

Visitation

Policy Statement

The facility has implemented a visitation¹ policy in consideration of communicable disease or other infection/illness such as SARS-CoV-2 (COVID-19). This policy is subject to frequent revisions. The facility will not restrict, limit, or otherwise deny visitation privileges on the basis of race, color, creed, national origin, gender identity, sexual orientation, religion, age, disability, ancestry, marital or veteran status.

Policy Interpretation and Implementation

1. The facility recognizes the resident's need to maintain contact with their love ones. The facility has developed the visitation policy to account for measures to help ensure the health and safety of our residents and staff, as well as, to maintain compliance with state and federal requirements and recommendations,
2. In accordance with CMS regulation, visitation is permitted by all individuals. Visitors may include, but are not limited to:
 - a. Spouses (including same-sex and transgender spouses);
 - b. Domestic partners (including same-sex and transgender domestic partners);
 - c. Other family members; and
 - d. Friends.
3. All lawful marriages and spouses will be recognized for purposes of this and all other policies, regardless of any contradictory state or local laws.
4. The facility provides 24-hour access to all individuals visiting with the consent of the resident with some exceptions as noted below which are in place to ensure the safety and security of the facility residents.
5. Resident will be informed of their right to visitation and the facility's visitation policy.
6. Visits with personal representatives, representatives from federal and state survey agencies, resident advocates, the State Long-Term Care Ombudsman, State and Federal Disability Rights Laws and Protection & Advocacy (P&A) Program authorities, clergy, and the resident's personal physicians, are permitted at all times, for any resident.
7. In accordance with Florida Statute 408.823(2)(b), a resident may designate a visitor who is a family member, friend, guardian, or other individual as an Essential Caregiver² who is permitted access to the resident.
 - a. Should the resident designate an Essential Caregiver, the facility will include this into the resident's Plan of Care.
 - b. The facility shall permit the resident to revoke or change their Essential Caregiver, at any time, by notifying social services.

¹ Facilities shall not restrict visitation without a reasonable clinical or safety cause, consistent with 42 CFR § 483.10(f) (4) (v).

² As defined at 408.823(2)(b) FS A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care.

Original: 09/03/2020; revised 09/09/2020, 10/2020, 11/2020; 12/2020, 03/2021, 04/2021, 09/2021, 11/2021, 03/2022; 04/2022, 10/2022, 02/2023, 05/2023, 06/2023

- c. Essential Caregiver visits will be permitted for at least 2 hours daily in addition to any other visitation authorized by the facility.
 - d. An Essential Caregiver is not required to provide necessary care to the resident, nor may the facility require an essential caregiver to provide such care.
8. Unless specifically prohibited under federal or state law, rule and/or regulation or by any federal, state or local entity which has jurisdiction, in-person, essential caregiver visits and/or compassionate care visits will be permitted in all of the following circumstances, unless the resident objects³:
- a. End-of-life situations;
 - b. A resident, who was living with family prior to being admitted, is struggling with the change in environment and lack of in-person family support;
 - c. The resident is making one or more major medical decisions;
 - d. A resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died;
 - e. A resident who requires cueing or encouragement to eat or drink which was previously provided by a family member or caregiver; or
 - f. A resident who used to talk and interact with others is seldom speaking
9. The resident has the right to deny visitation at any time.
- a. If a resident chooses to withdraw consent for visitation by a particular individual, the name of that person and the date consent is withdrawn shall be documented in the resident's medical record and the resident's plan of care updated.
 - b. Should the resident choose to deny all visitors, this request will be documented in the resident's medical record along with the date of the request and the resident's plan of care updated.
 - c. The resident may change their visitation status or visitation for an individual at any time upon notification of social services. The change in the resident's visitation choice(s) will be documented in the resident's medical record along with the date of the request and the resident's plan of care updated
10. The facility will post guidance on all entrance doors indicating that all visitors experiencing symptoms of respiratory infection/communicable disease; or symptoms compatible with COVID-19; experiencing a temperature equal to/or greater than 100 degrees; has a positive viral test for SARS-CoV-2 or tested positive for any communicable disease or infection; and/or visitors noted with signs/symptom of illness will be requested to defer non-urgent, in-person visitation until they meet CDC criteria for healthcare settings to end isolation. Additionally, in an effort to promote safety, visitors who have had close contact with someone with SARS-CoV-2 infection; a communicable disease or infection; or illness will be asked to defer non-urgent in-person visitation until they meet CDC criteria for healthcare settings to end isolation such as:
- a. When the visitor and/or resident who the visitor is there to see is unable to be tested or wear source control;
 - b. When the visitor and/or resident who the visitor is there to see is moderately to severely immunocompromised
 - c. The resident who the visitor is there to see resides on a unit with others who are moderately to severely immunocompromised;

