



Assisted Living Facility

Visitation & Infection Prevention Consent Form

You & I Living Assisted Living Facility requires for all visitors (family members/representatives, non-essential health care personnel), to have this form read and signed by each individual visiting the facility, that they understand the requirements for indoor and/or outdoor visitation and infection prevention and control policy must comply with the following listed below to ensure residents, staffs, and facility safety.

You & I Living Assisted Living Facility will allow in-person visitation in all the following circumstances, unless the resident objects:

End-of-Life Situation, - Resident who was living with family before being admitted to this facility is struggling with the change of environment and lack of in-person family support, - The resident is making one or more major medical decisions, - Resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died, - Resident needs cueing or encouragement to eat or drink which was previously provided by family members caregiver, - Resident who used to talk and interact with others is experiencing emotional stress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past), - Resident who has behavior disturbances (particularly when associated with cognitive impairment) that have not improved with non-pharmaceutical interventions, and the presence of a family member or friend help to ameliorate the behaviors, - Resident with acute change of condition (such as Non-COVID-related illness or fall) for which presence of a family member or friend provides reassurance, - In addition to family members, compassionate care visits, visit can be conducted by any individual that can meet the resident's needs such as clergy or lay persons offering religious and spiritual support.

You & I Living Assisted Living Facility will provide immediate access to any residents by:

- Any Representative of the State.
- Any Representative of the office of the State Long Term Care Ombudsman.
- The resident's individual physician.
- Access to a resident by immediate family and other relatives, subject to the resident's right to deny or withdraw consent at any time.
- Reasonable access to a resident by any entity or individual that provides Health, Social, Legal, or other services to a resident, resident's right to deny or withdraw consent at any time.

1. Must allow the designated staff to do the screening before enter the facility for signs and symptoms of any kind of infectious disease (temperature checks, questions or observations about signs or symptoms), and will prevent visitation by a visitor, including an essential caregiver visitor if he or she has signs and symptoms, or an active of any kind of disease transmission to prevent possible introduction of any kind of Infectious Diseases.
2. Visitors who are unable or unwilling to adhere to a facility's protocol for infection prevention should not permitted to visit or should be asked to leave.
3. Will assure to provide instruction before visitors enter the resident's room on the following: the proper use of on hand, hygiene, limit surface touched, and the use of PPE according to the facility's policy and the CDC guidelines.
4. The visit may occur in the location of the resident's choice of outdoors, or in another area in the facility that limit's the visitors movement through the facility and interaction with other residents and staff, Visitations allowed in the designated areas. Will ensure that all visitors enjoy full and equal visitation privileges consistent with resident preferences.
5. Will allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to No more than 3 or 4 visitors at the same time, depends in the visitation designated areas, and must follow the procedure as described above.
6. Visitors must call first to schedule a visitation appointment with the administration's office, to prevent crowd from outside visitors, due to the residents, staffs, and facility's safety. The facility will not restrict, limit, or otherwise deny visitation privileges based on Race, Color, National Origin, Religion, Sex, Gender Identity, or Disability.
7. Designate staff will monitor visitor adherence to appropriate use of masks, hand sanitation, and if required the use of PPE, AND social distancing.

I, _____ do understand that by signing this form I willingly know that I am responsible to follow the procedures listed above and to comply with the facility infection control prevention policy and procedure as they discussed with me.

Any question regarding this form, please feel free and speak to the Administrator, and/or Manager, or the Designated staff at **You & I Living Assisted Living Facility**

Visitor's Name

Visitor's Signature

Date



Assisted Living Facility

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3. Will assure to provide instruction before visitors enter the resident's room on the following: the proper use of on hand, hygiene, limit surface touched, and the use of PPE according to the facility's policy and the CDC guidelines.
4. The visit may occur in the location of the resident's choice of outdoors, or in another area in the facility that limit's the visitors movement through the facility and interaction with other residents and staff, Visitations allowed in the designated areas. Will ensure that all visitors enjoy full and equal visitation privileges consistent with resident preferences.
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6. Visitors must call first to schedule a visitation appointment with the administration's office, to prevent crowd from outside visitors, due to the residents, staffs, and facility's safety. The facility will not restrict, limit, or otherwise deny visitation privileges based on Race, Color, National Origin, Religion, Sex, Gender Identity, or Disability.
7. Designate staff will monitor visitor adherence to appropriate use of masks, hand sanitation, and if required the use of PPE, AND social distancing.

I, _____ do understand that by signing this form I willingly know that I am responsible to follow the procedures listed above and to comply with the facility infection control prevention policy and procedure as they discussed with me.

Any question regarding this form, please feel free and speak to the Administrator, and/or Manager, or the Designated staff at **You & I Living Assisted Living Facility**

Visitor's Name

Visitor's Signature

Date



Visitation Rights

Policy:

The purpose of the visitation rights policy and procedure is to develop guidelines for residents identifying visitation rights of not only family, but friends, health care representative, and representatives of the state as noted in the regulation.

To assure that the administrator of **You & I Living Assisted Living Facility** has followed all the required steps for development and implementation of a comprehensive visitation rights policy and procedure in accordance to the new requirements of participation,

The visitation rights, that will allow the resident to hug, and to be with their loved one at all stages of life when it matters most to say goodbye, allow for consensual physical contact between the resident and their loved ones, allow the resident to designate a visitor who is family member friend, guardian, or other individual as an essential caregiver.

You & I Living Assisted Living Facility will allow visitation c visitors and non-essential health care personnel through different mean based on different structure and resident's need, such as resident room, dedicated visitation spaces, outdoors, and for circumstances beyond compassionate care situation. The visitation will be person-centered, consider the resident's physical, mental, and psychosocial well-being, and support their quality of life.

