Policy Name: In-Person Visitation Policy

Facility Name: Green Oak Villa

Effective Date: 5/6/2022

Revision Dates:

Facility Name: Green Oak Villa Assisted Living Category: Operations

Applies to: Assisted Living

Exhibit

A) Florida Law Chapter 2022-34 Committee Substitute for Senate Bill No.988

B) Resident Essential Caregiver Designation Form

C) Essential Caregiver Acceptance Form

Purpose

In-Person Visitation bill has been signed into law, creating Chapter 408.823, which is subject "<u>In-person visitation.</u>" This policy and these and procedures are intended promote resident visitation, while maintaining prudent infection control practices in an attempt to reduce the probability of transmission of INFECTIOUS DISEASE within the Community, in compliance with the regulations set forth in Chapter 408.823, Florida Statutes. A resident may designate a visitor who is a family member, friend, guardian, or other individual as an Essential Caregiver.

Policy

The following are the procedures to be followed relating to visitation and to identify Essential Caregivers for residents as well as the expectations of both General Visitors and Essential Caregivers. These procedures will be administered equally to all residents that request to have an Essential Caregiver, without regard to race, color, religion, sex (including gender identity and transgender status), age, national origin, disability, or veteran status.

Essential Caregiver visitors provide emotional support to help a resident deal with a difficult transition or loss, upsetting event, making major medical decisions, needs cueing to eat and drink, stops speaking, or end-of-life ("Essential Caregiver"). Essential Caregiver visitors may be allowed entry into facilities on a limited basis for these specific purposes. At a minimum, the Community must allow an Essential Caregiver in-person visitation for at least 2-hours daily under the above referenced circumstances. At Green Oak Villa Assisted Living communities, the 2-hour visitation will be between 9:00a.m. – 9:00p.m.

The Executive Director of the Community may make exceptions to the 2-hour visitation on a case-by-case basis for end-of-life situations. These exceptions will be discussed and agreed upon in writing by the Community's Executive Director and the Resident and/or Resident's responsible party in advance.

All visitors who do not meet the requirements of an Essential Caregiver shall be considered General Visitors ("General Visitors").

Procedures:

- I. For compliance with Florida Statute Chapter 408.823, designation and utilization of essential caregiver visitors and rules of visitation.
 - 1. The community will provide the Agency for Health Care Administration (AHCA) with a copy of the Community's visitor policy and procedure, with the initial licensure application, renewal application and/or change of ownership application.
 - 2. The visitation policy and procedure for the Community, including Essential Caregiver designation and visitation, shall be available on the home page of Community website.
 - 3. Unless otherwise designated by the Executive Director, the Director of Nursing of the Community shall be responsible for infection prevention and control training.
 - 4. The Executive Director will set a limit on the total number of visitors allowed in the Community at any given time based on the ability of staff to safely screen and monitor and the space to accommodate General Visitors and/or the Essential Caregiver visitors. When there are no known cases of INFECTIOUS DISEASE among residents currently residing in the Community, visitation will be generally unrestricted. However, in the event Residents currently residing in the Community are known to be infected with INFECTIOUS DISEASE, restrictions will be placed

upon General Visitors to reduce the possible spread of INFECTIOUS DISEASE. Visitation by Essential Caregivers will always be allowed to occur as detailed herein. Efforts

to continue General Visitation even when a INFECTIOUS DISEASE positive resident is residing in the community shall be made, and protocols shall be implemented at the discretion of the Executive Director along the lines of the following (when practical):

- a. Identify locations for visitation/care to occur planning for residents in shared spaces and facilities with minimal common space to identify maximum time availability.
- b. Provide outdoor visitation spaces that are protected from weather elements, such as porches, courtyards, patios, or other covered areas that are protected from heat and sun, with cooling devices, if needed
- c. Create indoor visitation spaces for residents in a room that is not accessible by other residents or in a resident's private room if the resident is bedbound and for health reasons cannot leave his or her room
- 5. All residents and/or POA/Guardian, if appropriate, will be asked if they want to identify an Essential Caregiver.
- 6. All new residents will be asked if they would like to identify an Essential Caregiver upon move-in.
- 7. All residents will be allowed to update as requested the named Essential Caregiver of record within 2 business days of request.
- 8. Residents are allowed in-person visitation by the Essential Caregiver in all the following circumstances, unless the resident, client, or patient objects:
 - a) End-of-life situations.

