# **Procedure**

1. Active screening is not required per CDC recommendation.
   1. Visitors will be informed that they must follow healthcare setting guidance when entering a healthcare setting.
   2. Visitors must inform facility upon entering if they are COVID positive, have symptoms of COVID, or have been exposed to COVID. Possible symptoms include.
      1. Cough
      2. Shortness of breath
      3. Fatigue
      4. Muscle or Body Aches
      5. Headache
      6. New loss of taste or smell
      7. Sore throat
      8. Congestion or runny nose
      9. Nausea, vomiting or diarrhea
      10. body temperature of 100 degrees or higher
          1. Visitors with confirmed COVID-19 infection or compatible symptoms should defer non-urgent in-person visitation until they meet CDC criteria for health care setting to end isolation. For visitor who have had close contact with someone with COVID -19 infection, it is safest to defer non-urgent in-person visitation until 10 days after their close contact if they meet criteria described in CDC healthcare guidance (e.g., can not wear source control).
2. Visitors, residents, or their representative will be made aware of potential risk of visiting and necessary precautions related to Covid-19 in order to visit the resident. All must adhere to the core principles of infection prevention. Visual alerts (e.g. signs, posters) will be strategically placed at the entrance and other locations (e.g. waiting areas, elevators, cafeterias, lobbies) where personnel and visitors frequent. These alerts should include instructions about current Infection Prevention and Protection recommendations (e.g., when to use source control).
3. Cleaning and disinfecting of frequently touched services in the facility often, and designated visitation areas after each visit.
4. Visitation - Indoor or Outdoor.
   1. If the weather and the resident's health permit, the Ohio Department of Health encourages SNF and ALF to first consider scheduling outdoor visitation when resident and/or visitor are not up-to date with all recommended COVID-19 vaccine doses.
   2. When conducting indoor visitation:
   3. Although there is no limit on the number of visitors that a resident can have at one time, visits should be conducted in a manner that adheres to the core principles of COVID-19 infection prevention and does not increase risk to other residents. Facilities will ensure that physical distancing can still be maintained during peak time of visitation (e.g., lunchtime, social activities, etc.). Also, facilities should 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.
   4. If the county positivity rate is high all residents and visitors regardless of vaccination status, should masks and physically distance, at all times.
   5. If the county positivity rate is not high, the safest practice is for residents and visitors to wear face covering or mask, however, the facility could choose not to require visitors to wear face covering or mask while in the facility, except during an outbreak. The facility’s policies regarding face covering and masks should be based on recommendations from CDC, state and local health departments, and individual facility circumstances.
   6. An outbreak investigation is initiated when a single new case of COVID-19 occurs among resident or staff to determine if others have been exposed. To swiftly detect cases, CMS reminds facilities to adhere to the nationally accepted standards such as CDC recommendations on testing. When a new case of COVID -19 among resident or staff is identified, a facility should immediately (but not earlier than 24 hours after the exposure, if known) begin outbreak testing. Regardless of the county positivity rate, residents, and their visitors when alone in the resident’s room or in a designated visitation area, may choose not to wear face covering or mask and may choose to have close contact (including touch). Residents (or representatives) and their visitors should be advised of the risk of physical contact prior to the visit. If a roommate is present, it is safest for the visitor to wear a face covering or mask.
   7. While not recommended, residents who are on transmission-based precautions or quarantine can still receive visitors. In these cases, visits should occur in residents’ room and the resident should wear well fitted face mask (if tolerated). Before visiting residents, who are on TBP or quarantine, visitors will be made aware of potential risk of visiting and precautions necessary in order to visit the resident. Visitors should adhere to Core Principles of Infection Prevention.
   8. The facility will limit visitor movement in facility while in outbreak investigation is occurring. The visit should ideally take place in the resident’s room or designated visitation area, the resident and their visitors should wear well-fitting source control (if tolerated) and physically distance (if possible) during the visit. Also, visitors should physically distance themselves from other residents and staff when possible. For situations where there is a roommate and the health status of the resident prevents them from leaving the room, the facility will attempt to enable in-room visitation while adhering to core principles of Covid-19 infection prevention.
   9. The facility will make hand sanitizer available to visitors and residents for use before, after, and during the visit.
   10. Visitors must be of age maturity to facilitate social distancing and not be a distraction to others and be able to wear a face covering for the visit.
5. Compassionate Care Visitation
   1. Compassionate care visits are always allowed.
6. Ohio Living recognizes that some families/visitors may not feel comfortable with in-person visitation, Ohio Living will provide other options (e.g., virtual visitations by phone, skype, and face time).