

# LINX Living Assisted Living Home

## Visitation Policy

### Purpose

The policy of this facility ensures that the resident has appropriate access to visitors of his/her choosing at the time of his/her choosing, subject to the resident's right to deny visitation when applicable, and in a manner that does not impose on the rights of another resident. The resident has the right to interact with members of the community and participate in community activities both inside and outside of the facility.

These policies are also intended promote resident visitation, while maintaining prudent infection control practices in an attempt to reduce the probability of transmission of COVID within the Community, in compliance with the regulations set forth in Chapter 408.823, Florida Statutes.

### Procedures:

The following are the procedures to be followed relating to the visitation of the resident's friends and family. These procedures will be administered equally to all residents that request to a person visit him/her. At a minimum, the facility will allow in-person visitation between the hours of 9:00a.m. – 9:00p.m.

a. The facility will provide access to any resident of these individuals:  
-Immediate family and other relatives of the resident, subject to the resident's right to deny or withdraw consent at any time;

•Visitation should be person-centered, consider the residents' physical, mental, and psychosocial well-being, and support their quality of life.

-Any entity or individual that provides health, social, legal, or other services to the resident, subject to the resident's right to deny or withdraw consent at any time.

b. Visitation can be conducted through different means based on a facility's structure and residents' needs, such as in resident rooms, dedicated visitation spaces, outdoors, and for compassionate care situations. Regardless of how visits are conducted, there are certain core principles and best practices of infection control that reduce the risk of transmission. The

facility's administrator is responsible for ensuring the following measures are in place and that staff adhere to this policy. Visitation should be person-centered, consider the residents' physical, mental, and psychosocial well-being, and support their quality of life.

c. The facility will provide the Agency for Health Care Administration (AHCA) with a copy of the facility's visitor policy and procedure, with the initial licensure application, renewal application and/or change of ownership application.

d. The visitation policy and procedure for the facility shall be available on the home page of Linx Living website.

e. The administrator shall be responsible for infection prevention and control training.

#### Core Principles of Infection Control Program

A. Screening of all staff, providers, and authorized vendors who provide direct care to our residents who enter the facility for signs and symptoms of an infectious and transmittable infection. This is noted on facility postings of possible signs and symptoms. Entry may be denied for those with signs or symptoms of a contagious infection (regardless of the visitor's vaccination status) if the visitor refuses to comply with CORE principles.

B. Hand hygiene (use of alcohol-based hand rub is preferred).

C. Social distancing of at least six (6) feet between persons on transmission-based precautions is encouraged (residents may allow consensual physical contact with their visitors, e.g., allow to come close to them and to touch them).

D. Instructional signage and visitor education handouts on illness signs and symptoms and infection control practices is available for visitors.

E. Cleaning and disinfecting of high-frequency touched surfaces will be implemented at all times in the facility.

F. All staff will use Personal Protective Equipment (PPE) (e.g., for those on transmission-based precautions).

G. The risk of transmission can be further reduced using social distancing.

H. The facility will not place any restriction on the length of time of the visit or the number of guests visiting.

I. The administrator will set a limit on the total number of visitors allowed in the facility at any given time based on the ability of staff to safely screen and monitor. When there are no known cases of COVID among residents currently

residing in the facility, visitation will be generally unrestricted. However, in the event Residents currently residing in the facility are known to be infected with COVID, restrictions will be placed upon General Visitors to reduce the possible spread of COVID. Efforts to continue general visitation even when a COVID positive resident is residing in the community shall be made, and protocols shall be implemented at the discretion of the administrator along the lines of the following (when practical): a. Identify locations for visitation/care to occur planning for residents in shared spaces and facilities with minimal common space to identify maximum time availability.

L. All visitors must immediately inform the facility if they develop symptoms consistent with a communicable disease within 24-hours of their last visit at the facility.

M. Any visits may take place in the resident's room or a designated area determined by the administrator at the time the visitation scheduled is developed and agreed upon.

N. General Visitor visits may take place in accordance with the infection control protocols at the time of the visit. Visits by general visitors may be significantly limited when a resident residing in the facility is infected with COVID-19.

O. The facility will provide and facilitate outdoor visitation spaces that are protected from weather elements, such as porches, courtyards, patios, or other covered areas that are protected from heat and sun, with cooling devices, if needed. In addition, the facility will create indoor visitation spaces for residents in a room that is not accessible by other residents.

