SECTION:	Administrative Guidelines	
SUBJECT:	Visitation: Sun Towers Retirement Community	

PURPOSE

To establish visitation procedures within the ALF to ensure that visitation details are clear to staff, family and residents per the Florida Statute listed in 429.28.

- 1. Establish infection control & education procedures for visitors & vendors;
- 2. Provide personal protective equipment (PPE), etc. for visitors & vendors upon request;
- 3. Allow for no limits on length of visits & number of visitors;
- 4. To communicate which employees are responsible for ensuring that staff adhere to facility procedures.
- 5. Define that consensual physical contact is permitted between a resident and their visitors.

PROCEDURE

Resident's family members are not subject to visiting hour limitations or other restrictions not imposed by the resident. However, the community does close its doors for the safety of our residents between 11pm and 7am. During such times, visitors are encouraged to ring the front doorbell for security to greet the visitor and allow entry into the community.

Infectious Diseases & Education:

Visitors with confirmed infectious disease symptoms should defer non-urgent in-person visitation until they meet CDC criteria for healthcare settings to end isolation. For visitors who have had close contact with someone with an active infection, it is safest to defer non-urgent in-person visitation until they meet criteria described in CDC healthcare guidance. Visitors will not be required to be tested or vaccinated or show proof of immunization status under any circumstance. In general, visitors with signs and symptoms of a transmissible infection should defer visitation until he or she is no longer potentially infectious (e.g., 24 hours after resolution of fever without antipyretic medication), or according to CDC guidelines, and/or state, local health department recommendations.

Wellness restrictions may be placed to prevent community-associated infection or communicable disease transmission to one or more residents.

Personal Protective Equipment:

Printed information is available to help provide instruction, before visitors enter the resident's apartment, on hand hygiene, limiting surfaces touched, and the proper use of personal protective equipment. Visitors are encouraged to practice hand hygiene and wear face coverings or masks in accordance with CDC guidance.

Visitation Standards:

The community will not restrict, limit, or otherwise deny visitation privileges based on race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.

There are, however, safety and wellness restrictions made with the consent of the residents in their community.

- The number of visitors and the length of the visit are not restricted.
- Our residents have a right to receive visitors of his or her choosing at the time of his or her choosing and in a manner that does not impose on the rights of another resident.
- The community will provide immediate access to a resident by immediate family and their relatives of the resident, subject to the resident's right to deny or withdraw consent at any time.

Persons Responsible for Guidelines:

The Administrator and Wellness Coordinator are responsible for ensuring that employees of the assisted living/independent living adhere to the visitation guidelines.

Visitation and Personal Contact:

Consensual physical contact is allowed between a resident and visitor. Residents will be provided unrestricted private communication, including receiving and sending unopened correspondence, access to a telephone, and visiting with any person of his or her choice, at any time.

*Visitation at our community allows for in-person visitation for all of the following circumstances (unless the resident objects):

- End-of-life situations
- A resident who was living with family before moving into community is struggling with the change in environment, or resident is making on or more major medical decisions.
- A resident is experiencing emotional distress or grieving the loss of a friend or family member who recently died.
- A resident needs cueing or encouragement to eat or drink which was previously provided by a family member or caregiver.
- A resident who used to talk and interact with others is seldom speaking.