Visitation Policy

The Visitation Policy is designed to promote resident, visitor, and employee safety and compliance with applicable laws and regulations. The community does not restrict visitation.

As per Florida Statute 408.823, the Executive Director is responsible for ensuring that staff adhere to the policies and procedures.

General Guidelines:

1. If the individual is a first-time visitor, offer them the Infection Control Training and Education.
2. Screening Process/personal protective equipment, and infection control protocols.
    a. Ensure hand sanitizer is available for staff, visitors, and residents throughout the community.
    b. Screenings are no longer required for entrance to the community.
    ~~c.~~ Face mask use for residents and visitors is optional, regardless of vaccination or immunization status, unless the resident or visitor is ill or symptomatic.
    d. If the individual's loved one is in Isolation, they are required to wear a N-95 mask, gown, and face shield. *An N95 mask may be offered upon request.*
        a. Provide the individual with any personal protective equipment (PPE) needed prior to permitting entry.
    e. If their loved one is in quarantine, the individual is required to wear a N-95 mask.
        a. If they do not have one, provide them with one prior to permitting entry
    f. Hand hygiene should be performed by the resident and the visitors before and after contact.
    g. Visits for residents who share a room should ideally not be conducted in the resident's room. If in-room visitation must occur (e.g., the resident is unable to leave the room), an unvaccinated roommate should not be present during the visit. If neither resident is able to leave the room, communities should attempt to enable in-room visitation while maintaining recommended infection prevention and control.

3. Residents can visit with any person of his or her choice, at any time between the hours of 9:00 a.m. and 9:00 p.m. at a minimum.
4. There is no limit on the number of visitors allowed per visit.
5. The Executive Director is responsible for ensuring that staff adhere to the policies and procedures of the visitation policy.
6. Visitors are not required to submit proof of any vaccination or immunization.
7. Consensual physical contact between a resident and the visitor is allowed.

Essential Caregivers

A resident or their responsible party may designate anyone they choose as an Essential Caregiver. There are no limits on the number of identified Essential Caregivers per resident.

Special Circumstances

In the event a State Agency might require restriction, the Essential Caregiver will be allowed in all the following circumstances, unless the resident objects:

1. End-of-life situations
2. A resident who was living with family before moving into the community is struggling with the change in environment and lack of in-person family support.
3. The resident is making one or more major medical decisions.
4. A resident is experiencing emotional distress.
5. A resident is grieving the loss of a friend or family member who recently died.
6. A resident needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
7. A resident, client, or patient who used to talk and interact with others is seldom speaking. During these times, visits must be conducted in the resident's room.

For more information about visiting Florida communities generally, please visit acha.myflorida.com/visitation/. If you believe that your or your loved one's rights are being violated, please contact AHCA by calling the toll-free Complaint & Information Call Center at 1-888-419-3456, or by completing an online complaint form at: https://ahca.myflorida.com/

Commuity Access Procedure:

- Upon arrival check in at the front desk.
- Sign in and out on the Visitor Log.
- Visitors will be instructed and given the Visitation/Infection control guidelines.

VISITOR EDUCATION

.

STANDARD PRECAUTIONS

- Every visit shall require the visitor to sign in and out in the visitor log
- Regular hand washing will be adhered to before, during and after the visit
- Standard Precautions eliminates the need to routinely place residents in private rooms for infection control purposes.

Handwashing for Visitors

Handwashing facilities will always be available for use by visitors.

