

Safe Start for Long-Term Care Facilities

Washington Department of Health and Department of Social and Health Services

August 2020

COVID-19 has had a disproportionate effect on Washingtonians who live in long-term care facilities or receive care from Supported Living agencies in their homes. This phased approach to reopening is designed to keep them healthy and safe. The phase that a facility or agency is in will vary by county and mirror Governor Inslee's Safe Start Washington Plan. Additionally, a facility or agency must meet certain criteria before entering a new phase, including going 28 days without a resident/client 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. This document is a summary of the detailed Safe Start Recommendations and Requirements documents for each facility or agency type. More detail for each phase and topic is available in the full Safe Start plan.



Phase 1



Phase 2



Phase 3



Phase 4

Visitation

Remote visits, window visits, and compassionate care visits are allowed in all phases. Facilities should have policies in place for remote visitation, including access to technology that allows residents to communicate with family, friends or their spiritual community regardless of phase.

- Indoor visitation is prohibited, with the exception of compassionate care end-of-life and psychosocial need situations.
- Outdoor visitation is allowed. Residents may have two visitors each day.

- Compassionate care visits are allowed.
- Outdoor visits are permitted. Face masks must be worn and proper hand hygiene and social distancing practiced.
- If a resident or client is unable to participate in outdoor visits and cannot utilize technology for remote visitation, they are allowed to have one essential support person visit the facility as often as once a day.
- All visitors must wear a cloth face coverings or facemasks during visits.

- All residents or clients are allowed to have limited visitation.
- Outdoor visits are preferred to entering the facility or home.
- Facilities may limit the number of visitors per resident.
- Residents or clients are allowed to leave the facility as long as they practice social distancing, wear a mask and are screened for symptoms when they return.

- Regular visitation resumes.

Testing and screening

- The facility must maintain access to testing for all residents and staff.
- Testing will occur based on federal, Department of Health and Local Health Jurisdiction guidance.
- Residents and staff, as well as any essential health care personnel entering the building, must be screened for symptoms daily.
- Compassionate care and outdoor visitors must be screened.

- Phase 1 testing and screening mandates are still required in Phase 2.
- Non-essential personnel must be screened.
- Compassionate care and outdoor visitors, as well as essential support persons, must be screened.

- Remains the same as earlier phases.

- Facilities should follow current federal, Department of Health and Local Health Jurisdiction guidance for testing.
- Continue to screen all residents, staff and persons entering the facility for symptoms.

Personal Protective Equipment (PPE)

- All staff must wear a cloth face covering or face mask while in the facility.
- All staff and essential health care personnel must wear appropriate PPE when interacting with residents.
- Facilities must follow federal PPE optimization strategies.

- Phase 1 PPE mandates are still required in Phase 2.

- Remains the same as earlier phases.

- Follow federal, Department of Health and Local Health Jurisdiction guidance for PPE.

Group activities

- Communal dining is not recommended. If it occurs, residents must be seated at least six feet apart.
- Restrict group activities as much as possible.
- Facilities and agencies should have procedures in place that allow residents to use technology to participate virtually in activities that improve their quality of life.

- Onsite group activities are permitted, but limited to no more than 10 people.
- Outdoor activities require masking, social distancing and monitoring of residents or clients.
- Residents or clients may eat in the same room while practicing social distancing.

- Group activities remain limited to no more than 10 people.
- Visiting family members may participate in group activities, but must practice social distancing and wear a mask.
- Communal dining with six foot social distancing is permitted.

- Regular group activities resume.