General Visitation Policy Including During Communicable Disease Outbreak- Infectious Diseases. ***Facility Name:*** **Las Palmas Senior Living**					
Date Implemented:	12/21/2024	*Date Reviewed/ Revised:*	5/20/2025	*Reviewed/ Revised By:*	VPO/IDT

Policy:

This facility will implement heightened surveillance activities for communicable/infectious disease during periods of transmission in the community, an outbreak in the facility, and/or during a declared public health emergency for the illness. The facility may modify visitation practices when there are infectious outbreaks or pandemics.

Purpose:

The purpose of this visitation policy is to outline the procedures that support safe, consistent, and meaningful visitation opportunities for residents, while integrating infection control measures to prevent the spread of infectious diseases within the facility.

Infection Control and Visitor Education:

Visitors will receive infection control education upon entry. This includes:

- Information regarding hand hygiene and location of hand sanitizer stations and personal protective equipment (PPE) stations.
- Respiratory etiquette.
- Symptoms of infectious diseases.
- Facility infection control practices. Educational materials will be available in the lobby and provided verbally or in writing by staff, if necessary.

Definitions:

"Reasonable clinical and safety restrictions" include a facility's policies, procedures or practices that protect the health and security of all residents and staff.

Policy Explanation and Compliance Guidelines:

1. The Infection Preventionist will monitor the status of communicable disease in the community, maintain communication with local and state health departments, and will keep facility leadership informed of the need for heightened surveillance activities.
2. The facility will stay in contact with the local health authorities for guidance or direction on how to structure visitation to reduce the risk of communicable disease transmission during an outbreak.
3. The facility will post adequate signage with instructions for infection prevention, i.e. hand hygiene, cough etiquette, etc.
4. The facility will ensure all visitors have access to hand hygiene supplies.
5. Restrictions may be placed to prevent community-associated infection or communicable disease transmission to one or more residents. A resident's risk factors for infection (e.g., immuno-compromised condition) or current health state (e.g., end-of-life care) should be considered when restricting visitors.

All visitors will be screened prior to entry for signs and symptoms of infectious diseases. The facility may require temperature checks, symptoms questionnaire, and use of personal protective equipment (PPE) such as masks, gowns or gloves depending on the infectious disease risk level. Essential caregivers cannot be restricted from entry into the facility.

6. Visitors, not to exceed ninety visitors at any given time, are not subject to visiting hour limitations, except for reasonable clinical and safety restrictions, placed by the facility based on recommendations of the local health department. If family visits infringe upon the rights of other residents (e.g. family visits late at night when the resident's roommate is already asleep), staff will find a location other than the resident's room for visits.
7. Consensual physical contact between a resident and their visitor is permitted. Residents have the right to hug, hold hands, or engage in other consensual physical interactions with their visitors.
8. The Director of Nursing/ Infection Preventionist or Designee is responsible for ensuring staff adherence to visitation policies and procedures. This person will also coordinate visitation logistics, address concerns, and ensure infection control compliance.
9. In general, visitors with signs and symptoms of a transmissible infection (e.g., a visitor is febrile and exhibiting signs and symptoms of an influenza-like illness) should defer visitation until they are no longer potentially infectious (e.g., 24 hours after resolution outbreak of fever without antipyretic medication), or according to current guidelines, and/or local health department recommendations. There are no restrictions for essential caregivers.
10. The facility will offer alternatives to traditional visitation, such as outdoor visits, indoor designated visitation areas, and/or virtual communications (phone, video-communication). Staff will be alert to psychosocial needs and take actions that would allow visitation to occur safely despite the presence of contagious infection.
11. During an infectious disease outbreak, residents who are on transmission-based precautions (TBP) can still receive visitors. In these cases, before visiting residents who are on TBP, visitors will be made aware of the potential risk of visiting and precautions necessary in order to visit the residents. Visitors will adhere to principles of infection prevention.
12. Visitors shall not be required to provide proof of vaccination or immunization status as a condition of visitation. All visitors will be subject to the same infection control protocols regardless of vaccination status.
13. The facility will keep families informed of visitation policies through established communication channels, including designated primary contact for incoming calls and regular outbound updates. Emergency communication procedures will be implemented as necessary."