## Visitation Fact Sheet - Skilled Nursing Facilities (nursing homes)

Per guidance from the Centers for Medicare and Medicaid Services and Centers for Disease Control and Prevention, CDPH All Facilities Letter 20-22.5 authorizes long-term care facilities to temporarily modify their facility’s visitation policies. This fact sheet provides a quick look into how visits can be conducted safely, with additional criteria that **MUST** be followed. Please see AFL 20-22.5 for more information. Also, please note visitation rules are subject to county public health orders, which may be more restrictive.

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| CDPH **REQUIRES** virtual visitation for all facilities. CMS "encourages creative means of connecting residents and family members" and facilities are urged "to take strong efforts to facilitate connections with residents, families, friends, and loved ones." CDPH encourages frequent video and phone call visits. | All facilities **MUST** permit outdoor visitation. Outdoor visitation is preferred and should be held whenever practicable. Facilities should limit the number and size of visits occurring simultaneously to support safe infection prevention actions. CMS recommends "reasonable limits on the number of individuals visiting with any one resident at the same time." | If outdoor visitation is not possible, facilities **MUST** permit indoor visitation if they have:  
- Large communal indoor spaces, such as a lobby, cafeteria, activity room, physical therapy rooms, etc. where six-foot distancing is possible  
In-room visitation can be allowed when facilities meet all the following:  
- The county is in Tier 2 (Red), 3 (Orange), or 4 (Yellow) under [Blueprint for a Safer Economy](https://blueprintforasafereconomy.ca.gov/)  
- No staffing shortages  
- Access to adequate testing  
- An approved COVID-19 Mitigation Plan  
- Case status in the facility: Absence of any new COVID-19 cases in the facility for 14 days, among either residents or staff | **MUST** be permitted if screened for fever, COVID-19 symptoms, and wearing PPE:  
- Surveyors  
- Ombudsman  
- Visitors for legal matters that cannot be postponed or accomplished virtually  
- Protection and advocacy (P&A) program representatives  
- Individuals authorized under disability rights laws  
- Healthcare workers and nursing students should be permitted if they meet CDC guidelines for healthcare workers. | **MUST** be permitted. Per CMS, compassionate care does not exclusively refer to end-of-life situations. Compassionate care is not defined, but examples include to:  
- Help a new resident transition to a facility  
- Comfort a grieving resident after the death of a loved one  
- Cue a resident with malnutrition or dehydration to eat or drink  
- Assist a resident experiencing emotional distress  
For compassionate care visitation with personal contact, visitors **MUST**:  
- Be screened for COVID-19 symptoms  
- Be routinely tested for COVID-19, on at least a weekly basis  
- Wear a surgical facemask while in the building  
- Restrict their visit to the resident’s room  
- Be reminded to frequently perform hand hygiene | All the following rules **MUST** be followed for any on-location visitation:  
- Visits are scheduled in advance  
- Visitors are screened for fever and COVID-19 symptoms  
- There is 6-feet or more of physical distancing  
- Residents and visitors wear facial coverings (e.g., cloth masks or surgical face mask)  
- Staff monitor to ensure compliance with infection control guidelines. | Support person visitors are encouraged (but not mandated), regardless of COVID-19 outbreaks, for residents with physical, intellectual, developmental disabilities and/or cognitive impairments. No touching between visitors and residents, or proximity less than 6 feet is permitted, except perhaps in compassionate care visitation. The county is in Tier 2, 3, or 4 under [Blueprint for a Safer Economy](https://blueprintforasafereconomy.ca.gov/). |