

Today (3/17/21), the Michigan Department of Health and Human Services (MDHHS) updated its Residential Care Facilities Order to reflect recent changes in [Center for Medicare and Medicaid Services guidance](#) for visitation. The state recently rolled out an expanded visitation program, using a testing protocol to keep residents and staff safe. The updated order and accompanying guidance continues to support visitation and improve quality of life for seniors while maintaining precautions to help keep residents and staff safe. Testing is strongly encouraged prior to visitation, particularly in counties with medium or high positivity, but not required. The order goes into effect immediately.

Facilities must meet criteria specified and including having no new Covid-19 cases within the previous 14 days in order to host indoor and/or outdoor visitation.

Our facility's current visitation status is available on our Nursing Home Visitation Tab. The clinical and operational teams at our facility complete a daily self-assessment to determine our ability to accommodate these visits based on the criteria established by state and federal guidelines. We will communicate any changes to our visitation status on this website.

Visitors should in most cases be **immediate family members** (spouses/significant others, children, siblings, parents) of a resident. If a resident does not have immediate family in the area, visits with close friends or extended family will be considered. We ask that residents limit their visits to **one per day** whenever possible out of consideration for others and limited scheduling opportunities.

**Please know there is a possibility our visitation status could change!** All nursing homes will be required to constantly assess and reassess their visitation status. Our eligibility for hosting visits will be determined based on our ability to meet the standards outlined by the MDHHS.

#### Visitation.

- a. In accordance with this Order, facilities must support and accommodate residents receiving visitors. Visitation includes, to the extent practicable, both indoor and outdoor visitation unless otherwise specified. Visitation or visitor does not include an individual entering the facility for the purpose of performing official government functions. Adult foster care homes licensed for 12 or fewer residents, hospice facilities, substance use disorder residential facilities, and assisted living facilities are encouraged to implement visitor and staff testing protocols.
- b. Except as otherwise provided in this Order, visitation may only occur when the facility meets all of the following criteria:

(1) The facility has had no new COVID-19 cases originate in the facility, including those involving residents or staff ("facility-onset cases"), within the prior 14 days and is not currently conducting

outbreak testing. Admission of a resident who is known to be COVID-19-positive at the time of admission does not constitute a facility-onset case.

(2) The local health department or MDHHS has not prohibited visitation at the facility.

(3) Nursing homes, homes for the aged, and adult foster care facilities licensed to care for 13 individuals or more must ensure that all visitors over 13 years old participating in indoor visitation are subject to the testing requirements in section 4. Outdoor visitation is not subject to the testing requirements of section 4.

c. Facilities allowing visitation consistent with this order shall, without exception:

(1) Permit visits by appointment only. Facilities may impose reasonable time limits on visits and must require that visitors log arrival and departure times, provide their contact information, and attest, in writing, that they will notify the facility if they develop symptoms consistent with COVID-19 within 14 days after visiting.

(2) Limit the number of visitors per scheduled visit to two persons or fewer at any given time.

(3) For facilities with a MDHHS-required resident and staff testing regimen, in accordance with section 3(b)(3), require the testing of visitors in accordance with section 4 of this Order.

(4) Exclude visitors who are unwilling or unable to wear a face mask for the duration of their visit or follow hand hygiene requirements, and instead encourage those persons to use video or other forms of remote visitation. Further, require visitors to wear appropriate PPE, and comply with the facility's visitor PPE requirements based on applicable infection control protocols.

(5) Limit visitor entry to designated entrances that allow proper COVID-19 screening.

(6) Perform a health evaluation of all visitors each time the visitor seeks to enter the facility and deny entry to visitors who do not meet the evaluation criteria. Screenings must include tests for fever ( $\geq 100.4^{\circ}\text{F}$ ), other symptoms consistent with COVID-19, and known exposure to someone with COVID-19. Facilities must restrict anyone with fever, symptoms, or known COVID-19 exposure from entering the facility.

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(7) Post signage at all visitor entrances instructing that visitors must be assessed for symptoms of COVID-19, will, if applicable, be required to test before entry, and instruct persons who have symptoms of COVID-19 to not enter the facility.

(8) Require that visitors follow physical distancing requirements and refrain from any physical contact with residents and employees during indoor and outdoor visits, except that:

- A. Individuals who are providing services requiring physical contact under subsections 3(e)(3), 3(e)(4), and (3)(e)(5) are not required to abide by physical distance requirements between the visitor and the resident while providing such services; provided those service providers are wearing appropriate PPE and the time spent within six feet of a resident is no longer than 15 minutes.
- B. Visitors participating in visits at the End of Life may have physical contact with a resident if that resident is not COVID-19 positive, the visitors are wearing appropriate PPE, and the time spent within 6 feet of the resident is no longer than 15 minutes.

(9) Make hand sanitizer and/or hand washing facilities safely available to visitors and post educational materials on proper hand washing and sanitization.

(10) Ensure availability of adequate staff to assist with the transition of residents, monitoring of visitation, and for cleaning to disinfect surfaces in the visitation areas after each visit.

(11) Educate visitors on additional PPE use requirements for visitors beyond a face mask, if any. The facility must supply the visitor with the additional PPE. Entry may not be denied based on a visitor not having the additional PPE required by the facility.

(12) Disallow visitation during aerosol-generating procedures or during collection of respiratory specimens unless deemed necessary by staff for the care and well-being of the resident.

(13) Restrict visitor movement within the facility to reduce the risk of infection.

(14) Make accommodations to support visitation for residents who share a room with another resident. Visits for residents who share a room shall not be conducted in the resident's room.