- b) A resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support.
- c) The resident, client, or patient is making one or more major medical decisions.
- d) A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
- e) A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
- f) A resident, client, or patient who used to talk and interact with others is seldom speaking.
- 9. The Community shall maintain a visitor log for signing in and out.
- 10. No more than three Essential Caregiver visitors may be designated per resident.
- 11. Essential Caregiver visitor visits may still continue even if the specific resident to be visited is quarantined, tested positive for INFECTIOUS DISEASE, or is showing symptoms of a communicable disease so long as the visits can be conducted safely, and all infection control protocols are followed by the Essential Caregiver and resident. Visits in these circumstances will likely require a higher level of PPE than standard surgical masks. The general visitation requirement that the facility has no new facility-onset cases of a communicable disease (for example INFECTIOUS DISEASE-19) is not applicable to visitation by Essential Caregiver visitors.
- 12. The Community is not required to provide for "facility-provided" INFECTIOUS DISEASE-19 testing. However, the Community may choose to conduct INFECTIOUS DISEASE testing of residents, visitors, and staff, and said testing shall be in accordance with the most recent CDC and FDA guidance. The cost of this testing cannot be passed on to the visitor.
- 13. Essential Caregiver visitors must wear Personal Protective Equipment (PPE) per Community's Infection Control Policies. The PPE required must be consistent with the most recent CDC guidance for healthcare workers. At Green Oak Villa Assisted Living communities the Essential Caregiver visitors shall wear the same PPE that staff wear to provide care or services to the resident.
- 14. General Visitors must wear Personal Protective Equipment (PPE) per the Community's Infection Control Policies at the time of their visit.
- 15. Any changes to Green Oak Villa Assisted Living Essential Caregiver visitor policies must be promptly communicated to affected residents and Essential Caregiver visitors.

II. To facilitate visits by General Visitors and Essential Caregiver visitors upon a request from a resident or friend/family member:

- 1. The resident (or their representative) will read and sign the visitation policy and procedures. The acknowledgement of the signature represents that the resident (or their representative) understands that both General Visitors and Essential Caregiver visitor must abide by the policies set forth in this document.
- 2. The Essential Caregiver visitor will sign an acknowledgement of their receipt and

- understanding of the visitation policies and procedures. The Essential Caregiver's signature represents that they have received the policies and procedures, they understand the policies and procedures, and they agree to abide by said policies and procedures.
- 3. The Essential Caregiver visitor will complete training on infection prevention and control including the use of PPE, use of masks, hand sanitation, and social distancing.
- 4. The Essential Caregiver visitor must immediately inform the facility if they develop symptoms consistent with a communicable disease within 24-hours of their last visit at the facility.
- 5. Essential Caregiver visits may take place in the resident's room or a designated area determined by the Executive Director at the time the visitation scheduled is developed and agreed upon.
- 6. General Visitor visits may take place in accordance with the infection control protocols at the time of the visit. Visits by General Visitors may be significantly limited when a resident residing in the Community is infected with INFECTIOUS DISEASE.

III. When an Essential Caregiver visitor is scheduled to visit, the Community will:

- 1. The Community designee will thoroughly screen the visitor per the Community's infection control policy and procedure and document the name of the individual, the date and time of entry, and the screening mechanism used, along with the screening employee's name and signature. Just as with staff entering the building, if the visitor fails the screening, the visitor CANNOT be allowed entry.
- 2. The Executive Director will ensure that the required consents, and training and policy acknowledgements are in place.
- 3. The Community designee will ensure that the Essential Caregiver visitor has appropriate PPE if applicable.
- 4. The Community designee will require the Essential Caregiver visitor to sign in and out on the visitor log.
- 5. The Community staff will monitor the Essential Caregiver visitor's adherence to policies and procedures.
- 6. If the Essential Caregiver visitor fails to follow the Community's infection prevention and control requirements, after attempts to mitigate concerns, the Executive Director shall restrict or revoke visitation.
- 7. In the event the Essential Caregiver visitor's status is revoked due to the individual not following the Community's policy and procedures, the resident may select a different Essential Caregiver visitor who will be granted visitation rights upon proper vetting and agreeing to policies and procedures.

