

# OHIO HEALTH CARE ASSOCIATION

## QUICK REFERENCE SHEET

### FACILITY VISITATION

State and federal visitation requirements can be confusing for providers, agency staff, facility residents, and families. Please find below a helpful reference document for visitation guidelines applicable to Ohio residential care facilities/assisted living communities (ALs) and skilled nursing facilities (SNFs). You will find additional information on compassionate care situations after the general requirements.

- **Screening Requirements-** Visitors must be screened before visiting a resident. A log must be maintained of each visitor including their name, telephone number, and address. Screening includes:
  - Questionnaire on COVID-19 exposure
  - Screening assessment for cough, shortness of breath, and temperature of 100.0 degrees or higher
  - Identification check (federal, state or other satisfactory forms)
  - Testing of visitors is not required, but it is encouraged
- **All Visitation Requirements-** There must be enough space to ensure social distancing requirements are met for multiple visitors or concurrent resident visits. Only 2 visitors per resident are permitted at a time for 30-minute periods, beginning when the resident and visitor are reunited. Additionally, visitors must adhere to the following requirements:
  - Surgical/procedure facemasks supplied by the facility must be worn by visitors and should be worn by the resident if possible
  - Visitors must schedule their visit ahead of time
- **Outdoor Visitation-** A facility may facilitate indoor and outdoor visitation concurrently. Contingency plans should be made to address adverse weather conditions.
- **Indoor Visitation-** Visitors must be escorted to a designated visitation area by facility staff and may not go to other areas. Restroom use as well as entrance and exit protocols are designated by the facility.
- **Visitation Restrictions-** The extent to which facilities may restrict (not allow) visitation differ depending on the type of facility.

# OHIO HEALTH CARE ASSOCIATION

## QUICK REFERENCE SHEET

- Under CMS guidelines, SNFs may restrict visitation only if there was COVID-19 in the facility within the past 14 days or the facility is located in a CMS red county.
- ALs have more discretion to restrict visitation under the ODH order based on consideration of various factors such as COVID-19 levels in the facility and community, staffing levels, and access to testing.
- Visitation information for each SNF and AL should be available to the public via a state dashboard October 19, 2020.

## COMPASSIONATE CARE SITUATIONS

SNFs and ALs must allow 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. Examples of other types of compassionate care situations include, but are not limited to:

- 
- A resident, who was living with their family before recently being admitted to the facility, 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 caregiver(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).

---

### REQUIREMENTS FOR COMPASSIONATE CARE VISITS:

- The general requirements for visits also apply to compassionate care visits, including masking, social distancing, and escorting the visitor, except accommodations can be made for physical contact with the resident.
- Facilities should establish procedures for compassionate care visits in a person-centered way.
- Compassionate care visits should only be conducted in COVID-19-free areas of the facility, but can be done in a resident’s room.
- These visits are not meant to be conducted on a routine basis.

- Anyone who can meet the resident's needs, such as family members, clergy, or spiritual support will be permitted during compassionate care visits.

## HOME HEALTH AND HOSPICE TESTING CONSIDERATIONS

---

### ASSITED LIVING

- ❖ Home Health and hospice staff are not considered staff, but the Ohio Department of Aging strongly recommends testing agency personnel who enter the facility regularly.
- ❖ Testing occurs bi-weekly and can be state-supported, if the facility chooses that option. They may request insurance information from your staff if they test them.
- ❖ Agency staff may present antigen or PCR test results from an outside laboratory. Antibody tests are not acceptable.

### SKILLED NURSING

- ❖ Hospice staff are included in the definition of staff for the CMS testing requirements.
- ❖ Combining the federal and new revised state guidelines, testing cadence is determined by the county positivity rate designation
  - CMS green county- once a week
  - CMS yellow county- once a week
  - CMS red county- twice a week
- ❖ **The state is providing various forms of state-supported testing in the new weekly testing requirement effective October 26, 2020. The facility may opt out.**
- ❖ Outbreak testing of all residents and staff will occur immediately after a positive test is found and then every 3-7 days until 14 days pass without a positive test.
- ❖ Agency staff must present results on their next visit if they are not at the facility when they test their employees.
- ❖ Agency staff may present antigen or PCR test results from an outside laboratory. Antibody tests are not acceptable.

## REFERENCES

---

- [Fifth Amended Director's Order on Nursing Home Visitation](#)
- [Nursing Facility Testing Guidelines Effective October 26, 2020](#)
- [QSO-20-38-NH LTC Facility Testing Requirements](#)
- [QSO-20-39-NH Nursing Home Visitation](#)