



# Department of Health

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**DATE:** March 25, 2021  
**TO:** Adult Care Facility Operators and Administrators  
**FROM:** New York State Department of Health

## **Health Advisory: Revised Adult Care Facility Visitation**

**Please distribute immediately to:  
Operators, Administrators, Case Managers**

### **Summary**

While New York State guidance has focused on protecting adult care facility (ACF) residents from COVID-19, we recognize that physical separation from family and other loved ones may take a physical and emotional toll on residents and their loved ones. Residents may feel socially isolated, leading to increased risk for depression, anxiety, and other expressions of distress. Residents living with cognitive impairment or other disabilities may find visitor restrictions and other ongoing changes related to COVID-19 confusing or upsetting; and the Department of Health (“Department”) understands that ACF residents value the physical, emotional, and spiritual support they receive through visitation from family and friends. In alignment with the Centers for Medicare and Medicaid Services, the Department is revising the guidance regarding visitation in ACFs during the COVID-19 Public Health Emergency.

The information contained in this guidance supersedes and replaces previously issued guidance and recommendations regarding visitation. Please be advised that the Department continues to emphasize the importance of maintaining infection prevention practices given the continued risk of COVID-19 transmission.

### **Purpose**

This guidance is based upon the guidance issued by the [Centers for Medicare and Medicaid Services guidance for nursing homes](#). The information contained in this directive supersedes and replaces previously issued guidance and recommendations regarding general adult care facility (ACF) visitation and activities, including the guidance recently issued on March 2, 2021 and the Department’s November 24, 2020 Holiday Guidance; each facility is therefore required to have appropriate policies and procedures in place that address infection control and prevention when residents leave the facility for outings and that are respectful of resident rights.

Please be advised that nothing in this directive absolves the ACF of responsibility to perform regulatorily required supervision services and ensure that resident and family communication is ongoing and supported by virtual visits, whenever possible, nor does it change the guidance previously issued relative to visitation for medically necessary or end-of-life services.

Since the release of prior iterations of visitation directives, including that issued as recently as March 2, 2021, new COVID-19 vaccines have received Emergency Use Authorization from the Food and Drug Administration, and millions of vaccinations have since been administered to adult care facility (ACF) residents and staff across the country. These vaccines have shown pronounced efficacy in helping to prevent symptomatic spread of SARS-CoV-2 infection (i.e., COVID-19). ACFs in New York State should be committed to ensuring all eligible and consenting residents and staff have the opportunity to be vaccinated.

Based on the needs of residents and consistent with adult care facility staffing and the physical plant, visitation can be conducted through a variety of means, such as in resident rooms, dedicated visitation spaces and outdoors (weather permitting). Regardless of how visits are conducted, there are certain core principles and best practices that reduce the risk of COVID-19 transmission and as such must be followed.

### **Core Principles**

Regardless of how visits are conducted, there are certain core principles and best practices that reduce the risk of COVID-19 transmission including, but not limited to:

- Screening of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions about and 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 alcohol-based hand rub is preferred).
- The use of face coverings or masks (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 and designated visitation areas in the facility often, and after each visit.
- Appropriate staff use of Personal Protective Equipment (PPE).
- Effective cohorting of residents (e.g., separate areas dedicated to COVID-19 care).
- Residents in isolation or observation, and residents with suspected or confirmed COVID-19 status, irrespective of vaccination status, should not have visitors outside of compassionate care or end-of-life situations.

These core principles are consistent with federal guidelines and must be adhered to at all times. Additionally, visitation should be person-centered and consider the residents' physical, mental, and psychosocial well-being, and support their individual quality of life.

### **Limitations**

Visitors who are unable to adhere to the core principles of COVID-19 infection prevention should not be permitted to visit or should be asked to leave. The adult care facility must document this occurrence in accordance with Title 18 of New York Codes, Rules and Regulations, §485.14(h).

Facilities should consider how the number of visitors per resident at one time and the total number of visitors in the facility at one time (based on the size of the building and physical space) may

affect the ability to maintain the core principles of infection prevention. If necessary, facilities should consider scheduling visits for a specified length of time to help ensure all residents are able to receive visitors or capping the number of visitors accepted at any one time.

Principles of cohorting and physical distance should be central components of plans to restart communal activities for residents who have fully recovered from COVID-19 and for those not in isolation or observation, or with suspected or confirmed COVID-19 status. The adult care facility should consider creating small cohorts (10 or less) of residents to be tablemates or “activities buddies.”

As of April 1, 2021, out-of-town visitors traveling from other U.S. states or territories are no longer required to test or quarantine upon arrival in New York State. These travelers are still encouraged to test before entering adult care facilities for visits. Please understand that [international travelers](#) are required to follow guidelines set by the Centers for Disease Control and Prevention (CDC) and must quarantine upon arrival in New York State.

Questions related to the guidance, which is effective immediately, should be submitted in writing to [covidadultcareinfo@health.ny.gov](mailto:covidadultcareinfo@health.ny.gov).