

BEST PRACTICES FOR ICF/IID OUTDOOR VISITATION

As Ohio continues to cope with COVID-19 and take steps to reopen in phases, the Ohio Department of Developmental Disabilities (DODD) recommend continued vigilance as Ohioans with developmental disabilities, families, guardians, and providers consider visits. People who are considered vulnerable may live in Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) settings and be particularly susceptible to the virus. As you consider lifting visitation restrictions, an abundance of caution and planning is advised.

Lack of in-person engagement with family and friends who live outside of the congregate setting may significantly diminish a person's quality of life, making visits necessary to address the person's emotional wellness despite potential physical health risks. For these people, the provider will need to make every effort to mitigate risks to the highest degree possible. For some, their family and friends may be aged or terminally ill, and delaying visitation may have untenable consequences.

Visits for people in congregate care settings present a significant challenge due to the number of vulnerable people living together, and the number of staff needed to ensure visits are conducted safely. The ability for facilities to understand and know where the residents have been or who has had contact with them is critical to contain the spread of infection if someone tests positive for COVID-19. To ensure the risk of spreading the virus is minimal, staff must be educated and informed of droplet precautions and must adhere to enhanced infection control precautions including:

- reliable and persistent wearing of masks
- diligent handwashing
- use of other PPE such as gloves as the situations warrant

It is important to keep in mind that visitors may not have been as diligent in their prevention strategies. Contact tracing is much more difficult for the provider to monitor or ascertain where visitors may have been and the people they have been in close contact with prior to visits.

The Ohio Department of Health's (ODH) suspension of visitation in all long-term care facilities remains in effect. However, at the discretion of each provider, planning for **outdoor only** visits may be an option. This approach assumes people's visitation plans include the usual COVID-19 precautions, face coverings, social distancing, vigilant handwashing, surface cleansing, etc.

- ICF's need to carefully consider all implications for a resident's physical and mental well-being when determining when to allow facility and personal visitation decisions.
- DODD is encouraging each ICF provider to develop visitation practices that include, at a minimum, limiting visits, creating a screening process for visitors, and using sign-in sheets to track visitors.
- An evaluation must be made by the person's team to ensure the visitation is going to be emotionally beneficial, knowing that the social distancing guidance will prohibit hugging and handholding and that the visitor will be expected to wear a mask. Take into consideration if the individual has indicated a desire to have visitors. and if the individual being visited will be able to wear a mask.
- Providers need to educate residents on the risks of the spread of COVID-19 when interacting with visitors and the appropriate/applicable safety precautions.
- Providers must educate families/friends of the risks of the spread of COVID-19 and the potential health impact for not just their loved one, but all residents of the home.
- Providers need to have enough personnel available to check visitors in, take temperatures (both resident & visitor), do health screening (visitor), and monitor visits.
- If more than one person has a visitor, the visits should take place in distinctly separate outdoor areas so that groups are distant and not able to congregate.

- Visitors may not take people off the ground unless approved by the provider in advance.
- Visitors should be advised, in advance, that access to the facility will not be granted for any reason (e.g., restrooms), so the visitor needs to plan accordingly. Facilities that can offer restrooms in non-residential buildings, that are not in use by residents at the time of visitation, may consider accompanying visitors to and from those locations as needed. Those areas must be thoroughly cleaned after visitation before use by residents.
- Contingency plans need to be in place to address potential adverse weather conditions. Consider the temperatures and making areas of shade available, especially taking into consideration medication-related sun sensitivity.
- It is preferable for visits to be contact-free. If contact does occur, it is recommended that the individual wash hands thoroughly and change clothes when returning indoors. Items such as wheelchairs or other touched items need to be cleaned and disinfected.
- Hand sanitizer should be available to visitors and individuals to use before and during the visit.

Visits need to be:

- Prescheduled with the provider and notify the visitor of the length of time available for the visit.
- Include screening of visitors for temperature and symptom reporting, and hand sanitizing.
- Limited to gatherings based on the space available to maintain social distancing, including the individual and any staff needed to assist.
- In structured settings that are designed to encourage social distancing, supervise and address any laxing of masking or social distance.
- Conducted in an outdoor location where surfaces and furniture will be cleaned and sanitized before and after the visit.
- Limited to the individual and their visitors in an outdoor location of their own.
- Planned to avoid anything that would require removing the visitor's masks (such as eating).
- Planned in accordance with visitation guidelines required by the provider to maintain the health and safety of all residents.
- Planned to avoid sharing items such as balls, games, or craft supplies.

