VISITATION POLICY

FACILITY NAME: Guidance/Care Center Inc - ALF

SECTION: Resident Care

POLICY: In-Person Visitation Policy

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

Adoption Date: April 20,2022

Purpose

In-Person Visitation bill has been signed into law, creating Chapter 408.823, which is subject "In-person visitation."

Policy

The following are the procedures to be followed to identify Essential Caregivers for residents and the expectations. 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 visitors may be allowed entry into facilities on a limited basis for these specific purposes. The provider must allow at a minimum in-person visitation for at least 2-hours daily under these circumstances. At <u>Guidance/Care Center</u> the 2-hour visitation will be between 9:00 a.m. – 9:00 p.m. <u>Guidance/Care Center</u> may make exceptions to the 2-hour visitation on a case-by-case basis for end-of-life residents. These exceptions will be discussed and agreed upon in writing by the facility's designee and the resident's responsible party.

Procedures:

- I. For designation and utilization of essential caregiver visitors.
 - 1. Guidance/Care Center will provide the Agency for Health Care Administration (AHCA) with a copy of the facility's essential caregiver visitor's policy and procedure, with the initial licensure application, renewal application and/or change of ownership application.
 - 2. <u>Guidance/Care Center</u> essential caregiver visitor's policy and procedure is available on Guidance/Care Center homepage.

The Florida Assisted Living Association makes no warranties or representations whatsoever regarding the quality, content, completeness, suitability, adequacy, sequence, accuracy, or timeliness of such information and data

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3. <u>Guidance/Care Center</u> will designate <u>Clare Condra</u> as key staff to support infection prevention and control training.

- 4. Guidance/Care Center will set a limit on the total number of visitors allowed in the facility at any given time based on the ability of staff to safely screen and monitor and the space to accommodate the essential caregiver visitors.
 - 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 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 inperson 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.

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9. Maintain a visitor log for signing in and out.

10. No more than one essential caregiver visitor may be designated per resident.

- 11. The policy need NOT prohibit essential caregiver visitor visits, if the specific resident to be visited is quarantined, tested positive, or showing symptoms of a communicable disease. 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 COVID-19) is not applicable to visitation by essential caregiver visitors.
- 12. <u>Guidance/Care Center</u> is not required to provide for "facility-provided" COVID-19 testing if, and only if, it is based on 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 facility's Infection Control Policies. The PPE required must be consistent with the most recent CDC guidance for healthcare workers. At Guidance/Care Center the essential caregiver visitors shall wear the same PPE that staff wear to provide care or services to the resident.
- 14. Any changes to <u>Guidance/Care Center</u> essential caregiver visitor policies must be promptly communicated to affected residents and essential caregiver visitors.

II. To facilitate visits by Essential caregiver visitors upon a request from a resident or friend/family member:

- 1. The resident (or their representative) will read and sign the policy and procedures. The acknowledgement of the signature represents that the essential caregiver visitor will abide by the policies set forth in this document.
- 2. The essential caregiver visitor will complete training on Guidance/Care Center infection prevention and control including the use of PPE, use of masks, hand sanitation, and social distancing.
- 3. 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.

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4. Essential caregiver visits may take place in the resident's room or a designated area determined by <u>Guidance/Care Center</u> at the time the visitation scheduled is developed and agreed upon.

III. When an essential caregiver visitor is scheduled to visit, the facility will:

- 1. Guidance/Care Center will thoroughly screen the visitor per the facility'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. <u>Guidance/Care Center</u> will ensure that the required consents, and training and policy acknowledgements are in place.
- 3. Guidance/Care Center will ensure that the caregiver visitor has appropriate PPE if applicable.
- 4. <u>Guidance/Care Center</u> will require the essential caregiver visitor to sign in and out on the visitor log.
- 5. <u>Guidance/Care Center</u> will monitor the essential caregiver visitor's adherence to policies and procedures.
- 6. If the essential caregiver visitor fails to follow the facility's infection prevention and control requirements, after attempts to mitigate concerns, Guidance/Care Center shall restrict or revoke visitation.
- 7. In the event the essential caregiver visitor's status is revoked due to the individual not following the facility'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 Guidance/Care Center policies and procedures.

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Exhibit A:

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.
- 5. 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,	designate	_as essential
caregiver for In making this d	esignation, I consent and understand	that:
circumstances: 1. End-of-life situations. 2. A resident, client, or patient who w	or visits. reduled, based on current facility conditable. re limited to designated areas only. re limited to avisit at any time, even under as living with family before being active change in environment and lack relating one or more major medical decirciencing emotional distress or grieving thy died. required or encouragement to eat or dried the more of caregiver. used to talk and interact with other reach. At no time will they be more submit proof of vaccination. rewrited ow the facility's infection control are submit proof of vaccination. rewrited ow the facility of completion of required control policies. may be suspended for failure to follow the related rules of Guidance/Care Center	tions and are (Please speak as) the following dmitted to the of in-person sions. In the loss of a ank which was ers is seldom attringent than are trainings tow infection At that
Resident or Legal Representative Signature	Date	
Resident or Legal Representative Printed Name	Date	
Facility Representative Signature	Date	
Facility Representative Printed Name	_	

Exhibit C:

Essential Caregivers Acknowledgement

I,ac	ecept the designation as an essential caregiver for
I understand that:	
and education policies and procedures. procedures and agree to abide by them	Subject to Guidance/Care Center 's infection control I acknowledge receiving the policies and at all times. be scheduled, and may be no less than two hours
 Essential caregiver visits cannot occur it 	f the resident personally objects/declines your visit
no matter the circumstance per 408.823	of F.S.
"(c) The visitation policies and procedures required circumstances, unless the resident, client, or patient of	by this section must allow in-person visitation in all of the following objects:
provider's care is struggling with the change in environment or patient is making one or more major medical dedistress or grieving the loss of a friend or family mem	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 aber who recently died. 5. A resident, client, or patient needs cueing asly provided by a family member or caregiver. 6. A residentified as g. "
 as determined by facility policies 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 agreexperience symptoms of a respiratory difficulty breathing, congestion or runn repeated shaking with chills, new loss symptoms possibly related to a contag within fourteen (14) days of a visit. 	ree to <u>immediately</u> notify <u>Guidance/Care Center</u> if I infection, cough, fever, shortness of breath or my nose, sore throat, chills, headache, muscle pain, so of taste or smell, nausea or vomiting, diarrhea, ious infection, or if I test positive for COVID-19 estricted or revoked for failure to follow infection
Designated Essential Caregiver Signature	Date
Designated Essential Caregiver Printed Name	
Facility Representative Signature	Date
Facility Representative Printed Name	