LEADINGAGE NEW YORK COMPARISON OF SEPTEMBER 17 CMS AND NYS DOH VISITATION GUIDANCE FOR NURSING HOMES

(Note: This is not a comprehensive summary of the guidance. Please refer to the guidance documents at the links below.¹)

Topic	CMS Guidance (QSO 20-39- NH)	NYS DOH Revised SNF Visitation	Analysis
Effective	Immediately.	Sept. 17, with 1-week grace period for testing for facilities previously open.	Generally consistent
Core Principles/ Conditions for Visitation	Core Principles should be adhered to at all times: Screening all who enter Hand hygiene Face covering or mask Social distancing (at least 6 ft) Instructional signage and visitor education Cleaning and disinfecting high frequency touched surfaces and visitation areas after each visit Appropriate staff use of PPE Cohorting Resident and staff testing in accordance with QSO-20-38	 Must satisfy conditions: Compliance with reporting, Safety plan submission No staffing shortages No new onset of COVID in nursing home in 14 days Access to adequate testing based on plan that ensures all residents have had baseline test, capability to test in outbreak Arrangement with lab to conduct PCR tests and rapidly report Written screening protocols. Also — Adequate staff for supervision and disinfecting All visitors and residents wear mask or face-covering Social distancing Hand sanitizer Fact sheet 	Some NYS conditions may conflict with CMS requirements to facilitate visitation. (See below)
Person- Centeredness	Required	N/A	CMS
Location	Can be conducted through different means, e.g., resident rooms, visitation	Should be limited to outdoors, weather permitting. Under certain	Indoor or Outdoor.

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¹ CMS QSO 20-39: https://www.cms.gov/files/document/qso-20-39-nh.pdf. DOH Health Advisory Sept. 17: https://www.leadingagenv.org/linkservid/46C511FA-F874-69E5-6F5BD31CF7DF84CF/showMeta/0/.

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	NH)	Visitation	
	spaces, outdoors, depending on structure and resident needs. <i>Should</i> provide adequate degree of privacy.	circumstances, indoors. Resident room strictly prohibited except if bedbound, end-of-life or	May be in-room if bedbound, EOL, pediatric.
		pediatric in dedicated unit.	Provide privacy.
Outdoor	Preferred, should be outdoors whenever practicable. Should be facilitated routinely. Limit numbers and size of simultaneous visits. Should create accessible and safe outdoor spaces. County positivity rate does not need to be considered. Does not	Should be limited to outdoors, weather permitting.	Outdoor preferred. CMS requires nursing homes to facilitate outdoor visits "routinely." Seeking clarification from NYS regarding 14-day waiting
	reference 14-day waiting		period for outdoor visits.
Indoor	 should accommodate and support indoor visitation, including visits for reasons beyond compassionate care situations, if: No new onset of COVID cases in last 14 days and not conducting outbreak testing. Visitors adhere to infection control principles and staff monitor. Limit # of visitors/resident and total # at one time. Limit movement in facility. If residents share room, visits should not be in room. If health status of resident prevents leaving room, should attempt to enable in-room visitation while adhering to infection prevention. Should consider county positivity rate. 	Under certain circumstances: In well-ventilated space No more than 10 individuals Wearing mask or face covering Socially distanced Resident room strictly prohibited except if bedbound, end-of-life or pediatric in dedicated unit.	Allowed if no new onset in 14 days and facility is not outbreak testing. Use well-ventilated space(s). No more than 10 individuals in space. Visitors wear masks and socially distance. May be in-room if bedbound, EOL, pediatric.

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Community	Facilities should consider	N/A	Consider county
Spread	COVID county positivity rate		positivity rate in
	to determine how to		determining
	facilitate visitation. Low -		visitation limits,
	Medium (<10%): Visitation		requirements,
	should occur. If>10%: Only		space, etc.
	for compassionate care		
	situations or outdoors. May		Seeking clarification
	monitor other factors to		from NYS regarding
	understand level of risk.		whether 14-day
			waiting period must
			be applied to
			outdoor visitation
			(due to low
Visitor Testing	Not required Encourage	Required. Except facilities	positivity rates). CMS does not
Visitor resting	Not required. Encourage facilities in Medium or High	that had already resumed	require, encourage,
	(>5%) positivity counties to	visitation may allow	or prohibit testing
	test visitors if feasible.	visitation without negative	in low positivity
	Prioritize visitors who visit	test result until September	counties.
	regularly. <i>May</i> encourage	24, 2020. End of life and	counties.
	visitors to be tested on their	compassionate care visits	But, CMS requires
	own prior to coming to	not subject to negative test	facilitation if no
	facility (e.g., 2-3 days) with	result.	case in past 14 days.
	proof of neg test and date.		
	'		Seeking clarification
			from NYS re:
			whether visitor
			testing will continue
			to be required.
Number of	Outdoors: Limit numbers	Number of visitors <i>must</i> not	NYS guidance is
Visitors	and size of simultaneous	exceed 10% of the resident	more specific and
	visits.	census at any time and only	does not conflict
		2 visitors per resident at any	with CMS.
	Indoors: Limit # of	time.	
	visitors/resident and total#		
	at one time.	No more than 10 individuals	
		in an indoor space.	
Child Visitors	N/A	Visitors under age 18 to be	NYS guidance is
		accompanied by adult 18	more specific and
		years or older.	does not conflict
Comment to		End of Pfond	with CMS.
Compassionate	Compassionate care does	End of life and	CMS guidance
Care Visits	not exclusively refer to end-	compassionate care visits	offers broader
	of-life (EOL). Other types	not subject to negative test	approach.

