NEW VISITATION GUIDANCE

On March 22nd the NJ Department of Health updated its long term care visitation guidance. The new Visitation Memo states that every resident has a right to Social visits, including anyone of the resident’s choice (ex. grandchildren, friends, clergy, etc.).

Both fully vaccinated and unvaccinated residents have a right to Social visits. Unvaccinated residents may have their visits restricted if fewer than 70 percent of the center’s residents are vaccinated and the CALI (COVID-19 Activity Level) score in the area is high or severe. Residents who have COVID-19 or who are in quarantine are not permitted Social visitation.

Most importantly, a positive case in one section of the facility no longer shuts down the entire facility for a month, or months. If anyone tests positive, all staff and residents are tested within a few days of that positive test. If the virus has not spread to other units, Social visitation may resume immediately in unaffected areas.

Facilities may require Social visits to be scheduled to ensure it is prepared to handle the volume of visitors at one time.

In some cases, visits can occur in your room, especially if you are in a single room, but many visits will occur in an area of the facility designated for safe Social visitation. You can hug your loved ones as long as they are wearing a closely fitting mask and you are fully vaccinated. Mask wearing and hand-washing must be followed at all times.

Ask your facility when they are opening to Social visitation. If staff tell you that you are not eligible for Social visitation or if you are not comfortable with the length/frequency of your visits, contact the Ombudsman’s Office.

NEW QUARANTINE RULES

The NJ Department of Health and the federal Centers for Disease Control (CDC) have revised their position on whether residents who leave the LTC facility must be quarantined for 14 days upon their return. As of March 22, fully vaccinated residents who have not had any prolonged close contact with someone with COVID-19, do not automatically need to quarantine if they leave the facility. “Close contact” means being within 6 feet of a COVID-positive person for 15 total minutes during a 24-hour period.

The facility must use a risk assessment checklist to determine whether the risk of your time outside will require quarantine when you come back. The assessment includes many factors (ex. if you will be in close contact with someone with COVID, wear a mask consistently, practice social distancing, spend time indoors with unmasked people, or ride in vehicles with unmasked people). This should be a holistic assessment, not a checklist where one “yes” answer rules the day. If you want to leave the facility but are unsure about quarantine, ask staff to review this assessment with you.
When John opens his cabinet in his room, Vernon Cooper (“Vern”) can see all the chips and candy. “He will make fun of himself, saying ‘This is why I can’t get out of my chair after eating all this junk food!’, ” says Vern, a Volunteer Advocate at the Paramus facility.

“John is one of my favorite residents. Yesterday he was trying to get a headstone for his late wife’s grave, and showed me the estimate and asked for my opinion. It felt special that he was sharing this with me.”

Then there is David. Vern noticed that despite being in the memory care unit, David was very alert and oriented. Vern spoke with the social worker, who agreed to a new cognitive evaluation. As a result, the veteran moved out of the memory care unit into a regular room where he has more autonomy.

When Vern joined Paramus as a Volunteer Advocate, there were 325 residents. Now there are 188, reflecting a loss of 80 residents and one staff member to COVID-19. But Cooper has tried to keep a positive perspective during the pandemic and to continue to help residents. “I have been an Emergency Medical Technician (EMT) since 2014. I understand how fragile life is and how so important it is to be there for those in need. The residents are still valuable members of society that just need a little more help than some of us,” he says.

Cooper took part in the initial deployment of iPads in nursing homes as part of the LTCO’s Social Isolation Project, helping to keep residents more connected and less isolated during this time.

“As a Volunteer Advocate, I have built solid relationships with residents and facility staff and, when there are issues, I work to get them resolved.”

If there is a Volunteer Advocate in your facility, please feel free to speak to him/her about any concerns you have. If not, please call the LTCO at 1-877-582-6995.