

# Responsible RestartOhio



## Nursing Homes

### Mandatory

#### Facility Guidance

- Homes may permit residents to have visitors, so long as all safety standards are met.
- Homes shall be in substantial compliance with testing requirements for all staff as established by the May 27, 2020 Director's Order for the Testing of the Residents and Staff of all Nursing Homes.
- Homes are encouraged to test visitors, if feasible. If so, facilities should prioritize testing visitors that visit regularly (e.g., weekly), although any visitor can be tested. Facilities may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days) with proof of negative test results and date of test.
- Homes should consider: case status in surrounding community; case status in the facility; staffing levels; access to adequate testing for residents and staff; personal protective equipment supplies; local hospital capacity; and implications for resident physical and mental well-being when determining when to allow facility and personal visitation decisions.
- Homes should develop visitation practices that include, at a minimum, limiting visits, creating a screening process for visitors, maintaining a visitors log.
- Homes should educate residents on the risks of the spread of COVID-19 when interacting with visitors, and the appropriate/applicable safety precautions.
- Each Home can determine how to best implement visitations for their residents in a way that works best for them.

#### Visitors

- Require scheduling of all on-site visits with the home. Provide visitors a time and length for the visit.
- Visits shall not exceed 30 minutes in length. Visits do not commence until residents and visitors are together.
- Screen visitors for COVID-19 symptoms, including symptoms assessment and questions about exposure to COVID-19.
- Maintain a log of visitors that includes name and contact information and retain information for at least six months.
  - Have adequate staff on site to screen visitors.
  - Policies and logs shall be made available upon request to residents, visitors, the Department of Health, Department of Aging, Department of Developmental Disabilities, and any representative of the Office of the State Long-Term Care Ombudsman.
- During visits, require visitors to wear a mask and require residents, where possible, to also wear a mask.
- Due to guidance discouraging use of masks on children under the age of 2, all visitors shall be over the age of 2.
- Require that all visitors be at an age of maturity to facilitate social distancing and not be a distraction to other residents, visitors, or staff.
- No more than two visitors shall be permitted per resident per visit.
- If more than one resident has a visitor, or a resident has multiple visitors, provide enough space to permit all visitors and residents to maintain appropriate distance from each other.
- Encourage residents and visitors to have a contact-free visit. If contact does occur, the resident should wash hands thoroughly and, if possible, change clothes following the visit. Items such as wheelchairs or other touched items should be cleaned and disinfected.
- Have hand sanitizer available to visitors and residents for use before, after, and during the visit.

#### End of Life/ Compassionate Care

- Homes shall notify these visitors several days and up to one week in advance of end of life situations and shall not wait until active dying.
- This applies to all facility types, including but not limited to, assisted living facilities, and nursing homes.
- Compassionate care visits shall only be conducted in COVID-free areas of homes.
- All compassionate care visits shall be conducted using social distancing; however, if during a compassionate care visit, a visitor and Home identify a way to allow for personal contact, it should only be done following all appropriate infection prevention guidelines, and for a limited amount of time.
- Through a person-centered approach, Homes should work with residents, families, caregivers, resident representatives, clinicians and the Office of the State Long-Term Care Ombudsman program to identify the need, length, and frequency for compassionate care visits.

## Mandatory

### End of Life/ Compassionate Care (cont.)

- Compassionate care visits should not be conducted on a routine basis, nor should these visits be used to substitute regular routine visits.
- Anyone that can meet the resident's needs such as family members, clergy, or lay persons offering religious and spiritual support shall be permitted to participate in compassionate care visits.

### Indoor Visitation:

In addition to all other visitation requirements herein, the following shall apply to all indoor visitations:

- Visitors shall be escorted to and from the designated visitation area by staff of the home.
- Ingress/egress route will be planned to minimize potential contact between visitors and residents/staff.
- Visitation must occur in a designated visitation area that is separate and distinct from where resident rooms are located. The space must be able to be monitored by the Home's staff.
- As part of their visitation policy, each facility will develop a protocol for restroom use by visitors. Use of private, resident restrooms is prohibited.

### Outdoor Visitation:

In addition to all other visitation requirements herein, the following shall apply to all indoor visitations:

- Facilities may facilitate indoor and outdoor visitations concurrently.
- Contingency plans shall be made to address adverse weather as well as accommodations to provide for outdoor visit areas that provide shade for residents that may have sun-sensitivity.

### Communal Activities and Other Services:

- To the extent possible and so long as all safety protocols and safe distancing is adhered to, facilities are encouraged to continue offering communal activities for residents who have fully recovered from COVID-19, and for those not in isolation for observation, or suspected or confirmed COVID-19 status.
- Individuals may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet).
- Group activities may be facilitated with social distancing among individuals, appropriate hand hygiene, and use of cloth face coverings or facemasks.
- Hair salons inside homes are permitted to reopen for full service so long as all workplace safety standards are met, and state COVID-19 protocols and sector-specific COVID-19 protocols are followed.

### Confirmed Cases

- Immediately isolate and seek medical care for any individual who develops symptoms.\*
- Contact the local health district about suspected cases or exposure.

*\*Per the CDC, symptoms include cough, shortness of breath, difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headaches, sore throat, and new loss of taste or smell. (CDC expanded list of symptoms: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea.)*