

ADH Issues Revised Visitation, Screening and Staffing Directive for Long-term Care Facilities

10/08/2020

During his October 6 press conference regarding COVID-19, Governor Asa Hutchinson read a letter from a nursing-home resident who asked the question likely on the minds of many nursing home residents: “When will I see my children?” Governor Hutchinson acknowledged having received a number of similar letters from nursing-home residents and family members inquiring about visitation at long-term care facilities. To those who wrote, Governor Hutchinson provided some good news. He announced an amended directive from the Arkansas Department of Health (ADH): “Revised Visitation, Screening, and Staff Directive for Long-Term Care Facilities.”^[1] The amended directive reduces many of the restrictions that were initially placed in March^[2]—and subsequently loosened in July^[3]—in response to the pandemic.

This week’s amended directive left in place a continued prohibition against visitation to long-term care facilities except as allowed by the directive. So-called “minimum visitation” is required by all facilities under the following circumstances:

- Visitation that is “medically necessary,” which is defined as “visitation related to medical treatment and visitation appropriate in compassionate care situations as determined by the resident’s physician or advanced practice nurse.”
- Visitation by law enforcement, emergency personnel, representatives of Disability Rights of Arkansas, and representatives of governmental agencies such as ADH, DHS, and the U.S. Department of Health and Human Services.

Otherwise, the amended directive allows for “expanded visitation” but only for those long-term care facilities that meet the following requirements:

- The facility has not had a newly positive COVID-19 case in the past 14 days;
- The facility has met staffing requirements and is not under a waiver of any state or federal staffing requirements;
- The facility has adequate PPE for residents and staff;
- Every visitor, employee, contractor, or vendor is screened prior to entry of the facility; and
- The facility will restrict access to the facility to all persons who meet screening criteria.

The long-term care facility must screen for a temperature of 100.4 degrees or higher; positive test for COVID-19 within the previous 14 days; fever of 100.4 degrees or above during the previous 24 hours; worsening of other symptoms related to COVID-19 within the previous 24 hours, including cough, shortness or breath, sore throat, or loss of taste or smell; and close contact with anyone who is positive

with COVID-19 during the previous 24 hours. A person meeting any of these criteria must not be allowed entry to the facility.

Those facilities that meet the above requirements may choose to expand visitation. There is no requirement that facilities expand visitation if eligible to do so. If a facility provides expanded visitation, there must be “social distancing” of at least six feet between visitors and residents. ADH recommends that visitation be conducted outdoors “unless not possible due to weather or other circumstances out of the control of the long-term care facilities.” For visitation that is held indoors, facilities must designate areas outside of residents’ rooms^[4] that are easily accessible and limit the extent of visitors’ movement throughout the facility.

Residents are limited to two visitors^[5] at a time. Residents are encouraged to wear face masks if allowed by their medical conditions. Visitors must wear face masks and wash hands with an approved sanitizer at the beginning and end of the visit. Visitors cannot eat during a visit but may provide food to a resident if approved by the facility and consistent with the resident’s dietary restrictions.

Those facilities eligible for expanded visitation may also allow for salons and barber shops to provide services within the facility. In addition, eligible facilities may allow for communal dining.

Those facilities that are *not* eligible for expanded visitation may allow visitation through “visitation booths” located outdoors where a resident is brought to that location to visit, but only if the resident is completely separated from visitors by Plexiglass—or a similar barrier—and the facility has not had more than three active resident or staff cases at any one time within the last 14 calendar days.

This is all more welcomed news for nursing-home residents and family members who have been separated due to COVID-19 since mid March. In order to determine eligibility, long-term care facilities should reference the specific language of the advanced directive, which also speaks to recordkeeping requirements associated with expanded visitation. Family members will need to communicate regularly with their loved one’s facility to determine its eligibility and, if so, the extent to which expanded visitation will be offered and any limitations that may be associated with visitation. Unfortunately, a particular facility could see its eligibility status ebb and flow based on the presence and timing of COVID-19 within the facility. Thus, many family members will find it important to stay informed and visit whenever possible.

Read the Arkansas Department of Health directive [here](#).

^[1]

https://www.healthy.arkansas.gov/images/uploads/pdf/ADH_LTC_Visitation_Directive_amended_10.6.pdf

^[2] “Guidance for Limiting the Transmission of COVID-19 for Long-Term Care Facilities,”

https://www.healthy.arkansas.gov/images/uploads/pdf/directive_long_term_care.pdf

^[3] “Requirements for Facilities to Expand Visitation, Activities, and Communal Dining,”

https://arhealthcare.com/sites/default/files/LTC_Visitation_07222020_updated.pdf

^[4] A long-term care facility may allow visitation in a resident’s room if the resident is bedbound or cannot leave his room for health reasons.

^[5] The visitors should be 12 years of age or older, although ADH allows facilities to approve visitation for younger persons under “special circumstances.”