



ONE GOAL ONE FLORIDA

GOVERNOR RON DESANTIS

**TASK FORCE on the SAFE
and LIMITED RE-OPENING
of LONG-TERM CARE FACILITIES**

Final Recommendations to Governor DeSantis

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The cornerstone of Florida’s mission in responding to the COVID-19 pandemic has been protection of our most vulnerable residents, including those living in long-term care facilities like nursing homes and assisted living facilities.

On August 6, 2020, Governor Ron DeSantis formed the “Task Force on the Safe and Limited Re-Opening of Long-Term Care Facilities” to provide guidelines to safely allow visitation to long-term care facilities as the state continues to respond to the threat of COVID-19. The Task Force was charged with making recommendations to the Governor to maintain Florida's focus on protecting those most vulnerable to COVID-19, especially in congregate settings, while allowing safe visitation through the establishment of critical guidelines focused on family caregivers, appropriate public health triggers for broader visitation, and comprehensive visitation protocols.

The purpose of this report is to provide a summary of the Task Force's guidelines and recommendations. The Task Force had to weigh many factors during discussions and final decision-making, balancing the health and safety of residents with the importance of allowing residents to safely interact with their loved ones during our state's ongoing battle with COVID-19.

Visitation Policy for Long-term Care Facilities in Florida During the COVID-19 Pandemic

The COVID-19 pandemic created the greatest threat to our elderly and those with underlying medical conditions. Florida has 4.5 million individuals over the age of 65 and over 150,000 individuals residing in congregate settings, settings that are most vulnerable to rapid transmission of the COVID-19 virus. Florida has over 4,000 nursing homes, assisted living facilities, and group homes supporting some of our most vulnerable individuals. To respond to this clear threat to the elderly and those with disabilities, the Centers for Medicare & Medicaid Services (CMS) issued the first guidance memo on March 13, 2020, suggesting the restriction of visitation of all non-essential family members and health care personnel. CMS urged a continued person-centered approach to care, with effective communication with residents and family, and offered alternative means of communication. Two days later, on March 15, 2020, at the direction of Governor DeSantis, the Florida Department of Emergency Management issued Emergency Order 20-006 prohibiting all non-essential entry into long-term care facilities except in certain limited circumstances. On March 23, 2020, CMS added limitations on visitors in hospitals, critical access hospitals, psychiatric hospitals, inpatient hospice units, and intermediate care facilities.

Introduction (continued)

Throughout the months of April and May 2020, the Centers for Disease Control and Prevention (CDC) issued guidance with key strategies for facilities to prepare for and deal with COVID-19 cases among residents. The CDC also provided guidance for family support of loved ones in long-term care facilities. CMS issued a series of frequently asked questions (FAQs) in April dealing with the need for visitation limits, recognizing and dealing with the difficulty of isolation that the limitations on visitation create and underscoring the critical need for ongoing restrictions.

On May 18, 2020, CMS published initial recommendations for easing visitation restrictions based on specific public health benchmarks and requirements regarding infection control standards for safe visitation to minimize the risk of COVID-19. On June 23, 2020, CMS published another series of FAQs on long-term care facility visitation, including introducing flexibility through controlled visitation policies and separate spaces for residents without COVID-19. The FAQs also included factors to consider in adopting flexible visitation strategies.

Task Force on the Safe and Limited Re-Opening of Long-Term Care Facilities



On August 6, 2020, Governor DeSantis announced the formation of Florida's Task Force on the Safe and Limited Re-Opening of Long-Term Care Facilities. The members of the Task Force were charged with developing guidelines to safely allow family members to visit their loved ones in Florida's long-term care facilities where visitation has been prohibited. The Task Force consisted of key Florida health officials, association representatives, and a long-term care resident caregiver.

Membership of the Task Force on the Safe and Limited Re-Opening of Long-Term Care Facilities

Michelle Branham, Vice President of Public Policy, Alzheimer's Association

Mary Daniel, Caregiver

Gail Matillo, President and CEO, Florida Senior Living Association

Mary Mayhew, Secretary, Agency for Health Care Administration

Richard Prudom, Secretary, Florida Department of Elder Affairs

Emmett Reed, Executive Director, Florida Health Care Association

Dr. Scott Rivkees, State Surgeon General, Florida Department of Health

The Task Force held five publicly broadcast meetings between August 14-26, 2020, where they developed and discussed the guidelines and recommendations outlined in this report.