³ 408.823(2)(c), F.S

- d. The resident who the visitor is there to see resides on a unit experiencing ongoing SARS-CoV-2 transmission or other communicable disease; infection or illness that is not controlled with initial interventions
11. Instructional signage (e.g., signs, posters) will be posted throughout the facility (e.g., common areas) and visitors will be provided education which will include:
 - a. Identification of signs and symptoms of communicable disease or infection, such as COVID-19⁴,
 - b. infection control precautions/use of PPE in accordance with facility policy,
 - c. use facemasks or tissues to cover nose and mouth when coughing or sneezing and to dispose of contaminated items in waste receptacles,
 - d. hand hygiene and use of alcohol-based hand rub as a preferred method,
 - e. limiting surfaces touched while in the facility;
 - f. minimizing movement throughout the building (use of designated visitation locations (indoors and outdoors, as well as in room visitation, when appropriate)
 - g. importance of vaccination and remaining up to date with all recommended vaccine doses
 12. The Facility shall **NOT** compel visitors to provide proof of vaccination or immunization status. In addition, the facility shall **NOT** deny visitation based on a visitor's vaccination or immunization status.⁵
 13. Visitors may be asked to sign an acknowledgement form noting understanding of the facility's visitation and infection prevention and control policies; use of facemasks or PPE, as appropriate, provision of facility provided training; the potential risks (to include acquiring and spreading communicable disease or other infection/illness) of visitation and precautions as recommended by CMS and the CDC and agreement to abide by these policies. This is at the discretion of the Administrator or Director of Nursing.
 14. Facemasks will be provided/offered to all residents and visitors⁶
 15. Visitation may be conducted in facility-designated visitation areas or resident's room as determined by the facility and the resident health condition.
 16. All visitors will be asked to immediately inform the facility if they develop a fever or symptoms consistent with any communicable disease; infection or illness, or test positive for a communicable disease, infection or illness within fourteen (14) days of a visit to the facility.
 17. Visitors under 18 years of age:
 - a. Accompanied by an adult over the age of 18.
 - b. Remain with the adult through the entire visit.
 - c. Follow all infection control policies.
 - d. Maintain a social distance of at least six (6) feet from staff and residents
 - e. Limit movement through the facility.
 - f. The adult will be responsible, at all times, for the child's behavior
 - g. The facility reserves the right to expel the child and adult should they fail to maintain compliance with these requirements
 18. The facility will monitor federal, state or local sources for information related to a increases in the spread of any communicable disease, infection or illness and to respond to such increases as needed or directed and in accordance with CDC recommendations

⁴ [Symptoms of COVID-19](#)

⁵ Unless specifically directed and/or required by state and/or federal laws, rules, ordinances, directives or guidelines

⁶ Facilities are not required to provide PPE for visitors

Original: 09/03/2020; revised 09/09/2020, 10/2020, 11/2020; 12/2020, 03/2021, 04/2021, 09/2021, 11/2021, 03/2022; 04/2022, 10/2022, 02/2023, 05/2023, 06/2023

19. During periods when the [COVID-19 Hospital Admission Level](#) is high⁷ or there is a significant increase in the spread of a communicable disease, infection, or illness visitors will be required to wear a facemask while in the facility in accordance with CDC guidelines. The [COVID-19 Hospital Admission Level](#) may be found on the CDC website [COVID-19 by County](#).
20. The facility does promote that the safest practice is for residents and visitors to wear face coverings or masks while in the facility during visitation. However, when the county's [COVID-19 Hospital Admission Level](#) is not high and there is not a significant increase in the spread of a communicable disease, infection or illness, the facility will not require that visitors wear face coverings or masks while in the facility except as follows:
- a. during periods of a communicable disease; infection or illness to include SARS-CoV-2 outbreaks in the facility;
 - b. recommendations from the CDC, state and/or local health departments, or public health authorities;
 - c. individual facility circumstances such as:
 - i. when visitation which takes place in a room with roommate(s) present;
 - ii. when visitation is taking place with multiple different residents/visitors at the same time; or
 - iii. in small areas where social distancing is unable to be accommodated
 - d. for visitors with a confirmed communicable disease, infection or illness, to include SARS-CoV-2 infection, or any compatible symptoms who are unable to defer in-person visitation until they meet CDC criteria for healthcare settings to end isolation due to urgent circumstances, the visitor will be required to wear a NIOSH-certified disposable N95 respirator at all times and the visit is to be held alone in a designated location as determined by the facility. Please note: Visitation, at such time substantially increases the risk of transmitting a communicable disease, infection or illness, to include COVID-19, to the resident and others in the facility which has the potentially serious consequences; and
 - e. for visitors who have had close contact with someone with a communicable disease; infection or illness, to include SARS-CoV-2 infection, who are unable to defer in-person visitation until 10 days after their close contact if they meet the CDC healthcare guidance noted above (refer to 10 a-d of this section), the visitor will be required to wear a NIOSH-certified disposable N95 respirator at all times and the visit is to be held alone in a designated location as determined by the facility. Please note: Visitation, at such time substantially increases the risk of transmitting a communicable disease, infection or illness, to include COVID-19, to the resident and others in the facility which has the potentially serious consequences
21. In order to comply with CMS direction and regulations⁸ and State law, while **NOT** recommended, regardless of the [COVID-19 Hospital Admission Level](#) or the identification of a significant increase in the spread of any communicable disease, infection or illness, residents (or their representative on the resident's behalf) and their visitors when alone in the resident's room or in a designated visitation area,

