

Indoor visits in residential care facilities

Currently, residential care facilities may offer visitation under compassionate circumstances, such as end-of-life situations, and in [outdoor environments](#). There are other circumstances under which indoor visitation must be accommodated, such as to provide support for residents with disabilities and/or for religious exercise, and for long-term care ombudsman and adult protective services.

This guidance expands visitation opportunities and outlines the requirements for indoor visitation in residential care facilities serving older adults and people with disabilities. Facilities should continue to encourage visits outdoors if weather permits and the resident is able to participate.

Facilities must be in compliance with all public health orders prior to implementing this guidance. Residential care providers must routinely evaluate and update their visitation policies and procedures as updated guidance, facility resources, and community spread change. Individual facilities may enact stricter requirements based on their local conditions, but may not waive any of these requirements.

Indoor visitation criteria

Family and friends

Residential facilities may implement indoor visitation for family and friends when they meet all of the following six criteria.

1. Degree of community spread

- The facility must be located in a county that has less than or equal to an average of 25 new, active cases per 100,000 people over the prior 14 days, unless otherwise authorized by the Colorado Department of Public Health and Environment, **OR**, the facility is in a county that is actively in the [Protect Our Neighbors Phase](#).
- **Facilities in counties with 26 to 175 new, active cases per 100,000 people over the prior 14 days:** Visitors must provide documentation that they have had a negative COVID-19 test in the 48 hours preceding the visit. Community testing sites are available [here](#).
 - The time between when the specimen is collected, test result received, and visit occurs must be 48 hours or fewer.
 - The test must be a polymerase chain reaction (PCR) test or a test approved by the Colorado state lab or the U.S. Food and Drug Administration for use in asymptomatic people. Antibody testing is not acceptable.
 - **Facilities in counties with more than 175 new, active cases per 100,000 people over the prior 14 days:** Indoor visitation is not allowed.

2. Baseline testing

The facility must have conducted or arranged for at least one round of testing of all staff and residents who have left the facility within the preceding 14 days.

- “Staff” are defined to include employees, consultants, contractors, volunteers, students, caregivers, and others who provide care and services to residents. Facilities should prioritize testing for those individuals who are regularly in the facility (e.g., weekly) and have contact with residents or staff.
- Facilities must have procedures in place to address residents, staff, and others who refuse testing. Procedures should ensure that staff who have signs or symptoms of COVID-19 and refuse testing are prohibited from entering the building until the return to work criteria are met. If outbreak testing has been triggered and a staff member refuses testing, the staff member should be restricted from the building until the procedures for outbreak testing have been completed.
- Residents (or resident representatives) may exercise their right to decline COVID-19 testing in accordance with the requirements under 42 CFR § 483.10(c)(6). Facilities must have infection control procedures in place to address residents who refuse testing.

3. Surveillance & outbreak testing

Any facility that would like to offer surveillance testing must have a protocol to do regular testing surveillance for staff and residents. The facility should test all staff (as defined in this guidance) and any residents who have left the facility within the preceding 14 days, based on the county positivity rate reported in the past week (see table below).

Community COVID- 19 Activity	County Positivity Rate in the past week	Minimum Testing Frequency	Type of Testing
Low	<5%	Twice a month; weekly strongly encouraged	PCR
Medium	5%-10%	Once a week	Antigen or PCR
High	>10%	Twice a week	Antigen or PCR

For outbreak testing, all staff and residents should be tested, and all staff and residents that tested negative should be retested every 3 days to 7 days until testing identifies no new cases of COVID-19 infection among staff or residents for a period of at least 14 days since the most recent positive result. Staff and residents who have recovered from COVID-19 and are asymptomatic do not need to be retested for COVID-19 within 3 months after symptom onset, unless they develop symptoms during this time period.

4. Outbreak-free

- The facility must not be experiencing a current COVID-19 outbreak.

- The facility must not have any other ongoing infectious disease outbreak, such as flu or norovirus.
- All new or readmitted residents must be isolated in a private room or separate area for 14 days to observe for symptoms of COVID-19.
 - Residents who have been discharged from the hospital and have not yet met the criteria to discontinue transmission-based precautions for COVID-19 should continue to be isolated in a separate COVID-19 wing or unit of the facility with dedicated staff. Only residents with a confirmed COVID-19 test should be located in an isolation area.
 - Residents who require observation or isolation should not participate in indoor or outdoor visitation until they meet the criteria to be removed from such precautions.

