



## Maximizing Nursing Home Visits During the COVID – 19 Crisis

- Keep the dialogue open and be willing to follow their lead on screening and PPE gear, they are worried about COVID-19 and spreading
- DO NOT discharge your patients as a reactive response and say that the facility is non-compliant and not letting you see your patient.
- Customize and adjust your plan of care and visit frequencies for who you have prioritized as the most essential members of your team to visit the patient (nursing, aides, social work, chaplains). If social work or the chaplains are not allowed, they should spend time calling the families and checking in on them. If the aides are not allowed, discontinue the aide service but document that the facility is providing those services.
- Volunteers are not essential as it relates to their role with the patient in the nursing home in the face of this COVID-19. Utilize them in administrative support and if your hours falloff be able to document why your direct care volunteer hour percentages may have dropped during this time.
- **Documentation is key!**
- F2F visits.....more to come....**DO What Is Right for the Patient....**We will be getting (NHPCO is sure) exception for the F2F visits to be done via telephone, zoom, skype, tele-health!
- **DO NOT ABANDON the Patient or the Family. Do What is Right for the PATIENT!**
- Consider sharing the CMS Memo dated 3/23/20 attached [HERE](#) with facility providers restricting access.