

		Department: OPERATIONS	Work Instruction No: (WI) OP-0002-15-FL
Section:	Infection Control	Effective: 05/06/2022 Temporary Approval	Pages: 4
TITLE:	Visitation Rules During Outbreaks or Due to Infectious Disease Activity; Screening Upon Entry and Restricted Movement Within Community - Florida		

1.0 SCOPE:

This work instruction provides the steps necessary to ensure there is controlled access and restricted entry by individuals into the community when directed by the disease-specific Atria Protocol or a governing authority as a measure to limit infectious disease activity level.

2.0 DEFINITIONS:

Essential Visitor: An individual who is essential to providing care and/or support for residents or vendors for life safety needs or tasks. This includes but is not limited to Physicians, Private Duty Aides (PDAs), Hospice, Home Health providers and in some cases, family visiting during end-of-life. Individuals deemed essential visitors are often determined according to governing authority(ies), and Operations Counsel should make determinations when it is not clear.

Essential Caregiver: An individual designed by the resident for visitation purposes who may or may not provide care to the resident, at the resident's option.

Non-essential personnel: Individuals not necessary for onsite operation of the community.

Outbreak: When the combined number of residents and staff who are showing signs and symptoms of illness reaches or exceeds four percent (4%) of the total number of residents and staff. This will be calculated for the Assisted Living and Independent Living combined and for the Memory Care neighborhood separately. This definition may also be different if determined based on a local or state requirement.

Protocol: The rules, practices or framework in place to address the prevention and spread of infectious disease in the Community.

Screening: The process of asking and documenting questions to determine symptoms, exposure and risk of infectious disease, which is used to determine whether an individual is permitted entry into the community.

3.0 WORK INSTRUCTION:

- A. The Executive Director (ED) is responsible for ensuring visitors follow visitation protocols below to minimize transmission and spread of infectious agents into or across the community. The ED must:
1. Ensure staff provides education to any visitor about infection control protocols, the specific risks of transmission associated with the infectious disease involved in the outbreak, and the directive that the Community's rules must be followed or the visitor's right to visit may be suspended.
 2. Allow visitors, including Essential Caregivers, to visit a resident at any time and for any length of time during the day.
 3. Restrict access to only one entrance for all visitors, Essential Visitors and Essential Caregivers to enter in order to ensure screening is controlled.
 4. Staff the entrance at any time the entrance to the community is open and ensure an employee is at the entrance at all times during the day to stop and screen any person prior to entering the building.
 5. Document appropriately on the most recent Screening Log created by Atria for each classification of individual entering (resident, staff, visitor). The Screening Log questions may be more restrictive than Atria's standard screening when a governing authority requires it.
 6. Ensure no one entering self-screens but is always screened by an employee.
 7. Secure the Screening Logs, which contain confidential and personal information, when not within sight of an employee in charge of screening.
 8. Refer to the most current posted Protocol for that infectious disease to decide and seek guidance from their Regional Vice President or Operations Counsel for any questions about visitation or restrictions of individuals including non-essential personnel. Notwithstanding any restriction in the current protocol, allow in person visitation under the following circumstances unless the resident objects:
 - a. End-of-life situations;
 - b. In a situation in which the resident was living with family before residency and is struggling with the change in environment and lack of in-person family support;
 - c. When the resident is making any major medical decision;
 - d. When the resident is experiencing emotional distress or grieving the loss of a family member or friend who recently died;
 - e. When the resident needs cueing or encouragement to eat or drink, which encouragement was previously provided by a family member or caregiver; and
 - f. When the resident who used to talk and interact with others is seldom speaking

9. Require the appropriate level of PPE for the visitor and the resident according to what would be required of staff according to the resident and visitor's infectious status. Ask residents to practice hand hygiene before and after a visit.
 10. Escort residents to and from a common area visit to ensure little or no interaction with other residents.
 11. Not restrict consensual physical contact between the resident and the visitor.
 12. Post signage at community entrances and other strategic areas instructing individuals to not enter if they have fever, flu-like or respiratory symptoms, or gastrointestinal symptoms. Use the signage created by the Support Center which will include signs and symptoms and who to notify if visitors have symptoms.
- B. Individuals entering the Community, including Essential Caregivers:
1. Receive information from the employee conducting screening about the Community's infectious disease protocols, the specific risk's of transmission associated with the infectious disease involved in the outbreak and then agree to adhere to all the protocols for the safety of the resident, staff and the visitor.
 2. Answer the questions on the appropriate Screening Log truthfully and sign confirming responses prior to entrance into the community. With the exception of an Essential Caregiver, anyone not passing screening by answering in the affirmative to any of the questions must be asked to leave the Community
 3. Follow the rules in place for any limitations on the location of the visit or the manner in which the visit is conducted as determined by the Atria Protocol and governing authority rules.
 4. Use hand sanitizer and wear a surgical mask, or additional PPE as required based on the infectious disease status of the person being visited. Visitors are required to provide their own PPE. However, Atria can provide a mask if the visitor arrives without one.
 5. Report any symptoms developed after entry to a manager and leave the Community promptly.
 6. Go directly to the area for visitation and back. Movement through the Community upon entry will be limited to the visitation location during an outbreak. Avoid any interaction with other residents.

4.0 ASSOCIATED DOCUMENTS:

OP-002 Infection Prevention and Control Program
(WI) OP-0002-13 Monitoring Guidance and Establishing and Communicating Infectious Disease Protocols to Residents and Staff
Sign in Logs