

CF OPERATING PROCEDURE
NO. 155-65

STATE OF FLORIDA
DEPARTMENT OF
CHILDREN AND FAMILIES
TALLAHASSEE, September 25, 2020

Mental Health/Substance Abuse

VISITATION GUIDELINES IN A DEPARTMENT OF CHILDREN AND FAMILIES
STATE MENTAL HEALTH TREATMENT FACILITY

1. Purpose. This operating procedure is a guideline for general visitation procedures in the State Mental Health Treatment Facilities (SMHTF) and during the COVID-19 Public Health Emergency pursuant to Emergency DEM Order 20-009.
2. Scope. This procedure applies to all State Mental Health Treatment Facilities (SMHTF) whether operated by the Department of Children and Families or by contract with private entities, including the Florida Civil Commitment Center.

3. References.

- a. Chapter 394, [Part I](#), Florida Statutes (F.S.), Florida Mental Health Act.
- b. Chapter [916](#), F.S., Forensic Client Services Act.
- c. Chapter [744](#), F.S., Guardianship.
- d. [Emergency DEM Order 20-009](#).
- e. [Executive Order No. 20-52 and any extension](#).
- f. [AHCA Facility Visitation Expectations Memo](#).
- g. [AHCA COVID-19 Visitor Screening Toolkit](#).
- h. [CDC Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#).
- i. [WHO Infection prevention and control of epidemic-and pandemic-prone acute respiratory infections in health care](#).

4. Definitions. For the purposes of this operating procedure, the following definitions shall apply:

- a. Compassionate Care Visitors. Individuals who provide emotional support to help a resident deal with a difficult transition or loss, upsetting event, or end-of-life. Compassionate care visitors may be allowed entry into facilities on a limited basis for these specific purposes.
- b. COVID-19. Novel Coronavirus Disease 2019 is a severe acute respiratory illness that can be spread among humans through respiratory transmission.
- c. Employee. Any paid staff member, volunteer, or intern of the Department, any person under contract with the Department; and any person providing care or support to a resident on behalf of the Department or its providers in a mental health treatment facility.

OPR: SMF

DISTRIBUTION: X: OSGC; ASGO; SMF; Region/Circuit Mental Health Treatment Facilities.

d. Essential Caregiver. Individuals who have been given consent by the resident or his or her representative to provide services and/or assistance with activities of daily living to help maintain or improve the quality of care or quality of life for a facility resident. Essential caregivers include persons who provided services before the pandemic and those who request to provide services. Care or services provided by essential caregivers must be identified in the plan of care or service plan and may include bathing, dressing, eating, and/or emotional support.

e. Personal Protective Equipment (PPE). Protective clothing and/or equipment designed to minimize exposure to hazards that cause serious injuries or illnesses.

f. Professional Guardian. As defined in section 744.102, F.S.

g. State Mental Health Treatment Facility (SMHTF). A facility operated by the Department of Children and Families or by a private provider under contract with the Department to serve individuals committed pursuant to Chapter 394, F.S., or Chapter 916, F.S.

5. General Visitation.

a. Each SMHTF shall develop and maintain a general visitation policy consistent with sections 394.459, F.S., and 916.107, F.S. – Communication, Abuse Reporting, and Visits.

b. Facilities shall permit immediate access to any resident by the resident's family members, guardian, guardian advocate, representative, Florida statewide or local advocacy council, or attorney, unless such access would be detrimental to the resident or others.

c. Residents shall be informed of facility visitation policies including days and times of visitation.

d. If a resident's right to communicate or to receive visitors is restricted by the facility:

(1) Written notice of such restriction and the reasons for the restriction shall be provided to the resident, the resident's attorney, and the resident's guardian, guardian advocate, or representative;

(2) Any such restriction shall be documented in the resident's clinical record and include justification for restriction;

(3) Any restriction of a resident's right to communicate or to receive visitors shall be reviewed at least every 7 days, and,

(4) The right to communicate or receive visitors shall not be restricted as a means of punishment.

