STATE OF CONNECTICUT DEPARTMENT OF PUBLIC HEALTH

Deidre S. Gifford, MD, MPH Acting Commissioner



Ned Lamont Governor Susan Bysiewicz Lt. Governor

BLAST FAX 2021-8

TO:

Chronic and Convalescent Nursing Homes, and Rest Homes with Nursing

Supervision

FROM:

Acting Commissioner Deidre S. Gifford, MD, MPH Pada S.

Digitally signed by Deidre S. Gifford DN: cn=Deidre S. Gifford, o=Department of Social Services, ou=Commissioner,

email=deidre.gifford@ct.gov, c=US Date: 2021.03.19 14:11:26 -04'00'

CC:

Deputy Commissioner Heather Aaron, MPH, LNHA

Adelita Orefice, MPM, JD, CHC, Chief of Staff

Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE:

March 19, 2021

SUBJECT: Revised Visitation Guidance from CMS

The Centers for Medicare and Medicaid (CMS) issued new guidance in the **QSO 20-39-NH Revised** for visitation in nursing homes during the COVID-19 PHE, including the impact of COVID-19 vaccination. The memo was issued on March 10, 2021 and is *effective immediately*. Please review the memo in detail and listed below are some of the key changes:

- The core principles of COVID-19 infection prevention also includes Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status)
- Outdoor visitation- While taking a person-centered approach and adhering to the core
 principles of COVID-19 infection prevention, outdoor visitation is preferred even when
 the resident and visitor are fully vaccinated* against COVID-19. Outdoor visits generally
 pose a lower risk of transmission due to increased space and airflow. Therefore, visits
 should be held outdoors whenever practicable.



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• Indoor visitation- Facilities should allow indoor visitation at all times, and for all residents (regardless of vaccination status), except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission (note: compassionate care visits should be permitted at all times). These scenarios include limiting indoor visitation for:

- O Unvaccinated residents, if the nursing home's COVID-19 county positivity rate is >10% and <70% of residents in the facility are fully vaccinated;
- Residents with confirmed COVID-19 infection, whether vaccinated or unvaccinated until They have met the criteria to discontinue Transmission-Based Precautions; or
- o Residents in quarantine, whether vaccinated or unvaccinated, until they have met criteria for release from quarantine.
- Indoor Visitation during an outbreak- The guidance is intended to describe how visitation can still occur when there is an outbreak, but there is evidence that the transmission of COVID-19 is contained to a single area (e.g., unit) of the facility. To swiftly detect cases, we remind facilities to adhere to CMS regulations and guidance for COVID-19 testing, including routine staff testing, testing of individuals with symptoms, and outbreak testing. Please refer to the attached QSO memo for specific criteria.
- Compassionate Care Visits- Compassionate care visits, and visits required under federal disability rights law, should be allowed at all times, regardless of a resident's vaccination status, the county's COVID-19 positivity rate, or an outbreak. Please refer to the attached QSO memo for specific information.

^{*}Fully vaccinated refers to a person who is ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine, per the CDC's Public Health Recommendations for Vaccinated Persons.