IV. When a General Visitor is scheduled to visit, the Community will:

- 1. The Community designee will thoroughly screen the visitor per the Community's infection control policy and procedure and document the name of the individual, the date and time of entry, and the screening mechanism used, along with the screening employee's name and signature. Just as with staff entering the building, if the visitor fails the screening, the visitor CANNOT be allowed entry.
- 2. The Community designee will ensure that the General Visitor has appropriate PPE (if applicable).
- 3. The Community designee will require the General Visitor to sign in and out on the visitor log.
- 4. The Community designee will notify the General Visitor of any restrictions in place relating to visitation, or requirements relating to infection control, at that time of the visit.
- 5. The Community staff will monitor the General Visitor's adherence to policies and procedures.
- 6. If the General Visitor fails to follow the Community's infection prevention and control requirements, after attempts to mitigate concerns, the Executive Director shall restrict or revoke visitation.

CHAPTER 2022-34

Committee Substitute for Committee Substitute for Senate Bill No. 988

An act relating to in-person visitation; providing a short title; creating s. 408.823, F.S.; providing applicability; requiring certain providers to establish visitation policies and procedures within a specified timeframe; providing requirements for such policies and procedures; authorizing the resident, client, or patient to designate an essential caregiver; establishing requirements related to essential caregivers; requiring in-person visitation in certain circumstances; providing that the policies and procedures may require visitors to agree in writing to follow such policies and procedures; authorizing providers to suspend in person visitation of specific visitors under certain circumstances; requiring providers to provide their policies and procedures to the Agency for Health Care Administration at specified times; requiring providers to make their policies and procedures available to the agency for review at any time, upon request; requiring providers to make their policies and procedures easily accessible from the homepage of their websites within a specified timeframe; requiring the agency to dedicate a stand-alone page on its website for specified purposes; providing a directive to the Division of Law Revision; providing an effective date.

Be It Enacted by the Legislature of the State of Florida:

- Section 1. This act may be cited as the "No Patient Left Alone Act."
- Section 2. Section 408.823, Florida Statutes, is created to read:

408.823 In-person visitation.—

- (1) This section applies to developmental disabilities centers as defined in s. 393.063, hospitals licensed under chapter 395, nursing home facilities licensed under part II of chapter 400, hospice facilities licensed under part IV of chapter 400, intermediate care facilities for the developmentally disabled licensed and certified under part VIII of chapter 400, and assisted living facilities licensed under part I of chapter 429.
- (2)(a) No later than 30 days after the effective date of this act, each provider shall establish visitation policies and procedures. The policies and procedures must, at a minimum, include infection control and education policies for visitors; screening, personal protective equipment, and other infection control protocols for visitors; permissible length of visits and numbers of visitors, which must meet or exceed the standards in ss. 400.022(1)(b) and 429.28(1)(d), as applicable; and designation of a person responsible for ensuring that staff adhere to the policies and procedures. Safety-related policies and procedures may not be more stringent than those established for the provider's staff and may not require visitors to submit

proof of any vaccination or immunization. The policies and procedures must allow consensual physical contact between a resident, client, or patient and the visitor.

- (b) A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care.
- (c) The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects:
 - 1. End-of-life situations.
- 2. A resident, client, or patient who was living with family before being admitted to the provider's care is struggling with the change in environment and lack of in-person family support.
- 3. The resident, client, or patient is making one or more major medical decisions.
- 4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
- <u>5.</u> A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
- 6. A resident, client, or patient who used to talk and interact with others is seldom speaking.
 - 7. For hospitals, childbirth, including labor and delivery.
 - 8. Pediatric patients.
- (d) The policies and procedures may require a visitor to agree in writing to follow the provider's policies and procedures. A provider may suspend inperson visitation of a specific visitor if the visitor violates the provider's policies and procedures.
- (e) The providers shall provide their visitation policies and procedures to the agency when applying for initial licensure, licensure renewal, or change of ownership. The provider must make the visitation policies and procedures available to the agency for review at any time, upon request.
- (f) Within 24 hours after establishing the policies and procedures required under this section, providers must make such policies and procedures easily accessible from the homepage of their websites.

