



## VISITATION IN LONG-TERM CARE FACILITIES SUMMARY OF CURRENT GUIDANCE and FREQUENTLY ASKED QUESTIONS

This document is designed to answer questions about the recent revision of visitation restrictions impacting long-term care facilities. It also provides information about revised quarantine requirements for residents who leave and then return to the long-term care facility and recent DOH guidance on resumption of activities and communal dining.

The information in this document is based on the NJ Department of Health (NJDOH) Visitation Memo released on March 22, 2021 found at: [https://nj.gov/health/legal/covid19/3-22-21\\_Memo\\_StandardsProtocolsVisitorsFacilityStaff.pdf](https://nj.gov/health/legal/covid19/3-22-21_Memo_StandardsProtocolsVisitorsFacilityStaff.pdf)

It is also based on a revised risk assessment tool from the NJDOH about how to assess the risk of residents leaving long-term care facilities which can be found at: [https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)

This document also includes information from a May 12, 2021 Memo “Mandatory Guidelines for the Provision of Services, Group Activities, Visitation, and Testing in all Long-Term Care Facilities” found at: [https://www.state.nj.us/health/legal/covid19/5-12-21\\_Memo\\_StandardsProtocolsVisitorsFacilityStaff.pdf](https://www.state.nj.us/health/legal/covid19/5-12-21_Memo_StandardsProtocolsVisitorsFacilityStaff.pdf). This memo is designed to accommodate more visitation, group activities, and the provision of services for residents. More information will be made available as the Long-Term Care Ombudsman (LTCO) digests all the elements of the May 12, 2021 guidance.

Please see the press release below about the new guidance:

<https://www.nj.gov/health/news/2021/approved/20210512a.shtml>

### Background

On March 13, 2020, the federal Centers for Medicare, and Medicaid Services (CMS) and NJDOH suspended visitation in long-term care facilities in New Jersey. In the months after that, the state began to allow for some visitation.

Currently, three types or categories of visitation are permitted:

1. **End of life visits**, which can occur at any time, in the resident’s room, even when the facility is experiencing an outbreak, regardless of the resident’s vaccination or COVID-19 status.

2. **Compassionate care visits**, which can occur at any time, in the resident's room, even when the facility is experiencing an outbreak, regardless of the resident's vaccination or COVID-19 status.
3. **Social Indoor visitation**, which permits the resident to visit with anyone they choose including friends, family members, or caregivers. Can occur in the resident's room or apartment but may need to occur in a separate visitation area if the resident's roommate is unvaccinated or partially vaccinated and/or does not consent to the presence of visitors in the room

**Essential caregiver visits would now fall under social visits.**

Under its **Executive Directive for the Resumption of Services in all Long-Term Care Facilities 20-026**, [https://www.state.nj.us/health/legal/covid19/8-20\\_ExecutiveDirectiveNo20-026\\_LTCResumption\\_of\\_Svcs.pdf](https://www.state.nj.us/health/legal/covid19/8-20_ExecutiveDirectiveNo20-026_LTCResumption_of_Svcs.pdf); **outdoor visitation is permitted at all times**. Residents who are in quarantine due to exposure or suspected exposure to COVID-19 or who have tested positive for COVID-19 may NOT receive visitors.

Note: while Executive Directive 20-026 has not yet been updated, the May 12, 2021 NJDOH Memo now requires LTC facilities to allow communal meals and activities except for residents who are in quarantine due to exposure or suspected exposure to COVID-19, or who have tested positive for COVID-19 may NOT participate in communal meals and/or activities. **If unvaccinated or partially vaccinated residents are** participating in the activity, then **ALL** participants in the group activity **MUST** wear well-fitting masks and unvaccinated residents should physically distance from others participating in the group activity.

**THE MAY 12, 2021 MEMO EFFECTIVELY ELIMINATES THE PHASES THAT ARE INCLUDED IN THE EXECUTIVE DIRECTIVE 20-026.**

With the issuance of the March 22, 2021 visitation guidance and the May 12, 2021 vaccination guidance, all types of visitation are allowed at all times, (except for COVID-19 positive residents or units) but social indoor visits can be paused if a new case or cases are identified and outbreak testing has begun.

