Long Term Care Facility (LTCF) Visitation Guidance

A new respiratory disease – coronavirus disease 2019 (COVID-19) – is spreading globally and there have been instances of COVID-19 community spread in the United States. The general strategies CDC recommends to prevent the spread of COVID-19 in LTCF are the same strategies these facilities use every day to detect and prevent the spread of other respiratory viruses like influenza. One of the most important strategies is to prevent the introduction of respiratory germs into your facility in the first place through monitoring of visitors and healthcare workers.

Long-term care facilities concerned that a resident, visitor or employee may be a COVID-2019 patient under investigation should contact their local health department or 1-877-PA-HEALTH (1-877-724-3258) immediately for consultation and guidance.
AND
Check the CDC and the Pennsylvania Department of Health websites regularly for updates.

From the Centers for Medicare and Medicaid Services:

How should facilities monitor or limit visitors?

Facilities should screen visitors for the following:
1. International travel within the last 14 days to restricted countries. For updated information on restricted countries visit: https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html
2. Signs or symptoms of a respiratory infection, such as a fever, cough and sore throat.
3. Has had contact with someone with or under investigation for COVID-19.

If visitors meet the above criteria, facilities may restrict their entry to the facility. Regulations and guidance related to restricting a resident's right to visitors can be found at 42 CFR §483.10(f)(4), and at F-tag 563 of Appendix PP of the State Operations Manual. Specifically, a facility may need to restrict or limit visitation rights for reasonable clinical and safety reasons. This includes, "restrictions placed to prevent community-associated infection or communicable disease transmission to the resident. A resident's risk factors for infection (e.g., immunocompromised condition) or current health state (e.g., end-of-life care) should be considered when restricting visitors. In general, visitors with signs and symptoms of a transmissible infection (e.g., a visitor is febrile and exhibiting signs and symptoms of an influenza-like illness) should defer visitation until he or she is no longer potentially infectious (e.g., 24 hours after resolution of fever without antipyretic medication)."

How should facilities monitor or restrict health care facility staff?
The same screening performed for visitors should be performed for facility staff (numbers 1, 2 and 3 above).
- Health care providers (HCP) who have signs and symptoms of a respiratory infection should not report to work.
- Any staff that develop signs and symptoms of a respiratory infection while on-the-job, should: Immediately stop work, put on a facemask and self-isolate at home;
  - Inform the facility's infection preventionist, and include information on individuals, equipment and locations the person came in contact with; and

o   Contact and follow the local health department recommendations for next steps (e.g., testing, locations for treatment).

Refer to the CDC guidance for exposures that might warrant restricting asymptomatic healthcare personnel from reporting to work (https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html).

From the Society for Post-Acute and Long Term Care (PALTC) Medicine:

Employees: Because healthcare personnel reside in the community and work in facilities, they have the potential to introduce infections into PALTC populations. As with all situations, healthcare personnel who are ill should stay home and seek healthcare advice through their regular provider. Those with mild symptoms are encouraged to call, rather than going in person, for medical advice.

The Society for Post-Acute and Long Term Care (PALTC) Medicine strongly recommends that:
- Healthcare providers avoid working while ill.
- Healthcare facilities develop staff policies to allow and account for potential absenteeism during community-wide outbreaks.
- If there is evidence of community-wide COVID-19 illness, we recommend facilities screen staff at entry into the facility for respiratory signs and symptoms and fever.

Visitors: Like healthcare personnel, visitors may also inadvertently foster spread of infections in the PALTC setting. Given the unique nature of the PALTC setting, it will not likely be possible to prohibit all visitors in the event of community-wide COVID-19 illness. For example, individuals on hospice should be able to visit with family members who are not ill.

The Society for Post-Acute and Long Term Care (PALTC) Medicine recommends that:
- Consistent with good routine practice, posting signs requesting that people with acute respiratory illness to refrain from entering the PALTC facility. This applies whether or not there is COVID-19 activity in the community.
- Individuals (regardless of illness presence) who have a known exposure to someone with a COVID-19, or who have recently traveled to areas with COVID-19 transmission, refrain from entering the nursing home.
- If there is community-wide transmission of COVID-19, facilities consider screening visitors at entry to the facility.

From the Centers of Disease Control and Prevention:

Prevent the introduction of respiratory germs INTO your facility:

- Post signs at the entrance instructing visitors not to visit if they have symptoms of respiratory infection.
- Ensure sick leave policies allow employees to stay home if they have symptoms of respiratory infection.
- Assess residents' symptoms of respiratory infection upon admission to the facility and implement appropriate infection prevention practices for incoming symptomatic residents.

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Prevent the spread of respiratory germs WITHIN your facility:

- Keep residents and employees informed.
    - Describe what actions the facility is taking to protect them, including answering their questions and explaining what they can do to protect themselves and their fellow residents.
- Monitor residents and employees for fever or respiratory symptoms.
    - Restrict residents with fever or acute respiratory symptoms to their room. If they must leave the room for medically necessary procedures, have them wear a facemask (if tolerated).
    - In general, for care of residents with undiagnosed respiratory infection use Standard, Contact, and Droplet Precautions with eye protection unless suspected diagnosis requires Airborne Precautions (e.g., tuberculosis).
    - Healthcare personnel should monitor their local and state public health sources to understand COVID-19 activity in their community to help inform their evaluation of individuals with unknown respiratory illness. If there is transmission of COVID-19 in the community, in addition to implementing the precautions described above for residents with acute respiratory infection, facilities should also consult with public health authorities for additional guidance.
- Support hand and respiratory hygiene, as well as cough etiquette by residents, visitors and employees.
    - Ensure employees clean their hands according to CDC guidelines, including before and after contact with residents, after contact with contaminated surfaces or equipment and after removing personal protective equipment (PPE).
    - Put alcohol-based hand rub in every resident room (ideally both inside and outside of the room).
    - Make sure tissues are available and any sink is well-stocked with soap and paper towels for hand washing.
- Identify dedicated employees to care for COVID-19 patients and provide infection control training.
    - Guidance on implementing recommended infection prevention practices is available in CDC's free online course — The Nursing Home Infection Preventionist Training — which includes resources checklists for facilities and employees to use.
- Provide the right supplies to ensure easy and correct use of PPE.
    - Post signs on the door or wall outside of the resident room that clearly describe the type of precautions needed and required PPE.
    - Make PPE, including facemasks, eye protection, gowns and gloves available immediately outside of the resident room.
    - Position a trash can near the exit inside any resident room to make it easy for employees to discard PPE.

Other resources:
- "Attention Visitors" Facility Sign:
  https://paltc.org/sites/default/files/Attention%20Visitors%20All%20facilities.pdf