



ARGENTUM
EXPANDING SENIOR LIVING

Model Visitation Protocols for Vaccinated Senior Living Communities

ABOUT ARGENTUM

[Argentum](#) is the leading national association exclusively dedicated to supporting companies operating professionally managed, resident-centered senior living communities and the older adults and families they serve. Since 1990, Argentum has advocated for choice, independence, dignity, and quality of life for all older adults.

Argentum member companies operate senior living communities offering assisted living, independent living, continuing care, and memory care services. Along with its state partners, Argentum's membership represents approximately 75 percent of the senior living industry—an industry with a national [economic impact](#) of nearly a quarter of a trillion dollars and responsible for providing over 1.6 million jobs. These numbers will continue to grow as the U.S. population ages.

Argentum's programs and initiatives are driven by its membership. For more information about joining Argentum, please visit [argentum.org/membership](https://www.argentum.org/membership). Learn more at [argentum.org](https://www.argentum.org).

DISCLAIMER

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BACKGROUND

Visitation is essential to the health and wellbeing of senior living residents, offering immeasurable benefits mentally and emotionally.

Over the past 12 months, senior living residents have had to forgo precious time with their spouses (when these live away from the senior living residence), adult children, grandchildren, extended family members, beloved friends, etc., out of concern for contracting or spreading COVID-19. As vaccination implementation continues, hope and opportunity for visits are increasing in senior living communities.

The following protocols have been developed to provide guidance for visitation within **fully vaccinated** senior living communities, as the emphasized term is defined by the respective community. “Full vaccination” should be defined with consideration of CDC guidance as well as taking into account the amount of time needed for the vaccine to achieve efficacy following administration of final dose.

Communities are reminded to follow all visitation requirements or restrictions issued by Authorities Having Jurisdiction (AHJ), including state and local health departments, state licensing agencies, and other jurisdictional authorities.

I. SENIOR LIVING VISITATION CRITERIA FOR COMMUNITY CONSIDERATION

Senior Living community considerations for visitation may include one or more of the following but are not limited to these:

- Whether COVID-19 vaccine clinics have been held for residents and employees
- The mental, social, and physical health conditions residents need in order to thrive
- Any COVID-19 community cases among residents or employees within the past 14-day period
- The desire by residents and families for visitation opportunities
- If a resident shares an apartment: The roommate’s vaccination status and rights

VISITATION CONSIDERATIONS

- Review city, county and/or state positivity rates.
- Conduct surveillance testing for symptomatic and/or non-vaccinated residents and staff, as recommended by AHJ.
- Review the community’s ability to implement COVID-19 infection prevention, including wearing masks, screening visitors, surveillance of employees and residents, and handwashing.
- Review the overall physical plant and the ability to designate adequate visitation areas.

CONSIDERATIONS OF CIRCUMSTANCES THAT MAY IMPEDE VISITATION

Under the following, refer to AHJ:

- One or more cases of COVID-19 in the community, with attention to the location of the cases—clustered, spread, contained, etc., and the potential for ongoing exposure
- Circumstances around any individual positive case
- Any other considerations identified by the community

FORWARD PLANNING CONSIDERATION

A plan should be in place to vaccinate or verify vaccination of new employee hires and new resident admissions.

II. GENERAL PRACTICES FOR VISITATION

- Continue screening practices of employees and residents for signs, symptoms, and exposure to COVID-19.
- Screen visitors entering the community for signs and symptoms or possible exposure to COVID-19 and implement any/all additional screening questions recommended by the CDC.
- Have a contact tracing plan in place at the direction of AHJ.
- Work with AHJ to resolve any concerns related to false-positive test results.
- As a condition of visitation, require visitors to wear some form of respiratory protection (e.g., face covering, mask) that covers the mouth and nose.
- Post appropriate signage to communicate the community’s requirement for all visitors to comply with basic principles of infection control and remind visitors not to visit if they have symptoms of respiratory illness.

- Communicate the current visitation policy to residents and families.
- Provide hand sanitizer at entrances.
- When in-person visits are restricted, use technology to help family members communicate with residents. This can include telephone, video conferences, or mobile devices (e.g., FaceTime).

DESIGNATED VISITATION AREAS

- Visitation will be suspended when directed by AHJ.
- Hand sanitizer should be nearby and available for use in visitation area.
- Visits can take place in designated areas (outdoor and/or indoor) that are cleaned and disinfected between uses.
- Outdoor spaces are preferred.

ESSENTIAL VISITS

Essential visits should not be suspended unless specifically directed by AHJ.

- Essential personnel/visits include:
 - » Necessary medical personnel, such as home health, hospice, and physical therapists
 - » End-of-life and compassionate care visits
 - The community should work with the family/responsible party to develop a visitation plan/schedule that is appropriate for the resident.
 - Compassionate care visits may also include the need for mental, social, and/or physical support by visitors to help residents thrive.
- Individuals making an essential visit should:
 - » Wear respiratory protection while in the community and use all other personal protective equipment (PPE) as needed in accordance with CDC guidelines/recommendations
 - » Limit their visit to the resident's apartment or designated visiting area
 - » Not have contact with other residents
 - » Limit contact with staff members
 - » Not spend time in common areas, and always practice physical distancing
 - » Avoid overcrowding the apartment or designated visiting area

IN-ROOM VISITS (VACCINATED COMMUNITIES)

- Verify in-room visits are not prohibited by any AHJ before allowing.
- Barring jurisdictional prohibition, in-room visits are allowed at the discretion of the community.
- Contact between resident and the visitor is allowed. Encourage face coverings/masks for visitors and residents.
- Vaccinated residents and visitors meeting in a private room/apartment should not be required to wear respiratory protection or be physically distanced.
- Visitors' movement in the community should be limited. Visitors should not walk around common areas of the community but should go directly to the resident's apartment.
- Visitors should be able to adhere to COVID-19 infection prevention and control policies. The community should provide education about these policies before visits.
- In-room visits should be suspended only when directed to do so by AHJ.



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