Bishop Spencer Place: York/Coventry and Residential Living Center Resident/Staff Testing and Visitor Guidelines Family and friends virtual visits are available at all times.

	Out break testing	Positivity Rates preceding two weeks BSP - defined by CMS RLC — defined by KDHE			CORE PRINCIPLES FOR
	Any staff or resident testing COVID positive				KEEPING OUR RESIDENTS SAFE
		Red >10% AND >70% of residents fully vaccinated**	Yellow 5-10%	Green <5%	 Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and
Resident testing	Weekly until 14 days post-positive and no additional positives	None	None	None	observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor's vaccination status) • Hand hygiene (use of alcoholbased hand rub is preferred) • Face covering or mask (covering mouth and nose) • Social distancing at least six feet between persons • Instructional signage throughout the facility and proper visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene) • Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit • Appropriate staff use of Personal Protective Equipment (PPE) • Effective cohorting of residents (e.g., separate areas dedicated COVID-19 care)
Staff testing	Weekly until 14 days post-positive and no additional positives	Twice a week	Once a week	Monthly	
Communal activities	Contact charge nurse	6 feet distanceOutdoor activities	 6 feet distance indoor/outdoor activities Scheduled in-house beautician 	 6 feet distance indoor/outdoor activities Scheduled in-house beautician 	
Communal dining	Contact charge nurse	6 feet distance	6 feet distance	6 feet distance	
Visitors	Contact charge nurse After 1st round of outbreak testing - positives: Only End of Life/ Compassionate Care After 1st round of outbreak testing - no positives: visitation may resume for other wings/units within community	Indoor/Outdoor visits: Visitor acknowledges maintaining 6' social distance if resident not fully vaccinated Must mask at all times Must follow all screening criteria and core principles* 2 visitors Two-hour visit/day **<70% Resident Vaccination Indoor visits: Only End of Life/ Compassionate Care	Indoor/outdoor visits: Visitor acknowledges maintaining 6' social distance if resident not fully vaccinated Must mask at all times Must follow all screening criteria and core principles* 2 visitors Two-hour visit/day	 Indoor/outdoor visits: Visitor acknowledges maintaining 6' social distance if resident not fully vaccinated Must mask at all times Must follow all screening criteria and core principles* 2 visitors Two-hour visit/day 	

Scheduled case-by- case basis and End of Life/ Compassionate	For hours and schedule appt, call M-F: 9 am. – 5 p.m. BSP – 816-931-4277	For hours and schedule appt, call M-F: 9 am. – 5 p.m. BSP – 816-931-4277	For hours and schedule appt, call M-F: 9 am. – 5 p.m. • BSP – 816-931-4277	 Resident and staff testing conducted as required at 42 CFR 483.80(h) (see QSO-20-38-NH) Encourage visitors to be tested on their own prior to coming to
No essential caregivers	 An Essential Caregiver is or their guardian or legal assistance with activitie care or quality of life of Training required. Contact social worker as One additional Essential member. 	RLC/BSP (within 48-72 hours). Encourage visitors to become vaccinated when they have the opportunity		
 1 outside clergy No visitors under 1 Residents who have be 				
	case basis and End of Life/ Compassionate Care No essential caregivers • 2 visitors, one 2-ho • 1 outside clergy • No visitors under 1 Residents who have be	case basis and End of Life/ Compassionate Care No essential caregivers No essential caregivers Only one Essential Caregiver and the properties of the pro	case basis and End of Life/ Compassionate Care • BSP – 816-931-4277 • RLC – 785-204-4031 • An Essential Caregiver is an individual who has been gone their guardian or legal representative, to provide has assistance with activities of daily living to help maintal care or quality of life of a facility resident. • Training required. • Contact social worker and/or charge nurse for additional Essential Caregiver may be designated member. • Only one Essential Caregiver should be present at any 1 outside clergy • No visitors under 14 Residents who have been fully vaccinated* and with no known COVID-19 exposes	appt, call M-F: 9 am. − 5 p.m. Compassionate Care • BSP − 816-931-4277 • RLC − 785-204-4031 • An Essential Caregiver is an individual who has been given consent by the resident, or their guardian or legal representative, to provide health care services or assistance with activities of daily living to help maintain or improve the quality of care or quality of life of a facility resident. • Training required. • Contact social worker and/or charge nurse for additional information • One additional Essential Caregiver may be designated if that individual is a clergy member. • Only one Essential Caregiver should be present at any given time. • 2 visitors, one 2-hour visit per day • 1 outside clergy • No visitors under 14 Residents who have been fully vaccinated* and with no known COVID-19 exposure within 14 days will not

