

# Nursing Home Visitation and Quarantine: Frequently Asked Questions (FAQs) & Advocacy Strategies for Families



In March 2021, the Centers for Medicare and Medicaid Services (CMS) revised their visitation guidance based on the high COVID-19 vaccination rates of nursing home residents. The new guidance should make it easier for residents to receive visits from family and friends. The Centers for Disease Control and Prevention (CDC) also updated their guidance in [March](#) and again in [April](#) regarding when long-term care facility residents are required to quarantine.

Despite these changes, many families still have questions and concerns relating to visitation and quarantine. Below are some of the most frequent questions we are asked by family members. Our responses are based on the CMS and CDC guidance and show how the guidance can be used to help families advocate for their loved ones. While we are addressing family members in this document, it is important to remember that the right to visitation lies with the resident, not the visitor.

We have also included general advocacy strategies and tips if the facility is not following the guidance or denying residents' rights.



## Common Issues Under the Revised CMS and CDC Guidance

### 1. Can the facility refuse indoor visits?

The facility should be allowing indoor visitation “at all times for all residents,” except for the following very specific situations:

- The resident is not vaccinated, the nursing home’s COVID-19 county positivity rate is higher than 10%, and the resident vaccination rate in the facility is less than 70%;
- The resident has a confirmed case of COVID-19;
- The resident is in quarantine; or
- There is an outbreak in the facility. When this occurs, visitation is temporarily suspended while outbreak testing is conducted. Visitation should then be resumed depending on the testing results.

Other than these situations, a facility should always permit indoor visitation. The guidance does not provide for any other instances when indoor visitation can be denied.

### 2. Can the facility limit the length and frequency of visits to 15 minutes once a week?

The CMS [guidance](#) states that while facilities should allow indoor visitation at all times, they can “consider scheduling visits for a specific length of time to help ensure all residents are able to receive visitors,” and they can consider how the total number of residents in a facility may affect their ability to maintain the [core principles](#) of infection prevention.

However, the facility should not be arbitrary in its scheduling. In addition, all visitation must be “person-centered.” If a fifteen-minute visit is not sufficient for your loved one, ask facility staff for a longer visit. If they refuse, ask for the reasons. If the reasons relate to COVID-19 infection prevention, ask about alternatives to enable the person-centered visits the resident needs. If the reasons are not tied to infection prevention, the facility should allow the visit.

### 3. Can the facility refuse to allow visitation because they do not have enough staff?

No. The facility should not refuse visitation due to lack of staff because the guidance states that:

- Facilities should allow indoor visitation at all times and for all residents “... except for a few circumstances when visitation should be limited due to a high risk of COVID-19 transmission...” The only four situations the guidance lists for when visitation can be limited are identified in FAQ #1.
- A nursing home must facilitate in-person visitation and would be subject to potential enforcement action if it failed to do so without adequate reason related to clinical necessity or resident safety. The guidance never mentions staffing as a reason to limit visitation.

If visitation is still denied, point out the federal nursing home [regulations](#) about staffing. Nursing homes must have sufficient staff to meet each resident’s needs and to attain or maintain the resident’s physical, mental, and psychosocial well-being.

If the facility indicates that it has sufficient staff, then it has enough staff to safely facilitate visitation. If the facility responds that it does not have sufficient staff, then it would be violating federal regulations and possibly placing residents at risk. You should file a complaint with your State Survey Agency (see **General Advocacy Strategies and Tips** below).

### 4. Can the facility restrict me from visiting my loved one in her room? She needs help eating and has lost forty pounds during the pandemic.

**If there is no roommate:** If your loved one does not have a roommate, the facility should allow visitation in your loved one’s room.

**If there is a roommate:** The updated CMS guidance says that residents who share a room should not have visits in their rooms if possible. However, if the health status of the resident prevents them from leaving the room, the guidance states that the facility should try to enable in-room visitation while following all infection prevention guidelines.

In this instance, while your loved one may be able to physically leave the room, you should advocate that their weight loss makes visits in the room necessary so you can provide them with the assistance they need to eat.

Regardless of whether or not there is a roommate, your loved one’s weight loss should make them eligible to receive compassionate care visits. These visits are allowed when residents are not receiving the care required to meet their specific needs and are experiencing a decline or emotional distress. Compassionate care visits are permitted even when other visitation is restricted.

For help making your case for compassionate care, see our [fact sheet](#).

### 5. Can a facility shut down visitation for fourteen days after a staff member tests positive, even if the facility’s outbreak testing showed no further cases?

No. An outbreak is considered to be one or more new cases of COVID-19. According to the guidance, if there is a new case of COVID-19, a facility should immediately suspend visitation and begin outbreak testing. If the outbreak testing shows no additional cases, then visitation can resume in all areas of the facility where there are no COVID-19 cases.

In this instance, since the outbreak started with a staff member, the staff member should be self-isolating and no longer present, so visitation should fully resume.

## **6. Can a facility require a negative COVID test before I visit my loved one? Can they require me to be vaccinated before they let me in for an indoor visit?**

No. While facilities can encourage you to be tested and can offer testing, the CMS guidance clearly states, “visitors should not be required to be tested or vaccinated (or show proof of such) as a condition of visitation.” A facility cannot require you to show a negative test before you visit. In addition, they cannot require you to be vaccinated.

