March 3, 2022

DAL: DAL #22-26
Subject: Revised Visitation Guidelines

Dear Adult Care Facility Operator and Administrator:

The Department of Health ("Department") expects all adult care facilities (ACFs) statewide to immediately implement and comply with the following provisions which echo those previously issued by the Centers for Medicare and Medicaid Services on November 12, 2021 to nursing homes. This guidance supersedes and replaces previous Department-issued guidance and recommendations related to ACF visitation.

**General Visitation Guidance**

For all visitation, regardless of whether there is a declared public health emergency, adult care facilities (ACFs) must follow these general guidelines and core principles. Subject to the resident’s right to deny or withdraw consent at any time, all ACFs must provide immediate access to any resident’s visitors of their choice including, but not limited to, immediate family or other relatives of the resident and any others visiting with the consent of the resident.

- The ACF must document visitation refusals made by the facility in accordance with 18 NYCRR §485.14(h).
- When there is a confirmed positive case of communicable disease in an ACF, the facility must notify the local health department (LHD) if not already involved, and follow all recommendations made by the LHD.
- While it is safer for visitors not to enter the ACF while the LHD conducts an outbreak investigation, visitors should be allowed in the ACF, be made fully aware of potential risks associated with visitation during an outbreak investigation, and adhere at all times to the core principles of infection prevention. Residents and their visitors should wear face masks during visits regardless of their vaccination status, and such visits should occur in the resident’s room. In addition, the ACF should contact its LHD to discuss how to structure visitation to reduce COVID-19 transmission during an outbreak investigation.
- **Core principles** of COVID-19 infection prevention must be adhered to at all times.
- Visitors must maintain physical distance from other residents and ACF staff.
- Visitors who have a positive viral test for COVID-19, symptoms of COVID-19 irrespective of test result, or currently meet the criteria for quarantine, should not enter the ACF. All who enter, with the exception of emergency personnel responding to an emergency, must be screened for these exclusions.
• ACFs may not limit the number of visitors a resident can have at any one time, nor the frequency or length of visits for residents, or require advance scheduling of visits. However, the ACF must ensure physical distancing can be maintained and, to the extent possible, facilities should avoid large gatherings during which a large congregation of individuals in the same space cannot maintain physical distancing.

• Compassionate care visitors must be allowed at all times.

• If a resident’s roommate is unvaccinated or immunocompromised (irrespective of vaccination status) then visits should not be permitted in the resident’s room, if possible. Instead, if the immunocompromised resident or roommate is unable to leave the room, then the ACF should enable in-room visitation while adhering to the core principles of infection prevention.

• All residents and visitors should wear face coverings or masks and physically distance, particularly if either is at increased risk for severe disease or are unvaccinated.

• Visitors should wear face masks when around other residents or healthcare personnel, regardless of vaccination status.

• While not recommended, residents who are on transmission-based precautions or quarantine can receive visitors. Such visits should occur in the resident’s room and the resident must wear a well-fitting facemask (if tolerated). Before visiting such residents, visitors must be made aware of the potential risks of visiting and the precautions necessary to visit the resident. Visitors must adhere to the core principles of infection prevention. Facilities may offer well-fitting facemasks and other forms of personal protective equipment (PPE) if available, but facilities are not required to provide PPE to visitors.

• Unvaccinated residents may choose to have physical touch based on preferences and needs. In such instances, the facility must advise the resident and their visitor of the risks of such contact prior to the visit.

• ACFs may ask a visitor about their vaccination status however, visitors are not required to be tested or vaccinated or show proof of such as a condition of visitation. If the visitor declines to disclose vaccination status, the visitor should wear a face mask at all times. This applies to representatives of the Office of the State Long-Term Care Ombudsman, peer bridgers, housing contractors, care managers and other similar providers (collectively, “Settlement Providers”), and protection and advocacy representatives.

  o If a provider referenced in the preceding paragraph is planning to visit a resident who is either on transmission-based precautions or quarantine, or an unvaccinated resident, the surveyor or provider must be made aware of the potential risks and the visit should take place within the resident’s room.

  o If the resident or provider requests alternative communication in lieu of an in-person visit, the facility must facilitate such communication. This may include a phone or technology-based platform.
• All healthcare workers must be permitted to come to the ACF unless they are subject to a work exclusion or are symptomatic for COVID-19.

• Nothing herein absolves the ACF of its responsibility to perform regulatorily-required supervision services and to ensure that resident and family communication is ongoing. Based on residents’ needs and consistent with the ACF’s staffing and physical plant, visitation can be accommodated in a variety of means including in resident rooms, dedicated visitation spaces, and outdoors (weather permitting); and should always be person-centered with consideration of the individual residents’ physical, mental, and psychosocial well-being, and support their individual quality of life.

**Visitation by State Representatives and Settlement Providers**

Consistent with 18 NYCRR §§485.14 and 485.18, an ACF shall not restrict visitation absent reasonable cause such would directly endanger the safety of residents. Accordingly, an ACF **must** facilitate in-person visitation consistent with the applicable regulations and within the parameters of this guidance. Failure to facilitate visitation without adequate cause will result in an investigation and possible enforcement action.

**Outings, Communal Activities and Dining**

Effective July 8, 2021, ACFs may have restarted communal activities including, but not limited to a program of activities under 18 NYCRR §§487.7(h) or 488.7(f), dining and resident council meetings; provided, however, that before resuming such activities, the facility must first develop comprehensive policies and procedures for monitoring such communal activities to ensure adherence to the Core Principles of infection control as well as regulatory supervision requirements. These policies must be consistent with then-current CDC recommendations for assisted living or, where no such guidance exists, with guidance for similar congregate settings.

• ACFs must permit residents to leave the facility as they choose. The ACF staff must remind the resident and anyone accompanying the resident to follow all recommended infection prevention practices including wearing a face mask, maintaining physical distance, and practicing hand hygiene.

• Each ACF is required to have appropriate policies and procedures in place that respect each residents’ rights and address infection control and prevention when residents leave the facility for outings.

  o If the resident (or family member or other individual associated with the resident) reports a possible close contact to an individual with COVID-19 while outside the ACF, and the resident is unvaccinated or not fully vaccinated, the resident should be placed in quarantine and the LHD contacted. If the resident becomes symptomatic for COVID-19, the resident should be placed on transmission-based precautions regardless of vaccination status.

  o Residents who leave the ACF for 24 hours or more should be managed as a new admission or readmission and follow applicable recommendations in the Centers for Disease Control's [Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes: Create a Plan for Managing New Admissions and Readmissions](https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care-interim-infection-prevention-control-guidance.html).
**Survey Considerations**

The Department is responsible for ensuring surveyors are compliant with the applicable expectations. Therefore, ACFs are not permitted to restrict access to surveyors based on vaccination status. Questions about the process used to ensure surveyors can safely enter a facility should be addressed to the Department of Health via email to covidadultcareinfo@health.ny.gov.

For awareness, State surveyors will not enter a facility if they have a positive viral test for COVID-19, show signs or symptoms of COVID-19, or currently meet the criteria for quarantine. Surveyors will adhere to the core principles of COVID-19 infection prevention and adhere to any federal or State-established COVID-19 infection prevention requirements.

ACFs remain responsible for ensuring compliance with existing regulations, guidance, and requirements. Questions may be directed to covidadultcareinfo@health.ny.gov. Thank you in advance for your attention and compliance with this guidance.

Sincerely,

[Signature]

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