

VISITATION POLICY

Visiting hours at the Manor are between 9 AM and 9 PM.

In accordance with *RESIDENTS RIGHTS*

Every resident of a facility shall have the right to unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time between the hours of 9 a.m. and 9 p.m. at a minimum.

VISITORS MUST:

- Enter the facility through the front lobby.
- Sign in and sign out during each visit.
- Abide by (429.28 Florida Statutes) Residents Rights.
- Abide by the Manor's policies, procedures, guidelines, standards, and codes of conduct as amended from time to time.
- Follow infection prevention policies and procedures; education available and provided as needed.
- Treat all employees and residents with respect and courtesy.
- Conduct oneself in a manner that is not disruptive to the normal flow of daily activities and in a manner that does not adversely affect other residents.
- Respect a resident's right to deny or withdraw consent for a visit at any time.

VISITOR RESPONSIBILITIES

There is a shared responsibility for the safe management of visiting between residents and visitors. Visits should occur safely, and visitors should help with infection prevention and control.

- Screenings are no longer required for entrance to the community.
- Do Not Visit if you display signs of: a cold / flu, respiratory infection, shortness of breath, cough, fever, sore throat, chills, headache, diarrhea, muscle pain, fatigue, nausea or vomiting, new loss of taste or smell and congestion/runny nose, or communicable disease.
- Follow infection prevention procedures during visitation such as: washing & sanitizing hands, wearing PPE when required, covering coughs & sneezes and keeping physically distant from other residents.

ADDITIONAL INFORMATION

- Residents, visitors, and employees are not required to be vaccinated or show proof of vaccination or immunization status.
- There is no restriction on the number of visits per day or length of visits during visiting hours.
- We request that residents receive no more than 4 visitors at the same time. If there will be more than 4 visitors at one time, we respectfully request that you notify management ahead of time so that we may ensure appropriate visitation accommodations to maintain infection control precautions.
- Consensual physical contact is allowed between a resident and a visitor.
- Residents may leave the facility with a responsible party with no restrictions on the length of absence. Residents must follow the policy for signing out when leaving and signing in when returning.
- Visitors are not permitted to stay overnight with residents. Accommodation may be made with prior approval from management for safety or end-of-life circumstances.
- The Manor is not responsible for visitors' personal belongings at any time. Visitors are not permitted to leave or store their personal belongings at the Manor or in a Residents room.
- Shelton Manor is not required to provide "facility-provided" communicable disease testing.

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PLANNING YOUR VISIT

- Appointments are not required for visitation, however, planning your visit for certain times of the day can be helpful and improve enjoyment of the visit.
- To ensure that physical distancing can still be maintained during peak times when residents gather, visitors are not received in the dining areas during mealtimes. Accommodation is made with approval from management for special circumstances.
- Although our dining rooms are closed to visitors during dining hours, residents may receive a visitor during mealtime and visitors may bring their own food into the facility and share a meal with a resident in one of our alternate indoor or outdoor spaces with tables and chairs. Visitors are responsible for the proper disposal of food and trash. Staff may assist in locating appropriate spaces and trash receptacles.
- We request that residents receive no more than 4 visitors at a time. If there will be more than 4 visitors at one time, we respectfully request that you notify management ahead of time so that we may ensure appropriate visitation accommodations to maintain infection control precautions.
- If physical distancing between other residents cannot be maintained, the facility may restructure the visitation policy, such as asking visitors to schedule their visit at staggered timeslots throughout the day, and/or limiting the number of visitors in the facility or a resident's room at any time.

SPACES FOR VISITATION

Visitation can be conducted through different means based on a facility's structure and residents' needs, such as in resident rooms, dedicated visitation spaces, and outdoors.

- Outdoor visits generally pose a lower risk of transmission of communicable disease due to increased space and airflow. For outdoor visits, our facility has accessible spaces for visitation, such as courtyards, covered back porches and back yard area with chairs and benches.
- Indoor Visitation for all residents are permitted.
Visits should be conducted in a manner that adheres to the facility policies and does not increase risk to other residents. If a resident shares a room/has a roommate, visits should take place in other visitation spaces, if possible, in order to observe the roommates right to privacy. For indoor visits, our facility has accessible spaces for visitation such as the library, a separate sitting area near the library, activity room, and gathering/living room with multiple options for seating.

Indoor Visitation during an Outbreak of Communicable Disease in the Facility

- While it is safer for visitors not to enter the facility during an outbreak, visitors must still be allowed in the facility. Visitors must be made aware of the potential risk of visiting during an outbreak and adhere to the core principles of infection prevention. Education and training materials are available to all visitors on infection prevention, source control and proper use of PPE. Visitors must follow infection prevention policies and procedures. Visitors must be aware of the risks of the visit, and the visit must be conducted in a manner that doesn't increase the risk of transmission of communicable disease for other residents.

