

VISITATION: MAKING VISITATION SAFER

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Visitors to long-term care facilities provide vital connections for the mental health and well-being of residents. It is important to support visitation and also recognize some associated risks. When there are illnesses, such as COVID-19 or influenza in the community, visitors can introduce these illnesses to long-term care facilities. It is important to know how to decrease the risk of transmission from visitors, and when to use these measures.



Continue to work with residents and visitors to get vaccinated and boosted when indicated. Visitation should be permitted regardless of visitor's vaccination status. When a visitor is symptomatic or recently exposed (last 10 days), deferring visitation is recommended until they meet criteria for discontinuing isolation (by [Healthcare standards](#)).

Reducing Infection Risk During Visitation

The following measures can be helpful in reducing the risk of infection spread during visitation.

- ❑ Post visual alerts and reminders at entrances and in community spaces to support screening, hand hygiene and social distancing. Consider dating all signage to indicate revision and current recommendations.
- ❑ When screening visitors, defer non-urgent, in-person visitation until they meet criteria for discontinuing isolation (by healthcare standards):
 - A recent (within prior 14 days) positive test for SARS-CoV-2
 - Symptoms of COVID-19
 - Having recent close contact (10 days) with someone with SARS-CoV-2 infection
- ❑ Offering higher risk resident visitors (such as those who are exposed and urgently visiting) a rapid antigen test prior to visiting. *Follow guidance below for Compassionate Care Visitation.*
- ❑ Optimize engineering controls and [Indoor Air Quality](#)
- ❑ Limit crowding in community spaces. To support social distancing, provide reminders, such as signage, floor markings, and distanced furniture placement in common areas.
- ❑ Consider offering visitors well-fitting medical (see [Knot and Tuck](#)) or [KN95 masks](#).

Visitation During Outbreaks and when Community Transmission is High

Consider enhanced safety measures such as:

- ❑ Host visits outdoors or create dedicated, well-ventilated indoor visitation spaces.
- ❑ Support in-room visits where the resident's roommate is not present.

- Encourage the resident and visitor to wear a well-fitting KN95 or surgical masks (see [Knot and Tuck](#)), perform frequent hand-hygiene, and practice physical distancing during the visit.
- Limit the visitor's movement in the facility to only the location of the visit.
- Avoid conducting visits in common areas (except those areas dedicated for visitation).
- For family dining with a resident, consider providing a private dining space away from other residents.
- Make alcohol-based hand sanitizer available.
- Increase fresh air by opening windows, running PTAC units on low and, where available, turning on exhaust fans.
- Clean and sanitize visitation areas after each visit

Compassionate Care Visitation

Providing visitation for residents, families, and significant others may be required during end-of-life, bereavement, or loss. Consider utilizing additional measures to minimize the risk of transmission to staff and residents where a visitor has been exposed, symptomatic, or positive for COVID-19.

COVID-19 Positive Visitor Measures

- The exposed, positive, or symptomatic visitor should be the only visitor allowed during the visit and go only to and from the resident room.
- If possible, provide the resident a private room in a separate section of the facility. Ideally place the resident close to a separate entry. Maintain a closed door to the resident room as safety allows.
- Consider masking resident if possible.
- Provide visitor specific instructions for maintaining masking and hand hygiene during their time in the building.
- Utilize a staff member to escort the visitor and monitor the visitation to ensure infection prevention measures are followed. If possible, staff should continuously monitor visitation, especially while moving into and out of the building.
- Encourage and support visitor hand hygiene before and after all resident contact, after touching mask, their nose or mouth, and when leaving the resident room.
- Optimize air quality by opening windows, activating an exhaust fan in the adjacent bathroom and using portable HEPA filters where available.

COVID-19 Positive Resident

- If possible, provide the resident a private room in a separate section of the facility. Ideally place the resident close to a separate entry.
- Minimize visitation as much as possible. Limit each visit even to one person at a time.
- Provide visitor specific instructions to ensure they wear a well-fitting masking ([Knot and Tuck](#)) for the duration of the visit.
- Consider masking the resident if possible.
- Encourage and support visitor hand hygiene before and after all resident contact, after touching mask, their nose or mouth, and upon leaving the resident room.

- Optimize air quality by opening windows, activating an exhaust fan in the adjacent bathroom and using portable HEPA filters where available.

Resources:

CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#:~:text=Indoor%20visitation%20during,during%20the%20visit.>

CDC Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV2

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html#:~:text=Return%20to%20Work%20Criteria%20for%20HCP%20with%20SARS%2DCoV%2D2%20Infection>

Knot and Tuck Mask Technique

https://www.cdc.gov/coronavirus/2019-ncov/videos/masks/Knot-and-Tuck_Transcript-508.pdf

<https://www.youtube.com/watch?v=GzTAZDsNBe0>

OHA COVID-19 Public Health Recommendations: Indoor air considerations for smaller spaces

https://sharedsystems.dhsoha.state.or.us/DHSForms/Served/le3725_R.pdf