### **WHAT'S NEW? (Updated May 18, 2021)**

- On May 12, 2021, the NJDOH issued updated guidance that accommodates more visitation, group activities, and allows more outside contractors and outside staff to enter long-term care facilities.
- The May 12, 2021 guidance eliminates the need for the Phases that are included in the Executive Directive 20-026.
- Specifically, the May 12, 2021 guidance permits the resumption of communal dining and communal activities. The guidance further states that fully vaccinated residents may forgo source control (well-fitting facemasks) and physical distancing in select scenarios. However, unvaccinated, and partially vaccinated residents must still wear a well-fitting facemask during communal activities (except while eating) and must continue to physically distance. In a group of unvaccinated, partially vaccinated, and fully vaccinated

residents and staff, all must follow safety precautions including using well-fitting facemasks, and unvaccinated or partially vaccinated residents must practice physical distancing.

The May 12, 2021 guidance permits hair dressers, barbers, and any other outside contractors deemed necessary by the LTC facility to enter the building and to provide services to the residents in accordance with staff requirements such as screening and routine testing for those who are unvaccinated or partially vaccinated.

- The May 12, 2021 guidance also permits volunteers who provide care and services to residents on behalf of the facility to enter the building, only if the facility can meet screening criteria for entry, and has a protocol for the services to be rendered in a safe manner. The protocol must include, but not be limited to, infection prevention and control precautions, physical distancing, hand hygiene, cleaning between clients and the use of well-fitting source control. Testing requirements apply to any individual entering the facility (employee or volunteer, etc.) to provide a service to residents.
- Fully vaccinated staff no longer need to be routinely tested on a weekly or twice-weekly basis unless they are being tested because of a new case of COVID-19 has been identified in a resident or staff member, otherwise known as outbreak testing.
- The NJDOH Visitation Memo dated 3/10/21 clearly states that every long-term care resident has a right to social indoor visits. This may include anyone of the resident's choosing including grandchildren. This is new and comprehensive. Residents who are COVID-19 positive or who are in quarantine are exempt, as well as residents who are located on the unit with a COVID-19 case in the last 14 days. When a new case of COVID-19 among residents or staff is identified, **a facility should immediately begin outbreak testing by initiating facility-wide testing, regardless of vaccination status of residents and staff, and suspend all visitation (except that required under federal disability rights law and NJDOH guidance/directives)** until at least **ONE** round of expanded facility-wide testing is completed (i.e., day 3-7).
  - Indoor visitation during an outbreak or investigation: can occur when there is evidence that the transmission of SARS-CoV-2 is contained to a single area or apartment of the facility per this memo as follows:
    - 1) The facility should **suspend visitation on the affected unit** until the facility has no new cases identified in healthcare personnel or patients/residents for 14 days.
    - 2) If the **first round of testing (performed on day 3-7)** reveals no additional cases in **other areas** of the facility, then visitation can resume for those areas/units with no cases. Close contacts should be quarantined and tested upon identification.
    - 3) If the **first round of testing reveals one or more additional cases** in other areas/units for the facility, then facilities should suspend visitation for all residents, regardless of vaccination status, until there are no new cases identified in healthcare personnel or patients/residents for 14 days.

