

An Essential Caregiver (EC) program permits senior living communities, where appropriate, to allow family members or other designated individuals to have regular contact with residents where visitation may otherwise be limited as a result of policies enacted by communities to prevent and reduce the spread of COVID-19. These programs may be especially beneficial in mitigating the effects of social isolation and loneliness caused by reduced visitation.

Senior living communities offer a home- and community- based setting for older adults combining housing, supportive services and health care as needed, through assisted living, independent living, memory care, and continuing care. These communities care for those who are at the greatest risk of complications from COVID-19; more than half of all residents are over the age of 85, and another 30% are between the ages of 75-84. They often cope with multiple chronic conditions and/or require assistance with activities of daily living (ADL), such as eating, dressing, bathing, and the management or administration of medication. Over 42% suffer from some type of cognitive impairment. Regular visitation by loved ones may contribute to improved physical, psychological, spiritual, and emotional health of residents, particularly in memory care settings where residents may not fully comprehend the new policies and absence of loved ones.

EC programs have recently been adopted by several states, including Indiana, Minnesota, Missouri, Oklahoma and Texas. They offer flexibility for communities to determine the parameters of how the program will be implemented and establish expectations, guidelines, and requirements for residents, caregivers, staff members, and the community. Given the changing nature of the COVID-19 pandemic and associated federal, state, and local guidance, it is recommended that these programs provide sufficient flexibility and discretion for communities and operators.

This toolkit contains a model regulation and supporting materials for states, policymakers, regulators, and communities to consider in adopting an EC program. It was developed by a representative group from Argentum, a national association representing senior living companies that care for the nearly two million older Americans who reside in professionally managed, resident-centered senior living communities.

This toolkit is subject to change. It was last updated on October 1, 2020.

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ESSENTIAL CAREGIVER – MODEL REGULATION

PURPOSE:

To provide residents, whose health or well-being may be impacted by the unintended consequences of prolonged physical separation and social isolation, visits from family members or other trusted individuals for the purpose of providing care, assistance with activities, companionship, emotional and social support to residents in long-term care settings as a result of reduced visitation policies enacted due to the COVID-19 pandemic.

FINDINGS:

Visitation is significantly reduced for residents of long-term care settings in an effort to prevent and reduce the spread of COVID-19. While some measures are established to allow for alternative visitation, such as virtual or outdoor visits, they do not replace the regular physical contact experienced prior to COVID-19. As a result, residents have faced greater social isolation and loneliness, which can lead to unintended consequences such as increased risk of depression, change in behavior patterns and increased or new onset anxiety. These concerns are particularly impactful in memory care settings where residents may not fully comprehend the new policies and absence of loved ones.

Family members or other trusted individuals may help to alleviate some of the unintended consequences of the prolonged social distancing and physical separation policies put in place to prevent the spread of COVID-19 within communities. These individuals can be an essential presence and contribute positively to the resident's overall health and well-being.

Reduced visitation also contributes to greater strain on community staff who must care for the physical, psychological, spiritual, and emotional needs of residents, including at the end of life where family members may not be permitted to be present and comfort their loved ones.

Establishing policies that will permit communities, where appropriate, to allow family members or other designated individuals to have regular contact with residents could have significant quality of life benefits in long-term care settings. Limits to visitation should properly consider the risks and benefits, both in the short and long term.

DEFINITIONS:

1. "Essential Caregiver" or "Essential Care Partner" (EC) — An individual age 18 or older who, prior to visitor restrictions, was regularly engaged with a resident to provide companionship and/or assist with activities. These individuals advocate for a loved one's needs and support them in managing their health, healthcare, long-term care and overall well-being.
2. "Community" or "Facility" — A long-term care center, assisted living community, or similar setting as defined by statute.
3. PPE — Personal Protective Equipment designed to protect from the spread of infection or illness, to include protective clothing, gloves, face shields, goggles, facemasks and/or respirators, as determined appropriate by the community.

