

Visitation Guidance for Homes Related to COVID-19

Tennessee Department of Intellectual & Developmental Disabilities
Visitation Guidance | June 2020



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The Department of Intellectual and Developmental Disabilities (DIDD) offers the following guidance to help support providers as they consider how to best manage their agency visitation policies during this evolving pandemic. Specifically, this guidance provides recommendations regarding visitors to homes in which residential services are provided as well as overnight or extended visits during which no services are provided for persons supported in residential settings. This guidance document and recommendations contained herein apply to services and providers across the HCBS service system to include both the 1915(c) and 1115(a) programs.

Of note, in the CMS-approved COVID amendments (Appendix K to the Section 1915(c) waivers and the Section 1115 Emergency Waiver), the State has authority for a limited period to provide services in settings that do not fully comply with the HCBS settings provision at 42 CFR 441.301(c)(4)(vi)(D) that individuals are able to have visitors of their choosing at any time, when necessary to minimize the spread of infection during the COVID-19 pandemic. To be clear, this is not a blanket waiver of compliance with the HCBS Settings Rule or even of the provision applicable to visitors, but rather, allows for modifications *when needed* to minimize the risk of exposure and spread of COVID-19. DIDD, in partnership with TennCare, will continue to evaluate the need for these temporary flexibilities and will provide further advisement as determined to no longer be needed.

When the COVID-19 crisis commenced, the department did not mandate visitation policies but instead encouraged provider agencies to develop agency COVID-19 related policy in accordance with Centers of Disease Control and Prevention (CDC) and Tennessee Department of Health (TDH) guidance. DIDD recommends that providers continue to use sound judgment informed by conditions in their localized service area as they develop and update their visitation policies now that shelter-in-place orders have expired, and social distancing requirements are beginning to relax (albeit in phases and with continued caution). **Please note that any provider of approved, medically necessary Waiver services, including clinical providers, are not considered visitors for purposes of this guidance.**

Providers should also continue to make all reasonable efforts to reduce the spread of COVID-19. The following are general recommendations that should be reviewed and considered by provider agencies in developing updated COVID-19 visitation policies. These recommendations are divided into three categories: considerations to be taken to reduce the risk of the spread of COVID-19 prior to an in-home visit; considerations to reduce the risk of the spread of COVID-19 during the visit; and considerations to help reduce the risk of the spread of COVID-19 during overnight visits or other extended periods of absences where no services are provided and the person supported returns to his/her home (where residential services are provided).

To be clear, these are not requirements or strict prohibitions as it relates to visitors, but rather recommendations for providers to consider as they develop policies that seek to balance the rights of persons supported to spend time with others as they choose, with the need to ensure their health and safety as well as the health and safety of agency staff.

Recommended considerations to reduce the risk of the spread of COVID-19 prior to visitors in a home where residential services are provided

- To the extent possible, we recommend that visits are arranged in advance with notification to agency staff so that any necessary preparations and precautions may be taken. (Even when not pre-arranged, however, basic precautions should continue to apply.)
- Importantly, this includes making sure that persons supported are aware of the precautions that will be implemented and any visit-related restrictions that will be applied to limit risk of COVID exposure and spread.
- Ideally, work with persons supported to limit visitors to no more than two visitors at the same time and only one visit per person supported per day. Limiting the number and frequency of visitors minimizes the likelihood of exposure. This will also help with contact tracing should an infection occur.
- We recommend that no visits take place *in the home* if anyone living in the home is immunocompromised. Visits may occur *outside of the home* such as on the porch or in the yard, with recommendations for appropriate social distancing.
- Each visitor should be made aware of the symptoms of COVID-19 including the fact some people infected may have no symptoms. If they have had any symptoms during the past two weeks the visit should be delayed until the visitor can be tested for COVID-19 and show a negative result. The symptoms are:
 - Fever or chills
 - Cough
 - Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache
 - New loss of taste or smell
 - Sore throat
 - Congestion or runny nose
 - Nausea or vomiting
 - Diarrhea
- Screening for symptoms (over past 14 days) and current temperature should be performed immediately prior to the visit. If any symptoms have been present or fever greater than 100.0 degrees Fahrenheit, the visit should not take place.

Considerations to help reduce the risk of the spread of COVID-19 during the visit:

- Everyone (person(s) supported and visitor(s)) should wash their hands or use hand sanitizer before and after the visit.
- Ideally, social distancing should be observed (at least six feet apart). Visitors may be required to wear a cloth face covering. Persons supported should also be encouraged to wear a cloth face covering. Providers should be careful about strict limits of physical contact. Persons supported should not be prohibited from hugging or touching but should be educated about the increased risk of physical contacts and encouraged to limit these contacts to the extent possible.
- Consideration should be given for having the visit outdoors. If unable to visit outdoors, the indoor environment should be as large as feasible.
- Visits of limited length will limit the duration of exposure (ideally no longer than one hour).
- A plexiglass partition should be made available for greater safety at the discretion of the person supported.
- Bringing food as part of the visit is permissible as long social distancing is observed and the meal is appropriate for the person.

Considerations for visits outside of services:

- Extended visits outside of the provision of services with subsequent return to the waiver home should be carefully considered because they do represent increased potential risk both to the person supported and to others in the home upon return. These risks should be balanced with the known positive benefits of encouraging and promoting relationships and experiences outside of the agency environment, and the person's right to engage in such activities of his/her choosing.
- Careful consideration should be given with regard to known characteristics of outside environments, including such factors as the rate of COVID-19 in the community and compliance with social distancing. This should also include whether persons in the environment where the visit will occur have been infected or exposed to infection.
- Screening criteria applied to visitors to the home are also applicable to persons supported returning to the home. Consideration may be given to retesting prior to returning home from extended visits outside the provision of services. When the screening and/or test (as applicable) are positive, the person may not be prohibited from receiving needed services; however, the provider may offer services in an alternative setting to avoid the risk of spread to others.