6. Visitation During a Public Health Emergency. During the COVID-19 Public Health Emergency, all SMHTFs shall put in place additional procedures and safeguards to protect the safety and security of residents, visitors and employees. The following guidelines should be incorporated into each SMHTF visitation policy.

a. Establish visitation frequency including days and times. Visitation times should include the amount of time allowed per visit.

b. Only visitors in the following circumstances may be allowed to enter any SMHTF:

(1) Family members, friends, and individuals visiting residents in end-of-life situations only;

(2) Hospice or palliative care workers caring for residents in end-of-life situations;

(3) Any individuals or providers giving necessary health care to a resident, provided that such individuals or providers 1) comply with the most recent Centers for Disease Control and Prevention (CDC) requirements for PPE, 2) are screened for signs and symptoms of COVID-19 prior to entry, and 3) comply with the most recent infection control requirements of the CDC and the facility;

(4) Facility employees;

(5) Facility residents;

(6) Attorneys of Record for a resident in a civil or forensic SMHTF for court related matters if virtual or telephonic means are unavailable;

(7) Public Guardians as set forth in Chapter 744, Florida Statutes, Professional Guardians as defined by section 744.102(17), Florida Statutes and their professional staff pursuant to section 744.361(14), Florida Statutes, as allowed by Executive Order;

(8) Representatives of the federal or state government seeking entry as part of his or her official duties, including, but not limited to, the Long-Term Care Ombudsman program and representatives of the Department of Children and Families, the Department of Health, the Department of Elderly Affairs, the Agency for Health Care Administration, the Agency for Persons with Disabilities, a protection and advocacy organization under 42 U.S.C. §15041, the Office of the Attorney General, any law enforcement officer, and any emergency medical personnel; and

(9) Essential caregivers and compassionate care visitors who meet the above definitions and satisfy the following criteria:

(a) Essential caregivers include persons who provided services before the pandemic and those who request to provide services. Care or services provided by essential caregivers must be identified in the plan of care or service plan and may include bathing, dressing, eating, and/or emotional support.

(b) Compassionate care visitors may be allowed entry into facilities on a limited basis for the specific purposes outlined in the definition above.

(c) Each resident or his or her representative may designate up to two (2) essential caregivers and up to two (2) compassionate care visitors.

(d) Other than in end-of-life situations, a resident may be visited by one (1) such visitor at a time.

(10) SMHTFs shall establish policies and procedures for designation and utilization of essential caregivers and compassionate care visitors.

c. To ensure the safety of residents, visitors and employees during COVID-19 Health Emergency, SMHTFs will allow general visitation under the following circumstances:

(1) The facility must have no new facility-onset of resident COVID-19 cases in the previous fourteen (14) days other than in a dedicated wing or unit that accepts COVID-19 cases from the community.

(2) The facility must have fourteen (14) days with no new facility-onset of staff COVID-19 cases where a positive staff person was in the facility in the ten (10) days prior to the positive test.

(3) The facility must have sufficient staff to support management of visitors.

(4) The facility must have adequate:

- (a) PPE for staff, at a minimum;
- (b) Cleaning and disinfecting supplies, and,
- (c) Capacity at referral hospitals for the facility.

d. Documentation showing compliance with the following requirements must be kept for all visitation within a facility:

(1) All non-resident individuals entering a facility must be screened utilizing a standardized questionnaire.

(2) The documentation must contain:

- (a) Name of the individual entering the facility;
- (b) Date and time of entry, and,
- (c) The screening mechanism used by the facility to conclude that the individual did not meet any of the enumerated screening criteria. This documentation must include the screening employee's printed name and signature.

e. SMHTF staff shall:

