



## **Criteria for Reopening Nursing Homes Based on Federal and State Guidelines**

Facilities may consider limited visitation and activities when the following conditions have been met:

1. The facility is in full compliance with all state and federal requirements, state Executive Orders and guidance, state reporting requirements including COVID-19 focus surveys, HERDS and staff testing surveys, and federally required submission of COVID-19 data to the National Healthcare Safety Network (NHSN).
2. The facility has protocols to separate residents into cohorts of positive, negative, and unknown as well as separate staffing teams to deal with COVID-positive residents and nonpositive residents.
3. The facility has completed the NY Forward Safety Plan and submitted a copy of the completed plan to [covidnursinghomeinfo@health.ny.gov](mailto:covidnursinghomeinfo@health.ny.gov). The facility will retain a copy of the plan at the facility where it is easily accessible and immediately available upon request of the Department or local health department. Any changes to the plan will be immediately communicated to the Department. The plan will:
  - a. Clearly articulate the space(s) to be used for visitation (outdoors and indoors) including the number of visitors and residents which could be safely socially distanced within the space(s).
  - b. Such plan shall include attestation of compliance with all State and federal guidelines.
4. The facility has no staffing shortages as evidenced by the facility's individual staffing plan and as reported through the submission to the National Health Safety Network (NHSN).
5. Access to adequate testing. The facility should have a testing plan in place that, at a minimum, ensures all consenting nursing home residents have received a single baseline COVID-19 test. In addition, the facility has the capability to test or can arrange for testing of all residents upon identification of any individual with symptoms consistent with COVID-19. If a staff member tests positive for the SARS-CoV-2 virus, the facility has the capacity to continue re-testing all nursing home staff and residents, as applicable.
6. An executed and operationalized arrangement with laboratories to process SARS-CoV-2 virus tests. As recommended by CMS, the test used should be able to detect SARS-CoV-2 virus (e.g., polymerase chain reaction (PCR)) with greater than 95 percent sensitivity, greater than 90 percent specificity, with results obtained and rapidly reported to the facility.
7. Continued written screening protocols for all staff during each shift including temperature and symptom check, questionnaire regarding potential exposure.
8. Continued screening and monitoring of all residents every shift including temperature checks, vital signs, pulse oximetry and evaluation for Covid related symptoms.

9. Written screening protocols for all visitors entering the facility including temperature and symptoms check as well as questionnaire regarding potential exposure.
10. There have been no new nursing home onset *COVID* cases (residents or employees) in the facility for 28 days.
11. The facility has adequate supplies of PPE and essential cleaning and disinfection supplies to care for residents. An adequate supply of masks will be on hand and available for visitors who lack an acceptable face covering.
12. Referral hospital(s) have bed capacity on wards and intensive care units.
13. A copy of the facility's formal visitation plan is posted to the public website and broadcasted via email, robo call or social media to provide visitors with clear guidelines for visiting and to announce if and when visitation is paused due to an increase in the number of residents and/or staff with a confirmed positive COVID-19 diagnosis.

### **Facility Visitation Guidelines**

1. No more than 10% of the residents shall have visitors at any one time. Only two visitors (limited to family members, loved ones, and representatives from the long term care ombudsmen program and advocacy groups) per resident at any one time.
2. Visitation is by appointment only. The facility will have designated days/times for limited visitation. The facility administrator may make exceptions to the above visitation days as able to accommodate resident needs and family schedules, not to exceed the 10% threshold. Examples of such:
  - a. Based on the first letter of the resident's surname, visitation days are assigned as follows:
    - A-C – Sunday
    - D-G – Monday
    - H-K – Tuesday
    - L-N – Wednesday
    - O-R – Thursday
    - S-V - Friday
    - W-Z – Saturday
  - b. Scheduled appointments between designated times (i.e. 9am-11am and 2p-5p)
  - c. Scheduled appointments in incremental time slots (i.e 30-60 minutes).
3. Visitation is limited to outdoor areas, weather permitting. The facility will use designated areas that allow and are marked for social distancing delineations i.e. on the portico and courtyards.
4. Only under certain limited circumstances will visitation be allowed inside. Such visitation will be allowed in well ventilated, common areas only (main dining room, library, family lounge, solarium or portico) and is strictly prohibited on units and in resident room.
5. Current Covid-19 positive residents, residents with Covid-19 symptoms, and residents in a 14-day quarantine or observation period or not eligible for visits.
6. Both residents and visitors must remain socially distanced at all times and face coverings/masks must cover both the nose and mouth, if medically tolerated. The only

exception to social distancing is when residents are being assisted with wheelchair mobility.

7. Adequate staff will be present to allow for assistance with the transition of residents and monitoring of visitation including strict adherence to social distancing and wearing of required PPE.
8. Cleaning and disinfecting of approved visitation areas will be conducted after each visit using an EPA-approved disinfectant.
9. Visitors under the age of 18 must be accompanied by an adult 18 years of age or older.
10. Visitor Entry:
  - a. All visitors with an appointment will be directed to a designated 'check in' area for screening. Such screening includes:
    - Point of Care Testing (if available)
    - Observation of any signs or symptoms
    - Temperature checks
    - Questionnaire about symptoms and potential exposure including international travel or travel to other states designated under the Commissioner's travel advisory.
    - Documentation of screening questions and temperature recordings is maintained onsite.
    - Visitors must also provide the following information which is maintained electronically. Such information is available upon the Department's request for purposes of inspection and potential contact tracing.
      - First and last name
      - Physical (street) address
      - Daytime and evening telephone number
      - Date and time of visit
      - Email address, if available
      - A notation indicating the individual cleared the screening (temperature and questions) but does not disclose individual specific information.
  - b. Visitation will be refused if any individual(s) exhibits any Covid-19 symptoms or does not pass the screening questions.
  - c. Visitors will be checked for appropriate face covering/mask which will be required for entry. Face coverings and masks must cover both the nose and mouth throughout the duration of the visit. For visitors who do not have an appropriate face covering, one will be issued.
  - d. Visitors will be required to utilize alcohol-based hand rub. Education on use is provided.
  - e. Visitors will be escorted to the designated visitation area.
11. Visits will be monitored by designated staff and those who do not follow the guidelines will be asked to leave the premises.