Facilities may contact their local health authorities for guidance or direction on how to structure their visitation to reduce the risk of transmission during an outbreak of communicable disease in the facility.

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Can a resident receive visitors if the resident is on isolation precautions? Yes

- Why? It is important to note that federal regulations explicitly state that residents have the right to make choices about significant aspects of their life in the facility and the right to receive visitors, as long as it doesn't infringe on the rights of other residents. In this case, as long as a visit doesn't increase the risk of transmission of communicable disease for other residents (i.e., by using the guidance for conducting safe visits), the resident still has the right to choose to have a visitor. Therefore, if the resident and the visitor is aware of the risks of the visit, and the visit is conducted in a manner that doesn't increase the risk transmission of communicable disease for other residents, the visit must still be permitted in accordance with the requirements.
- While not recommended, residents who are on transmission-based precautions or quarantine can still receive visitors. In these cases, visits should occur in the resident's room and the resident should wear a well-fitting facemask (if tolerated).
- Before visiting residents, who are on transmission-based precautions or quarantine, visitors will be made aware of the potential risk of visiting and precautions necessary to visit the resident.
- Visitors will be required to supply their own PPE. Facilities are not required to provide PPE for visitors.
- Visitation should be person-centered, consider the residents' physical, mental, and psychosocial well-being, and support their quality of life.
- When visiting a resident who is on isolation precautions, visitor will be required to utilize personal protective equipment (PPE) as determined by facility policies and procedures related to current facility status and current medical condition of the designated resident.
- Gown and gloves must be discarded in the appropriate receptacle when exiting the resident's room and hands must be sanitized.
- Visitors must go directly to the resident's room for visitation and must directly exit the facility upon completion of visit. Visitors are not permitted to walk around the facility hallways or common areas and are not permitted to come into close contact with other residents and staff.
- Visitors who are unable to adhere to the core principles of infection prevention should not be permitted to visit or should be asked to leave.

Designation of person responsible for staff adherence to visitation policies and procedures.

- Administrator, Assistant Administrator, and Health Care Coordinator

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Face Covering Policy

Revised Emergency Rule - 59AER23-2 Chapter 408.824, F.S.-

Agency for Health Care Administration is mandated by Chapter 2023-043, Laws of Florida, to adopt emergency rules to implement section 408.824, Florida Statutes. This emergency rule establishes facial covering requirements for health care practitioners and health care providers, which includes ALFs.

ALFs will be required to have facial covering policies and procedures effective immediately or on August 1, 2023.

Resident Requirements:

No resident may be required to wear facial covering unless the resident's health care practitioner/health care provider requires the resident to wear facial covering only when the resident is in a common area and is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission.

Visitor Requirements:

No visitor may be required to wear facial covering, unless it is required by a healthcare provider, if the visitor is:

- Exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission,
- Is in a sterile area of the health care setting or an area where sterile procedures are being performed,
- Is in an in-patient or clinical room with a patient who is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission, or
- Is visiting a resident, whose healthcare provider has diagnosed the resident with or confirmed a condition affecting the immune system. The condition is known to increase the risk of transmission of an infection from employees without signs and symptoms of infection to a resident. The resident's healthcare practitioner has determined that the use of facial covering is necessary for the resident's safety.

Opt-Out Requirements For Residents:

The facility's facial covering policy and procedures must have a provision for opting out of wearing the facial covering, even when the resident's healthcare provider requires the resident to wear one.

Shelton Manor Policy: Resident may opt-out of wearing a facial covering, even when the resident's healthcare provider requires the resident to wear one if the resident is isolated to a private room and if the resident refrains from entering common areas and refrains from coming into contact with other residents to prevent spread of infectious disease through droplet or airborne transmission.

Opt-Out Requirements For Visitors:

The facility's facial covering policy and procedures must have a provision for visitors to opt-out of wearing facial covering if an alternative method of infection control or infectious disease prevention is available.

Shelton Manor Policy: Visitors may opt-out of facial coverings during visitation unless visitation is with a resident who is on droplet or airborne isolation, or the resident's healthcare practitioner has determined that the use of facial covering is necessary for the resident's safety.

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Shelton Manor does not currently have an alternative method of infection control available for visitors to opt-out of wearing facial covering to prevent the spread of infectious disease through droplet or airborne transmission. Therefore, If a visitor is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission, our policy is for that person not to visit our facility until your health care provider has determined that you are not at risk for spreading infectious disease.

