

Division of Quality Assurance: Notifications & Updates

Attn: Nursing Home and Assisted Living Providers

COVID-19, Visitation and Long-Term Care Communities

People who live in our nursing homes, assisted living communities and the staff and caregivers are at a high risk of contracting COVID-19. Their safety and wellbeing continues to be a top priority for DHS. When a resident or staff member tests positive for COVID-19, the potential for rapid spread can be extremely high and life-threatening, and asymptomatic individuals who are COVID-positive can spread the virus. In order to minimize spread, we ask that long-term care settings remain vigilant about minimizing the numbers of people entering their buildings from the community. The Department of Health Services continues to support the following guidance regarding visitation of residents by family members. This information is consistent with [guidance](#) published by the federal Centers for Medicare & Medicaid Services (CMS) and published on the [DHS COVID-19 webpage](#).

Restrictions on visitors:

- Facilities should restrict all visitors and nonessential health care personnel, except for certain compassionate care situations, such as an end-of-life scenario. Facilities should notify potential visitors of the need to defer visitation until further notice (through [signage](#), calls, letters, etc.).
- In compassionate care situations, visitors will be limited to a specific room only. Facilities should require visitors to perform hand hygiene and use personal protective equipment (PPE), such as face masks. Decisions about visitation during an end-of-life situation should be made on a case-by-case basis, which should include careful screening of the visitor (including clergy, bereavement counselors, etc.) for fever or respiratory symptoms.
- Individuals with symptoms of a respiratory infection (fever, cough, shortness of breath, or sore throat) should not be permitted to enter the facility at any time (even in end-of-life situations).
- Visitors that are permitted to enter must wear a face mask while in the building and restrict their visit to the resident's room or other location designated by the facility. Facilities should also remind visitors to frequently perform hand hygiene, especially after coughing

or sneezing.

Health care workers. Facilities should follow [CDC guidelines for restricting access to health care workers](#).

- Other health care workers, such as hospice workers, EMS personnel, or dialysis technicians, who provide care to residents should be permitted to enter the facility as long as they meet the CDC guidelines for health care workers.
- Facilities should contact their local health department for questions, and frequently review the [CDC COVID-19, website for health care professionals](#).

Additional [guidance](#) offered by the Centers for Medicare & Medicaid Services (CMS) and published on the [DHS COVID-19 webpage](#) includes:

- Offering alternative means of communication for people who would otherwise visit, such as virtual communications (phone, video-communication, etc.).
- Creating and/or increasing listserv communication to update families, such as advising them to not visit.
- Assigning staff to serve as the primary contact to families for inbound calls, and conducting regular outbound calls to keep families up to date.
- Offering a phone line with a voice recording updated at set times (for example, daily) with the facility's general operating status, such as when it is safe to resume visits.

Please also see the Wisconsin Board on Aging and Long Term Care (BOALTC) memo [COVID-19, Visitation and Long-Term Care Communities](#) dated April 14, 2020 which shares similar alternatives to a face-to-face visits:

- Use Facetime, Skype or other mobile media, if your resident has access to a device, or as arranged by the home.
- Send extra cards, notes, postcards, being sure to keep your message short and positive.
- Phone your resident often, but please try not to call during the busiest times of day if staff need to assist your resident with the phone.
- If your resident is unable to talk on the phone or use mobile media to stay in touch, ask the staff if someone can call you periodically to give you an update about how your resident is doing.

Residents still have the right to access the Ombudsman Program with the Board on Aging and Long Term Care by phone at 1-800-815-0015, via e-mail at BOALTC@wisconsin.gov or online at <http://longtermcare.wi.gov/>.

These recommendations are to keep our residents of Wisconsin nursing homes and assisted living communities protected from the COVID-19 virus, but also the staff and caregivers who work

in those settings. In these days where many long-term care settings are already working with fewer staff than they would like, they cannot afford to lose even one to this virus for any length of time. If your facility has developed additional creative ways for residents to connect with their loved ones, please share those with us on the weekly Assisted Living Provider and Nursing Home Provider Forums. Thank you for your help in protecting Wisconsin's most vulnerable citizens.

Please do not reply directly to this email message. If you have a question about this information, email the [Division of Quality Assurance](#).

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