

Newsletter #85 November 24, 2020 1

Newsletter

Licensed and Certified Facilities

Aloha,

CTA is distributing this information which is approved by the Office of Health Care Assurance. It is being distributed to all CCFFHs.

Aloha CCFFH Operators:

While the holiday season is typically a time for family and friends to gather, residents and visitors are encouraged to exercise extreme caution this year. With the holiday season fast approaching, everyone understands that residents and their families will want to spend more time together. During the holidays, facilities, residents, and visitors should continue to follow the guidelines for visitation and adhere to the core principles of infection prevention. This includes care giver visitors as well. We also recommend that facilities find innovative ways of celebrating the holidays without having parties or gatherings that could increase the risk of COVID-19 transmission.

The Department of Health is urging facility staff, residents and visitors to follow established guidelines for visitation.

If you have had no COVID-19 cases in the last 14 days and your county positivity rate is low or medium, a facility must allow in-person visitation consistent with the current regulations.

Failure to facilitate safe visitation, without adequate reason related to clinical necessity or resident safety, would constitute a potential violation and the facility would be subject to citation and enforcement actions.

When It's OK to Not Allow In-Person Visits:

1. Residents who are in isolation for observation for having symptoms of COVID-19 or having been confirmed with COVID-19.
2. Any visitor who tested positive or has symptoms consistent with COVID-19 should not come to the facility; refer to CDC guidance for when they can be around others.

Visitation can be conducted in resident rooms, dedicated visit areas, outdoors, and for circumstances beyond compassionate care situations.

Reducing the risk of COVID-19 includes but is not limited to remaining six feet apart, wearing a mask, and limiting the number of visitors. **Adherence to these principles is critical** to prevent the spread of COVID-19.

Core Principles of COVID-19 Infection Prevention

- Screen all who enter the facility (e.g., temperature checks, questions or observations about signs or

symptoms). **Deny entry of those with signs or symptoms**

- Hand hygiene (use of alcohol-based hand rub is preferred)
- Face covering or mask (covering mouth and nose)
- Social distancing at least six feet between persons
- Instructional Signs/Visitor Education on signs and symptoms, infection control, specified routes to designated areas
- **After each visit**, cleaning/disinfecting touched surfaces (doorknobs) and visitation areas
- Staff use of PPE
- Effective interaction of residents

These are consistent with the CDC guidance for facilities and should be followed at all times. Visitation should consider the residents' physical, mental, and psychosocial well-being, and support their quality of life. Using physical barriers (e.g., clear Plexiglas dividers, curtains) can further reduce risk. Visits should be conducted with an adequate degree of privacy.

Visitors who are unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave.

Outdoor Visitation (PREFERRED): Poses a lower risk of transmission due to increased space and airflow so all visits should be held outdoors whenever practicable unless the weather is bad, the individual's medical condition prevents it, or someone in the facility is in isolation.

Facilities should create accessible and safe outdoor spaces and limit the number and size of visits occurring simultaneously to support safe infection prevention actions like social distancing.

Indoor Visitation: Facilities should accommodate and support indoor visitation, including visits for reasons beyond compassionate care situations, based on the following guidelines:

1. No new onset of COVID-19 cases in the last 14 days
2. Visitors adhere to the core principles and staff should provide monitoring for those who may have difficulty adhering to core principles, such as children;
3. Limit the number of visitors per resident at one time and limit the total number of visitors in the facility at one time. Consider scheduling visits to help ensure all residents have visitors
4. Limit movement in the facility. Visitors should go directly to the resident's room or designated visitation area.
5. Open windows and doors to allow adequate air ventilation to reduce the risk of transmission.

Visitation should NOT be conducted in the resident's room when sharing a room with another resident.

NOTE: For situations where there is a roommate and the health status of the resident prevents leaving the room, facilities should attempt to enable in-room visitation while adhering to the core principles of COVID-19 infection prevention.

Compassionate Care Visits: While end-of-life situations have been used as examples of compassionate care situations, the term "compassionate care situations" does not exclusively refer to end-of-life situations. Other types of compassionate care situations include, but are not limited to:

- A resident, who was recently living with their family, is struggling with the change in environment and lack of physical family support.
- A resident who is grieving after a friend or family member recently passed away.
- A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or care giver(s), is experiencing weight loss or dehydration.
- A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

In addition to family members, these visits can be conducted by any individual that can meet the resident's needs, such as clergy or lay persons offering religious and spiritual support. There may be other compassionate care situations not mentioned above.

If during this visit, a visitor and facility 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. Work with

residents, families, and care givers to identify the need for compassionate care visits.

Client Visit Outside Facility: Residents may want to leave the facility to visit with family and friends; they have the right to leave. Double down on infection control.

Leaving the facility increases a risk for exposure. The risk may be further increased by factors such as a resident's health status, the level of COVID-19 in the community (e.g., cases or positivity rate), or attendance at large gatherings. **Discuss these and other risks with their family and facility staff.** Educate residents and families of steps they should take to reduce the risk of contracting COVID-19 and encourage residents to stay connected with loved ones through phone and video. Should a resident ultimately choose to leave the CCFFH, DOH is providing the following recommendations:

- Limit close contact (maintain physical distancing of six feet or more), keep gatherings as small as possible, and use technology to engage with others remotely;
- Wear facemasks or cloth face covering at all times (including in cars, homes, restaurants, etc.);
- Limit contact with commonly touched surfaces or shared items;
- Keep safe around food and drinks. Avoid communal serving utensils, passing of food, potluck or buffet style food service, and instead opt for individually prepared plates by a single server;
- Perform hand hygiene often (e.g., wash hands with soap and water or alcohol-based hand sanitizer);
- Avoid large gatherings, crowded areas, and high-risk activities such as singing;
- For those attending a gathering, avoid contact with individuals outside of their household for 14 days prior to the gathering;
- Ask anyone who has signs or symptoms of COVID-19, or has been exposed to someone diagnosed with COVID-19, to not attend the gathering;
- If possible, conduct gatherings outdoors. Indoor gatherings should have good ventilation, open windows and doors if possible;
- Verbally greet others instead of shaking hands or giving hugs. Think ahead about how you will manage to prevent physical interactions with loved ones of different ages such as young children; and
- Check local conditions and state requirements for precautions and restrictions, including positivity rates and quarantine requirements, before crossing state lines.

CMS has collaborated with the Centers for Disease Control and Prevention (CDC) on these recommendations, and we encourage you to review [CDC's webpage on holiday celebrations](#) which has more suggestions for preventing the spread of COVID-19.

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