⁷ NOTE: [COVID-19 Hospital Admission Level](#)-Replaced COVID-19 Community Levels with [COVID-19 hospital admission levels](#) to guide prevention decisions. Changes based on: MMWR: [COVID-19 Surveillance After Expiration of the Public Health Emergency Declaration — United States, May 11, 2023](#) MMWR: [Correlations and Timeliness of COVID-19 Surveillance Data Sources and Indicators — United States, October 1, 2020–March 22, 2023](#). COVID-19 hospital admission levels can help individuals and communities decide which prevention actions they can take based on the latest information. For each level, CDC recommends actions you can take to help you protect yourself and others from severe impacts of COVID-19.

⁸ [QSO-20-39-NH-REVISED-Nursing Home Visitation](#)

Original: 09/03/2020; revised 09/09/2020, 10/2020, 11/2020; 12/2020, 03/2021, 04/2021, 09/2021, 11/2021, 03/2022; 04/2022, 10/2022, 02/2023, 05/2023, 06/2023

- may choose not to wear face coverings or masks. However, if a roommate is present during the visit, the visitor may be required to wear a mask to help ensure the safety of the roommate(s).
22. Residents (or their representative on the resident's behalf) and their visitors may choose to have close contact (including touch). Residents (or their representative) and their visitors will be advised of the risks of physical contact prior to the visit.
 23. While **NOT** advised, per CMS regulation, the facility may not prohibit visitation for residents who are on transmission-based precautions; have a communicable disease, infection or illness; tested positive for SARS-CoV-2 infection; or are symptomatic. The resident/resident representative and the visitor will be advised of the potential risks, to include acquiring and spreading communicable disease, infection, or illness, such as COVID-19, and the need to utilize all precautions as recommended by CMS and the CDC
 24. State and Federal Disability Rights Laws and Protection & Advocacy (P&A) Program authorities, representatives of the Office of the State Long-Term Care Ombudsman who visit a resident who is on TBP or in isolation; during a significant increase in the spread of any communicable disease; infection, or illness; or in a county where the [COVID-19 Hospital Admission Level](#) is high in the past 7 days, will be made aware of the potential risk of visiting, The resident visited will also be made aware of the same. The visit should be conducted in the resident's room, when possible.
 25. Pets or animals will **NOT** be permitted in the facility during periods when the [COVID-19 Hospital Admission Level](#) is high or during periods when a significant increase in the spread of any communicable disease, infection or illness is identified.
 26. The facility will monitor visitor adherence to infection control policies and procedures, appropriate use of face masks, PPE, social distancing and the facility's visitation policy;
 27. After attempts to mitigate concerns, the facility will restrict or revoke visitation if the visitor fails to follow infection prevention and control policies and/or the facility's visitation policy.
 28. The facility will provide:
 - a. Outdoor⁹ visitation space that is protected from weather elements, with cooling devices, if needed; and
 - b. Indoor visitation:
 - i. In accordance with CMS regulations, the facility must allow indoor visitation at all times and for all residents without limitation, except as permitted under the regulations¹⁰, on:
 1. frequency of visits,
 2. length of visit;
 3. number of visitors; or
 4. require advanced scheduling
 29. Visits are to be conducted in a manner that adheres to the core principles of infection prevention and does not increase risk to other residents.
 30. During periods when the [COVID-19 Hospital Admission Level](#) is high; when a significant increase in the spread of any communicable disease, infection, or illness is identified; and/or the facility is experiencing an outbreak, the facility will:
 - a. Promote physical distancing during peak times of visitation (e.g., lunch time, after business hours, etc.).