Visitors need to:

- Agree to have temperature taken, complete a health screening & wash hands/use hand sanitizer upon arrival.
- Agree to wear face coverings during the visit.
- Agree to minimize physical contact when possible and determined necessary by the team.
- Agree to follow any visitation guidelines required by the provider to maintain the health and safety of all residents.
- Understands the health risks of COVID-19 and the importance of taking steps to minimize exposure for all the residents of the home.
- Understands that scheduled visitation may need to be canceled or rescheduled on short notice depending on the availability of staff or the health status of any resident in the home.

As ODH's orders change, DODD will continue to work with congregate care settings to move toward less restrictive visitation guidance.

Provider Considerations for Initiating Outdoor Visitation:

- Is the facility clear of quarantine, isolation, and staff COVID+ cases (for 14 days since last C+)?
- Is the facility clear of staff COVID+ cases (for 14 days since last with staff C+ diagnosis was in the facility)?
- Have other factors recently increased the risk of exposure to COVID-19 occurred in the last 14 days with/without COVID-19 consequences (such as staff assignments, or in facility resident movement among buildings, attending Adult Day Services, or other outings from the facility)?

Risks	Risk Mitigation
<p>COVID-19 spreads easily and is believed to be spread primarily through airborne droplets from an infected person's speech, coughs, and sneezes. When enough droplets from the air may enter the mouth or nose of another person, that person can become infected.</p> <p>People without known symptoms can spread the virus to others.</p>	<p>Having visits occur outdoors allows droplets to be dispersed and decreases the droplets that accumulate in the air for other people to inhale.</p> <p>Wearing face coverings decreases the number of droplets expelled by speech and potentially inhaled by another person.</p> <p>Limiting close personal physical contact.</p>
<p>Droplets that land on surfaces and are transmitted to a person's mouth nose or eyes may spread the infection.</p>	<p>Teaching/assisting people to wash their hands before visits and to keep their hands away from their faces until hands are washed again after the visit.</p> <p>Cleaning and sanitizing touchable surfaces before and after visits.</p> <p>Using hand sanitizer before touching any surfaces after the visit.</p>
<p>People with some underlying health conditions have a higher risk for an adverse outcome from a COVID-19 infection? These include:</p> <ul style="list-style-type: none"> • diabetes • severely obesity • older than 60 years old • known respiratory issues • known cardiac disease, including hypertension • immunocompromising conditions (ex: HIV, cancer, post-transplant, Prednisone treatment, etc.) • renal disease • other underlying health problems 	<p>Health screening of visitors before the visit.</p> <p>Maintaining a social distance of at least 6 feet during the visit.</p> <p>Keeping face coverings on the entire visit.</p> <p>Avoiding personal contact during a visit.</p> <p>Thoroughly washing hands after a visit.</p> <p>Wiping off any gifts before they go to a person's living area.</p>
<p>Roommates or housemates with high-risk health conditions.</p>	<p>Consider cohorting people who are getting visits to live separately from people not getting visits.</p>
<p>Visitors who may not want to wear face coverings or maintain social distancing.</p>	<p>Educate visitors on the risks to the individual and housemates. Be clear that visitation is contingent on compliance with all safety precautions.</p> <p>Consider the possibility of delaying visitation or visiting through a closed window only.</p>

Links to current orders

DIRECTORS STAY AT HOME ORDER

<https://coronavirus.ohio.gov/static/DirectorsOrderStayAtHome.pdf> find April 13th edition that suspends

DIRECTORS STAY AT HOME ORDER continues above through 11:59 pm on May 1, 2020.

<https://coronavirus.ohio.gov/static/publicorders/Directors-Stay-At-Home-Order-Amended-04-02-20.pdf>

DIRECTORS STAY SAFE OHIO ORDER continues above through 11:59 pm on May 29, 2020.

<https://coronavirus.ohio.gov/static/publicorders/Directors-Stay-Safe-Ohio-Order.pdf>

CDC's KEY STRATEGIES TO PREPARE FOR COVID-19 IN LONG TERM CARE FACILITIES last reviewed April 15, 2020,

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care-strategies.html>

DIRECTORS ORDER TO LIMIT ACCESS TO OHIO'S NURSING HOMES AND SIMILAR FACILITIES

<https://coronavirus.ohio.gov/wps/portal/gov/covid-19/resources/public-health-orders/order-to-limit-access-to-ohios-nursing-homes-and-similar-facilities>

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