Visitors are required to provide their own PPE, including face masks, gloves, eye protection, and gown, when visiting with a resident who is exhibiting signs or symptoms of or has a diagnosed infectious disease that can be spread through droplet or airborne transmission, or visiting a resident, whose healthcare provider has diagnosed the resident with or confirmed a condition affecting the immune system, the condition is known to increase the risk of transmission of an infection to employees and other residents..

Opt-Out Requirements For Employees:

The facility’s facial covering policy and procedures must have provisions for employees to opt-out of wearing facial covering.

Shelton Manor Policy: Employees may opt- out of wearing a facial covering unless the employee is:

- Conducting sterile procedures,
- Working in a sterile area,
- Working with a resident, whose healthcare provider has diagnosed the resident with or confirmed a condition affecting the immune system. The condition is known to increase the risk of transmission of an infection from employees without signs and symptoms of infection to a resident. The resident’s healthcare practitioner has determined that the use of facial covering is necessary for the resident’s safety,
- Working with a resident on droplet or airborne isolation, or
- Engaging in non-clinical potentially hazardous activities that require facial coverings to prevent physical injury or harm in accordance with industry standards.
- Employees may not opt-out of and must follow COVID-19 policies and procedures for wearing PPE and face masks.

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IN-PERSON VISITATION/ ESSENTIAL CAREGIVER POLICY

- EXHIBIT: A) Florida Law Chapter 2022-34 Committee Substitute for Senate Bill No.988
B) Resident Essential Caregiver Designation Form
C) Essential Caregiver Acceptance Form

Purpose

In-Person Visitation bill has been signed into law, creating Chapter 408.823, which is subject “In-person visitation.” This policy and these and procedures are intended to comply with regulations set forth in Chapter 408.823, Florida Statutes. A resident may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver.

Policy

The following are the procedures to be followed to identify Essential Caregivers for residents and the expectations. These procedures will be administered equally to all residents that request to have an essential caregiver, without regard to race, color, religion, sex (including gender identity and transgender status), age, national origin, disability, or veteran status. Essential caregiver visitors provide emotional support to help a resident deal with a difficult transition or loss, upsetting event, making major medical decisions, needs cueing to eat and drink, stops speaking, or end-of-life. Essential caregiver visitors may be allowed entry into facilities on a limited basis for these specific purposes. The provider must allow at a minimum in-person visitation for at least 2-hours daily under these circumstances. At Shelton Manor, the 2-hour visitation will be between 9:00 a.m. - 9:00 p.m. Shelton Manor may make exceptions to the 2-hour visitation on a case-by-case basis for end-of-life residents.

Procedures:

I. For designation and utilization of essential caregiver visitors.

1. Shelton Manor will provide the Agency for Health Care Administration (AHCA) with a copy of the facility’s essential caregiver visitor’s policy and procedure, with the initial licensure application, renewal application and/or change of ownership application.
2. Shelton Manor’s essential caregiver visitor’s policy and procedure is available on sheltonmanor.com homepage.
3. Shelton Manor will designate Administrator, Assistant Administrator, Health Care Coordinator, and Director of Staffing as key staff to support infection prevention and control training.
4. Shelton Manor will set a limit on the total number of visitors allowed in the facility at any given time based on the ability of staff to safely screen and monitor and the space to accommodate the essential caregiver visitors.
5. All residents and/or POA/Guardian if appropriate will be asked if they want to identify an Essential Caregiver.
6. All new residents will be asked if they would like to identify an Essential Caregiver upon move-in.
7. All residents will be allowed to update as requested the named Essential Caregiver of record within 2 business days of request.
8. Residents are allowed in-person visitation in all the following circumstances, unless the resident, client, or patient objects:
 - End-of-life situations.
 - A resident, client, or patient who was living with family before being admitted to the provider’s care is struggling with the change in environment and lack of in-person family support.
 - The resident, client, or patient is making one or more major medical decisions.
 - A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
 - A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
 - A resident, client, or patient who used to talk and interact with others is seldom speaking.
9. Maintain a visitor log for signing in and out.
10. No more than one essential caregiver visitor may be designated per resident.

