

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER Lt. Governor

PO BOX 360 TRENTON, N.J. 08625-0360

www.nj.gov/health

March 16, 2020

JUDITH M. PERSICHILLI, RN, BSN, MA Commissioner

TO:

Administrators

Mental Health Programs licensed pursuant to N.J.A.C. 10:37A

Substance Use Disorder Programs licensed pursuant to N.J.A.C. 10:161A

FROM:

Marcela Ospina Maziarz, M

**Deputy Commissioner** 

**Health Systems** 

SUBJECT:

Mandatory Guidelines for Visitors and Facility Staff

Effective Tuesday, March 17, 2020 at 5 p.m. and until lifted by the Department of Health (Department), the following screening and restriction requirements for all visitors to your facility shall be implemented by your facility.

Effective Tuesday, March 17, 2020 at 5 p.m. and until further notice by the Department, the following screening and restriction requirements for facility staff shall be implemented by your facility.

## **Mandatory Guidelines for Visitors and Facility Staff**

### **Definitions**

**Restricting** means the individual should not be allowed in the facility at all, until the Department lifts the requirements of this memorandum.

## 1. Limiting Resident Visitation

The following rules shall apply to resident visitors:

- a. The facility shall actively screen and restrict visitation for those who meet one or more of the following criteria:
  - Exhibit signs or symptoms of a respiratory infection, such as a fever (evidenced by a temperature check of the visitor taken by the facility),

- cough, shortness of breath, or sore throat;
- ii. In the last 14 days, has had contact with someone with a confirmed diagnosis of COVID-19, or under investigation for COVID-19, or are ill with respiratory illness;
- iii. In the last 14 days, has traveled internationally to a country with sustained community transmission. For updated information on affected countries visit: <a href="https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html">https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html</a>; or
- iv. Resides in or travels to a community where community-based spread of COVID-19 is occurring.
- b. If, after undergoing screening, the visitor is permitted to enter the facility, the facility shall:
  - i. Ask the visitor if he or she had any recent trips (within the last 14 days) on cruise ships or participated in other settings where crowds are confined to a common location. If the answer is yes, then it is recommended that the facility offer the visitor a facemask to use while onsite.
  - ii. Provide instruction, before the visitor enters the facility and resident's room, on hand hygiene, the location of handwashing stations, limiting surfaces touched, and use of PPE according to current facility policy while in the resident's room;
  - iii. Limit the visitor's movement within the facility to the resident's room (e.g., reduce walking the halls, avoid going to dining room, etc.); and
  - iv. Advise the visitor to limit physical contact with anyone other than the resident while in the facility. For example, practice social distancing with no handshaking or hugging and remaining six feet apart.

#### 2. Alternatives to Resident Visits

In lieu of visits, the Department suggests that facilities consider:

- a. Offering alternative means of communication for people who would otherwise visit, such as virtual communications (phone, video-communication, etc.).
- b. Creating/increasing listserv communication to update families, such as advising to not visit.
- c. Assigning staff as primary contact to families for inbound calls and conduct regular outbound calls to keep families up to date.
- d. Offering a phone line with a voice recording updated at set times (e.g., daily) with the facility's general operating status, such as when it is safe to resume visits.

#### 3. Vendors

- a. For vendors and transportation providers (e.g., when taking residents to offsite appointments, etc.), the facility shall actively screen and restrict those individuals from entering the facility if they meet one or more of the following criteria:
  - Exhibit signs or symptoms of a respiratory infection, such as a fever (evidenced by a temperature check of the individual taken by the facility), cough, shortness of breath, or sore throat;
  - ii. In the last 14 days, has had contact with someone with a confirmed diagnosis of COVID- 19, or under investigation for COVID-19, or are ill with respiratory illness;
  - iii. In the last 14 days, has traveled internationally to a country with sustained community transmission. For updated information on affected countries visit: <a href="https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html">https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html</a>; or
- b. If, after undergoing screening, the vendor or transportation provider is permitted to enter the facility, the facility shall:
  - i. Ask the vendor or transportation provider if he or she had any recent trips (within the last 14 days) on cruise ships or participated in other settings where crowds are confined to a common location. If the answer is yes, then it is recommended that the facility offer the individual a facemask to use while onsite.
  - ii. Provide instruction, before the individual enters the facility, on hand hygiene, the location of handwashing stations, limiting surfaces touched, and use of PPE according to current facility policy;
  - iii. Limit the individual's movement within the facility to those areas necessary to complete the vendor's or transportation provider's task; and
  - iv. Advise the individual to limit physical contact with anyone in the facility. For example, practice social distancing with no handshaking or hugging and remaining six feet apart.
- c. For supply vendors, it is recommended that they drop off supplies at a dedicated location, such as a loading dock, instead of entering the facility. Medication and/or other supplies that must be received by an employee should follow customary drop off procedures.

# 4. Monitoring and Restricting Health Care Facility Staff and Medical Professional Visitors

a. The facility shall actively screen and restrict health care facility staff and medical professional visitors (e.g., physicians, APN's, nurses, counselors, LSCW, LAC, LPC, LCADC, CADC, LSW, and LMFT) who meet the following criteria:

- Exhibit signs or symptoms of a respiratory infection, such as fever (evidenced by a temperature check of the staff member or medical professional taken by the facility), cough, shortness of breath, or sore throat;
- ii. In the last 14 days, has had contact with someone with a confirmed diagnosis of COVID- 19, or under investigation for COVID-19, or are ill with respiratory illness;
- iii. In the last 14 days, has traveled internationally to a country with sustained community transmission. For updated information on affected countries visit: <a href="https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html">https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html</a>; or
- iv. Resides in or travels to a community where community-based spread of COVID-19 is occurring.
- b. If, after undergoing screening, the staff member or visiting medical professional is permitted to enter the facility, the facility shall:
  - Ask the individual if he or she had any recent trips (within the last 14 days) on cruise ships or participated in other settings where crowds are confined to a common location. If the answer is yes, then it is recommended that the facility offer the individual a facemask to use while onsite; and
  - ii. Provide instruction, before the individual enters the facility, on hand hygiene, the location of handwashing stations, limiting surfaces touched, and use of PPE according to current facility policy.
- c. Health care facility staff who have signs and symptoms of a respiratory infection should not report to work.
- d. Any staff that develop signs and symptoms of a respiratory infection while onthe-job, are required to:
  - i. Immediately stop work, put on a facemask, and self-isolate at home;Inform the facility's infection preventionist, and
  - ii. include information on individuals, equipment, and locations the person came in contact with; and
  - iii. Contact their health care provider.
- e. Refer to the CDC guidance for exposures that might warrant restricting asymptomatic healthcare personnel from reporting to work (<a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html</a>)

Facilities should contact their local health depart ent for questions, and frequently review the CDC website dedicated to COVID-19 for health care professionals (<a href="https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html">https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html</a>) and the New Jersey Department of Health Website for COVID-19: <a href="https://www.nj.gov/health/cd/topics/ncov.shtml">https://www.nj.gov/health/cd/topics/ncov.shtml</a>.

If you have any questions concerning this matter, please contact Ms. Jean DeVitto, Executive Director, Certificate of Need and Healthcare Facility Licensure Program at jean.devitto@doh.nj.gov.