- (1) Designate key staff to support infection-prevention and control education of visitors on use of PPE, use of masks, hand sanitation, and social distancing of at least six (6) feet;
- (2) Maintain a visitor log for signing in and out;
- (3) Screen visitors to prevent possible introduction of COVID-19;
- (4) Prohibit visits, except for compassionate care visits, if the resident is quarantined or if the resident is positive for or shows symptoms of COVID-19;
- (5) Monitor visitor adherence to appropriate use of face masks, PPE, and social distancing of at least six (6) feet;
- (6) Face masks should fit snugly but allow for easy breathing and should cover the mouth and nose;
- (7) Establish limits on the total number of visitors allowed;
- (8) Immediately cease general visitation if a resident—other than in a dedicated wing or unit that accepts COVID-19 cases from the community—tests positive for COVID19, or is exhibiting symptoms indicating that he or she is presumptively positive for COVID-19, or a staff person who was in the facility in the ten (10) days prior tests positive for COVID-19;
- (9) Clean and disinfect visiting areas between visitors and maintain handwashing or sanitation stations;

(10) Provide outdoor visitation spaces that are protected from weather elements, such as porches, courtyards, patios, or other covered areas that are protected from heat and sun, with cooling devices if needed;

(11) Create indoor visitation spaces for resident in a room that is not accessible by other resident, or in the resident's private room if the resident is bedbound and for health reasons cannot leave his or her room;

(12) Document in each resident's chart, up to five (5) general visitors who have been designated by the resident or representative;

(13) Ensure that a resident has not more than two (2) visitors at a time;

(14) Ensure that there are adequate supplies of facility COVID-19 testing for visitor use if needed so long as use of testing is based on the most recent CDC and FDA guidance; and

(15) Notify and inform residents and their representatives of any changes in the facility's visitation policy.

(16) SMHTFs should follow guidance from their local Departments of Health (DOH).

f. All Visitors must:

(1) Schedule an appointment for visitation to ensure proper screening and adherence to infection control measures;

(2) Be eighteen (18) years of age or older;

(3) Sign a consent form noting understanding of facility's visitation and infection prevention and control policies;

(4) Wear a face mask, perform proper hand hygiene and maintain social distancing of at least six (6) feet with staff and other residents and limit movement in the facility;

(5) Comply with facility-provided COVID-19 testing, if offered;

(6) Visit in a resident's room or other facility-designated area;

(7) Attest that they have received infection prevention and control training, including training on proper use of PPE, hand hygiene, and social distancing prior to entering the facility. Training is available at [CDC Website](#). For training visitors, these videos are recommendations:

a) [Visiting Family and Friends with higher risk of severe Illness.](#)

b) [Wear a Mask to Protect You & Your Friends.](#)

c) [Social Distancing.](#)

d) [COVID Overview.](#)

e) [Handwashing Is Very, Very Important.](#)

f) [Learn How to Correctly Wear Your Face Mask.](#)

g) [How to Correctly Put On PPE.](#)

- h) [How to Correctly Take Off PPE.](#)
- i) [Important Info About Cleaning Your Hands.](#)

(8) At a minimum, all visitors will be required to wear a face mask, and;

(9) All visitors must immediately inform the facility if they develop a fever or symptoms consistent with COVID-19 or test positive for COVID-19 within fourteen (14) days of a visit to the facility.

g. Limitations to Visitation.

(1) SMHTFs have the right to prohibit visits, except compassionate care visits, if:

(a) The resident is quarantined or if the resident is positive for or shows symptoms of COVID-19, or;

(b) After attempts to mitigate concerns, restrict or revoke visitation if the essential caregiver or compassionate care visitor fails to follow infection prevention and control requirements or other COVID-19-related rules of the facility.

(2) SMHTFs has the right to prohibit individuals seeking entry for visitation for any person meeting any of the criteria below:

(a) Infected with COVID-19 who does not meet the most recent criteria from the CDC to end quarantine.

(b) Showing, presenting signs or symptoms of, or disclosing the presence of a respiratory infection, including cough, fever, shortness of breath, sore throat, chills, headache, muscle pain, repeated shaking with chills, new loss of taste or smell, or any other COVID-19 symptoms identified by the CDC.

(c) Has been in contact with any person(s) known to be infected with COVID-19, who does not meet the most recent criteria from the CDC to end isolation.

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

JACQUELINE A. YOUNG
Director, State Mental Health Treatment Facilities, Policy and Programs