



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

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### **Reopening Guidance for Licensed Personal Care Homes and Assisted Living Facilities**

*Revised 10/1/2020*

The Mississippi State Department of Health (MSDH) is providing these recommendations to safely transition Personal Care Homes (PCHs) and Assisted Livings (ALs) into reopening and to ensure a healthy and sanitary environment for care to prevent the introduction of and transmission of COVID-19 infections in the facility. These recommendations are based, in part, on the Centers for Disease Control (CDC) guidance which should be followed for preventing the transmission of COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/assisted-living.html>

#### **If a resident or staff member tests positive for COVID-19:**

- Notify the MSDH Office of Epidemiology at 601-576-7725 and the Office of Licensure at 601-364-1100.
- **Facility will receive recommendations for infection control, including the use of appropriate personal protective equipment (PPE), from MSDH personnel.**
- Facility must notify residents and family/responsible parties if a resident or employee tests positive and must retain proof of that notification for Licensure.
- Facility must communicate with residents and family/responsible parties reminding them not to visit when ill or if they have had a [known exposure](#) to someone with COVID-19.
- Facilitate and encourage alternate methods for visitation (e.g., video conferencing and facetime) and communication with the resident.

#### **Facility Staff**

- Staff must wear, at a minimum, a face mask/cloth face covering throughout the day.
- When caring for patients with known COVID-19, MSDH recommends strict compliance with CDC infection control guidance. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>
- Staff must be screened for signs and symptoms of COVID-19 daily upon entrance into the facility for their shift. The screening will include temperature checks, observation for any signs and symptoms of COVID-19.
- Staff will be immediately sent home (and for medical attention) if screening is positive.
- Staff must report to employer if they have had a [known exposure](#) to someone with COVID-19.

- All staff will be in-serviced on infection control measures including, but not limited to, washing hands before and after any contact with any person or surfaces; appropriate way to wear and remove gloves; how to properly sanitize the environment; and how and when to wear appropriate PPE.

### **Residents**

- Signs and symptoms and temperature checks will be conducted for residents at each shift and anytime they return to the facility from an essential medical appointment.
- Hand hygiene should be performed routinely.
- Residents should be encouraged to wear a cloth mask or face covering when leaving their room, leaving the facility (e.g., medical visits) and when around others.

### **Facilities may choose to reopen if they meet ALL of the following prerequisites:**

- the [Core Principals of COVID-19 Infection Prevention](#) can be met.
- the COVID-19 county positivity rate, found on the [COVID-19 Nursing Home Data](#) site is used to determine how to facilitate indoor visitation:
  - Low (<5%) = Visitation should occur according to the core principles of COVID19 infection prevention and **facility policies** (beyond compassionate care visits)
  - Medium (5% – 10%) = Visitation should occur according to the core principles of COVID-19 infection prevention and **facility policies** (beyond compassionate care visits)
  - High (>10%) = Visitation should only occur for [compassionate care situations](#) according to the core principles of COVID-19 infection prevention and **facility policies**
- no new onset of COVID-19 cases in the last 14 days;
- the location is not experiencing staff shortages;
- adequate supplies of personal protective equipment (PPE) and essential cleaning and disinfection supplies are available;
- adequate testing for COVID-19 is available; and
- referral hospital(s) have bed capacity on wards and intensive care units.

### **Communal Dining/Group Activities**

- Limit communal dining and group activities to COVID-19 negative residents with no signs and symptoms of illness.
- Limit communal dining and group activities to groups of no more than 20 individuals including staff.
- Practice social distancing by limiting the number of people at tables and spacing at least 6 feet apart.

- If there is a confirmed case of COVID-19, group activities and communal dining will be immediately suspended.
- Ensure all residents wear a face mask/cloth face covering when out of their rooms.
- Hand hygiene should be observed. The CDC recommends using Alcohol-Based Hand Rub (ABHR) with greater than **greater than 60% ethanol or 70% isopropanol**.

### Visitors

- External groups (i.e. singers, entertainment) should be limited if possible and activities should be conducted outdoors.
- Visitors must be notified of visitation requirements and agree to the elements prior to conducting the visit.
- Visitation must be scheduled with the facility to ensure that the designated visitation area and staff are available for monitoring.
- Signs will be posted at the entrance with instructions for visitors to be screened before entering the facility.
- Visitors must be screened before being allowed entry to the facility. Visitors will be denied entry to the facility if they have any signs or symptoms consistent with COVID-19 or exposure to a known COVID-19 case.
- Facilities should consider limiting visitation to family members/primary contacts.
- Facilities should consider time limits for visitation i.e., one hour.
- Visitors and residents must wear a cloth face covering or facemask for the duration of their visit. Visitors are responsible for bringing their own face mask/cloth face covering.
- Visitors and residents must maintain proper social distancing.
- Visitors must be monitored by staff during the visit.
- Violation of these rules by the visitor may result in revocation of visitation rights.
- According to the CDC, all healthcare workers and first responders are considered essential personnel; therefore hospice, home health, therapists, nurses, and dieticians may be allowed to enter the facility if they are screened and follow infection control procedures.
- A facility must immediately suspend for 14 days all visitation if the facility is identified as having an active outbreak.