P. The facility shall maintain a visitor log for signing in and out.

Q. When a general visitor is scheduled to visit, the facility will:

1. Thoroughly screen the visitor per the facility's infection control policy and procedure and document the name of the individual, the date and time of entry, and the screening mechanism used, along with the screening employee's name and signature. Just as with staff entering the building, if the visitor fails the screening, the visitor CANNOT be allowed entry.

3. The facility administrator, manager or staff will require that all visitors will be required to sign in and out on the visitor log.

4. The facility administrator, manager or staff will notify all visitors of any restrictions in place relating to visitation, or requirements relating to infection control, at that time of the visit.

5. The facility staff will monitor the general visitor's adherence to policies and procedures.

6. If visitors fails to follow the facility's infection prevention and control requirements, after attempts to mitigate concerns, the administrator shall restrict or revoke visitation.

The visitation policies and procedures required by this section must allow in-person visitation in all of the following circumstances, unless the resident, client, or patient objects.

**Entry of Healthcare Workers and Other Providers of Services** Healthcare workers who are not employees of the facility, but provide direct care to the facility's residents, such as hospice workers, Emergency Medical Services (EMS) personnel, dialysis technicians, laboratory technicians, radiology technicians, social workers, clergy, etc., must be permitted to come into the facility as long as they are not subject to a work exclusion due to showing signs or symptoms of an infectious illness.

EMS are not required to be screened, so they can attend to any emergency without delay. All facility staff, including individuals providing services under contract or arrangement, as well as volunteers, should adhere to the core principles of infection prevention.

#### Denying Access to Residents

- Denying access or providing limited and supervised access to an individual if that individual is suspected of abusing, exploiting, or coercing a resident until an investigation into the allegation has been completed or has been found to be abusing, exploiting, or coercing a resident;
- Denying access to individuals who have been found to have been committing criminal acts such as theft.
- Denying access to individuals who are inebriated or disruptive; or
- Denying access or providing supervised visitation to individuals who have a history of bringing illegal substances into the facility which places residents' health and safety at risk.

#### Visitation and Illegal Substance Use:

If the facility determines illegal substances have been brought into the facility by a visitor, the facility should not act as an arm of law enforcement. Rather, in accordance with state laws, these cases may warrant a referral to local law enforcement. To protect the health and safety of residents, facilities may need to provide additional monitoring and supervision. Additionally, facility staff should not conduct searches of a resident or their personal belongings, unless the resident or resident representative agrees to a voluntary search and understands the reason for the search.

# Infection Control Policy

## Purpose

The purpose of the infection control program is to establish and maintain practices within the facility to safeguard a sanitary environment, thus preventing the spread of infection and disease among residents and personnel.

## Policy

Linx Living LLC facility will develop and implement an infection prevention and control program. The facility will follow the Center for Disease Control's universal blood and body fluid precautions that treat all service recipients as though they were potentially infectious. All employees will follow the guidelines regarding exposure and control plan to eliminate exposure to body or certain other body fluids. Within the first 30 days of delivering services to recipients, the agency will ensure and document in records that human immunodeficiency virus (HIV), hepatitis, sexually transmitted diseases, and tuberculosis education was completed with employees.

## Procedure

The administrator is responsible for the direction, provision, and quality of infection prevention and control services. This effort is supported by department heads and other personnel as appropriate.

The administrator, shall be responsible for, but not limited to, developing and maintaining written objectives, a policy and procedure manual, and an organizational plan for the infection prevention and control service.

The objectives of the program are as follows:

- Establish and maintain policies and procedures for infection control that are consistent with current regulations and acceptable standards of practice.
- Establish and maintain a system of surveillance and appropriate response for facility acquired infections.
- Establish and maintain a system for the detection, reporting, investigation, and control of any outbreaks of infectious conditions.

- Provide guidance for the implementation of appropriate infection control precautions or isolation techniques to prevent the spread of infection.
- Provide a system to monitor the appropriate use of antibiotics in the resident population for the treatment of infectious conditions.
- Establish and maintain a system for the monitoring of employee health issues, including but not limited to work restrictions for those infected by infectious conditions.