

STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES

Aging and Long-Term Support Administration PO Box 45600, Olympia, Washington 98504-5600

March 29, 2021

ALTSA: ICF/IID #2021-016 ALTSA: NH #2021-025

UPDATES TO THE SAFE START FOR LONG-TERM CARE RECOMMENDATIONS AND REQUIREMENTS DOCUMENT

Dear Administrator/Superintendent:

The Safe Start for Long-Term Care Recommendations and Requirements Document (Safe Start Plan) establishes criteria for long-term care settings to permit visitation. The plan also offers guidance on trips outside the facility, communal dining and group activities, testing and screening, source control and PPE, and staffing.

On March 19, 2021, the Department of Health and the Department of Social and Health Services released updates to the Safe Start Plans for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) and Nursing Homes (NH). The updates include allowing visitation under specific conditions, as well as updates to the risk assessment and quarantine processes.

Visitation Allowances

Facilities should allow indoor visitation when either the visitor or resident is fully vaccinated, except under the following circumstances:

- Unvaccinated residents, unless the visitor is fully vaccinated.
- Residents with confirmed COVID-19 infection, whether vaccinated or unvaccinated, until they have met the criteria to discontinue Transmission-Based Precautions.
- Residents in quarantine, whether vaccinated or unvaccinated, until they have met criteria for release from quarantine.
- Outbreak situations require temporarily suspending visitation:
 - Facilities with 17 or more beds are to complete first round of testing. If there is no outbreak
 in other units or areas, visitation may resume in unaffected areas. The affected area will
 follow the 28-day outbreak cycle
 - Facilities with fewer than 17 beds are to complete first round of testing and then coordinate with the local health jurisdiction on the best approach to resume visitation.

Outdoor visits are still preferred due to the lower risk of transmission related to increased space and airflow.

Compassionate Care visits should be permitted <u>at all times</u> regardless of COVID activity in the building and regardless of a resident's vaccination status or COVID-19 status.

Risk Assessment and Quarantine

Providers should continue to complete a risk assessment with each resident who participates in community activities or attends medical appointments.

- The Risk Assessment has been updated to accommodate vaccinated residents.
- If a resident is <u>fully</u> vaccinated, they would only need to quarantine if they came into prolonged contact with a person who has COVID-19. Prolonged contact means within 6 feet for a cumulative total of 15 minutes or more over a 24-hour period.
- For an unvaccinated resident, or a resident who is not fully vaccinated, providers should complete the full risk assessment and quarantine if the assessment indicates high risk.

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Facility Operations

- Plan to manage visitation and visitor flow. The facility may limit the number of visitors allowed in the facility to allow for adequate adherence to infection prevention protocols.
- If the resident has a roommate:
 - o Ideally, no visitors should be in the resident's room.
 - Unvaccinated roommates should not be present during the visit if the visit must take place in the resident's room.
 - Maintain source control and physical distancing during the visit.

Important Reminders

- The Essential Support Person system is no longer active as residents are allowed visitors.
- If an individual resident is restricted from visitors for the reasons previously outlined, they may have compassionate care visits under the compassionate care model, if needed.
- The facility must establish policies and procedures outlining how the number of visitors per resident at one time and the total number of visitors in the facility at one time may affect the ability to maintain the core principles of infection prevention:
 - The facility must take into consideration work schedules of visitors and include allowances for evening and weekend visits.
 - The facility will post with the visitor log, vaccination requirements for visitation, as well as a notice that visitors are not to visit indoors if they are unvaccinated and the resident is unvaccinated. The posting will also indicate it is a violation of the Governor's Proclamation for an unvaccinated person to visit an unvaccinated resident indoors.
 - o If necessary, the facility should consider scheduling visits for a specified length of time.
 - Visitor movement about the facility should be limited with visitors going directly to the designated visiting space.
 - Visitors must be screened and they must acknowledge they have reviewed the notice about unvaccinated visitors. The visitor log must be maintained for 30 days.
- For residents who share a room, visits should take place outside of the room if possible.
- The facility must establish policies and procedures around tours of the facility for the purpose of screening for prospective new residents.
- Visitors and residents should wear a well fitted cloth mask or face mask and practice hand hygiene before and after the visit. The safest approach, particularly if either party has <u>not</u> been fully vaccinated, is for residents and their visitors to maintain 6 feet distance from others.

Click <u>here</u> to access the updated *Risk Assessment Template* to assess COVID-19 exposure risk for residents after community visits.

Click <u>here</u> to view the updated *Safe Start for Long-Term Care Recommendations and Requirements Document* in its entirety.

Thank you for your continued commitment to resident health and safety. If you have any questions, please contact RCSPolicy@dshs.wa.gov.

Sincerely,

Mike Anbesse, Director Residential Care Services

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