- Both fully vaccinated (two weeks after final dose) and unvaccinated or partially vaccinated residents have a right to have social indoor visits. Unvaccinated or partially vaccinated residents cannot have indoor visitation if fewer than 70 percent of the facility's residents are vaccinated AND the CALI (COVID-19 Activity Level Index) score in that region is high or very high.
- High CALI scores (the rate of infection in each region) alone do not automatically shut down social indoor visitation. Social indoor visitation is allowed in areas with high CALI scores. Outdoor visitation is always preferred.
- Social indoor visits can occur at any time, except when the facility is initiating outbreak testing (there is a pause), and residents from the impacted unit would stop social indoor visitation until 14 days of no new cases. Social indoor visitation should resume in unaffected areas of the facility as soon as the first round of expanded facility testing for all residents and staff is resulted, so long as COVID-19 cases are contained in a single unit. Facility-wide social indoor visitation is paused when there are COVID-19 infections associated with more than one unit. Residents who are in quarantine or isolation may not have indoor visitation; Visitation may occur via an end of life or compassionate care visit.
- A new case of COVID-19 among residents or staff in one section of the long-term care facility no longer requires the facility to suspend visitation for the entire facility for 28 days. Instead, when a positive case of COVID-19 is identified, indoor and outdoor visitation is suspended (except that required under federal disability rights law and NJDOH guidance/directives) until one round of expanded facility-wide testing is completed. If it appears that the virus did not spread to other units, those unaffected units can resume visitation.
- In addition, the affected unit may resume social indoor visitation after only 14 days from the last positive test. It doesn't matter if the facility is currently considered in outbreak status and is on the statewide outbreak list.
- While visiting alone in the resident's room or designated visitation room, resident(s) and their visitor(s) may choose to have close contact including touch and to remove their face masks, as long as everyone is fully vaccinated. Fully vaccinated residents may choose to have close contact including touch, with their unvaccinated visitor(s) while both resident and visitor are wearing well-fitting source control. However, the safest approach for those who are not fully vaccinated is to maintain physical distancing and wearing well-fitting source control to ensure everyone's safety.
- Fully vaccinated residents who leave the facility for any reason will be required to quarantine if they have had prolonged exposure to someone with COVID-19 during their absence from the facility or if they are symptomatic and COVID-19 testing is pending.

### ***WHAT HAS NOT CHANGED***

- SCHEDULING – Both the federal and state guidance allow long-term care facilities to schedule visits, limit the number of people in the building, and limit the number of visitors for each resident. Scheduling is not required, but it is permitted.
- SCREENING – All visitors must be screened and must follow safety protocols, regardless of their vaccination status, which include wearing well-fitting source control at all times except as described in the updated memo when patients/residents/and/or visitors are fully vaccinated .
- COMPASSIONATE CARE VISITS – Compassionate Care visits are permitted for all residents regardless of their vaccination or COVID-19 status; residents whose mental and/or physical condition is declining; residents who have recently lost a loved one; residents who need encouragement to eat or drink, or who are losing weight. Residents who are under quarantine or with confirmed COVID-19 should not have indoor visitation except for limited circumstances such as compassionate care or end of life situations. This is not an all-inclusive list of circumstances for compassionate care visits. Facilities should consider each situation in a person-centered manner.
- REGIONAL CALI SCORE – New Jersey is still utilizing the COVID-19 Activity Level Index or CALI score to determine community activity. This score is a combination of three factors: the COVID-19 case rate per 100,000 people; the incidence of COVID-19-like illnesses; and the COVID-19 test positivity rate. This information is updated weekly and can be found here: <https://www.nj.gov/health/cd/statistics/covid/>

## **FREQUENTLY ASKED QUESTIONS**

### **TIMELINE**

#### **When is this new NJDOH Visitation Memo effective?**

All long-term care providers licensed by the NJDOH received visitation guidance on March 22, 2021 and were briefed by the NJDOH on this guidance on March 24, 2021. The providers received the Mandatory Guidelines for the Provision of Services, Group Activities, Visitation, and Testing in all Long-Term Care Facilities on May 12, 2021 and were briefed on this guidance on May 19, 2021.

Long-term care facilities should be communicating with residents and their families and caregivers now to explain how and when visitations will occur. Activities and communal dining should resume immediately. Reopening social indoor visitation and communal dining and activities are not optional for long-term care facilities, it is a requirement.

### **VISITATION ELIGIBILITY/BASICS**

#### **Why do indoor social visits stop when a staff member tests positive?**

COVID-19 still presents a significant risk to LTC residents. Any time there is one positive test result among staff or residents, the facility must begin testing everyone in the facility. While

testing is taking place, visitation will be temporarily paused until the facility can determine if anyone else in the facility was exposed.

