

Supplemental Care Visits for Long-Term Care Facilities
August 31, 2020

Regional Task Force for COVID-19 in LTC

Although COVID-19 continues to represent health risk to the older adult population, the need for supplemental care visits (i.e., podiatry, optometry, dentistry, barber/beautician, etc.) remains as both a health and quality of life issue. Neglect of these cares has the potential to result in unnecessary negative health outcomes. It is important when re-introducing these cares back into facilities that it is done in the safest way possible to reduce risk for the long-term care population.

Preparation for Supplemental Care Visits¹

In preparation for supplemental care visits, facilities must have a plan that includes symptom screening of providers and residents, personal protective equipment, space for encounters and scheduling information. Providers will follow same guidelines as facility staff for entering and exiting the facility.

Supplemental care visits should take place in a dedicated space whenever possible. Only one resident should be in the room with the provider at a time unless a chaperone is needed and then appropriate social distancing should be maintained. All furniture and tools used during the visit should be disinfected between each visit with a product that is effective against COVID-19. When possible, single use tools should be used and disposed of between each resident encounter.

Eligibility for Visits

Residents are eligible for supplemental care visits if they are able to be mobilized to the location where the visit will take place. Facility will assist with transportation as needed. Residents in isolation will not be eligible for supplemental care visits until out of isolation. Exceptions may be made for emergencies as defined by administrative leadership in concert with the medical team. Residents must wear a face mask at all times that covers their nose and mouth during each encounter, when possible.

Facilities may become temporarily ineligible for supplemental care visits during times of a COVID-19 outbreak or when designated by public health officials.

Scheduling Process

The scheduling of all residents by facilities should be done prior to day of visits. Appointment times and durations should be appropriate enough to allow for the visit and post-visit cleansing of room/furniture/tools between residents.

Visit Processes

Supplemental care providers will use the single entry and exit point from the facility previously identified. Screening for symptoms of or exposure to COVID19 followed by observed hand hygiene must occur prior to entry. Providers must wear a mask over the nose and mouth throughout their entire time in the facility. Providers should provide the facility with documentation of a negative COVID-19 test in the timeline required by local and state ordinances and in accordance with recommendations set forth by CMS. Facilities should keep records of each provider who enters the building and which residents were provided services. The provider must also keep records of facilities visited and residents seen in order to notify facilities entered in the past 14 days if they test positive at any time.

¹Supplemental care visits are equivalent to visits provided by persons defined by CMS as non-essential care providers.