We were unable to implement this policy in Dec 2021 due to COVID restrictions but as of 2/7/2022 this policy is in effect at WSH.

## **DBHDS State Facility Visitation Policy Related to COVID-19**

(Updated 11/24/21)

### **BACKGROUND**:

DBHDS is responsible for ensuring the health and safety of individuals admitted to the DBHDS State Operated Facilities by enforcing the standards required to help each individual attain or maintain their highest level of well-being. 2019 Novel Coronavirus (COVID-19) is a virus identified as the cause of an outbreak of respiratory illness first detected in Wuhan, Hubei Provence, China, and has now reached a global scale.

### **PURPOSE:**

This policy serves to provide updated guidance for visitation in the DBHDS state facilities, subsequent to the previous policies issued on March 13, 2020, July 24, 2020, and April 13, 2021, August 31, 2021 related to the COVID-19 pandemic in the Commonwealth of Virginia to help control and prevent the spread of the virus. With increased COVID-19 vaccination, DBHDS state operated facilities continue to see a decline in outbreaks and cases. As such, DBHDS is updating its visitation guidance accordingly, but emphasizing the importance of maintaining infection prevention practices. Definitions related to visitation have been updated to reflect the most up to date guidance from the CDC¹. Facility visitation practices will change from restricted to limited. This is done with consideration of the benefits of visitation to the well-being of the patients/residents at the state facilities. Multiple factors must be considered by the facility in the implementation of this guidance, including the community transmission rate, vaccination rate of staff and patients/residents, staffing availability, PPE and testing supplies, physical layout of the facility to ensure infection prevention precautions, and presence of COVID-19 cases at any given facility. This document provides further specification of criteria for facilities to permit visitors at each facility, on a limited basis. Facilities may begin visitation immediately based on their ability to meet the criteria below and all are expected to be in compliance by December 8, 2021.

# **DEFINITIONS**:

**Visitor** means any individual who is not currently admitted to the facility or not directly employed by the DBHDS. This includes, but is not limited to family members, friends, authorized representatives, guardians, legal representatives, members of the general public, regulatory agencies, and site inspectors.

**Restricted** means that visitors are not allowed in the facility at all, except for certain situations, such as individuals who are critically ill or end-of-life, or in the case of a minor child, the visitor is a parent or approved guardian. Contractors, vendors, and CSB employees facilitating care coordination and patient/resident discharge, who are mission critical to the operations of the facility are also permitted to visit.

**Limited** means that visitors are permitted however modifications to normal visitation practices have been made to meet health and safety precautions. Limitation criteria may be further specified.

<sup>&</sup>lt;sup>1</sup> https://www.cdc.gov/coronavirus/2019-ncov/hcp/non-us-settings/hcf-visitors.html#visitors-healthcare-facilities

**Outbreak** is defined by the Virginia Department of Health as an increase in the number of cases of disease observed and in Virginia, an outbreak of COVID-19 is defined as two (2) or more lab-confirmed cases associated with a facility.

## **RESPONSIBLE AUTHORITY:**

Facility Directors are responsible for ensuring the implementation of this policy and have the authority to make a determination on a case-by-case basis if the level of visitation required by an individual admitted to a state facility needs additional review.

### **SPECIFIC GUIDANCE:**

General guidelines for all facilities:

- Visits should be conducted in a manner that adheres to the core principles<sup>2</sup> of COVID-19 infection prevention and does not increase risk to other residents or staff.
- All facilities will have an established single entrance per building for all visitors.
- All visitors must be screened at the time of entry for COVID-19 utilizing a COVID-19 screening
  questionnaire taking into consideration the recommendation provided by the Centers for
  Disease Control(CDC) and/or the Virginia Department of Health (VDH).
- Visitors who screen positive based on the COVID-19 screening questionnaire, who have a
  positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for
  quarantine, should not enter the facility and should reschedule their visit.
- Outdoor visitation is strongly recommended when possible. If available, facilities should create accessible and safe outdoor spaces for visitation, such as in courtyards, patios, or parking lots, including the use of tents.
- Facilities will notify all patients, staff, and potential visitors of the visitation policy utilizing multiple means including: signage, verbal, and written notification.
- All visitors are required to wear appropriate face coverings (covering both the nose and mouth) both indoors and outdoors during the duration of the visit, regardless of vaccination status of the patient/resident or their visitor.
- Permitted visitors who do not screen positive but place an additional concern regarding risk of transmission of infection to an admitted individual or staff, may be required to wear Personal Protective Equipment (PPE) that is made available by the facility to the visitor.
- Facilities should ensure that physical distancing can still be maintained during peak times of visitation (e.g., lunch time, after business hours, etc.).
- Movement of visitors in the facility is restricted. Visitation may occur only in areas designated by the facility. Visitors should go directly to the designated visitation area.
- Permitted total visitors are limited to 2 at a time per resident/patient.
- To manage the volume of visitors entering the facility, the facility should implement scheduled
  visits. Facilities should consider the volume of visitors in the facility that include other individuals
  who conduct critical infrastructure work at the facility. Individuals who conduct critical
  infrastructure work at the facility may include: Legal representatives, human rights advocates,

.

<sup>&</sup>lt;sup>2</sup> https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf

- discharge coordinators, magistrates, law enforcement, and contracted vendors, and will not be counted toward a resident/patient's self-designated 2 visitor limit.
- Visitors who are not able or willing to comply with the facilities' requirements for infection control including COVID-19 screening, wearing a face covering, hand hygiene, maintaining social/physical distancing, and limiting physical contact, may be restricted from visitation.
- Designated visitors who violate facility requirements may also be restricted from visiting.
- Though it will not be routinely required, the facility may request the visitor to be tested for COVID-19 under specific and defined circumstances to protect the health and safety of staff and residents.
- Due to infection control purposes, visitors are not permitted to bring food, share food during the visit, or bring any items for the resident/patient without prior specific approval of the facility staff.
- If the resident/patient is under any transmission based precautions (isolation or quarantine), only telephone or tele-visitation is permitted.
- Any facility or unit that is certified by CMS as a nursing facility or intermediate care facility, must also consider any requirements or guidance further specified by CMS.
- Each facility should ensure the following Human Rights regulations as it pertains to visitation restriction:
  - Each individual and his authorized representative (if applicable) is notified about the revised visitation policy prior to implementation
  - The notification clearly explains the change in visitation to include information about when the change will begin and under what circumstance(s) it will be discontinued;
  - o Evidence of the notification will be maintained by the facility.
  - And individualized restriction to visitation, beyond what is identified in this Policy, shall follow the approval process outlined in 12VAC35-115-50 and 12VAC35-115-100.
  - Because there is no waiver as the Governor's declaration of the state of emergency ended in June 30, 2021, individuals maintain the right to file a complaint about access to visitation.

Visitation is not permitted at the facility if:

- There is an active COVID-19 outbreak at the facility;
- The Facility Director (in coordination with the DBHDS Central Office) deems that visitation poses a significant risk to the health and safety of resident/patients and staff due to COVID-19;
- Directed by the Health Department to cease visitation for any reason.

This policy will be reviewed monthly and is subject to change based on guidance and information provided by the Centers for Disease Control and the Virginia Department of Health related to the situation of COVID-19 within the Commonwealth of Virginia.

Alexis Aplasca, MD	Alison Land
Chief Clinical Officer	Commissioner