The Task Force focused on the following:

- Safely allowing Essential Caregivers to visit long-term care facilities;
- Safely allowing Compassionate Care visits in long-term care facilities;
- Visitation options including indoor and outdoor visitation;
- Beauty salon and barber services; and
- Resident medical services and healthcare provider visits.

Essential Caregivers and Compassionate Care Visitors

The following section outlines essential caregiver and compassionate care visitor parameters by:

- Defining essential caregivers and compassionate care visitors
- Outlining what facilities must do to safely allow visitation
- Outlining what visitors must do to safely allow visitation

Defining Essential Caregiver

- An Essential Caregiver is an individual who provides health care services or assistance with activities of daily living to help maintain or improve the quality of care or quality of life of a facility resident.
- Care or service provided by the Essential Caregiver is included in the plan of care or service plan for the resident.
- Activities of daily living are tasks related to personal care needs as identified in the plan of care or service plan and include bathing, dressing, eating or emotional support.

The facility should allow access by Essential Caregivers whose services are provided as part of the resident's plan of care or service plan as long as they pass the facility screening criteria and comply with facility policies for entry. Such criteria may include facility-provided testing for COVID-19. Additionally, caregivers must be advised of and acknowledge the risk created by frequency and duration of close contact.

Essential Caregivers are expected to work with the facility to determine an agreeable schedule that addresses the facility obligations for screening, infection prevention and control training, including appropriate use of personal protective equipment (PPE) for Standard and Transmission-based Precautions, masks, hand hygiene, and social distancing. The facility must prohibit access by an Essential Caregiver if the resident is positive for COVID-19 or is suspected of having COVID-19. The facility must deny access by Essential Caregivers for noncompliance with facility infection prevention and control requirements.

Defining Compassionate Care Visitor

- A Compassionate Care Visitor is intended to provide emotional support to help a resident face a hard situation, such as:
 - End of life;
 - Major upset, difficult transition, or loss.
- Compassionate Care Visitors are allowed on a limited basis as an exception to restricted visitation.

Task Force Recommended Guidelines (continued)

The facility should allow Compassionate Care Visitors for limited visits when a resident is experiencing trauma or end-of-life care. Compassionate Care Visitors must pass the facility screening criteria and comply with facility policies for entry. Policies may include testing for COVID-19.

Compassionate Care Visitors are expected to work with the facility to determine the optimal schedule for a visit considering the facility obligations for screening, infection prevention and control training, including appropriate use of PPE for Standard and Transmission-based Precautions, masks, hand hygiene, and social distancing. The facility must prohibit access by a Compassionate Care Visitor who does not comply with the facility's infection prevention and control requirements.

The Task Force discussed the existing exemption from visitor restrictions for family members, friends, and visiting residents in end-of-life situations under Division of Emergency Management Emergency Order No. 20-006 and recommends retaining this exemption.

Facility Requirements for Essential Caregivers and Compassionate Care Visitors

Facilities must do the following to ensure resident and facility safety:

- Establish policies and procedures for how to designate and utilize an Essential Caregiver, and allow Compassionate Care visits.
- Provide infection prevention and control training, including proper PPE and mask use, hand hygiene, and social distancing.
- Designate key staff to support infection prevention and control training of Essential Caregivers and Compassionate Care Visitors.
- Identify those who provided Essential Caregiver services before the pandemic or have asked to provide these services since the pandemic and consult with the resident or representative for concurrence.
- Continue with visitor screening (*i.e.*, temperature checks and COVID-19 signs, symptoms, and exposure screening questions).
- Allow residents to designate two Essential Caregivers and two Compassionate Care Visitors and allow no more than one Essential Caregiver and one Compassionate Care Visitor per visit. This limitation does not apply in end-of-life situations.
 - Intermediate Care Facilities and Agency for Persons with Disabilities licensed Group Homes may allow two Essential Caregivers or two Compassionate Care Visitors at one time.
- Set a limit on the total number of visitors allowed in the facility based on the ability of staff to safely screen and monitor visitation.
- Develop a schedule for visitation and work with the resident and Essential Caregivers and Compassionate Care Visitors to define an agreeable schedule.
- Allow evening and weekend Essential Caregiver and Compassionate Care visits to accommodate work or childcare barriers.

Task Force Recommended Guidelines (continued)

- Maintain a visitor log for signing in and out.
- Prohibit visitation if the resident is quarantined or if the resident is positive for COVID-19 or if the resident is symptomatic, unless the visit is for compassionate care.
- Restrict or revoke visitation if the Essential Caregiver or Compassionate Care Visitor fails to follow the facility's infection prevention and control requirements or other COVID-19 related rules of the facility, after attempts to mitigate concerns.