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11. The policy need NOT prohibit essential caregiver visitor visits, if the specific resident to be visited is quarantined, tested positive, or showing symptoms of a communicable disease. Visits in these circumstances will likely require a higher level of PPE than standard surgical masks. The general visitation requirement that the facility has no new facility onset cases of a communicable disease is not applicable to visitation by essential caregiver visitors.
12. Shelton Manor is not required to provide “facility-provided” communicable disease testing.
13. Essential caregiver visitors must wear Personal Protective Equipment (PPE) per facility’s Infection Control Policies. The PPE required must be consistent with the most recent CDC guidance for healthcare workers. At Shelton Manor, the essential caregiver visitors shall wear the same PPE that staff wear to provide care or services to the resident.
14. Any changes to Shelton Manor essential caregiver visitor policies must be promptly communicated to affected residents and essential caregiver visitors.

II. To facilitate visits by Essential caregiver visitors upon a request from a resident or friend/family member:

1. The resident (or their representative) will read and sign the policy and procedures. The acknowledgement of the signature represents that the essential caregiver visitor will abide by the policies set forth in this document.
2. The essential caregiver visitor will complete training on Shelton Manor’s infection prevention and control including the use of PPE, use of masks, hand sanitation, and social distancing.
3. The essential caregiver visitor must immediately inform the facility if they develop symptoms consistent with a communicable disease within 24-hours of their last visit at the facility.
4. Essential caregiver visits may take place in the resident’s room, or a designated area determined by Shelton Manor at the time the visitation scheduled is developed and agreed upon.

III. When an essential caregiver visitor is scheduled to visit, the facility will:

1. Ensure that the required consents, and training and policy acknowledgements are in place.
2. Ensure that the caregiver visitor has appropriate PPE if applicable.
3. Require the essential caregiver visitor to sign in and out on the visitor log.
4. Monitor the essential caregiver visitor’s adherence to policies and procedures.
5. If the essential caregiver visitor fails to follow the facility’s infection prevention and control requirements, after attempts to mitigate concerns, shall restrict or revoke visitation.
6. In the event the essential caregiver visitor’s status is revoked due to the individual not following the facility’s policy and procedures, the resident may select a different essential caregiver visitor who will be granted visitation rights upon proper vetting and agreeing to policies and procedures.

Exhibit A: CHAPTER 2022-34

Committee Substitute for Senate Bill No. 988

An act relating to in-person visitation; providing a short title; creating s.408.823, F.S.; providing applicability; requiring certain providers to establish visitation policies and procedures within a specified timeframe; providing requirements for such policies and procedures; authorizing the resident, client, or patient to designate an essential caregiver; establishing requirements related to essential caregivers; requiring in-person visitation in certain circumstances; providing that the policies and procedures may require visitors to agree in writing to follow such policies and procedures; authorizing providers to suspend in-person visitation of specific visitors under certain circumstances; requiring providers to provide their policies and procedures to the Agency for Health Care Administration at specified times; requiring providers to make their policies and procedures available to the agency for review at any time, upon request; requiring providers to make their policies and procedures easily accessible from the homepage of their websites within a specified timeframe; requiring the agency to dedicate a stand-alone page on its website for specified purposes; providing a directive to the Division of Law Revision; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

Section 1. This act may be cited as the “No Patient Left Alone Act.”

Section 2. Section 408.823, Florida Statutes, is created to read: 408.823 In-person visitation.

(1) This section applies to developmental disabilities centers as defined in s. 393.063, hospitals licensed under chapter 395, nursing home facilities licensed under part II of chapter 400, hospice facilities licensed under part IV of chapter 400, intermediate care facilities for the developmentally disabled licensed and certified under part VIII of chapter 400, and assisted living facilities licensed under part I of chapter 429.

(2)(a) No later than 30 days after the effective date of this act, each provider shall establish visitation policies and procedures. The policies and procedures must, at a minimum, include infection control and education policies for visitors; screening, personal protective equipment, and other infection control protocols for visitors; permissible length of visits and numbers of visitors, which must meet or exceed the standards in ss.400.022(1)(b) and 429.28(1)(d), as applicable; and designation of a person responsible for ensuring that staff adheres to the policies and procedures. Safety-related policies and procedures may not be more stringent than those established for the provider’s staff and may not require visitors to submit proof of any vaccination or immunization. The policies and procedures must allow consensual physical contact between a resident, client, or patient and the visitor.

(b) A resident, client, or patient may designate a visitor who is a family member, friend, guardian, or other individual as an essential caregiver. The provider must allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the provider. This section does not require an essential caregiver to provide necessary care to a resident, client, or patient of a provider, and providers may not require an essential caregiver to provide such care.

(c) The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects:

1. End-of-life situations.
2. A resident, client, or patient who was living with family before being admitted to the provider’s care is struggling with the change in environment and lack of in-person family support.
3. The resident, client, or patient is making one or more major medical decisions.
4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
6. A resident, client, or patient who used to talk and interact with others is seldom speaking.
7. For hospitals, childbirth, including labor and delivery.
8. Pediatric patients.