When **one** staff person tests positive, *investigative* testing is done, which is immediate testing, followed by an initial round of expanded facility-wide testing (day 3-7). This testing may still be referred to as “outbreak” testing by facilities due to the language in the Executive Directive and CMS. Any identification of a COVID-19 case in a long-term care facility may prompt facility-wide testing. When outbreak testing is initiated, visitation and activities are paused.

Additionally, if one resident who has been in the facility for at least 14 days tests positive, it is considered an official outbreak by the Local Health Department and outbreak testing must occur and visitation and activities are paused.

### **What is an outbreak? What is outbreak testing?**

The definition of an outbreak of COVID-19 is 1 or more facility onset case of COVID-19 in a resident, or when 2 or more health care professionals receive lab-confirmed diagnosis within a 14-day period.

Whether it is for an investigation (1 staff positive result) or an outbreak (2+ staff positive or 1+ resident positive), when a new case of COVID-19 is identified in a facility, immediate facility-level testing is imperative to assist with containment and response.

When this happens, facilities are recommended to work with their local health department and to:

- Immediately perform outbreak testing (viral platform either point-of-care or via commercial laboratory) of all residents and HCP, regardless of vaccination status, who have not been previously positive within the past 90 days.
- Continue to perform outbreak testing of all residents and HCP every 3-7 days, regardless of vaccination status, (who have not tested positive in the previous 3 months\*) until at least 14 days have elapsed since the most recent positive.

### **Visitation impact:**

A Facility should **suspend visitation on the affected unit** until the facility has no new cases of COVID-19 identified in staff or residents for 14 days. If the **first round of expanded facility-wide testing (performed on day 3-7)** reveals no additional cases in **other areas** of the facility, then visitation can resume for those areas/units with no cases.

The May 12, 2021 guidance stated that facilities should suspend all visitation including outdoor visitation (except that required under federal disabilities rights law and NJDOH guidance/directives) until at least one round of expanded facility-wide testing is complete (e.g., day 3-7). Facilities do not need to stop outdoor visitation until the conclusion of the outbreak; however, all visitation, including outdoor visitation should be suspended until one round of outbreak testing is complete.

For the full list of outbreak definitions, including investigation thresholds, please see the NJ COVID-19 Disease Chapter (p13-14) at:

[https://www.nj.gov/health/cd/documents/topics/NCOV/NCOV\\_chapter.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/NCOV_chapter.pdf).

**Can the facility use rapid tests for outbreak testing? If so, shouldn't they be able to restore or establish social indoor visits in unaffected areas within a day or two?**

Yes, LTC facilities can use rapid tests to conduct outbreak testing. This will make it possible to determine quickly whether the virus has spread to other areas. Expanded facility-wide testing should occur immediately and then on day 3-7 to account for the average incubation period of SARS-CoV-2 infection.

**The administrator in my loved one's facility says the facility is in Phase 0 and so they can't have social indoor visitation. Is that correct?**

With the May 12, 2021 guidance, the Phases included in the Executive Directive 20-026 are no longer relevant as it relates to visitation, activities, or admission of outside contractors or volunteers into the long-term care facility.

The March 22, 2021 Memo states that indoor visitation is allowed for residents except when the resident is COVID-19 positive or is in quarantine or the unit in which they reside is subject to outbreak testing. (Then only compassionate care or end of life visits are permitted.)

But if the facility goes 14 days without another positive test, all types of indoor visitation can occur. So indoor visitation can even occur in a facility that is on the NJDOH outbreak list if that facility has not had a positive test result in 14 days. Being on the outbreak list and doing outbreak testing are two different things.

**How does the CALI score affect my ability to visit?**

The CALI score only affects unvaccinated residents' visitation options.

The NJDOH Visitation Memo states that all vaccinated residents have a right to have visitors as long as the resident is not COVID-19 positive or in quarantine. Unvaccinated and partially vaccinated residents also have a right to have visitors. However, if unvaccinated or partially vaccinated residents live in a facility where 1) the CALI score is high or very high and 2) where fewer than 70 percent of the residents are vaccinated, they may not be able to have indoor visitors. (Both of these conditions must be met, however, in order to restrict visitation for an unvaccinated or partially vaccinated resident.)