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	include but are not limited to: New resident struggling with change in environment; resident grieving; resident who needs encouragement to eat; resident experiencing emotional distress. May be conducted by anyone, including clergy. Social distance, but may identify way to allow for personal contact, following all appropriate infection prevention guidelines for a limited amount of time.	result. EOL not subject to 14-day waiting period. Not clear whether compassionate care is subject to 14-day waiting period. No definition of compassionate care. NH COVID Guidance speaks to "imminent end-of-life situations."	Seeking NYS clarification regarding more flexible person- centered approach.
When Visitation	Facilities may restrict in-	Facilities must restrict	Seeking clarification
May be Prohibited	person visitation due to county positivity rate, facility's COVID status, resident's COVID status, visitor symptoms, lack of adherence to infection control practices, or other relevant factor. Facilities may not restrict without a reasonable clinical or safety cause. If no COVID cases in last 14	visitation if they don't satisfy all conditions above. Not required. Nursing	regarding whether all NYS conditions are "relevant factors" that would allow restrictions on visitation under CMS guidance.
is Required	days and county positivity rate is low or medium, must facilitate in-person visitation. Failure to facilitate without adequate reason violates 483.10(f)(4).	homes <i>may</i> resume visitation if all prerequisites are met.	have no COVID cases in last 14 days must facilitate visitation unless they have reasonable cause to restrict.
Residents on TBP or Quarantine	Residents on transmission- based precautions should receive in-person visits only in compassionate care situations.	COVID-19 positive residents, residents with COVID-19 signs or symptoms, and residents in a 14-day quarantine or observation period are not eligible for visits.	CMS allows visits in compassionate care situation. Seeking NYS clarification.
LTC	Must provide immediate	Same visitation	Must allow access.
Ombudsman	access to LTC Ombudsman	requirements apply to LTC	Unclear whether
and Disability	and P&A representative . In-		14-day waiting

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Rights P&A Programs	person access by LTC Ombudsman may be limited due to infection control concerns. May not be limited without reasonable cause. If in-person access is not advisable, facility must facilitate alternative mode of communication. Must allow Ombudsman to review resident records. If resident needs in-person assistance to ensure effective communication, must allow entry under ADA and Rehab Act. May impose safety measures.	Ombudsman as apply to other visitors.	period is allowed, when immediate access is required. Unclear whether lack of test result and failure to meet all other NYS conditions of visitation are reasonable causes to restrict.
Health Care Workers and Other Service Providers.	Health care workers who are not employees but provide direct care (such as EMS, hospice, dialysis, lab techs, rad techs, social workers, clergy), must be permitted to come into the facility as long as they are not subject to work exclusion or show signs or symptoms. EMS personnel do not have to be screened. All staff, individuals providing services under arrangement, and volunteers must adhere to infection prevention principles and COVID testing requirements.	Medically-necessary care is allowed. When facility is open for visitation, allows students and trainees enrolled in programs to become licensed, registered, certified, board eligible or otherwise to complete a program for health care professionals. When facility is open for visitation, allows resumption of existing construction projects impacting the lives of nursing home residents that were previously approved with a revised mitigation/ prevention plan including testing, screening, PPE use, distance from residents, etc.	CMS – Must allow direct care workers, including social workers and clergy. Seeking confirmation from NYS that direct care workers/SWs/Clergy are permitted regardless of 14-day period. NYS limits on students and construction projects apply. Seeking NYS clarification re: students, trainees, medical residents/fellows.
Communal Activities and Dining	Communal activities and dining <i>may</i> occur, while adhering to core principles of infection prevention.	Small group activities permissible when open for visitation and space allows for appropriate social	CMS guidance is permissive.

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	Facilities should consider additional limitations based on COVID status of facility. Residents may eat in same room with social distancing. Group activities may be facilitated for residents who are recovered, not in isolation, not with suspected or confirmed COVID, and with social distancing, hand hygiene, and face covering.	distancing. No more than 10 residents and staff will be permitted to engage at any one time. Residents may be assisted to go outdoors. Communal dining remains suspended at this time.	Seeking State permission to expand communal dining and social activities.