GUIDELINES:

1. All communities should have full discretion on the extent of a program to implement, within the parameters established by the State, and the State shall not mandate any organization, community, or facility to establish an EC program.

2. The resident (and/or their representative) shall designate an EC according to the resident's needs and integrated with their person-centered care planning. The community's executive director (or designee) should have the ability to establish requirements of the EC in agreement with the resident (and/or their representative) including establishing in advance expectations of the care and support to be provided by the EC.
3. Communities may determine the number of ECs permitted. This may be a limit of 1-2 ECs per resident, a total number of ECs registered with the facility, or a limit of ECs actively in the community at any time.
4. Scheduling should be clearly established in advance and appropriate to the community's needs to manage visitors. This is recommended to be no more than one visit per day and for no more than two-hours per visit (e.g., daily for 1 hour from Noon-1 p.m.) Communities should take into consideration the number of individuals within the facility at any time to promote proper physical distancing.
5. Communities should carefully assess the risks of permitting an EC and re-evaluate these as conditions change within the setting and the broader geographic area.
6. Communities should carefully consider the current status of COVID-19 both in their building and local geographic area prior to designating ECs. If residents are cohorted by COVID-19 status, ECs are not allowed in areas designated to care for COVID-19 + individuals or areas designated to care for persons with unknown COVID-19 status.
7. Risk should be minimized by establishing clear plans for PPE use, including the type of PPE required, who is responsible for providing PPE, if the community will furnish (and if at any cost) PPE to ECs, instruction on proper use of PPE, COVID-19 screening, entry and exit procedures, locations where EC may be present, appropriate uses of indoor/outdoor spaces, and distancing policies with others in the community.
8. Communities may establish screening procedures for symptoms of COVID-19 before entering the setting, to include an elevated temperature, and may require a negative COVID-19 test prior to scheduling visits and any regular testing as deemed necessary. ECs should closely monitor their symptoms and not visit if experiencing any symptoms.
9. Communities should closely track the arrival and departure of ECs, to include names, addresses, email addresses, and time in/out for purposes of contact-tracing as required by the governing jurisdiction.
10. Any additional requirements within memory care settings must be clearly established and communicated to all ECs, staff, and any others present within these areas.
11. ECs should be provided with guidelines on the expectations of their role, to include information on the ombudsmen's programs, and be clearly communicated through any relevant forms of communication used by the community.
12. The resident (and/or their representative) shall have discretion to change an EC in accordance with guidelines established by the community.
13. The community may temporarily suspend or terminate EC status for failure to comply with their agreement or the community's guidelines.
14. The community may temporarily suspend or terminate an EC program in whole as deemed necessary by the executive director or designee as established by the community's program guidelines.
15. All Community staff should be made aware of the policies and guidelines for ECs and how they will be implemented and enforced.

EFFECTIVE DATE:

This policy is to take effect no later than 30 days from the date of posting.

ESSENTIAL CAREGIVER – PLANNING CHECKLIST

Planning & Policies

- Establish policies and procedures for how to designate and utilize an EC.
- Develop criteria for who can be an EC in your site. The Administrator, Director of Nursing, Social Services Director, or other designated staff should help determine policies.
- Consult with resident about their wishes to determine whom to designate as the EC. Consider persons such as a family member, outside caregiver, friend, or volunteer who provided regular care and support to the resident prior to the pandemic
- Utilize the EC to provide care and emotional support in the same manner as prior to the pandemic, or in whatever manner necessary, as resident health care or psychological conditions may have changed.

Scheduling

- Work with the resident and EC to identify a schedule of up to two hours per day, or until caregiving tasks are completed, for the EC to be in the community.
- Ensure scheduling of EC visits considers numbers of EC in the building at the same time. The community may establish time limits as needed to keep residents safe.

Implementation

- Designate a central point of entry where the EC signs in and is actively screened for symptoms of COVID-19 prior to entering the building, in the same manner as community staff.
- The community must allow evening and weekend visits that accommodate the EC who may be limited by work or childcare barriers.
- Educate the EC on how to don/doff necessary PPE appropriately. This can be accomplished utilizing posters demonstrating key instructions to reinforce safe practices.