(d) The policies and procedures may require a visitor to agree in writing to follow the provider’s policies and procedures. A provider may suspend in-person visitation of a specific visitor if the visitor violates the provider’s policies and procedures.

(e) The providers shall provide their visitation policies and procedures to the agency when applying for initial licensure, licensure renewal, or change of ownership. The provider must make the visitation policies and procedures available to the agency for review at any time, upon request.

(f) Within 24 hours after establishing the policies and procedures required under this section, providers must make such policies and procedures easily accessible from the homepage of their websites.

(3) The agency shall dedicate a stand-alone page on its website to explain the visitation requirements of this section and provide a link to the agency’s webpage to report complaints.

Section 3. The Division of Law Revision is directed to replace the phrase “30 days after the effective date of this act” wherever it occurs in this act with the date 30 days after this act becomes a law.

Section 4. This act shall take effect upon becoming a law.

Approved by the Governor April 6, 2022.
Filed in Office Secretary of State April 6, 2022.

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Exhibit B:

Essential Caregivers Designation

I, _____ designate _____ as essential caregiver

for _____. In making this designation, I consent and understand that:

- Visits by essential caregivers are subject to Shelton Manor’s policies and procedures and ability to screen visitors and monitor visits.
- All essential caregiver visits may be scheduled, based on current facility conditions and are at will be set for a minimum of 2 hours daily.
- Limited to one visitor at a time and are limited to designated areas only. (Please speak with the Administrator regarding possible exceptions for end-of-life situations)
- Resident can object to a visit at any time, even under the following circumstances:
 1. End-of-life situations.
 2. A resident, client, or patient who was living with family before being admitted to the provider’s care is struggling with the change in environment and lack of in-person family support.
 3. The resident, client, or patient is making one or more major medical decisions.
 4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
 5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
 6. A resident, client, or patient who used to talk and interact with others is seldom speaking.
- Essential caregivers will need to follow the facility’s infection control and education policies and procedures and agree to such. At no time will they be more stringent than those for staff and at no time require to submit proof of vaccination.
- Essential caregivers must sign an acknowledgement of completion of required trainings and adherence to infection prevention and control policies.
- Visits by a specific essential caregiver may be suspended for failure to follow infection prevention and control requirements or other related rules of Shelton Manor. At that time the resident or resident’s representative can designate a new essential caregiver.

Resident/Legal Representative Signature

Resident/Legal Representative Printed Name

Date

Facility Representative Signature

Facility Representative Printed Name

Date

**Exhibit C:
Essential Caregivers Acknowledgement**

I, _____ accept the designation as an essential caregiver

For _____.

I understand that:

- My visits as an essential caregiver are subject to Shelton Manor’s infection control and education policies and procedures. I acknowledge receiving the policies and procedures and agree to abide by them at all times.
- My visits as an essential caregiver may be scheduled and may be no less than two hours per day.
- Essential caregiver visits cannot occur if the resident personally objects/declines your visit no matter the circumstance per 408.823 of F.S.
 - “(c) The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects:
1. End-of-life situations. 2. A resident, client, or patient who was living with family before being admitted to the provider’s care is struggling with the change in environment and lack of in-person family support. 3. The resident, client, or patient is making one or more major medical decisions. 4. A resident, client, or patient is experiencing emotional distress or grieving the loss of a friend or family member who recently died. 5. A resident, client, or patient needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver. 6. A resident, client, or patient who used to talk and interact with others is seldom speaking. “
- When visiting as an essential caregiver, I will utilize personal protective equipment (PPE) as determined by facility policies and procedures related to current facility status and current medical condition of the designated resident.
- I acknowledge having received training on infection prevention and control, use of PPE, use of masks, hand sanitation, and social distancing. I am satisfied with the training provided and do not have any questions regarding any of these topics.
- I acknowledge my obligation and agree to immediately notify Shelton Manor if I experience symptoms of a respiratory infection, cough, fever, shortness of breath or difficulty breathing, congestion or runny nose, sore throat, chills, headache, muscle pain, repeated shaking with chills, new loss of taste or smell, nausea or vomiting, diarrhea, symptoms possibly related to a contagious infection, or if I test positive for COVID-19 within fourteen (14) days of a visit.
- Visits by essential caregivers may be restricted or revoked for failure to follow infection prevention and control procedures of Shelton Manor.

Designated Essential Caregiver Signature Designated Essential Caregiver Printed Name Date

Facility Representative Signature Facility Representative Printed Name Date