- (15) Make available an employee or volunteer trained in infection control measures at all times during the visit. This individual is not required to supervise a visit but must be available for questions.
- (16) Limit the number of overall visitors at the facility in any given time based upon limited space, infection control capacity, and other necessary factors to reduce the risk of transmission.
- (17) Advise residents and visitors to not share food.
- (18) Communicate regularly with residents and their families to inform them of updated visitation protocols.
- (19) Prohibit visits to residents who are in isolation or are otherwise under observation for symptoms of COVID-19.
- d. Prior to offering outdoor visitation, the facility must assure all of the following:
- (1) The outdoor visitation area allows for at least six feet between all persons. Tables are recommended as a barrier to ensure proper physical distancing. Marked areas and signage may be necessary to inform visitors of expectations. Tables and chairs must be disinfected after each use; and
  - (2) The outdoor visitation area provides adequate protection from weather elements (e.g., in a shaded area).
- e. Facilities should accommodate the following visitation even when visitation would otherwise not be permitted under section 3(b)(1)-(3):
- (1) Window visits when a barrier is maintained between the resident and visitor. Accommodations shall be made for residents without access to ground floor window or a window that does not open to an area accessible to the visitor. Accommodations may include utilizing a visitation room or space with a window or door access to a visitor.
  - (2) A parent, foster parent, or guardian of a resident who is 21 years of age or under.
  - (3) Visits that support Activities for Daily Living (ADL) or visits that are necessary to ensure effective communication with individuals with hearing, vision, or speech impairments. Facilities with residents that had ADL arrangements prior to March 14, 2020, or residents that have had a change of condition that could be improved with ADL arrangements, must attempt to contact the resident's next of kin or an

individual identified by the resident in partnership with the local ombudsman to establish arrangements. Except in circumstances where the visitor tests positive for COVID-19, facilities that deny visitation under this section must provide written notice to the visitor with an explanation of why visitation is being denied. The denial notice must also be sent to MDHHS and the LTC ombudsman.

(4) Visits, including those by clergy, that occur when a resident is in serious or critical condition or in hospice care. Except in circumstances where the visitor tests positive for COVID-19, facilities that deny visitation under this section must provide written notice to the visitor with an explanation of why visitation is being denied. The denial notice must also be sent to MDHHS and the LTC ombudsman.

(5) Medical service providers such as hospice providers, podiatrists, dentists, durable medical equipment providers, social workers and other behavioral health providers, speech pathologists, occupational therapists, physical therapists, and other health care providers, including resident physicians and clinical students. If these services must be provided indoors, the facility must restrict movement within the facility to the greatest extent possible to reduce the risk of infection.

- f. The following visitation may occur even when visitation would otherwise not be allowed under section 3(b)(2):

(1) Non-medical service providers, such as hairdressers, nail salon technicians, cosmetologists, and providers of religious or spiritual services, when it is determined by a qualified medical professional that there will be an actual or potential negative impact on the resident when the service is not provided, and the resident will not benefit from remote service delivery. These services may be provided to residents who have never been diagnosed with COVID-19, or who are no longer in the infectious period for COVID-19 per CDC guidance. These services must be provided outdoors or in a well-ventilated area whenever possible. If services must be provided indoors, the facility must restrict movement within the facility to the greatest extent possible to reduce the risk of infection.

(2) Volunteers who have been trained in infection control measures and are supporting visitation (e.g. scheduling visits, conducting screening of visitors, escorting visitors or residents to visitation location, and/or monitoring visits for infection control compliance).

#### 4. Testing.

- a. For the purposes of this order, when visitor testing is required, facilities should conduct point of entry testing of visitors whenever possible. When point of entry testing is not available, facilities must require visitors to be tested on their own within 72 hours of coming to the facility and require proof of negative test results upon entry.
- b. Testing shall be required prior to entry for indoor visitation at all facilities, except that:
  - (1) Testing is not required prior to visits under subsections 3(e)(1) and visits at the End of Life, though such testing is strongly encouraged.
  - (2) Testing requirements for visitation under subsections 3(e)(5) and 3(f)(1)-(2) must be the same as for similar staff working in the facility.
  - (3) Testing is not required for visitors 13 years of age or younger.

#### 5. Implementation.

- a. Nothing in this order should be taken to modify, limit, or abridge protections provided by state or federal law for a person with a disability.
- b. Under MCL 333.2235(1), local health departments are authorized to carry out and enforce the terms of this order.
- c. Law enforcement officers, as defined in the Michigan Commission on Law Enforcement Standards Act, 1965 Public Act 203, MCL 28.602(f), are deemed to be “department representatives” for purposes of enforcing this order and are specifically authorized to investigate potential violations of this order. They may coordinate as necessary with the appropriate regulatory entity and enforce this order within their jurisdiction.
- d. Consistent with MCL 333.2261, violation of this order is a misdemeanor punishable by imprisonment for not more than 6 months, or a fine of not more than \$200.00, or both.
- e. The December 8, 2020 order entitled “Requirements for residential care facilities” is rescinded as of the effective date of this order. Nothing in this order shall be construed to affect any prosecution or enforcement based on conduct that occurred before the effective date of this order.
- f. Consistent with any rule or emergency rule promulgated and adopted in a schedule of monetary civil penalties under MCL 333.2262(1) and applicable

to this order, violations of this order are punishable by a civil fine of up to \$1,000 for each violation or day that a violation continues.

- g. If any provision of this order is found invalid by a court of competent jurisdiction, whether in whole or in part, such decision will not affect the validity of the remaining part of this order.

This Order is effective immediately.