Requirements for EC

- The EC must wear all necessary personal protective equipment (PPE) while in the building (minimally eye protection and face mask) and must perform frequent hand hygiene. The community should ensure hand sanitizing stations and alcohol-based hand rubs are accessible. For additional guidance, see Contingency Standards of Care for COVID-19: Personal Protective Equipment for Congregate Care).
- The EC must inform the LTC provider if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit to the resident.
- The EC should provide care in the resident's room or in community-designated areas within the building. The EC must limit movement in the community. The EC may take the resident outside for a walk during their time with the resident; pushing a wheelchair while the EC is wearing appropriate PPE and the resident is wearing a face covering, as tolerated, is an acceptable activity.
- The EC must maintain social distancing of at least 6 feet with staff and other residents while in the building.
- The EC should not take the resident out into the community except for essential medical appointments.

- The EC must not be allowed to visit a resident during a resident's 14-day quarantine and must not visit when a resident is positive for COVID-19 or symptomatic, unless the visit is for compassionate care.
- The community may restrict or revoke EC status if the EC fails to follow social distancing, use of PPE or other COVID-19 related rules of the community. Prior to restriction/revocation, the community, EC and resident should discuss in attempt to mediate the concerns.

Troubleshooting

- Residents may express a desire to designate more than one EC based on their past involvement and needs (e.g., more than one family member previously split time to provide care for the resident). In these unique situations, community staff should work cooperatively with the resident and family to work out a schedule to accommodate the ECs.

ESSENTIAL CAREGIVER – PROGRAM ANNOUNCEMENT LETTER

Dear XXX

One of the most difficult things about COVID-19 for our residents has been the prolonged separation from families and loved ones. With the virus still very much a threat in our communities, we must take careful steps in any plans to re-open our settings to visitors

We recognize the critical role family members and other outside caregivers, such as friends, volunteers, private personal caregivers, often have in the care and support of our residents. Recently released guidance now provides for a designation of an Essential Caregiver in assisted living communities.

Realizing both the potential benefits and risks of allowing additional essential caregivers into the building, we will carefully consider this guidance as well as other criteria such as the current status of COVID-19 in our setting and local communities and the overall health and safety of all who live and work here.

We ask for your patience over the next few days as we review this guidance and determine our next steps in terms of how it aligns with our infection control practices and diligent commitment we have to combat this virus as we balance the safety, health and wellness for all who live and work here.

We know the desire of our residents and their loved ones to be connected in a more meaningful way and also recognize the concerns that many of our residents and families regarding our ability to prevent and contain this virus in light of more people having access to our building(s).

Please know we are carefully considering our options, evaluating out policies and protocols, and will be sharing more information with you as soon as we have completed that process. In the meantime, please reach out to **Name, Title, Email and Phone** if you have any questions.

Sincerely,

Name
Title
Organization

ESSENTIAL CAREGIVER – SAMPLE RESIDENT/FAMILY LETTER

Dear XXX

Although social distancing and physical separation are still important to keep residents safe, we are taking steps to combat the unintended consequences of prolonged social isolation and to maintain overall health and wellbeing.

We are pleased to announce that we are creating a new Essential Caregiver program. Our goal through this program is to help our residents who are missing care previously provided by a loved one or outside caregiver prior to the visitor restrictions required by state and federal guidelines due to the COVID-19 pandemic.

This new program will be implemented effective [date here] per state guidelines and is a narrowly defined exception to visitor restrictions which may allow certain caregiving services to be provided by a personal caregiver from outside our community.

We ask for patience over the next [###] days as we design a program that balances the safety, health and wellness for all who live and work here and for those who serve in the Essential Caregiver role. We recognize the critical role family members and other outside caregivers, such as friends, volunteers, private personal caregivers, often have in the care and support of residents

We are providing some information to you in advance of this program starting so you have a better understanding of what it means to be an Essential Caregiver as well as the policies and protocols that will be in place for those who serve in this role.