## **7. Can a facility deny compassionate care visits because my loved one is not at “end-of-life?” My loved one is really suffering.**

No. The CMS guidance is very clear that compassionate care visits are not just for end-of-life situations. If your loved one has declined physically or emotionally or is experiencing emotional distress, they should be allowed to receive compassionate care visits. The facility should work with you, your loved one, and your long-term care Ombudsman to determine the need for these visits. Both the need for and nature of these visits should be “person-centered,” meaning they should be individualized and customized to promote the resident’s well-being. Refer to our [fact sheet](#) for help making the case for compassionate care.

However, it is important to remember that the March 2021 revised CMS guidance also permits indoor visitation for all residents at all times except in specific situations. This means that most of the time you should be allowed visitation even if your loved one does not qualify for compassionate care.

## **8. Can my loved one be forced to quarantine when she enters a new facility? I really want to visit to help her with her adjustment. She’s struggling and confused.**

According to CDC guidance, vaccinated residents who enter a new facility do not have to quarantine unless they have had prolonged close contact (within six feet for fifteen minutes) in the prior fourteen days with someone with COVID-19.

Similarly, if your loved one has had COVID-19 in the past three months, they should not be placed under quarantine when entering a new facility. This applies regardless of any prolonged exposure to COVID-19.

However, your loved one will be subject to quarantine when entering a new facility if they are not vaccinated.

Being in quarantine does not always mean a resident cannot receive visits. The CMS guidance specifically identifies a resident struggling with a change in environment and lack of family support after moving into a nursing home as a reason for compassionate care visits. If your loved one is in this situation, they likely qualify for compassionate care visitation.

For more on the CDC guidance on quarantine and what it means for nursing home residents, see our [fact sheet](#).

## **9. Will my loved one be quarantined if they leave the facility for a medical appointment? What if I bring my loved one home to visit family for the evening? Does it matter how long they are gone from the facility?**

If your loved one wants to leave their nursing home, they can leave whenever they like. They are not a prisoner and are always free to leave. Nevertheless, in some situations they may be required to quarantine upon their return. Any resident who has had prolonged exposure to an individual with COVID-19 outside the facility in the prior fourteen days must be quarantined - whether or not the resident is vaccinated. Read more in our [summary on quarantining](#).

Residents who are out of the facility for less than 24 hours should not be quarantined unless they have had prolonged contact with someone with COVID-19. This means that your loved one can go to a medical appointment or visit with family at your home without fear of quarantine upon return.

Residents who leave the facility for 24 hours or longer should not be quarantined if they: (1) are vaccinated and have not had contact in the prior fourteen days with someone with COVID-19; or (2) have had COVID-19 within the past three months. All other residents must be placed in quarantine.

## 10. Now that my loved one is vaccinated, does that change what they can do or what our visits look like?

Yes! The recent CDC [guidance](#) makes some important changes:

- Vaccinated residents can take part in group activities with other vaccinated residents without masking or social distancing.
- Vaccinated residents can participate in communal dining with other vaccinated residents without masking or social distancing.

(However, in both situations, if unvaccinated residents or staff are present, then masks should be worn and anyone unvaccinated should continue social distancing.)

- If a resident is vaccinated, their visitor is also vaccinated, and they visit privately in their room or another designated visitation room, their visit can be conducted without masks or social distancing.



## General Advocacy Strategies and Tips

If you believe your loved one is being denied access to visitors and/or inappropriately quarantined, the first step is to use the guidance to make the points discussed above. Print out the CMS and CDC guidance and highlight the pertinent sections pertaining to your loved one's situation. Then ask facility staff to explain the reason for their actions. If the reasons are not in line with the CMS and/or CDC guidance, share the guidance with them.

### If the concern about visitation or quarantine continues, here are some additional steps to take:

- **File a grievance.** Every facility must have a grievance process and a grievance official who oversees the process. Once you file a complaint or concern, the facility must investigate the issue, report its findings, and give you a written response stating what action has been taken or will be taken as a result of the grievance.
- **Raise your concerns at the next care plan conference or request a special care plan conference.** The care plan meeting is an opportunity to share your concerns with staff, talk about what can be done, and develop a solution.
- **Contact your local long-term care Ombudsman program.** Ombudsman representatives advocate on behalf of residents. They may be able to help you resolve the situation. To find the ombudsman program that covers your loved one's facility, go to: [https://theconsumervoice.org/get\\_help](https://theconsumervoice.org/get_help).
- **If your facility has a family council, work with the family council on the issues you are facing.** The family council is a group that works together to address facility-wide concerns. It is often easier to make an impact as a group rather than on your own. For more on family council advocacy, see our [fact sheet on family council advocacy during COVID-19](#).
- **File a complaint with the State Survey Agency.** This agency is responsible for regulating nursing homes and investigating nursing home complaints. You can find [contact information](#) for your state under Licensure and Certifications.

**Hopefully, these actions will resolve the situation. If not, you can pursue the following strategies:**

- **Contact your loved one's elected officials.** They need to know what is happening in nursing homes in their jurisdiction. Also, ask if they will look into your concern. You can find your [elected officials](#).
- **Reach out to the media.** You can connect directly by communicating with a particular reporter or by writing an editorial, an op-ed, or a letter to the editor for your local or state paper. You can also use social media. Consider tagging your nursing home, their corporate owners, and your legislators. Sometimes companies respond faster to issues raised on social media to avoid unwanted attention.

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**Above all, be persistent!** Family members frequently report that they have done all of the above, yet nothing has changed. Unfortunately, once is not always enough. If you call or email an office and do not hear back, contact them again. As frustrating as it can be, persistence is usually the only way to advocate effectively. So keep at it!

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For more information on visitation and quarantine, visit our [webpage](#).



*National Consumer Voice for Quality Long-Term Care*

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