



Limited Outdoor Visitation, Compassionate Care Visitation and Resident Community Outings Guidance for Oregon Nursing, Assisted Living and Residential Care Facilities

DHS Provides Guidance to Allow Limited Outdoor Visitation

DHS, APD Safety Oversight and Quality Unit (SOQ), issued [Provider Alert NF-20-98](#) providing guidance to allow limited outdoor visitation in nursing, assisted living and residential care facilities; and adult foster homes. The guidance lists all the criteria that must be met before limited outdoor visitation can begin. At least 24 hours before commencing outdoor visitation, facilities must submit via email to SOQ copy of their visitation plan that indicates the facility has a location designated for outdoor visitation, sufficient staff, a mechanism for appointments and sufficient PPE to permit visitation, and can meet all other required criteria outlined in the guidance. Advance notice communicating the visitation policy and protocols shall be provided to residents, resident families, and staff including the date visitation appointments can begin, the criteria that must be met for outside visitation and circumstances when visitation will be discounted.

APD Issues Guidance to Allow Compassionate Care Visitation

DHS, APD Safety Oversight and Quality Unit issued guidance to allow for the possibility of limited, structured indoor visitation when additional family support is critical to an individual's plan of care and outdoor visitation cannot be accommodated. Compassionate care visits could include end-of-life situations, bereavement due to the loss of a loved one, or emotional support for the resident who has just moved into a licensed setting and is adjusting to their new surroundings. The guidance does not define each situation that might be support a compassionate care visitation allowance and instead encourages providers to work with the SOQ team, resident families and the long- term care ombudsman to determine if a compassionate care visit should be conducted. These visits are not meant to be routine and are intended to provide comfort during challenging times and help offer the resident critical emotional and social supports during their time of need. The guidance includes procedures that must be followed if a compassionate care visit is determined to be appropriate. See [Admin Alert NF-20-100](#).

APD Issues Guidance on LTC Facility Phase I Reopening (see [Admin Alert NF-20-89](#)) : Community Outings

Under Oregon's Phase One reopening, LTC residents may engage in community outings, subject to the same restrictions, as any other Oregonian. However, facilities should take certain

precautionary steps to safeguard residents and staff when individual residents choose to exercise their right to leave a community. The precautions include:

- Informing all residents, prior to leaving the building, about facility policy for leaving the facility. Information should include what protocols will be followed upon return to the facility.
- Preparing and distributing timely information about Covid-19 to residents, families and staff prior to any outings or changes in visitation protocols. Information can be found at healthoregon.org/coronavirus and should include:
 - Transmission of COVID-19 and the significant risks it poses to older adults and individuals with compromised immune systems. (See: [CDC Covid-19 Guidance for Older Adults](#) and [OHA Covid-19 Fact Sheet](#))
 - The importance of face masks or face coverings during community outings, and guidance on appropriate use. (See: [OHA Mask & Face Covering Guidance](#))
 - The reasons for social distancing during community outings, including information about how to practice effective social distancing. (See: [OHA Physical Distancing Flyer](#))
 - Reasons for avoiding large gatherings in community outings.
 - Information and examples of outside activities or behaviors which may be considered high risk. Some examples include encountering a large gathering, inability to maintain a six-foot distance between people, going to establishments that don't require face masks.

Screening upon re-entry from a community outing:

- Residents should be screened for signs and symptoms just as is done with any staff member or essential visitor.
- The facility should perform a risk-based interview with the resident regarding the activities they were engaged in while in the community. Interview questions may include:
 - Please describe what activities you engaged in while outside of the facility.
 - Did you encounter other people in groups during your outing? If so, how many?
 - Were they wearing masks or protective covering?
 - Were you able to remain at least six feet away from others during your visit? For how long were you in close proximity?
 - Did you enter any establishments that did not require the use of face masks?
 - Did you wear a face mask or covering while in the community?
 - To your knowledge, did you encounter another person that was coughing, sneezing, short of breath or fever?
- If the risk-based interview indicates the resident engaged in behavior that poses a significant risk of COVID-19 exposure, the resident may be placed on a 14-day enhanced monitoring period.

- During this period, the resident may be asked to limit the amount of time spent outside of their room.
- Resident should not be isolated in their room and should be permitted to ambulate and engage in exercise. Care should be exercised to ensure the resident:
 - Does not enter other resident's rooms during the monitoring period;
 - Wears a face mask/covering while outside of their room. Socially distances from other residents.
 - The resident must have access to a telephone or other electronic device(s) to remain in contact with family or friends.
 - The resident should be monitored daily for signs and symptoms of Covid-19.
- Facilities must document all monitoring actions and interventions for residents under enhanced monitoring. Documentation must be available for review upon request by the State.