Visitation Rights Policy & Procedures Regulations

You & I Living Assisted Living Facility will provide immediate access to any resident by:

- Any representative of the state.
- Any representative of the office of the state long term care ombudsman.
- The resident's individual physician.
- The facility will provide immediate access to a resident by immediate family and other relatives of the resident, subject to the resident's right to deny or withdraw consent at any time.
- The facility will provide reasonable access to a resident by any entity or individual that provides health, social, legal, or other services to the resident, subject to resident's right to deny or withdraw consent at any time.

You & I Living Assisted Living Facility will assure to meet the following requirements:

- Inform each resident (or resident representative, when appropriate) of his or her visitation rights and related facility policy and procedures, including any safety restriction or limitation on such rights, consistent with the requirements of this subpart, the reasons for the restriction or limitation, and to whom the restrictions apply, when he or she is informed of his or her other rights under this section.
- **You & I Living Assisted Living Facility** will not restrict, limit, or otherwise deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
- **You & I Living Assisted Living Facility** will ensure that all visitors enjoy full and equal visitation privileges consistent with resident references.
- Resident' right to deny or withdraw consent, means the resident is responsible to provide the facility with a form containing the resident name, signature, and date. The form must include the name of people the resident refuse to see.
- **You & I Living Assisted Living Facility** will assure to comply with the infection control prevention.
- **You & I Living Assisted Living Facility** will assure to provide an infection control education to residents, staff, and visitors by using posters on the wall and handout materials, and review our infection control policy and procedure under their request.
- **You & I Living Assisted Living Facility** will communicate the visitation policy through multiple channels. Examples include calls, letters, posts, and e-mails.

Procedures:

The Administrator will allow in-person visitation in all the following circumstances, unless the resident objects:

- End-of-life situations.
- Resident who was living with family before being admitted to this facility is struggling with the change of environment and lack of in-person family support.
- The resident is making one or more major medical decisions.
- Resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
- Resident needs cueing or encouragement to eat or drink which was previously provided by family member or caregiver.
- Resident who used to talk and interact with others is experiencing emotional stress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

- Resident who has behavior disturbances (particularly when associated with cognitive impairment) that have not improved with non-pharmaceutical interventions, and the presence of a family member or friend helps to ameliorate the behaviors.
- Resident with acute change in condition (such as non-COVID related illness or fall) for which presence of a family member or friend provides reassurance. Allowing a visit in these situations is consistent with the intent "compassionate care situations." also, in addition to family members, compassionate care visits can be conducted by any individual that can meet the resident's needs, such as clergy or lay persons offering religious and spiritual support.
- The Administrator will allow in-person visitation by the essential caregiver for at least 2 hours daily in addition to any other visitation authorized by the administrator.

You & I Living Assisted Living Facility will ensure infection control protocols are followed.

You & I Living Assisted Living Facility may cancel the visit if the visitors fails to comply with the requirements. The core principles of infection prevention will be adhered to and as follow:

- Screening of all who enter the facility for signs and symptoms of any kind of disease transmission (temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms.
- Hand hygiene will be conducted with the preferred use of alcohol-based hand rub.
- Instructional signage throughout the facility and proper visitor education on infection control precautions, and other applicable facility practices will be conducted.
- Cleaning and disinfection of highly touched surfaces in the facility and in designated visitation areas after each visit will be performed.
- Staff will adhere to the appropriate use of personal protective equipment (PPE).
- Visitors who are unable or unwilling to adhere to **You & I Living Assisted Living Facility** facility protocol for infection prevention should not permitted to visit or should be asked to leave.
- The facility will educate and inform all visitors of the facility's infection control policies and procedures related to visitation.
- The visit may occur in the location of a resident's choice of designated visitation area which may include the resident's bedroom, outdoors, or in another area in the facility that limit's the visitor movement through the facility and interaction with other residents and staff.
- **You & I Living Assisted Living Facility** will prevent visitation by a visitor, including an essential caregiver visitor if he or she has signs and symptoms, or an active of any kind of disease transmission.

Outdoor Visitation:

Outdoor visits pose a lower risk of disease transmission due to increase space and airflow, and outdoor visitation is therefore preferred whenever practicable.

The administrator of facility will assure to have accessible and safe

Outdoor spaces for visitation, such as patios and process to limit the number and size of visits occurring simultaneously to support safe infection prevention actions consider reasonable limits on the number

Of individuals visiting any one resident at the same time, such as no more than 3 or 4 visitors at the same time.

Indoor Visitation:

The Administrator will assure to provide instruction, before visitors enter the resident's room, on hand hygiene, limiting surface touched, and the use of PPE according to **You & I Living Assisted Living Facility** policy. The administrator will ensure to instruct the visitors to only visit the resident's room and ensure they limit time spent in any other locations in the facility.

Visits for residents who share a room should ideally not be conducted in the resident's room but should instead take place in a designated visitation area.

1. If visitation is occurring in a designated area in the facility, the administrator will assure scheduling visits so that multiple visits are not occurring simultaneously, to the extent possible. If simultaneously visits do occur, everyone in the designated area should wear source control and physical distancing should be maintained between different visitation groups regardless of vaccination status.
2. The Administrator will ensure to take steps to improve ventilation in visitation areas, including increasing introduction of outdoor air and improving air filtration.

**You & I Living Assisted Living Facility
Honors the Resident's Bill of Rights
Visitation Hours are Between 9:00AM – 9:00PM**