



**Missouri Department of Health and Senior Services**

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Director



**Michael L. Parson**  
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TO: All Long-Term Care Facilities

FROM: Director Randall Williams, MD, FACOG

DATE: June 15, 2020

RE: COVID-19 Visit Guidance

### **Guidance Considerations for Long Term Care Facility Visits**

The Missouri Department of Health and Senior Services (DHSS) is dedicated to protecting the health and safety of our citizens. This especially includes those Missourians that make their home in residential care facilities, assisted living facilities, intermediate care facilities, skilled nursing facilities, and intermediate care facilities for individuals with intellectual disabilities.

The below guidance is for facilities wanting to allow outdoor visits and visits through an open window for residents who are bedbound or who cannot otherwise leave their room. Any prior guidance issue by the department will be updated to reflect the guidance below. Each facility will make the final decision to allow visits. Facilities may want to consider having a policy in place to determine these activities can be expanded without jeopardizing the health of the residents.

Facilities may want to consider the following when allowing visits:

- The facility has not had any COVID-19 staff or resident cases, or it has been two incubation periods (28 days total) since the last facility acquired COVID-19 positive case. Facility acquired cases include all staff who test positive and residents who test positive while residing in the facility. Facility acquired does not include residents admitted to the facility with a known positive diagnosis or residents who test positive upon admission as part of the facility's admission criteria, as long as these residents have resided in a designated COVID-19 unit since admission.
- Limiting outdoor visits to only residents who are;
  - COVID-19 negative or asymptomatic **and** not suspected to have COVID-19 OR
  - Previously COVID-19 positive but have been released from isolation based on either the symptom based or test based strategy.
- Allowing up to two visitors at one time with social distancing (spaced by at least 6 feet), hand hygiene before and after each visit for both the resident and the visitors, and use of a cloth face covering or facemask for both the resident and the visitors. In the event a resident cannot safely wear a cloth face covering or facemask, a plastic partition or plexiglass barrier may be considered to prevent the spread of virus.
- Completing a screening upon arrival of each visitor and allowing only those visitors that meet the screening criteria to visit. Components of the screening to are determining whether the visitor

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has ever been diagnosed with COVID-19 and if so, the visitor should be currently asymptomatic and at least 10 days must have passed since disease onset. Facilities may want to consider not allowing any visitor with signs and symptoms consistent with COVID-19 or who are unable to demonstrate proper use of infection control techniques to visit.

- Keeping visitor logs noting the names of visitors, who they visited, staff that assisted the visit, dates of visit, and contact information in the event of subsequent positive COVID-19 cases among staff or residents.
- Sanitizing any outdoor areas, including tables, chairs and partitions between each and every visit using an EPA approved disinfectant in accordance with instructions for dilution and contact times.

Facilities may also want to consider only allowing residents who are COVID-19 positive or who are symptomatic to participate in outdoor visits under the following circumstances:

**Symptomatic residents with laboratory-confirmed COVID-19 or residents who are symptomatic with suspected COVID-19 but who have not had a laboratory-confirmed COVID-19 diagnosis meet either:**

- *Symptom-based strategy*
  - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
  - At least 10 days have passed *since symptoms first appeared*
- *Test-based strategy*
  - Resolution of fever without the use of fever-reducing medications **and**
  - Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**
  - Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected  $\geq 24$  hours apart (total of two negative specimens).

**Asymptomatic residents with laboratory-confirmed COVID-19 meet either:**

- *Time-based strategy*
  - 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test. Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.
- *Test-based strategy*
  - Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected  $\geq 24$  hours apart (total of two negative specimens).

The DHSS encourages facilities to view the information at the following link for the most up-to-date information:

<https://health.mo.gov/living/healthcondiseases/communicable/novel-coronavirus/>