**VISITATION SCHEDULING**

**Can I now drop by and visit my loved one?**

Probably not yet, as many facilities may be scheduling visits in advance in accordance with federal and state guidance. Both the federal and state guidance state that long-term care facilities should “consider the number of visitors per resident at one time and the total number of visitors in the building at any time.” As such, the guidance states that the “Facilities should consider scheduling visits for a specific length of time to ensure all residents are able to receive visitors.”

Your facility should have a plan for how they are going to accommodate social indoor visits. You should contact your facility and request a social indoor visit with your loved one as soon as possible. The facility is not required to schedule these visits, but that is how most facilities are handling them.

### **Why do I have to schedule a visit?**

You may not have to. This is not required in the federal guidance or NJDOH Visitation Memo. However, the Memo gives that discretion to the long-term care facility in order to ensure that all requests for visitation can be accommodated safely.

### **I work full-time, can I visit my loved one during the evening and on weekends?**

Because every resident is entitled to visitors of their choosing, the long-term care facility should allow you to visit during these times. Again, your facility may be using a scheduling system, so you should inform them of the hours you are available to visit and they should accommodate your request.

### **How many people can visit at a time?**

The NJDOH Memo does not limit how many visitors can be permitted at a time. However, the facility must have enough staff, space, personal protective equipment or PPE, and cleaning materials to safely accommodate the volume of visitors. Facilities may establish a limit on the number visitors each resident can have at one time in order to comply with this requirement. You should contact your facility in advance of your anticipated visit to learn more about their individual restrictions.

### **The facility administrators say they don't have enough staff to schedule regular visits with family. Can they do that?**

LTC facilities are required to have enough staff to care for their residents and to accommodate social indoor visitation, and 1-on-1 supervision is not required for any kind of visit. So, lack of staffing should generally not be considered a reason to deny visitation. However, depending on the resident's living situation, you may need to schedule your visit.

It is a good idea to discuss your visitation expectations with the long-term care facility administration so that you can make an informed decision about how to conduct safe visits that are beneficial to the resident.

If your facility says they do not have adequate staffing and this problem persists, you should report them to the NJ Department of Health at [lrc.complaints@NJ DOH.nj.gov](mailto:lrc.complaints@NJDOH.nj.gov) or call the NJDOH at 1-800-792-9770.

## **VISITOR ENTRY, ACCESS, AND SUPERVISION**

### **Must all visitors be tested or vaccinated?**

Visitors are not required to be tested or vaccinated. The facility must log and screen everyone entering the facility regardless of vaccination status which may include, having their temperature taken and filling out a questionnaire.

### **Can a long-term care facility keep me from visiting my loved one because they don't have enough rapid tests?**

No. You will need to be screened and assessed but you are not required to be tested.

### **Can children now visit long-term care facilities?**

Children over the age of 2 must wear a well-fitting face mask and abide by social distancing requirements. Children under the age of 2 must follow physical distancing requirements and should not have physical contact with the resident. Additionally, all children must always be supervised by an adult.

### **Can I visit if I cannot wear a mask?**

Visitors, adults and children, who are not able to wear source control should be encouraged to use alternatives to on-site visits with (e.g., outdoor, telephone or internet communication), particularly if there is an at increased risk for severe illness from SARS-CoV-2 infection.

### **Can I visit in my loved one's room?**

Yes, for essential caregivers and for compassionate care visits. But, for social indoor visits, it depends. If your loved one lives in a private room, the facility should be able to accommodate your request. However, if your loved one has a roommate, you will likely have to conduct your social indoor visit in an area of the facility that is designated for visitation. If both your loved one and the roommate are fully vaccinated and both consent to in-room visitation, the facility should try to accommodate the residents' request for in-room visitation.

### **My sibling is visiting from out of state, can they visit my parent indoors? Outdoors?**

The State of New Jersey no longer has any out of state visitor quarantine requirements.