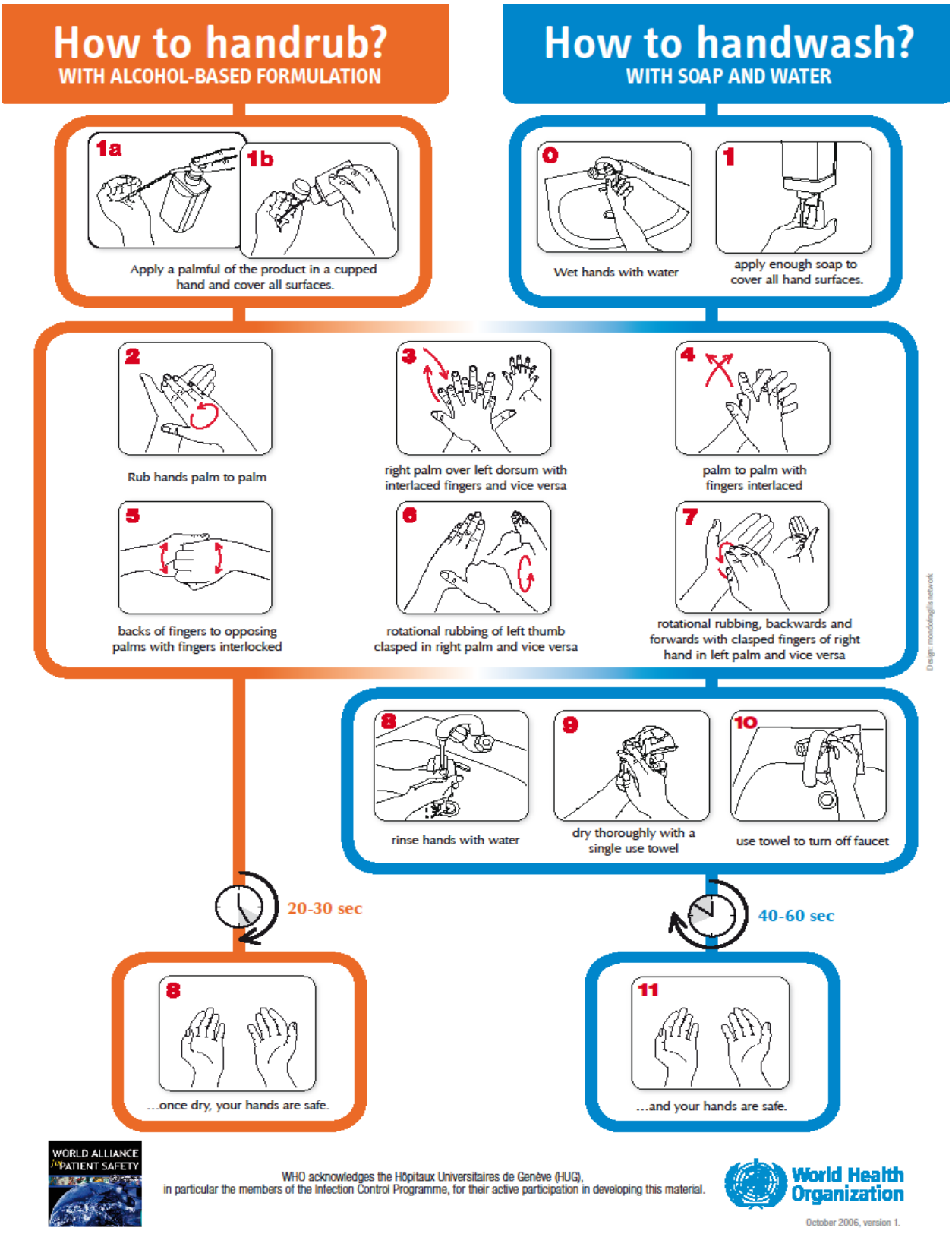
Alcohol-based gels will be available to all visitors. Handwashing and cleansing with an alcohol-based sanitizer are acceptable methods for hand hygiene. Handwashing with soap and warm water should be performed to remove dirt, blood, and body fluids.

Visitors will clean their hands before and after visit, and as needed during the visit.

Proper Handwashing Technique:

- Remove all jewelry, including rings.
- Run the faucet so that the water is lukewarm and wet the hands.
- Use a small amount of liquid soap to cover the hands and wrists. Soap the forearms, if necessary, to cleanse beyond the area of contamination.
- Use friction. Rub one hand upon the other, and interlace the fingers of both hands, using a back-and- forth motion for at least **20** seconds.
- Rinse your hands and wrists under running water. Always hold the hands so that they are lower than the elbows to allow water to flow from the fingertips.
- Dry your hands with a clean paper towel.
- Use a paper towel to turn off the water faucet.

Visitors will be required to practice hand hygiene before, during, and after visits.



All visitors shall be required to support Universal Source Control

Source control refers to use of well-fitting cloth masks, facemasks, or respirators to cover a person's mouth and nose to prevent spread of respiratory secretions when they are breathing, talking, sneezing, or coughing. In addition to supplying source control, these devices also offer varying levels of protection for the wearer against exposure to infectious droplets and particles produced by infected people. Ensuring a proper fit is important to optimize both the source control and protection offered. Because of the potential for asymptomatic and pre-symptomatic transmission, source control measures are recommended for everyone in a healthcare community, visitors should wear their own well-fitting form of source control upon arrival to and throughout their stay in the community. If they do not bring their own, they should be offered an option that is equivalent to what is recommended for people in the community.

