Balancing Rights & Risk in Visitation

Kim Marheine, Ombudsman Services Supervisor
State of Wisconsin Board on Aging and Long Term Care
Division of Quality Assurance
Bureau of Nursing Home Resident Care
September 20, 2021
NOTE: Use of this Presentation

THIS POWERPOINT MAY BE USED AS A REFERENCE TOOL BY THOSE WHO ATTENDED THIS PRESENTATION. INFORMATION PROVIDED DOES NOT CONSTITUTE LEGAL ADVICE.

THIS POWERPOINT IS NOT INTENDED FOR GENERAL CONSUMER USE, AND IT MAY NOT BE USED AS PART OF ANY OTHER PRESENTATION WITHOUT THE EXPRESS WRITTEN PERMISSION OF THE BOARD ON AGING AND LONG TERM CARE.
Everything old is new again?

The CMS QSO 20-39, revised on March 10, 2021, expanded visitation, easing some of the earlier restrictions and noting there are now fewer conditions under which visitation should be limited. All details of this QSO remain currently in effect.

Residents’ rights have not changed; concerns for renewed challenges related to isolation if imposed for a second time, suggest even more devastating effects on resident health and psychosocial well-being.

Infection control guidance also hasn’t changed: screening staff and visitors, wearing a mask, staying distanced, and being vaccinated appear to remain the most effective infection control approaches, as far as we know them today.

Per CMS and CDC, a single case of Covid should not restrict visitation to all residents of an entire nursing home for 14 days, per QSO 20-39 and updated testing strategy.

We’ve all had a taste of “normal,” and want that to continue. There are particular concerns for families and residents related to continued visitation as we approach fall and winter weather and significant holidays.
Balancing Rights & Risk

- Some of the most difficult choices come when persons would choose quality of life, self-determination and independence over perceived threats to safety.

- Making decisions about risk should rarely be all or nothing, yes or no.

- Tools to discern and balance risk: Rothschild Process for Care Planning, consult with an ombudsman. The impact of the decision on single and all residents should be the considerations of highest input and priority when making decisions.

- With the resident’s approval, bring other stakeholders to the conversation; the resident’s choice and voice should be heard above all others.

- Communicate: thoughtfully, with compassion and transparency, and often.
Honoring Rights & Mitigating Risk with Visitation: Ombudsman Program Complaint Recalls

Family of new resident: resident and family fully vaccinated, no known exposure told could have no visitors for 14 days.

Residents went to family reunions, weddings, picnics; infection control practices assessed as low risk and high mitigation compliance. Residents made to quarantine for 14 days despite being fully vaccinated, very careful, and not knowingly exposed.

Visits offered only during staff-specified hours; no evenings, no weekends. Visits canceled at last minute if no staff to screen, even though staff answer doors.

Lack of privacy in visits: families told some aspects of visits no longer allowed due to short staff, yet staff appeared to listen to and interrupt conversations, tell families what they can and cannot talk about with residents.

Residents report few or no activities; “the state” said no group activities or outings, no use of volunteers to help with activities.

Visits denied when a single staff case was identified. Whole nursing home closed to visitation for 14 days despite no new cases.

Families report phones not answered: unable to make appointments for visits or get information about resident status. Resident phones unplugged or not charged.

Family members who formerly visited and assisted with resident care now told “the state” said they could not provide care.
Make decisions about visitation person-centered

- Help everyone understand that rights have not changed, have not been diminished.
  - Right to be out in the community
  - Right to have visitors of choice, at a time that works best for the resident
  - Right to privacy in visits
  - Right to speak with an ombudsman or volunteer ombudsman in private
  - Right to not have visits restricted without credible cause
  - Right to participate in decisions
  - Right to file grievances, to have grievances fully investigated and to receive feedback about grievance resolution

- Renewed restrictions on visitation should be implemented based on most current CMS and CDC information. Consult with IPs, local and tribal public health for input. Request a RAST call. Involve an ombudsman. Make final decisions based on all data, with a focus on impact on resident health and psychosocial well-being.
Lead, expand and empower your team

• Hopefully better stability in resident overall status, psychosocial well-being.

• High resident and family satisfaction, decreased grievances, positive feelings of empowerment, less conflict.

• Higher staff satisfaction, improved team function, hopefully reduced turn-over in staff.

• Beneficial collaborations with residents, family members, staff, local and tribal public health, other community partners, DQA, Ombudsman and Volunteer Ombudsman.

• More stakeholders share the same goals and work together toward meeting those goals, including the goal to minimize or eliminate Covid outbreaks.
RESOURCES

• Board on Aging and Long Term Care – Long-Term Care Ombudsman Program
  www.longtermcare.wi.gov  Phone: 1-800-815-0015 {Advocates for persons age 60 and over}

• Disability Rights Wisconsin - www.disabilityrightswi.org - 800-928-8778 {Advocates for persons under age 60}

• www.pioneernetwork.net

• Staying Connected with Family and Friends Living in Long-Term Care Facilities -
  https://theconsumervoice.org/issues/other-issues-and-resources/covid-19#staying-connected

A Good Day to Call Your Ombudsman…

• Ombudsmen and Volunteer Ombudsmen are now back out in the field, visiting residents, providing consultations, and resolving complaints and concerns.

• Call us before you need us. 1-800-815-0015.

• Best success often happens when the ombudsman is involved sooner than later. The ombudsman’s only client is always your resident.