



## Essential Caregiver Visitation Policy and Procedure

- Walk in appointments are accepted M-F 9AM-6pm and Sat/Sun 10am-4pm. Please note, no appointments will be accepted after 6pm on M-F or after 4pm on the weekends.
- Once you are checked in, there are NO time constraints on your visit.
- A negative COVID test is NO LONGER REQUIRED to visit.
- BOTH caregivers may visit on the same day and at the same time.
- Visitors must check in at the front and have temperature taken before they are able to enter
- Visitors must check out before leaving
- Visitors may not move throughout the facility
- Essential Caregivers may have physical contact with the residents
- Essential Caregivers must practice social distancing between all other residents and staff members
- Visitors must sign the attestation to remain in compliance with visitation policy and procedure.
- Essential Caregivers must wear an approved face mask at all times- surgical, N95 or KN95 masks are permitted
  - If a resident is in quarantine for COVID Unknown or COVID Positive status, the Essential Caregiver must wear all appropriate PPE, as provided by the Facility.
- Essential Caregivers must self-monitor for signs and symptoms of COVID-19 and not participate if they have signs and symptoms or are positive for COVID-19
- Hand hygiene must be completed before and after every visit
- Essential Visitors must sign an attestation form that they have received and understand proper infection control policies, including donning and doffing PPE.
- Designation of Essential Caregivers may be changed once per month, given 24 hour notice to the facility.
- Visits may occur in the residents room, however if the resident has a roommate, the curtain must be drawn and the visitor must maintain social distancing from all other residents.
- If any of the above policies and procedures are violated during the visit, visitation will be immediately terminated and you will be escorted out of the facility.



I, \_\_\_\_\_ have read and understand the Essential Caregiver Visitation Policy and Procedure. I agree to comply with all written policies and procedures in order to reduce the risk of spread of COVID-19.

Additionally, I have been trained on infection control best practices, donning and doffing of all personal protective equipment. I agree to comply with all usage of appropriate PPE, given COVID-19 status of the individual resident I am visiting.

\_\_\_\_\_  
Essential Caregiver

\_\_\_\_\_  
Date

\_\_\_\_\_  
Facility Representative

\_\_\_\_\_  
Date