

Nursing Home and Assisted Living Oversight Working Group
Socialization, Visitation and Caregiver Engagement Subcommittee

Vision Statement:

A diverse group of elected officials, professional advocates, family advocates, government agencies, providers, professionals, and individuals that collaboratively met to address the impact of visitation and socialization COVID-19 restrictions on residents of long-term care communities, inclusive of Nursing Homes and Assisted Living Communities, as a basic need.

Mission:

Develop recommendations that address the impact of COVID-19 visitation, socialization and caregiver engagement restrictions on residents of long-term care communities.

Goals:

Identify primary areas of focus and interventions that can be implemented to address the current and prevent future social and emotional negative impact to residents of long-term care communities.

Recommendations that protect residents' rights and social/emotional needs of long-term care residents in balance with the medical wellbeing. This person-centered approach will meet individualized needs and goals in a holistic manner.

Further incorporate Assisted Living Communities and outline their role in the long-term care continuum.

Objectives:

To provide recommendations broken down into primary areas of focus and interventions that can be implemented to address the current and prevent future social and emotional negative impact to residents of long-term care community when facing a pandemic or other wide spread public emergency.

Policy Initiatives:

1. Require that residents, family members, and responsible persons are given input on living environment and any changes that would impact rights or status in their communities. All development of policies regarding visitation, use of technology, and family access and other change in regulatory frameworks must be available for review and input prior to implementation. ([Human Services Committee](#))
2. As such develop statewide long term care facilities (LTCF) visitation guidelines that are not subject to facility interpretation and ensure that even in the event of an outbreak, all LTCF residents are able to elect a support individual, both a primary and secondary, who is able to visit safely by adhering to guidelines used with staff. Visitation protocols

must be person centered and must include wishes of the resident or their representative. (Human Services Committee)

Comment – Define Support Individual vs Essential Caregiver

3. Strength the Resident's Bill of Rights to ensure any restrictions or impacts include a way to petition for redress. (Aging Committee)
4. Resident and Family Councils: (Aging Committee)
 - a. Stand up and reinforce resident councils, which will have a voice by law in statewide actions by either the executive branch or legislative branch in the development of policies that impact day to day living. Require that input from resident councils be heard within 7 days.
 - b. Require that families and family councils' voices are heard on issues involving family members who chose long term care or need long term care facilities to take care of physical, mental or emotional issues. Ensure that family councils are given a position on statewide task forces that determine the development of policies that impact the day-to-day living of residence.
5. Develop an Essential Caregiver (EC) Program. ECs are not subject to the interpretation of a facility. They are to be allowed at all LTCF and not subject to closures or quarantines due to infection or any other impact that limits LTCF activities. (Human Services Committee)

Comment – The subcommittee members all agree this should move forward and want to ensure that the ECs have protections like staff of skilled nursing facilities (SNF).
6. Develop a definition of an Essential Caregiver to be incorporated into law. (Human Services Committee)
7. All residents of LTCF should have access to the technology of their choosing, with provisions in place for roommates and privacy. (Aging Committee)
8. Enhance the ombudsman program to include in their review the impact on socialization, visitation and general resident support. (Human Services Committee)

Comment – Grow the Resident Advocate program
9. Ensure all LTCF staff are educated regarding best practices to address the social-emotional and mental health needs of residents as well as all components of person-centered care. (Public Health Committee)

Comment – It is recommended that the Staffing Levels Subcommittee look at how is staff defined – all staff or hands-on staff – and what is the expectation here.