Please review recently updated travel restrictions: <https://covid19.nj.gov/faqs/nj-information/travel-and-transportation/are-there-travel-restrictions-to-or-from-new-jersey>

### **What about family coming in from out of state for end of life visits? Can those visits be scheduled indoors?**

The LTC facility should work with the family to facilitate a safe indoor visit when the resident is nearing end of life, regardless of the vaccination status of the visitor or the resident. Because of the nature of these visits, LTC facilities should allow for extended visitation periods for family and friends. Family members should expect that there may be some reasonable limits on the number of people who can visit at one time and must abide by all safety measures.

### **Since I can hug my vaccinated loved one, why do I have to abide by social distancing requirements during my visit?**

The power of touch is critical to the well-being of residents in long-term care; that is why this provision was included in the NJDOH Visitation Memo.

The May 12, 2021 Memo clarifies that, if you and your loved one are both fully vaccinated, you do not have to wear a mask while visiting in their room and they do not have to wear a mask or be physically distanced from you. However, if you and your loved one are not fully vaccinated, you both must wear a well-fitting facemask and maintain physical distance. If the resident is fully vaccinated, but the visitor is not fully vaccinated, the resident can choose to have close physical contact with the visitor, but both the resident and the visitor must wear well-fitting source control.

The May 12, 2021 guidance states that visitors, regardless of vaccination status, should always physically distance from other residents, visitors and staff that are not part of their group and must wear well-fitting source control.

### **Can a resident have more than one person designated as their essential caregiver, or more than one person approved for compassionate care visits?**

Yes, a resident – or their representative – can designate more than one person to provide essential care and compassionate care visits. The facility should work cooperatively with the resident and the family to work out a schedule to accommodate both essential caregivers and people who are approved to make compassionate care visits.

### **How does this new NJDOH Visitation Memo impact outdoor visits? Are they still required? Is social distancing required?**

Outdoor visits are permitted for all residents except those who are COVID-19 positive or in quarantine under transmission-based precautions. In fact, outdoor visits should be encouraged,

and facilities should provide ample, comfortable space for these visits and should schedule them during hours that are convenient for potential visitors. While staff need to be available during outside visits, not every resident requires a staff person to be with them during the visit. Physical touch is permitted for fully vaccinated residents.

The May 12, 2021 Memo indicates that all visitation, including outdoor visitation, should be paused (except that required under federal disability rights law and NJDOH guidance/directives) when a new case of COVID-19 among residents or staff is identified .

### **Does a staff person have to supervise or chaperone our indoor visit?**

This is not required. You should be able to have private time with your loved one. However, the facility may want to be able to observe briefly to ensure that safety protocols are followed.

## **RESIDENT FREEDOM WITHIN THE FACILITY**

### **Why do residents have to stay in their room for weeks on end?**

That should not be happening. The May 12, 2021 guidance makes it clear that communal activities and communal dining should resume and the safety measures that must be taken depend on the vaccination status of the residents.

- a. If **ALL** patients/residents participating in the group activity **are fully vaccinated**, they may choose to have close contact with others participating in the activity and/or without wearing source control during the activity.
- b. **Unvaccinated Patients/Residents: If unvaccinated residents are** participating in the activity, then **ALL** participants in the group activity **MUST** wear well-fitting masks and unvaccinated residents should physically distance from others participating in the group activity.

NJDOH guidance has never required that residents stay in their rooms for prolonged periods of time. It was suggested that residents stay in their rooms during an outbreak but it was never required by either the state or the federal government.

### **Why isn't my facility hosting any group activities or meals?**

Communal activities and communal dining must resume for all residents except those who have or are suspected to have COVID-19 or who are in quarantine due to suspect or confirmed COVID-19 exposure, regardless of vaccination status.

If all residents participating in a group activity or communal dining are fully vaccinated, they may choose to have close contact with others participating in the activity with or without wearing source control during the activity/meal.

However, when unvaccinated and/or partially vaccinated residents are participating in the activity/meal, then ALL participants in the group MUST wear well-fitting source control (e.g.

well-fitting face masks) and unvaccinated and partially vaccinated residents should physically distance from others participating in the group activity or meal. In this scenario, all residents should wear well-fitting source control except while eating or drinking.

