



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, Washington 98504-5600

November 17, 2023

ALISA: NH #2023-041
NURSING HOME VISITATION: COVID-19 (REVISED)

Dear Nursing Facility/Home Administrator:

The purpose of this letter is to formally notify you of Updated Visitation Guidance: Revised guidance has been issued to align with the conclusion of the federal Public Health Emergency (PHE). This guidance supersedes and replaces previously issued recommendations regarding visitation. To review the detailed changes, please refer to the link provided: [QSO-20-39-NH \(Revised 5-8-2023\)](#).

Guidance:

The updated guidance emphasizes adherence to the core principles of COVID-19 infection prevention and control (IPC) to mitigate the risks associated with visitation. These core principles include:

- **Provide Visitation Guidance** (e.g., posted signs at entrances) about recommended actions, including deferred visitation for visitors who have a positive viral test for COVID-19, symptoms of COVID-19, or have had close contact with someone with COVID-19.
- **Hand hygiene** (use of alcohol-based hand rub is preferred)
- **Face covering or mask** (covering mouth and nose) in accordance with CDC guidance
- **Post visual alerts** (e.g., signs, posters) at the entrance and in strategic places (e.g., waiting areas, elevators, cafeterias) These alerts should include instructions about current IPC recommendations (e.g., when to use source control).
- **Cleaning and disinfecting** of frequently touched surfaces in the facility often, and designated visitation areas after each visit
- **Appropriate staff use of Personal Protective Equipment (PPE)**
- **Effective cohorting** of residents (e.g., separate areas dedicated to COVID-19 care)
- **Resident and staff testing** conducted following nationally accepted standards, such as CDC recommendations.

Outdoor Visitation:

Outdoor visits are encouraged as they generally pose a lower risk of transmission due to increased space and airflow. Facilities should create safe and accessible outdoor spaces for visitation, following all IPC practices.

Indoor Visitation:

Facilities must allow indoor visitation at all times for all residents as permitted under the regulations. There are no limitations on the frequency, length, or number of visitors for each resident. However, visits should adhere to IPC principles and not increase the risk to other residents. Local health authorities can provide guidance on structuring visitation to reduce COVID-19 transmission.

Face Coverings and Masks:

The facility's policies regarding face coverings and masks should align with recommendations from the CDC, state, and local health departments, considering individual facility circumstances.

Indoor Visitation during an Outbreak Investigation:

During an outbreak investigation, visits should ideally occur in the resident's room, and all necessary IPC measures should be followed. Facilities should limit visitor movement within the facility during an outbreak investigation.

Visitor Testing and Vaccination:

While not mandatory, facilities are encouraged to offer testing to visitors. Vaccination is strongly encouraged for all visitors. Testing and vaccination can help prevent the spread of COVID-19, but they are not required conditions for visitation.

Required Visitation:

Facilities must not restrict visitation without a reasonable clinical or safety cause, as per 42 CFR § 483.10(f)(4)(v). Fully open and unrestricted visitation is now allowed, except in certain situations when visits are limited to the resident's room.

Access to the Long-Term Care Ombudsman:

Facilities must provide immediate access to representatives of the Office of the State Long-Term Care Ombudsman and the Protection & Advocacy programs. Ombudsman representatives and P&A program personnel should adhere to IPC principles while visiting residents.

Entry of Healthcare Workers and Other Providers of Services:

Healthcare workers, personnel involved in resident transitions, and other service providers should be permitted entry as long as they are not subject to work exclusion. All staff and volunteers should adhere to IPC principles.

Communal Activities, Dining, and Resident Outings:

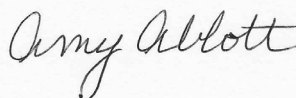
Communal activities and dining may occur while adhering to IPC principles. Residents should be allowed to leave the facility as they choose, and they should be reminded to follow recommended IPC practices upon returning.

Survey Considerations:

State survey agencies and CMS are responsible for ensuring that surveyors have access to the facility. Surveyors should adhere to IPC principles and any COVID-19 infection prevention requirements set by federal and state agencies.

If you have any questions, please contact Charles Demler, Policy Program Manager, at charles.demler@dshs.wa.gov.

Sincerely,



Amy Abbott, Director
Residential Care Services

DSHS: "Transforming Lives"