

CONSIDERATIONS CHECKLIST FOR INDOOR VISITATION (10/12/2020)

Under CMS memo [QSO 20-39-NH](#) and MDH's [Minnesota Home Care Provider/Assisted Living Visitation and Activities Guidance Throughout the COVID-19 Pandemic \(10/12/20\)](#), nursing homes and housing with services/assisted living settings may not restrict in-person visitation without a reasonable clinical or safety cause. Providers should consider these factors in determining if there is reasonable cause to restrict visitation for clinical necessity or resident safety:

| FACTOR | CRITERIA | SITE STATUS |
|--|--|-------------|
| Primary Considerations: If the following two criteria are met, a provider is expected to facilitate in-person visits, including indoor visits when outdoor visits are not practicable. | | |
| Case Status of Setting: | Provider has not experienced any new facility onset COVID-19 cases (resident or staff) in last 14 days. | |
| Case Status in Greater Community: | If the 14-day COVID-19 positivity rate in your county is low (0-5%) or medium (5-10%), visitation should occur beyond Compassionate Care situations, including Essential Caregiver visits. If the rate is > 10%, visitation should occur only for Compassionate Care and Essential Caregiver situations. | |
| Other Considerations: If the two criteria above are met, a provider may still restrict indoor visitation to some extent if other risk factors (examples below) create a reasonable clinical or safety cause to do so. These exceptions will be limited. Providers are advised to consult with MDH about specific circumstances. | | |
| Adequate Staffing: | Ensure provider is not in a staffing crisis. Setting must be able to manage visitation while safely providing resident care with current staffing levels. | |
| Access to Adequate Personal Protective Equipment for Staff: | Before allowing modifications of visitation, a facility should be in conventional or contingency capacity for PPE, and not in a crisis. | |
| Local Hospital Capacity: | Take into account the ability of the local hospital to accept transfers from long-term care facilities on general and intensive care units. Work with local county partners and regional health care coalitions to assist with determining this ability. | |
| Screening: | All visitors need to be actively screened prior to entry into the building for symptoms and exposure to a person with confirmed COVID-19. Visitors with symptoms or COVID exposure should not be allowed. | |
| <i>Other</i> | <i>See CMS and MDH guidance for examples of other potentially relevant factors and criteria. Track here.</i> | |
| Note: In all cases, visitors who are unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave. | | |

If you have specific questions please contact Kari Everson (keverson@leadingagemn.org) or Jonathan Lips (jlips@leadingagemn.org).