Beyond being a welcome visitor, many family members are critical partners in the ongoing care and physical and emotional support of people living in nursing homes and assisted living facilities.

In Rhode Island, visitor restrictions have been implemented in nursing homes and assisted living facilities to help prevent and mitigate the spread of COVID-19. Although social distancing and physical separation are still important to keep residents safe, strategies are needed to combat the unintended consequences of prolonged separation and to maintain overall health and well-being of the residents. The COVID-19 crisis has exacerbated the challenges of social isolation and loneliness in the nursing home and assisted living populations.

Feelings of loneliness can have deleterious consequences, including increased risk of depression, suicidal thoughts, aggressive behaviors, and anxiety. Although technology can help decrease loneliness for some residents, those with cognitive impairment, visual and/or hearing difficulties, and mobility limitations may still struggle to maintain connections with their loved ones during these times.

The Centers for Medicare and Medicaid Services (CMS) Nursing Home Visitation dated September 17, 2020, recommends using a person-centered approach when applying this guidance for visitors, including those who have been categorized as essential caregivers.

Recognizing the contribution that visitors can give to support residents, RIDOH is providing guidance for nursing homes and assisted living facilities about designating an essential caregiver category. The goal of essential caregivers is to help residents who are missing care previously provided by a loved one or outside caregivers.

**Essential Caregivers**

- One essential caregiver may be designated for each resident.
- An essential caregiver must be at least 18.
- An essential caregiver may be a family member, friend, personal private caregiver, or volunteer who was providing care before the pandemic and/or who needs to start providing care now because there has been a change in the patient's condition and they now need care.
- Essential caregivers, prior to visitor restrictions, were those family members and loved ones who regularly engaged with the resident prior to the pandemic to provide care, support, or companionship and/or assist with activities requiring one-on-one direction.
- Essential caregivers should provide care and support similar to what they did before the pandemic (e.g., help with meal set up, grooming, companionship, and/or provide care and support that became necessary due to a change in the resident's condition, such as refusing to eat, that could be improved with assistance from a resident support person).
Administration

- Each facility will make the final decision whether it will establish an essential caregiver program to allow visits.

- Essential caregiver designation will be made at the sole discretion of the facility and only upon agreement by the resident (and/or their representative).

- The essential caregiver designation and agreement should outline what support will be provided by the essential caregiver.

- A care plan/service plan must be developed that reflects activities the essential caregiver would perform.

- Essential caregivers should provide care and support similar to what they did before the pandemic.

- Visits must be scheduled in advance or in accordance with a care plan/service plan developed by the facility.

- The facility should direct the essential caregiver to provide care in the resident’s room, or in facility-designated areas within the building. The essential caregiver must limit movement within the facility.

- Each facility and/or RIDOH may suspend visits based on factors, including but not limited to, community positivity rates, essential caregiver’s ability or failure to comply with recommendations and requirements during the visit, outbreak and personal care equipment (PPE) status at facility, resident’s COVID-19 status, etc.

- The essential caregiver must adhere to face masking and hand hygiene requirements at all times.

- Other PPE may be required depending on care provided.

- The essential caregiver must maintain six-foot physical distancing with staff and other residents at all times. Under certain special circumstances (i.e., resident eating, bathing, grooming) the required six-foot distancing may be relaxed for short periods of time as long as face masks are worn by the essential caregiver at all times and, when possible, by the resident.

- If the resident has a roommate, the essential caregiver should not enter the resident’s room while the roommate is there and should not stay in the room for more than 15 minutes without prior approval of the roommate or roommate’s authorized representative.

- The essential caregiver is not allowed to visit a resident during a resident’s quarantine and must not visit when a resident has tested positive for COVID-19 or has COVID-19 symptoms, unless the visit is for end-of-life compassionate care.

- The facility should allow evening and weekend visits that accommodate the essential caregiver, who may be limited by work or childcare barriers.
Screening and Testing

- The essential caregiver will be screened for signs and symptoms of COVID-19 in the same manner as facility staff.

- Testing, either rapid or PCR, at point of entry is encouraged. Testing will be the responsibility of the essential caregiver, and if testing is provided by the facility, essential caregivers will be tested on the same schedule as staff.

- The facility will be responsible for verifying and tracking testing status of essential caregivers.

- Testing will not be required for end-of-life compassionate care visits; however, screening for COVID-19 will still be required.

- The essential caregiver must inform the facility if they develop COVID-19 symptoms within 14 days of the visit.

Training

- Each essential caregiver must complete facility-designated infection prevention and control training, including proper PPE and mask use and proper hand hygiene.

Training for essential caregiver visits must adhere to core principles of COVID-19 infection prevention including, but not limited to:

- Screen all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms.
- Practice proper hand hygiene (use of alcohol-based hand sanitizer is preferred).
- Wear face covering or mask (covering mouth, nose, and chin).
- Practice proper physical distancing of at least six feet between persons.
- Post signage throughout the facility and provide proper visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)
- Clean and disinfect high-touch surfaces in the facility often, and clean and disinfect designated visitation areas after each visit.
- Use appropriate PPE for staff.
- Practice effective cohorting of residents (e.g., separate areas dedicated to COVID-19 care)
- Conduct required resident and staff testing per 42 CFR 483.80(h) (see QSO-20-38-NH)

These core principles are consistent with the Centers for Disease Control and Prevention (CDC) guidance for nursing homes and assisted living facilities and should be adhered to at all times. Additionally, essential caregiver visitation should be person-centered; consider the residents’ physical, mental, and psychosocial well-being; and support their quality of life. The risk of transmission can be further reduced through the use of physical barriers (e.g., clear plexiglass dividers, curtains).

Nursing homes and assisted living facilities should enable visits to be conducted with an adequate degree of privacy. Essential caregivers 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. Following a person-centered approach and adhering to these core principles can help visitation by essential caregivers to occur safely.