We encourage you to read [link to the guidance] on Essential Caregivers to fully understand the guidance we are required to follow and ensure we are protecting the health and safety of all who live and work here. Below are some of the criteria we will use as we evaluate and designate Essential Caregivers in our settings:

- Essential Caregivers will be determined based on consultation/assessment with our [Administrator/Executive Director, Director of Nursing, Social Services Director or other designated staff].
- Residents will be consulted about their wishes to help determine whom to designate as an Essential Caregiver. If the resident desires to designate more than one Essential Caregiver based on their past involvement and needs, we will work cooperatively with them to determine who will serve as essential caregivers and the schedule for those visits.
- Essential Caregivers can be family members, outside caregivers, friends or volunteers who provided regular care and emotional support to the resident prior to the pandemic.
- Essential Caregivers may provide support up to two hours per day or until caregiving tasks are completed. Please know [Insert Org Name] may establish limits of the number of Essential Caregivers in the building or the length of the visits based on the need to keep residents and staff safe.
- Essential Caregivers will be actively screened for symptoms of COVID-19 prior to entering the building and must wear all necessary personal protective equipment while

in the building. They must also perform frequent hand hygiene and maintain social distancing of at least 6 feet with staff and other residents while in our building.

- Essential Caregivers will limit their movement in our building, providing care and support in their loved ones' room or a designated space in our building.
- Essential Caregivers must inform us if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit to a resident.

With this new guidance, it is important to know that Essential Caregivers cannot take a resident out into the community except for essential medical appointments, must not visit a resident during a resident's 14-day quarantine, and must not visit when a resident is symptomatic or tests positive for COVID-19, unless the visit is for compassionate care. Please know we do retain the right to restrict or revoke Essential Care status if the designated person fails to follow our established policies and protocols.

Realizing both the potential benefits and risks of allowing additional essential caregivers into the building, we will carefully consider the current status of COVID-19 in our setting and local communities prior to designating Essential Caregivers and as we monitor the program.

If you are interested in being designated as an Essential Caregiver, please contact [insert name, phone and email]. [Insert Name] can also respond to any questions or concerns you may have. We will review each request to determine whether it meets the criteria of the state and meetings the resident's care plan before any individual can begin serving as an Essential Caregiver.

We know that you share our concerns about efforts to keep residents in our community safe during the COVID-19 pandemic. While we welcome this opportunity to make necessary exceptions to the visitor restrictions, we must all continue to be vigilant. If, at any time, it is deemed unsafe for Essential Caregivers to enter the building—due to a rise in the number of cases in our community, either within our walls or in the broader community—it is our obligation per guidelines to revisit and reassess the program.

We recognize the concern you may have that not everyone will be able to serve as an Essential Caregiver. We also deeply feel the desire of our residents and their loved ones to be connected in a more meaningful way.

Please know we continue to provide outdoor visits, window visits, and visits through technology and encourage you to take advantage of these opportunities. We are working on plan to re-open our setting to visitation once we receive updated guidance from the state and meet the requirements that will be specified in that guidance. We will keep you updated on the status of our re-opening and look forward to the day when we can warmly welcome all visitors back into our community.

Sincerely,

Name

Title

Organization

ESSENTIAL CAREGIVER – STAFF LETTER

Dear XXX

The safety and health of our residents and staff has guided our work throughout the COVID-19 pandemic. We feel the impact of social isolation on the health and wellbeing of our residents and are taking steps to implement a new program that will allow some family members, friends or outside caregivers to provide care as permitted by statute and/or regulation and emotional support to residents.

The Essential Caregiver program to help reduce social isolation and is being created with guidance from the state. We want you to know that we have carefully assessed this decision to ensure we are taking all precautions and steps to ensure the safety and health of all who live and work here. We are finalizing policies and protocols for this program that we will share with you soon. The Essential Caregiver program will launch on [date].