### **Why can't the facility hair salon reopen?**

The May 12, 2021 guidance permits beauticians and barbers to provide services in long-term care facilities.

The new guidance states that: "Non-essential healthcare personnel/contractors (e.g. barbers, hair stylists) are permitted to enter the facility only if the facility can meet screening criteria for entry, and has a protocol for the services to be rendered in a safe manner." Entry must be in accordance with staff requirements such as screening and routine testing for those who are unvaccinated or partially vaccinated. The protocol must include, but not be limited to, infection prevention and control precautions, physical distancing, hand hygiene, cleaning and disinfecting between clients and the use of well-fitting source control.

### **Can my loved one visit with a friend in another room? They are both fully vaccinated. Can married couples who are living in different sections of a facility (different levels of care) and are fully vaccinated visit with each other now?**

As a result of the NJDOH Memo dated May 12<sup>th</sup>, 2021. Fully vaccinated residents can visit with each other, in each other rooms, if they are not symptomatic of COVID 19.

## **QUARANTINE RULES FOR RESIDENTS**

### **Why does my loved one have to quarantine every time they leave the facility?**

Residents may not have to quarantine every time they return to the facility, especially if fully vaccinated. The federal Centers for Disease Control and Prevention (CDC) requirements on this have recently changed.

CDC has recently stated that **fully vaccinated** residents who are new admissions or existing residents who go out of the facility for any period of time or for overnight do not necessarily have to quarantine upon their return if they have **not** had prolonged close contact with a suspected or confirmed case. (See decision tree in risk assessment protocol link below.)

[https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)

Specifically, the CDC defines prolonged close contact as 15 cumulative minutes of exposure at a distance of less than 6 feet to an infected person during a 24-hour period (See decision tree in risk assessment protocol link below.)

For **unvaccinated or partially vaccinated residents**: In situations where residents need to routinely leave the facility (e.g., to attend doctor's appointments, dialysis treatments, out-

patient procedures) the facility should utilize the risk assessment tool. The risk assessment should include factors such as community transmission; infection prevention and control compliance from transport personnel, and the presence of COVID-19 positive cases(s) at the sending and/or receiving facility. The CALI score should not be the sole determinant, however.

[https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)

**My loved one is on dialysis and is constantly on quarantine. Does this mean they cannot have any indoor social visits?**

If a resident is fully vaccinated and has not had contact with a suspected or confirmed case of COVID-19, the resident does not need to automatically quarantine. Indeed, the CDC recently stated that the adverse impact of continual social isolation outweighs the benefit of quarantine.

For unvaccinated or partially vaccinated residents, the facility should be using the same risk assessment that they use for people who go out for other medical appointments or outings, found on the NJDOH website:

[https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)

The facility should work with residents to try to accommodate their right to have the visitors of their choice. If the facility refuses to make this accommodation, contact the NJ Department of Health or the NJ Office of the Long-Term Care Ombudsman.

**STAFF VACCINATION**

**Why isn't the state requiring LTC staff to get vaccinated? Can private companies require their staff to get vaccinated?**

Although there is no statewide mandate for LTC staff to receive the COVID-19 vaccination, employers are permitted to mandate vaccination. Employers have the right to mandate vaccination, with certain exemptions, if there is a significant threat to their patients or residents. The guidance can be found here: <https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws>. LTC facilities should continue to educate, encourage staff to be vaccinated. The NJDOH provides electronic educational resources that can be found in the HealthCare Provider Toolkit at:

<https://www.nj.gov/health/ltc/>.

**The vaccination rate among residents at my facility is low. Why? What is NJDOH doing about this?**

Some long-term care facilities that were recently in outbreak status may not have been able to vaccinate as many people as others due to illness in the building. The initial vaccination

program for long-term care provided for 3 clinics for each facility. Many of these clinics have concluded.

The NJDOH is now partnering with long-term care pharmacy providers to deliver vaccines to long-term care residents and staff. This vaccine maintenance program has already begun.