Out door visitation

While taking a person-centered approach and adhering to the core principles of COVID-19 infection prevention, outdoor visitation is preferred even when the resident and visitor are fully vaccinated* against COVID-19. Outdoor visits generally pose a lower risk of transmission due to increased space and airflow. Therefore, all visits will be held outdoors whenever practicable when agreed to and tolerated by the resident. The nursing home will take into account weather considerations (e.g. inclement weather, excessively hot or cold temperatures, poor air quality), and individual resident's health status (e.g., medical condition(s), COVID-19 status), and/or an outbreak status, and/or resident preference when scheduling outdoor visitation with the resident's representative. The nursing home will identify and will provide accessible and safe outdoor spaces for visitation (e.g., courtyards, patios) with auditory privacy.

*Fully vaccinated refers to a person who is ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine, per the CDC's Public Health Recommendations for Vaccinated Persons.

Indoor visitation

The nursing home will allow indoor visits at all times and for all residents (regardless of vaccination status), including visits for reasons beyond compassionate care situations, based on the following guidelines (except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission (note: compassionate care visits should be permitted at all times)). These scenarios include limiting indoor visitation for:

- Unvaccinated residents
 If the nursing home's COVID-19 county positivity rate is >10% and <70% of residents in the facility are fully vaccinated
- Residents with confirmed COVID-19 infection
 Whether vaccinated or unvaccinated until they have met the criteria to discontinue Transmission-Based precautions; or
- Residents in quarantine, whether vaccinated or unvaccinated, until the have met the criteria for release from quarantine.

The nursing home will accommodate and support indoor visitation including visits for reasons beyond compassionate care situations, based on the following guidelines:

- For indoor visits, create indoor spaces for residents in a room easily accessed without visitors traversing through the building and is not accessible by other residents.
- Situations where there is a roommate and the health status of the resident prevents leaving the room. The nursing home will attempt to enable in-room visitation while adhering to the core principles of COVID-19 infection prevention.
- The nursing home will limit movement in the facility. For example, visitors will not walk around different halls of the facility. Rather, they will go directly to the resident's room or designated visitation area.
- The visit is for residents who shared a room should not be conducted in the resident room, if possible. For situations where there is a roommate and the health status of the resident prevents leaving the room, the nursing home will attempt to enable in-room visitation while adhering to the core principles

Indoor visitation during an outbreak

An outbreak exists when a new nursing home onset of COVID-19 occurs (i.e., a new COVID-19 case among residents or staff). When a new case of COVID-19 among residents or staff is identified, the nursing home will immediately begin outbreak testing and suspend all visitation (except that required under federal disability rights law), until at least one round of facility-wide testing is completed. Visitation can resume based on the following criteria:

- If the first round of outbreak testing reveals no additional COVID-19 cases in other areas (e.g., units) of the facility, then visitation can resume for residents in areas/units with no COVID-19 cases. However, the nursing home will suspend visitation on the affected unit until the facility meets the criteria to discontinue outbreak testing. For example, if the first round of outbreak testing reveals two more COVID-19 cases in the same unit as the original case, but not in other units, visitation can resume for residents in areas/units with no COVID-19 cases.
- If the first round of outbreak testing reveals one or more additional COVID-19 cases in other areas/units of the facility (e.g., new cases in two or more units), then the nursing home will suspend visitation for all residents (vaccinated and unvaccinated), until the facility meets the criteria to discontinue outbreak testing.

While the above scenarios describe how visitation can continue after one round of outbreak testing, the nursing home will continue all necessary rounds of outbreak testing. Visitation can occur during an outbreak, but does not change any expectations for testing and adherence to infection prevention and control practices. If subsequent rounds of outbreak testing identify one or more additional COVID-19 cases in other areas/units of the facility, then nursing home will suspend visitation for all residents (vaccinated and unvaccinated), until the nursing home meets the criteria to discontinue outbreak testing.

In all cases, visitors should be notified about the potential for COVID-19 exposure in the facility (e.g., appropriate signage regarding current outbreaks), and adhere to the core principles of COVID-19 infection prevention, including effective hand hygiene and use of face-coverings.