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Date: April 15, 2021

To: Nursing Facilities
Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs)
Adult Assisted Housing Providers

Re: Visitation Reminder

Since our April 7, 2021 notice to providers giving clarification on both the visiting and testing guidance provided by CMS on March 10, 2021 in QSO 20-39-NH (REVISED), questions have been asked by providers and families identifying the need for additional guidance which we are addressing in this Memo.

Facilities should have a visitation process in place which takes into account the following:

- QSO 20-39-NH (REVISED 3/10/2021) is very clear that visitation “should be allowed at all times,” except for a very few circumstances which it details:

Facilities should allow indoor visitation at all times and for all residents (regardless of vaccination status), except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission (note: compassionate care visits should be permitted at all times). These scenarios include limiting indoor visitation for:

- Unvaccinated residents, if (a) the nursing home’s COVID-19 county positivity rate is >10%, and (b) <70% of residents in the facility are fully vaccinated;
 - Residents with confirmed COVID-19 infection, whether vaccinated or unvaccinated until they have met the criteria to discontinue Transmission-Based Precautions; or
 - Residents in quarantine, whether vaccinated or unvaccinated, until they have met criteria for release from quarantine.
- Likewise, 20-39NH (REVISED) is very clear that visitation should be allowed “for all residents regardless of vaccination status,” except for those same few circumstances listed above.
 - Prior to entering, visitors must be screened using a process that includes observation of visitors. This is to validate that they are not exhibiting signs or symptoms of Covid. Facilities that use a visitor screening process which does not contain some level of visitor observation would not be in compliance with current CDC standards.

- Visitors must be educated regarding the need for them to wear facemasks covering their nose and mouth, follow proper hand hygiene, keep 6 feet apart from others in the facility, and not go anywhere in the facility except for the resident's room or a designated visitation area.
- All persons (except for EMS *there to attend to an emergency*) who enter a facility must not only be asked Covid-19 screening questions; they must also *be observed* to determine if they exhibit signs and symptoms associated with COVID-19. This applies to each shift of staff, all visitors, outside healthcare providers, vendors, etc.
- Unvaccinated people can visit residents.
- Fully vaccinated residents are able to have close contact (hug, hold hands, etc.) with their visitors, while both parties are wearing masks, and if they perform hand hygiene both before and after such contact.
- Even if there is an outbreak within the facility, unless the outbreak spans more than just one unit of the facility, visitation (indoor and outdoor) must still be allowed for residents of the units that do not have an outbreak.
- Facility staff are not expected to supervise visits constantly. Facilities can use passive observation, such as staff occasionally checking in with the resident, or walking by the resident's room and observing the resident and visitor, to ensure compliance with source control and social distancing.
- A facility *can* limit the number of visitors who can be in or on the facility grounds at the same time and can schedule the start time of visits. These limitations, however, cannot be arbitrary. They must be based on a risk assessment designed to prevent the spread of infection. The size of the facility (and, for outdoor visits, the size of the facility's outdoor spaces) must be considered in determining the risk of spreading infection.
- A facility *cannot* impose arbitrary visitor restrictions, such as allowing only 6 visitors a day for the entire facility, requiring visits to be limited to only one person, prohibiting children from visiting, restricting visitations to only 15 minutes, or allowing visitation only on certain days of the week, during certain hours of the day or night. Limits on the number of visitors in the facility must be for the purpose of preventing the spread of disease (example: in order to ensure social distancing, the physical space does not allow for more than X number of people).
- If the visitor is familiar with the resident's room and the facility has no concerns about the visitor complying with these requirements, then facility staff's observations of compliance can be more passive.
- On the other hand, if the visitor is unfamiliar with the facility, or staff have reason(s) to believe that the visitor is not likely to comply with the education provided by the

facility upon the visitor's entry, then the facility should have a process to address those concerns. As an example, the facility could require that the visitor be escorted by staff to and from the resident's room.

If there are any additional questions or concerns, please reach out to our office for assistance.