Essential Caregivers and Compassionate Care Visitors Requirements

Visitors must do the following to ensure resident and facility safety:

- Wear a surgical mask and other necessary PPE as appropriate for the care provided.
 - PPE for Essential Caregivers should be consistent with CDC guidance for health care personnel.
- Complete infection prevention and control training, including training on the appropriate use of PPE, use of masks, hand hygiene, and social distancing.
- Sign an acknowledgement certifying completion of training and adherence to the facility's infection prevention and control policies.
- Comply with facility-provided COVID-19 testing if offered.
 - Facility use of testing must be based on current CDC and FDA guidance.
- Inform the facility if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit.
- Provide care or visit in the resident's room, or in facility-designated areas within the building.
- Maintain social distance of at least six feet with staff and other residents and limit movement in the facility.

Task Force Recommended Guidelines (continued)

General Visitation

General visitation applies to individuals who are not designated as an Essential Caregiver or Compassionate Care Visitor. The following section outlines:

- Outdoor and indoor guidelines to safely allow visitation
- Specific criteria for facilities to allow visitors
- Facility requirements for safe visitation
- Visitor requirements for safe visitation

The following facility conditions must exist for a facility to allow indoor and/or outdoor visitation:



- 14 days with no new facility onset of **resident** or **staff** COVID-19 cases (if staff person was in the facility in the 10 days prior to the positive test), excluding dedicated units/wings accepting COVID-19 cases from the community;
- Sufficient staff to support management of visitors;
- Adequate PPE;
- Adequate cleaning and disinfecting supplies; and,
- Adequate capacity at referral hospitals for the facility.

Guidance

- Facilities are strongly encouraged to provide outdoor visitation.

Facility Requirements for Indoor and/or Outdoor Visitation

Facilities must do the following to ensure resident and facility safety:

- Designate key staff to support infection prevention and control education of visitors on topics such as use of masks, proper hand hygiene, social distancing and visitation policies.
- Schedule visitors by appointment and monitor for adherence to proper use of masks and social distancing, while allowing for auditory privacy.
- Notify and inform residents, their representatives and recurring visitors of any change in the visitation policy.
- Continue with visitor screening (*i.e.*, temperature checks and COVID-19 signs, symptoms, and exposure screening questions).
- Facility may perform testing and facility use of testing must be based on current CDC and FDA guidance.
- Maintain a visitor log for signing in and out.

Task Force Recommended Guidelines (continued)

- Clean and disinfect visitor spaces between visitors and maintain handwashing or sanitation stations.
- Require visitors be 18 years of age or older.
- Allow residents to designate up to five visitors total.
- Limit the number of visitors per resident to no more than two visitors per visit at any one time.
- Set a limit on the total number of visitors allowed in the facility based on the ability of staff to safely screen and monitor visitation.
- Limit the length of visits, visitation days and hours, and number of visits per week.
- Prohibit visitation if the resident is quarantined or if the resident is positive for COVID-19 or if the resident is symptomatic.
- For indoor visitation, create indoor spaces for residents in a room that is not accessible by other residents, or in the resident's private room if the resident is bedbound and for health reasons cannot leave their room.
- For outdoor visitation, create outdoor spaces for residents that are protected from weather elements, such as porches, courtyards, on patios, or other covered areas.
 - Protection from the heat and sun is essential and cooling devices may be required to maintain safe temperatures.

Visitor Requirements for Indoor and/or Outdoor Visitation

Visitors must do the following to ensure resident and facility safety:

- Properly wear a face mask and perform proper hand hygiene.
- Sign a consent form noting an understanding of the facility's visitation and infection prevention and control policies.
- Comply with facility-provided COVID-19 testing if offered.
 - Facility use of testing must be based on current CDC and FDA guidance.
- Inform the facility if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit.
- Visit in the resident's room, or in facility-designated areas.
- Maintain social distance of at least 6 feet with staff and residents and limit movement in the facility.

Process Upon Identification of a New COVID-19 Case

- Indoor and outdoor visitation is prohibited until the facility achieves a continuous 14-day period without the facility-onset of a resident or staff COVID-19 case (if staff person was in the facility in the 10 days prior to the positive test), excluding dedicated units/wings accepting COVID-19 cases from the community.
- Any facility that has a resident test positive for COVID-19, or has a staff person that tests positive for COVID-19 if the staff person was in the facility in the 10 days prior to the positive test, must immediately cease all indoor and outdoor visitation.
- Essential Caregivers and Compassionate Care Visitors are still permitted.

