Subject: Access and Visitation – Florida Document Name: N-130

Effective Date: 9/14/2017 Revision Date: 10/24/2022

POLICY:

The resident has the right to receive visitors of his or her choosing at the time of his or her choosing, subject to the resident's right to deny visitation when applicable, and in a manner that does not impose on the rights of another resident. There is no limit on the number of visitors a resident may have at one time, or limits on the frequency or length of visits.

Procedure:

- 1. The center must provide immediate access to any resident by:
 - a. Any representative of the Secretary;
 - b. Any representative of the State;
 - c. Any representative of the Office of the State long term care Ombudsman;
 - d. The resident's individual physician;
 - e. Any representative of the agency responsible for the protection and advocacy system for the developmentally disabled individuals;
 - f. Any representative of the agency responsible for the protection and advocacy system for individuals with mental disorder;
 - g. The resident representative.
- 2. The center will provide immediate access to a resident by immediate family and other relative of the resident, subject to the resident's right to deny or withdraw consent at the time.
- 3. The Office of the State Long-Term Care Ombudsman will be given access to examine a resident's medical, social and administrative records in accordance with State law.
- 4. The center will provide immediate access to a resident by others who are visiting with the consent of the resident, subject to reasonable clinical and safety restrictions and the resident's right to deny or withdraw consent at any time;
- 5. The Center will allow in-person visitation, unless the resident objects, in the following situations:
 - a. End-of-life situations
 - b. Resident who was living with family before admission to the center is struggling with the change in environment
 - c. Resident is making one or more major medical decisions

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d. Resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died

- e. Resident needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver
- f. Resident who used to talk and interact with others is seldom speaking
- 6. The center will inform each resident and/or resident representative of his or her visitation rights and related center policies and procedures.
- 7. The center will inform each resident of the right, subject to his or her consent, to receive the visitors whom he or she designates as well as deny visitation including but not limited to:
 - a. A spouse, including a same-sex spouse;
 - b. A domestic partner, including a same-sex domestic partner;
 - c. Another family member;
 - d. A friend.
 - e. Essential Caregiver
 - i. Essential caregiver may be a family member, friend, guardian, or other individual as designated by the resident
 - ii. The center will allow in-person visitation by the essential caregiver for at least 2 hours daily, in additional to any other visitation authorized by the center
 - iii. The essential caregiver is not required to provide care to the resident
- 8. The center will not restrict, limit, or otherwise deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation or disability. The center may not require visitors to submit proof of any vaccination or immunization.
- 9. The center will ensure all visitors enjoy full and equal visitation privileges consistent with resident preferences,
- 10. Centers will provide 24-hour access to other non-relative visitors who are visiting with the consent of the resident. These other visitors are subject to reasonable restrictions, which may include:
 - a. Restrictions imposed by the center that protect the security of all the center's residents, such as keeping the center locked at night;

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b. Denying access or providing limited and supervised access to a visitor if that individual has been found to be abusing, exploiting, or coercing a resident;

- c. Denying access to a visitor who has been found to have been committing criminal acts such as theft;
- d. Denying access to visitors who are inebriated; under the influence and/or disruptive;
- e. Denying access or providing supervised visitation to visitors who have a history of bringing illegal substances into the center.
- f. Deferring visitation for individuals that are experiencing signs and symptoms of a transmissible infection (such as flu like symptoms) until they are no longer infectious per CDC or local health department
- g. Establishing reasonable visitation hours to facilitate care giving for the resident or to protect the privacy of other residents, such as requiring that visits not take place in the resident's room if the roommate is asleep or receiving care; or
- h. Changing the location of visits to assist care giving or protect the privacy of other residents, if these visitation rights infringe upon the rights of other residents in the center.
- 11. If the center determines an illegal substance may have been brought into the center by a visitor, Center will contact local law enforcement.
 - Note: center staff will not search the resident's personal belongings unless the resident or resident representative agrees to a voluntary search and understands the reason for the search.
- 12. The center may suspend in-person visitation if the visitor violates the center's policies and procedures
- 13. The center will provide the visitor information on infection control including but not limited to hand hygiene, personal protective equipment, and screening and any other infection protocols for visitors.
- 14. Residents on transmission –based precautions may receive visitors, center will provide potential risk of visitation and infection control precautions required to visit. Visitors will adhere to the principles infection control.
- 15. The center will follow core principle of infection control based on the center's COVID-19 status

Screening:

- **16.** The center will post guidance (signs at the entrance) regarding recommended actions for visitors who have a positive viral COVID-19 test, symptoms of COVID-19 or have had close contact with someone with COVID-19.
 - **a.** Visitors with confirmed COVID-19 infections or compatible symptoms should defer non-urgent visitation until they meet the CDC criteria for healthcare settings to end isolation.

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b. Visitors who have close contact with someone with COVID-19 infection, it is safest to defer non-urgent in-person visitation until 10 days after their close contact if they meet CDC healthcare guidance.

- 17. Staff and Healthcare personnel(including but not limited to, physicians, physician extenders, hospice providers, laboratory and radiology staff) will be instructed to report any of the following to their supervisor or the Infection Preventionist:
 - i. A positive viral test for SARs-CoV-2
 - ii. Symptoms of COVID-19 or
 - iii. A high risk exposure to someone with SARs-CoV-2 infection

PPE for Visitors:

- 18. All visitors will perform hand hygiene prior to visitation
- 19. If a center's community transmission level is high all residents and visitors, regardless of vaccination status, should wear face covering or mask.
 - a. If the center's community transmission level is not high, the safest practice is for residents and visitors to wear face covering/mask. The center may choose not to require visitors wear face coverings or mask while in the center except during an outbreak (based on recommendations from CDC, state or local health departments and the center circumstances)
 - b. Regardless of the community transmission level, residents and visitors when alone in the resident's room or in a designated visitation area, may choose not to wear face coverings or masks and may choose to have close contact (including touch).
 - *i.* Resident or their representative and visitor should be advised of the risk of physical contact prior to the visit
 - *ii.* If the roommate is present during the visit, it is safest for the visitor(s) to wear a face covering or mask.

Education:

- 20. Center will follow federal and state regulations on visitation. Center will follow the core principles of COVID-19
 - a. Hand hygiene
 - b. Face covering/mask covering mouth and nose in accordance with CDC guidance
 - Signage such as but not limited to- COVID-19 symptoms, infection control precautions, mask, specified entries and exits and routes to the dedicated visitation area(s)
 - d. Cleaning and disinfecting high touch surfaces in the center and in the designated visitation area(s) between visits
 - e. Staff PPE
 - f. Resident cohorting
 - g. Resident and staff testing as required

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Note – Visitors who are unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave the center.

Physical Contact

- 21. Regardless of the community transmission level, residents and visitors when alone in the resident's room or in a designated visitation area, may choose not to wear face coverings or masks and may choose to have close contact (including touch).
 - a. Resident or their representative and visitor should be advised of the risk of physical contact prior to the visit
 - b. If the roommate is present during the visit, it is safest for the visitor(s) to wear a face covering or mask.

Designation of a Staff Member:

Center will designate a staff member to serve as the infection preventionist and will oversee and ensure staff adhere to the policies and procedures of the center.