⁹ Outdoor visitation is preferred even when the resident and visitor are up-to-date with COVID-19 Vaccination

¹⁰ Facilities may not restrict visitation without a reasonable clinical or safety cause, consistent with 42 CFR § 483.10(f)(4)

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- b. Avoid large gatherings (e.g., parties, events) where large numbers of visitors are in the same space at the same time and physical distancing cannot be maintained.
 - i. While the facility may not limit the number of visitors the resident has or require that visitation be scheduled, the facility may limit the number of individuals visiting together with the resident at any one time.
 - ii. The facility may request that only several individuals visit with the resident while the remaining wait in the facility lobby or in another location on facility grounds until the resident requests or the visitors themselves leave allowing for that individual/group to be replaced with another individual/group waiting.
 - iii. The number of individuals permitted to visit with a single resident at any one time will depend on the number of visitors for that resident; location of the visit; and the number of other individuals visiting other residents at the same time.
 - c. Limit visitor movement in the facility
31. If a resident's roommate, regardless of vaccination status, is immunocompromised and/or is on transmission-based precautions to include isolation, visits will not be conducted in the resident's room.
 32. For situations where there is a roommate and the health status of the resident prevents either resident from leaving the room, the facility will attempt to enable in room visitation while adhering to the core principles of infection control and prevention.
 33. Visits for residents who share a room should not be conducted in the resident's room, if possible.
 34. If, for any reason, visitation is conducted in a room which houses more than 1 individual, the facility reserves the right to limit the number of visitors in the room at one time to ensure adherence to infection control and prevention principles; as well as; to protect the rights of the other individual(s) sharing the room. In addition, all visitors will be required to wait outside the room or in the lobby while the roommate(s) is receiving treatment, undergoing examinations, and/or receiving personal care.
 35. For visits conducted in a resident's room, unless otherwise permitted by the resident, the resident's visitors will be required to wait outside the room or in the lobby while the resident is receiving treatment, undergoing examinations, and/or receiving personal care.
 36. Indoor Visitation during an [Outbreak Investigation](#)¹¹:
 - a. The facility will immediately begin outbreak testing in accordance with the state and federal requirements;
 - b. Visitation may not be suspended, per CMS regulation; however, the facility will:
 - i. Make visitors aware of the potential risk of visitation during an outbreak investigation; and
 - ii. adhere to the core principles of infection prevention.
 - c. Visitors who choose to visit during an outbreak investigation will be directed to use appropriate source control regardless of vaccination status, at all times. When possible, these visits will occur in the resident's room or designated areas.
 37. Some visitation may be subject to reasonable restrictions that protect the security of the facility's residents such as:
 - a. Limiting or supervising visits from persons who are known or suspected to be abusive or exploitative to a resident;

¹¹[Outbreak Investigation](#)- A new COVID-19 infection in any staff or any nursing home-onset COVID-19 infection in a resident, The facility includes the presence of a significant increase in a communicable disease, illness or infection as part of this definition.

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- b. Denying access to individuals who are found to have been committing criminal acts; and
 - c. Denying access to visitors who are inebriated or disruptive.
38. The facility reserves the right to restrict or deny visitation during declared emergencies or as directed by state, federal or local officials to include, but not limited to hurricanes and civil unrest.
 39. Incidents of any disruptive, threatening, violent, or abusive behavior by a visitor must be documented in the resident’s medical record or other facility approved form.
 40. If the disruptive, threatening, violent or abusive behavior of a visitor persists, the facility reserves the right to have the visitor removed from the facility. If the facility determines this behavior presents a danger or escalates to a point that it cannot be managed; thus, infringing on the rights of other residents, staff or visitors, the facility reserves the right to take any action necessary to ensure the safety of the residents, staff and other visitors. This action will be documented in the resident’s record or facility approved form.
 41. A visitor log will be maintained. Each visitor will be required to:
 - a. Provide their name;
 - b. Date and time of entry and exit;
 42. Residents are permitted to leave the facility as they choose. The facility recommends that the resident, especially for those at high risk for severe illness; when the [COVID-19 Hospital Admission Level](#) is high; or when a significant increase in the spread of any communicable disease, infection or illness is identified, and any individual accompanying the resident to follow all recommended infection prevention practices including wearing a face covering or mask, physical distancing, and hand hygiene and to encourage those around them to do the same.
 43. The Administrator in coordination with the Director of Nursing are responsible for ensuring that staff adhere to this policy.
 44. Inquiries concerning this policy should be referred to the Facility Administrator or Director of Nursing.

References	
OBRA Regulatory Reference Numbers	§483.10(f)(4) Right to Receive Visitors; §483.80(a) Infection prevention and control program; §483.10(b)(2) Right to Make Choices; §483.73(b) Policies and procedures; 408.823(1-2) FS
Survey Tag Numbers	F562; F563, F564; F880; F561; E-0013; CZ841
Additional Policies	COVID-19 Prevention and Control Policy
References	Section 504 of the Rehabilitation Act of 1973, 29 U.S.C. § 794 (Section 504) and the Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12101 et seq. (ADA). Coronavirus Aid, Relief, and Economic Security Act (CARES Act)