5. Personal protective equipment (PPE) supply

Facilities must maintain a 14-day supply of all necessary personal protective equipment (PPE) that would be necessary to respond to an outbreak, without dependence on state or local public health stockpiles.

6. Critical staffing

Facilities must have and maintain adequate staffing without using contingency staffing. There must be enough staff to respond to residents' needs, accommodate the terms of indoor visitation, and monitor for adherence to required infection control measures, such as handwashing, masks, and social distancing.

Service providers

Residential facilities that meet criteria 2-6 above may allow service providers such as beauticians, barbers, podiatrists, dentists, and physical, speech, and occupational therapists after adding surveillance testing as part of their indoor visitation plans:

- Service providers are exempted from criteria 1, above.
- Service providers, defined as staff for the purposes of this guidance, must be included in the facility surveillance and outbreak testing requirements outlined above.

Indoor visitation requirements

Prior to initiating indoor visitation

- Notify your [local public health agency](#) that the facility is beginning indoor visitation, and adhere to any additional guidance it provides.
- Notify resident families and service providers that indoor visitation is occurring in your facility. The notification should include:
 - Precautions being taken to keep residents safe.
 - Expectations and requirements for visits. Minimally, the notification should include:
 - A description of the symptom screening process.
 - All terms of indoor and outdoor visitation, including mask and social distancing requirements, how to summon staff if needed, and what will cause a visitor to be denied entry.

- Steps visitors must take before, upon arrival, and during their visit.
- Ensure the facility is screening staff and residents daily for COVID-19-related symptoms.

When indoor visitation begins

- Limit indoor visitors to people age 18 and older.
- Require visitors and service providers to schedule an appointment for the visit to ensure the facility can safely accommodate the number of people and have enough staff to monitor compliance with required prevention activities.
- Screen all visitors and service providers.
 - Ensure visitors have taken a COVID-19 test and received a negative result within 48 hours of conducting the visit, if applicable, based on the degree of community spread.
 - In addition, visitors and service providers **must be fever-free, symptom-free, and have no known exposure to COVID-19 within the past 14 days.**
- Collect visitors' full names and contact information.
 - Facility staff must notify recent visitors and service providers of increased COVID-19-related symptoms or outbreaks on the unit where the resident resides, should such an event occur within 14 days of a visit, and recommend the visitor(s) seek testing.
- Greet visitors at a designated area at the entrance of the facility where a staff member must:
 - Perform temperature check and [symptom screening](#).
 - Document the visitor's contact information and the results of the screening. [Example form](#).
 - Ensure the visitor has a face mask or cloth covering that does not have an [exhalation valve](#), and ensure the mask covers the visitor's nose and mouth.
 - Have the visitor clean their hands with alcohol-based hand sanitizer.
 - Escort the visitor to the designated visitation area.
- Limit indoor visitation to common spaces, such as activity areas or dining rooms that allow for appropriate social distancing according to the [social distancing space calculator](#), proper ventilation (open windows, etc.) and cleaning and disinfection between visitors.
 - Internal group gatherings, such as dining and group activities, should be restricted in these areas during visitation to prevent potential exposure to other residents.
 - For smaller facilities, such as those in residential home-like structures and/or those with limited room ventilation systems, indoor visitation must be limited to one visitor for one resident at a time with no congregating of individuals or groups of residents or visitors in the area being used for indoor visitation.
 - Resident rooms should only be used for visitation as an accommodation for residents who cannot access the common area being used for indoor visitation.
- Require visitors and service providers **to wear masks during the entirety of the visit.**
 - Residents should wear masks unless it is medically contraindicated.

- Deny entry to visitors or service providers who don't pass screening or who refuse to comply with any of the requirements.

Additional requirements for service providers

- Service provision must occur in the resident's room or in a separate room that is appropriately disinfected between uses.
- Service providers must wear appropriate PPE and follow appropriate infection control measures prior to, during, and after each resident encounter.
- In addition to complying with the facility policy and procedures regarding infection control, the service provider must abide by all other precautions and restrictions imposed on their profession that would be required in any setting.