- (3) The agency shall dedicate a stand-alone page on its website to explain the visitation requirements of this section and provide a link to the agency's webpage to report complaints.
- Section 3. The Division of Law Revision is directed to replace the phrase "30 days after the effective date of this act" wherever it occurs in this act with the date 30 days after this act becomes a law.

Section 4. This act shall take effect upon becoming a law.

Approved by the Governor April 6, 2022.

Filed in Office Secretary of State April 6, 2022.

Exhibit B:

Essential Caregivers Designation

<i>I</i> ,d	esignate		as Essential
I,d Caregiver for In r	naking this designa	tion, I consent and	understand that:
 Visits by essential caregive procedures and ability to see All Essential Caregiver visit are at will be set for a minit. Limited to one visitor at a towith the Executive Director has the abilicircumstances: 	creen visitors and nets may be scheduled mum of 2 hours datime, and are limited regarding possibles.	nonitor visits. I, based on current ily. Id to designated are exceptions for en	facility conditions and eas only. (Please speak
 End-of-life situations. A resident, client, or p 	patient is making on tient is experiencing er who recently dientient needs cueing a family member	ange in environm one or more major in ng emotional distre od. or encouragement or caregiver.	medical decisions. ess or grieving the loss of a to eat or drink which was
 Essential Caregivers will n policies and procedures ar those for staff and at no tin Essential Caregivers must and adherence to infection Visits by a specific Essenti infection prevention and co . At that time the resident of Caregiver. 	nd agree to such. And require to submit sign an acknowled prevention and coral Caregiver may bontrol requirements	At no time will the t proof of vaccinate a ligement of complet a roll policies. The suspended for factor of the related rules.	ey be more stringent than tion. etion of required trainings ilure to follow ales of the Community
Resident or Legal Representative Signature		Date	
Resident or Legal Representative l	Printed Name		
Community Representative Signat		Date	
Community Representative Printe	d Name		

Exhibit C:

Essential Caregivers Acknowledgement

Ι,	accept the designate	tion as an Essential Caregiver for
Ιυ	inderstand that:	
•	hours per day. Essential Caregiver visits cannot occur i	redures. I acknowledge receiving the bide by them at all times. by be scheduled, and may be no less than two less
	visit no matter the circumstance per 40 "(c) The visitation policies and procedures required circumstances, unless the resident, client, or patient	by this section must allow in-person visitation in all of the following
	provider's care is struggling with the change in envi or patient is making one or more major medical d distress or grieving the loss of a friend or family me	patient who was living with family before being admitted to the ronment and lack of in-person family support. 3. The resident, client ecisions. 4. A resident, client, or patient is experiencing emotional mber who recently died. 5. A resident, client, or patient needs cueing wided by a family member or caregiver. 6. A orperidasetineth, telwi eh not s, g. "
•	(PPE) as determined by facility policistatus and current medical condition of I acknowledge having received training use of masks, hand sanitation, and so provided and do not have any questions. I acknowledge my obligation and agree experience symptoms of a respiratory difficulty breathing, congestion or running repeated shaking with chills, new loss symptoms possibly related to a contaguity of the policy	g on infection prevention and control, use of PPE ocial distancing. I am satisfied with the training regarding any of these topics. It to <u>immediately</u> notify if I will infection, cough, fever, shortness of breath on my nose, sore throat, chills, headache, muscle pain so of taste or smell, nausea or vomiting, diarrheations infection, or if I test positive for an enen (14) days of a visit.
esig	nated Essential Caregiver Signature	Date
esigi	nated Essential Caregiver Printed Name	
omn	nunity Representative Signature	Date
omm	unity Representative Printed Name	