1. The “Safe Start Plan for Long-Term Care” directs facilities on the types of resident visitations and outings allowed in long-term care. See the “What’s Allowed” Phase Chart on Page 4 of this Reference Sheet.

   **Safe Start Plan for Long-Term Care is available here:**
   [https://www.dshs.wa.gov/altsa/famhelp-facility-status-and-information](https://www.dshs.wa.gov/altsa/famhelp-facility-status-and-information)

2. Visitation is based on a list of criteria that the facility must meet and the “COVID 19 Risk Assessment Dashboard” which defines the “PHASE” a county is in. This information changes daily.

   **DOH COVID 19 Risk Assessment Dashboard is available here:**

### DEFINITIONS FOR EACH PHASE IN THE SAFE START PLAN

**Phase 1**

Is designed aggressive infection control during periods of heightened virus spread in the community and potential for healthcare system limitations, which may include factors such as staffing, hospital capacity, Personal Protective Equipment (PPE), and testing. **Heightened virus spread (High COVID-19 activity) is defined as >75 cases/100,000 for two weeks.** Check the above Risk Assessment Dashboard to see what the metric is for your county. If your county is currently meeting the definition of heightened virus spread the facility will remain in phase 1.

**Phase 2**

**Entry Criteria:** If the county in which a facility is located has entered Phase 2, the facility may begin implementing the criteria outlined in the grid below after meeting all of the following criteria:

- The facility has reviewed the key metrics for the county at the COVID 19 Risk Assessment Dashboard and determined that moderate transmission is occurring in the community. **Moderate transmission is defined as 25-75 cases/100,000 population for two weeks.**
- 28 days have passed since the last positive or suspected resident/client or staff case was identified in the home OR any timeline required by the LHJ, whichever is greater;
- Adequate staffing levels are in place;
- The facility performs and maintains an inventory of PPE to assure at least a 14-day supply using the CDC PPE burn rate calculator:

8/20/2020  Information taken from the Governor’s Safe Start Plan for LTC. DSHS FAM HELP
[https://www.waombudsman.org/coronavirus-information/](https://www.waombudsman.org/coronavirus-information/)
● The facility performs and maintains an inventory of disinfection and cleaning supplies for residents and clients;
● There is assurance by the LHJ that local hospital(s) have the capacity to accept referrals/transfers;
● The facility/home is capable of cohorting residents with dedicated staff in the case of suspected or positive cases OR is able to transfer positive cases to a COVID-19 positive facility for care and recovery OR in the case of small homes, there is a plan in place for managing both positive and negative cases while mitigating the spread of infection. Facilities or agencies may use discretion to be more restrictive, where deemed appropriate, through internal policies and in conjunction with the LHJ, even if they have moved to this Phase.

Phase 3

Entry Criteria: *If the county in which a facility is located has entered Phase 3, the facility may begin implementing the criteria outlined in the grid below after meeting all of the following:*

- The facility has reviewed the key metrics for the county at the COVID 19 Risk Assessment Dashboard and determined minimal transmission is occurring. Minimal transmission is defined as 10-25 cases/100,000 population for two weeks.
- 28 days have passed since the last positive or suspected resident or staff case was identified in the home OR any timeline required by the LHJ, whichever is greater;
- Adequate staffing levels are in place;
- The facility performs and maintains an inventory of PPE to assure at least a 14-day supply using the CDC PPE burn rate calculator: [https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/burn-calculator.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/burn-calculator.html);
- The facility performs and maintains an inventory of disinfection and cleaning supplies for residents and clients;
- There is assurance by the LHJ that local hospital(s) have the capacity to accept referrals/transfers;
- The facility/home is capable of cohorting residents with dedicated staff in the case of suspected or positive cases OR is able to transfer positive cases to a COVID-19 positive facility for care and recovery OR in the case of small homes, there is a plan in place for managing both positive and negative cases while mitigating the spread of infection.

Facilities or agencies may use discretion to be more restrictive, where deemed appropriate, through internal policies and in conjunction with the LHJ, even if they have moved to this Phase.
Phase 4

Entry Criteria: If the county in which a facility is located has entered Phase 4, the facility may relinquish all restrictions and return to a regular course of business after meeting all of the following:

- The facility has reviewed the key metrics for the county at the COVID 19 Risk Assessment Dashboard and determined that sporadic transmission is occurring in the community. **Sporadic transmission is less than 10 cases/100,000 population for two weeks.**
- 28 days have passed since the last positive or suspected resident or staff case was identified in the home OR any timeline required by the LHJ, whichever is greater;
- The facility/home has adequate staffing levels in place;
- The facility performs and maintains an inventory of PPE to assure at least a 14-day supply using the CDC PPE burn rate calculator: [https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/burn-calculator.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/burn-calculator.html);
- The facility performs and maintains an inventory of disinfection and cleaning supplies for residents and clients;
- There is assurance by the LHJ that local hospital(s) have the capacity to accept referrals/transfers;
- The facility/home is capable of cohorting residents with dedicated staff in the case of suspected or positive cases OR is able to transfer positive cases to a COVID-19 positive facility for care and recovery OR in the case of small homes, there is a plan in place for managing both positive and negative cases while mitigating the spread of infection. Facilities or agencies may use discretion to be more restrictive, where deemed appropriate, through internal policies and in conjunction with the LHJ, even if they have moved to this Phase.

Until the COVID public health threat has ended facilities will:

- Screen 100% of all persons, residents, and staff entering/re-entering the facility including: temperature checks, questionnaire about symptoms and potential exposure, observation of any signs or symptoms, and ensures all people entering the facility or home have cloth face covering or facemask;
- Maintain a log of all visitors which must be kept for 30 days;
- Use PPE, as determined or recommended by CDC, DOH, LHJs, and CMS guidelines as warranted;
- Universally mask;
- Maintain access to COVID-19 testing for all residents and staff at an established commercial laboratory.
QUICK GLANCE COVID-10 TRANSMISSION RISK BY PHASE

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1</td>
<td>High COVID-19 activity is defined as &gt;75 cases/100,000 for two weeks</td>
</tr>
<tr>
<td>Phase 2</td>
<td>Moderate transmission is defined as 25-75 cases/100,000 population for two weeks</td>
</tr>
<tr>
<td>Phase 3</td>
<td>Minimal transmission is defined as 10-25 cases/100,000 population for two weeks</td>
</tr>
<tr>
<td>Phase 4</td>
<td>Sporadic transmission is less than 10 cases/100,000 population for two weeks</td>
</tr>
</tbody>
</table>

What is allowed for Long-Term Care Facilities Visitation
Washington State Department of Health and Department of Social and Health Services
August 2020

A facility or agency must meet certain criteria before entering a new phase, including going 28 days without a resident or staff member testing positive for COVID-19 and having at least a 14-day supply of Personal Protective Equipment (PPE) on hand. Until the COVID-19 public health threat has ended, facilities and agencies will practice social distancing, universal masking, screen all staff and residents entering for symptoms, maintain access to testing, and follow all local and federal PPE guidelines.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compassionate care visits</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Window visits</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Remote visits</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Outdoor visits</td>
<td>✔*</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Limited indoor visits</td>
<td>✔**</td>
<td>✔</td>
<td>✔</td>
</tr>
<tr>
<td>Normal visitation</td>
<td>✔</td>
<td>✔</td>
<td>✔</td>
</tr>
</tbody>
</table>

*Residents are limited to two visitors each day.
**Only if the resident is unable to visit outdoors or remotely.
In that case, a single essential support person will be allowed into the facility.