In the event of a viral outbreak the visitor will be subject to the appropriate PPE as required to mitigate and prevent spread of the virus. Community staff will instruct on the proper PPE for the individual situation.

When visiting a resident that is quarantined due to an active contagion period the visitor will be required to wear full PPE. Community staff will instruct on proper donning and doffing of the PPE

The PPE recommended when caring for a resident with suspected or confirmed Infection includes the following:

- **Respirator**
    - Put on an N95 respirator (or equivalent or higher-level respirator) before entry into the resident room or care area, if not already wearing one as part of extended use strategies to optimize PPE supply. Other respirators include other disposable filtering facepiece respirators, powered air purifying respirators (PAPRs), or elastomeric respirators.
    - N95 respirators or respirators that offer a higher level of protection should be used when performing or present for an aerosol generating procedure. See appendix for respirator definition.
    - Disposable respirators should be removed and discarded after exiting the resident's room or care area and closing the door unless implementing extended use or reuse. Perform hand hygiene after removing the respirator or facemask.
        - If reusable respirators (e.g., powered air-purifying respirators [PAPRs] or elastomeric respirators) are used, they should also be removed after exiting the resident's room or care area. They must be cleaned and disinfected according to manufacturer's reprocessing instructions prior to re-use.
- **Eye Protection**
    - Put on eye protection (i.e., goggles or a face shield that covers the front and sides of the face) upon entry to the resident room or care area.
        - Protective eyewear (e.g., safety glasses, trauma glasses) with gaps between glasses and the face do not protect eyes from all splashes and sprays.
    - Ensure that eye protection is compatible with the respirator so there is not interference with proper positioning of the eye protection or with the fit or seal of the respirator.
    - Remove eye protection after leaving the resident room or care area, unless implemented extended use.

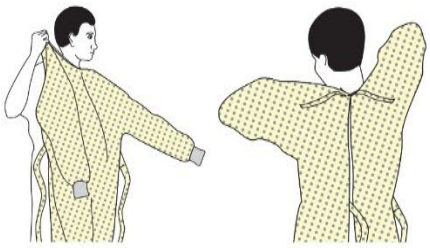
    - Reusable eye protection (e.g., goggles) must be cleaned and disinfected according to manufacturer's reprocessing instructions prior to re-use. Disposable eye protection should be discarded after use unless following protocols for extended use or reuse.
- **Gloves**
    - Put on clean, non-sterile gloves upon entry into the resident room or care area.
        - Change gloves if they become torn or heavily contaminated.
    - Remove and discard gloves before leaving the resident room or care area, and immediately perform hand hygiene.
- **Gowns**
    - Put on a clean isolation gown upon entry into the resident room or area. Change the gown if it becomes soiled. Remove and discard the gown in a dedicated container for waste or linen before leaving the resident room or care area. Disposable gowns should be discarded after use. Reusable (i.e., washable or cloth) gowns should be laundered after each use.

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

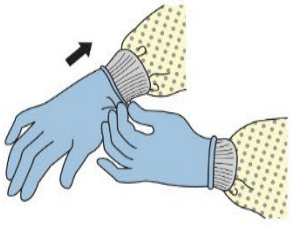
- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit

4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

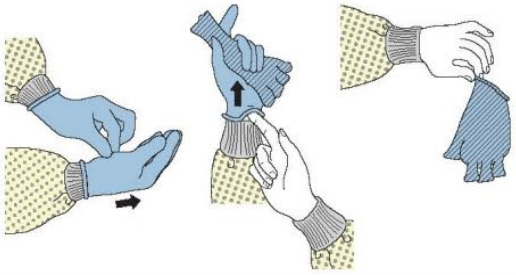
CS250672-E

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

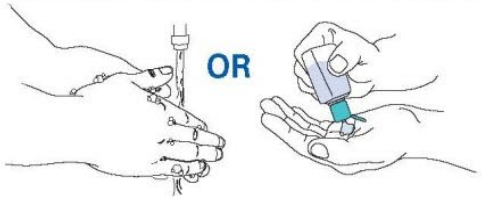
3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container

5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

CS250672-E