Task Force Recommended Guidelines (continued)

Beauty Salons and Barbers

Beauty salons and barbers help improve resident morale and quality of life. Hair salons may resume providing services to residents with certain precautions in place.

To resume beauty salon and barber services:

- Facilities must have a continuous 14 days with no new facility onset of resident or staff COVID-19 cases (if staff person was in the facility in the 10 days prior to the positive test), excluding dedicated units/wings accepting COVID-19 cases from the community.
- Barbers and hairdressers providing services must wear a surgical mask and gloves and perform hand hygiene. In addition, they must follow the same requirements as Essential Caregivers.
- Residents receiving services must wear a face mask, if tolerated.
- Waiting customers must adhere to social distancing guidelines.
- Only residents of the facility are allowed in the salon for services; no services can be provided to outside guests.
- Services may not be provided if the resident is quarantined, if the resident is positive for COVID-19, or if the resident is symptomatic.
- Barbers and hairdressers must properly clean and disinfect equipment between residents.

Resident Medical Services and Health Care Provider Visits

Resident Medical Services Outside of the Facility

Residents leaving the facility or group home temporarily for medical appointments must wear a face mask at all times, if tolerated, and be screened for signs and symptoms of COVID-19 upon return to the facility. Eye protection should be encouraged.

Health Care Provider Visits

Facilities or group homes must allow the resident to receive ordered health care services from external providers. Health care providers serving residents in the facility or group home must comply with CDC requirements for PPE, must be screened for signs and symptoms of COVID-19 prior to entry, and must comply with all infection control requirements of the CDC and the facility.

In addition, the resident receiving the health care services should wear a face mask during the service, if tolerated.

Finally, medical appointments should be scheduled through the facility or group home to comply with the facility or group home's ability to ensure appropriate screening and adherence to infection control requirements.

The Task Force makes the following recommendations to Governor DeSantis:

- Allow visitation in long-term care facilities for Essential Caregivers and Compassionate Care visitors. These individuals provide important care and support to residents of long-term facilities. Without their involvement these residents are at risk of unnecessary decline or death.
- Allow general resident outdoor and indoor visitation if the facility meets certain indicators of low virus risk.
- Each visitation scenario must be accompanied by facility policies and procedures that support the safety of all residents and visitors. Policies and procedures must address appropriate training and mandatory use of masks and other infection control protections, including screening and visitor scheduling and management.

Complaint Submissions

- For concerns regarding a health care facility in Florida, consumers, patient advocates and practitioners may file an anonymous complaint with the Agency for Health Care Administration.
 - Please be sure to include sufficient information, such as the patient/resident name, date(s) of events, and any other specifics pertinent to the complaint, to allow proper assessment of concerns.
 - You may file a complaint with the Agency by calling our toll-free Complaint & Information Call Center at 1-888-419-3456, or by completing our online complaint form at: <http://apps.ahca.myflorida.com/hcfc>.
- The Long Term Care Ombudsman Program is a volunteer-based advocacy organization seeking to improve long-term care facility residents' quality of life and care. The organization investigates complaints made by or on behalf of residents. All investigations are confidential and provided at no charge.
 - You may file a complaint with the Long Term Care Ombudsman by calling 888-831-0404 or by completing a complaint form online at <http://ombudsman.myflorida.com/Complaint.php>

Additional Information

- Florida Department of Health COVID-19 Website
 - <https://floridahealthcovid19.gov/>
- Centers for Disease Control Preparing for COVID-19 in Nursing Homes, June 25, 2020
 - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>
- Centers for Medicare and Medicaid Services Announcements of New Measures to Protect Nursing Home Residents from COVID-19, March 13, 2020
 - <https://www.cms.gov/newsroom/press-releases/cms-announces-new-measures-protect-nursing-home-residents-covid-19>
- Frequently Asked Questions on Nursing Home Visitation, June 23, 2020
 - <https://www.cms.gov/files/document/covid-visitation-nursing-home-residents.pdf>

Resources and Links (continued)

CDC Infection Prevention and Control Training Resources

**Prevent COVID-19:
Wear a Cloth Face Covering (for general visitation)**
<https://youtu.be/ML3n1c0FHDI>

How to Wear Masks:
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-to-wear-cloth-face-coverings.html>

How to Safely Put on Personal Protective Equipment:
<https://youtu.be/H4jQUBAIBrl>

How to Safely Take off Personal Protective Equipment:
<https://youtu.be/PQxOc13DxvQ>

Guidance for Health Care Workers Use of Personal Protective Equipment
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>