### Outdoor Visitation

Visitation is recognized as an important part of an individual's health and well-being. It is known that congregate settings provide opportunities for increased risk for the spread of COVID-19. However, recent data show that the risks of virus transmission are lower in outdoor settings. Facilities should establish visitor areas that are protected from weather elements, such as porches, patios and other covered areas, or have a space large enough to house a temporary tent. Outdoor visitation may occur regardless of a facility's outbreak status provided the following conditions are met.

1. Facilities should establish visitor areas that are protected from weather elements, such as porches, patios and other covered areas, or have a space large enough to house a temporary tent.
2. The facility must monitor the temperature in any outdoor visitation area.

3. Visits should occur only on days when there are no weather warnings that would put their visitors or residents at risk.
4. Adequate staff must be present to allow for personnel to help with outdoor transition of residents, monitoring of visitation, and cleaning and sanitizing areas after each visit.
5. Visitation areas must be cleaned and sanitized between visitations using an approved antiviral disinfectant. The visitation schedule must provide enough time in between visits for this process.
6. Visitors must participate in and pass the facility's screening process prior to each visit.
7. The facility screening process must include a screening questionnaire, which will record the identity of the resident visited, date, name, address and phone number of the visitor and the facility must maintain these records so that they can be made available upon request by the Mississippi State Department of Health Bureau of Health Facilities Licensure and Certification or Office of Epidemiology.
8. The questionnaire will also include a declaration regarding signs and symptoms of infection, contact and/or exposure to known COVID-19 positive persons, and any prior testing for COVID-19, and a statement that the visitor will inform the facility immediately if they develop symptoms within 72 hours of visiting or test positive for COVID-19 after visiting.
9. Visitors must not have signs or symptoms of COVID-19 for at least three (3) days prior to a visit.
10. If any visitor previously tested positive for COVID-19, they must not visit within 14 days of a positive test.
11. Residents must wear a cloth face covering during the visit, if able and all visitors must always adhere to physical distancing (at least 6 feet apart) during visits.
12. Residents must have the ability to safely transition from their room to an outdoor visitation location.
13. Facilities should consider limitations to the number of visitors a person may have at a time to minimize the number of people to which a resident is exposed.
14. Visitors must stay in designated outdoor visitation locations.
15. Visitation should be restricted to children 12 years of age or older. Visitors with children must be able to manage them, and children must be able to wear a face mask during the entire visitation. Special family circumstances warranting children under the age of 12 to visit can be approved by the facility.
16. Outdoor visitations should be rotated, and visitors must **schedule** visits in advance with the facility pursuant to the facility's scheduling process and available times.
17. Facilities should rotate and schedule visits at specific times such that the total number of visitors present at any one time does not exceed safe limits.
18. Visitation will only be allowed during select hours of each day as defined by the facility.
19. Visitation hours and limits should be determined by the facility's availability of outdoor space and the ability of staff to monitor for infection control measures.
20. The facility must **ensure** that hand sanitizer and extra facemasks are available.
21. Visitors must sanitize hands with an alcohol-based hand rub or by handwashing with soap and water when entering and exiting.
22. Visitors cannot eat during the visit but may provide food and/or beverages to the resident consistent with dietary considerations if approved by the facility.

23. The facility must monitor all visits carefully to ensure that masks are worn, and visitation policies are followed.
24. If the facility cannot provide the necessary supervision of outdoor visits to prevent breeches in infection control requirements, then the facility must suspend outdoor visitation.

### **Off-Site Medical Visits**

- Telehealth visits are the first option and must be pursued prior to permitting the resident to leave for a medical visit.
- Any healthcare/routine doctor visits must be deemed as essential.
- One family member or primary contact may take a resident to a medical visit if urgent/essential.
- The facility must share resident's COVID-19 status with transportation and the medical facility at which the resident has the appointment.
- Family member or primary contact must:
  - Be screened for COVID-19 symptoms or exposure prior to leaving facility.
  - Wear a face mask/cloth face covering at all times.
  - Be informed of these requirements and agree to comply.
  - Practice hand hygiene using ABHR.
- Resident must:
  - Wear a face mask/cloth face covering at all times.
  - Practice hand hygiene with **ABHR**.
  - Be monitored for COVID-19 symptoms for 14 days after visit and have twice daily temperature checks.

### **Salon/Barbershop Personnel**

- Must supply facility proof of a negative COVID-19 test results within the past seven days of starting back services to the facility. The salon/barbershop personnel will be responsible for obtaining their own COVID-19 test and providing the results to the facility.
- Must schedule visits so two residents will not be in the room at the same time unless services can be provided by maintaining proper social distancing of at least 6 feet.
- Must be negative for signs and symptoms screening before entering
- Must wear a face mask/cloth face covering and gloves
- Resident must wear a mask

### **Overnight Stays/Hospitalization**

If a resident opts to leave the facility overnight for other than an essential healthcare appointment, upon return the resident should be quarantined to their room and monitored for signs and symptoms of infection for 14 days.

If resident tested positive at a hospital, the hospital must find placement for the resident to finish out the isolation period before returning to the facility. The hospital can contact Mississippi MED-COM at 1-888-862-2345 for assistance.