The NJDOH, Office of Long-Term Care Resiliency is reaching to all facilities who currently have low vaccination rates for residents and staff. Education and access to vaccines is being offered.

## **ENFORCEMENT**

### **What consequences do facilities face if they just choose not to follow the NJDOH Visitation Memo, the new May 12 guidelines, or the existing quarantine/outing guidelines?**

The NJ Department of Health licenses and regulates long-term care facilities. The NJDOH enforces federal CMS nursing home regulations. If a nursing home does not abide by the NJDOH Visitation Memo or Executive Directive 20-026 and, in doing so, violates the federal nursing home regulations, they will be issued a “deficiency” which must be remedied or they will face a fine or they will have their admissions curtailed. This is also true of Assisted Living Residences, Residential Health Care Facilities, Comprehensive Personal Care Homes, and Dementia Care Homes which are licensed by NJDOH under state law and must abide by all NJDOH Directives and Memos.

If you believe that a long-term care facility is not following the NJDOH Executive Directive 20-026 or the new NJDOH Visitation Memo or the May 12 Memo, file a complaint with the NJDOH at [ltc.complaints@doh.nj.gov](mailto:ltc.complaints@doh.nj.gov) or call 1-800-792-9770.

If you wish to have someone advocate for your right to have visitors or to visit a loved one in a long-term care facility, call the NJ Office of the Long-Term Care Ombudsman at 1-877-582-6995. <https://www.nj.gov/ooie/contact.shtml>

## **RESOURCES**

Below are the six resource documents that guide how long-term care facilities must allow for visitation and when they can require that a resident quarantine.

1. The NJDOH Long Term Care landing page: [www.nj.gov/health/ltc](http://www.nj.gov/health/ltc)
2. On March 10, 2021, the federal Centers for Medicare and Medicaid Services (CMS) relaxed visitation restrictions in nursing homes that had been in place for nearly a year as a result of the COVID-19 public health emergency. <https://www.cms.gov/files/document/gso-20-39-nh-revised.pdf>

3. On March 22, 2021, with outbreaks declining in long-term care facilities, the NJ Department of Health (NJDOH) issued a MEMO revising its own visitation guidelines to complement the new federal guidance. [https://nj.gov/health/legal/covid19/3-22-21\\_Memo\\_StandardsProtocolsVisitorsFacilityStaff.pdf](https://nj.gov/health/legal/covid19/3-22-21_Memo_StandardsProtocolsVisitorsFacilityStaff.pdf)
4. This new NJDOH Memo supplements and is meant to be used in conjunction with NJDOH Executive Directive 20-026, Resumption of Services in all Long-Term Care Facilities. Note: the sections that relate to visitation start on page 24. [https://www.state.nj.us/health/legal/covid19/8-20\\_ExecutiveDirectiveNo20-026\\_LTCResumption\\_of\\_Svcs.pdf](https://www.state.nj.us/health/legal/covid19/8-20_ExecutiveDirectiveNo20-026_LTCResumption_of_Svcs.pdf)
5. New Jersey is still utilizing the COVID-19 Activity Level Index (CALI) score to determine the amount of virus in the community. This score is a combination of three factors: the COVID-19 case rate per 100,000 people; the incidence of COVID-19-like illnesses; and the COVID-19 test positivity rate. This information is updated weekly and can be found here: <https://www.nj.gov/health/cd/statistics/covid/>
6. All residents who leave a long-term care facility for any reason should be assessed to determine if they need to quarantine upon their return. See this COVID-19 Exposure Risk Assessment Template for Patients in Post-acute Care Settings. [https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)
7. May 12, 2021 Memo “Mandatory Guidelines for the Provision of Services, Group Activities, Visitation, and Testing in all Long-Term Care Facilities.” [https://www.state.nj.us/health/legal/covid19/5-12-21\\_Memo\\_StandardsProtocolsVisitorsFacilityStaff.pdf](https://www.state.nj.us/health/legal/covid19/5-12-21_Memo_StandardsProtocolsVisitorsFacilityStaff.pdf)