Please know that we do not anticipate that the Essential Caregiver will have a direct impact on you and your role in our organization. We believe the program will provide benefit our residents, particularly in the area of emotional support.

This new program should not be considered a “re-opening” of our building to all visitors. Essential Caregivers will be family members, friends or outside caregivers who provided care and support to residents prior to the pandemic. They will be designated based on the wishes of the resident and in consultation with our leadership team, including the Director of Nursing/Social Services Director.

Essential Caregivers will be held to the same infection control standards as you are – they will be screened upon entering the building, required to use appropriate personal protective equipment and practice hand hygiene, and ask to practice social distancing of at least 6 feet from residents and staff. They will limit their movement in the building, providing care and support either in the resident’s room or in a designated pace in our building.

We will track and monitor the number of Essential Caregivers in our building at any given time to ensure we are not putting other residents and staff at risk. We also have the right to restrict this program based on the status of COVID-19 in our setting and our broader geographic area.

With this new guidance, it is important to know that Essential Caregivers cannot take a resident out into the broader community except for essential medical appointments and must not visit when a resident is symptomatic or tests positive for COVID-19, unless the visit is for compassionate care.

Please know we do retain the right to restrict or revoke Essential Care status if the designated person fails to follow our established policies and protocols, and ask for your support in letting us know if you see something that may present a risk to you, our residents and our community.

If you have any questions or concerns regarding Essential Caregivers, please contact Name, Email and Phone.

ESSENTIAL CAREGIVER – STAFF POLICIES & PROCEDURES

POLICY: To facilitate use of an Essential Caregiver during the COVID-19 pandemic to participate in the in-person care of a resident for those residents who require psychosocial support as a result of social isolation related to COVID-19.

DEFINITION OF ESSENTIAL CAREGIVER:

An Essential Caregiver is an individual who was previously actively engaged with the resident or is committed to providing psychosocial health support and/or assistance with activities of daily living

PROCEDURE:

1. Criteria for Essential Caregiver visit eligibility: *[consider your criteria and determine what these are for your community. List criteria below.]*
2. Criteria for suspending Essential Caregiver visits: *[consider your criteria and determine what these are for your community. List criteria below.]*
3. Determine residents who will benefit from an Essential Caregiver (EC)
 - a) Establish whether the resident was receiving regular care and support from a family member, outside caregiver, friend, or volunteer prior to the pandemic.
 - b) Review the resident list for resident's that may benefit from an EC visit for psychosocial support.
 - c) Speak with residents and/or family members who feel the resident will benefit from an EC visit for psychosocial support.
 - d) Complete an assessment of each resident type to determine if the situation meets the criteria for an EC visit(s).
4. Document resident needs as they relate to EC.
5. Consult the resident and discuss their choice for who will be the EC and what services or activity the EC will provide.
6. Coordinate EC visits with the designated essential caregiver and review the plan for visits.
7. Document conversation with each potential EC to review the following procedures that they must follow:
 - a) Sign-in when entering the building prior to each visit. Consider a sign-out book as well.
 - b) Be screened for COVID-19 symptoms.
 - c) Inform site if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit to the resident
 - d) Set a schedule of weekly visits for up to 3-hours per visit, ideally visits will conclude when the caregiving task is complete.
 - e) A mask and eye protection must be worn during the visit.
 - f) Perform frequent hand hygiene with alcohol-based hand rub or using the building's sanitization station.

- g) Limit movement within the community to resident's room or in a community-designated area.
 - h) Maintain social distancing of 6-feet with staff and other residents in the building.
 - i) Do not visit during a resident's 14-day quarantine, and when a resident is positive for COVID-19 or symptomatic.
 - j) As established by the community's guidelines, essential caregivers may not take the resident out into the broader community except for essential medical appointments.
 - k) Agree that Essential Caregiver status may be revoked if the EC fails to follow community rules.
8. Maintain an up-to-date list of contact information for each Essential Caregiver. Keep list at the check-in station for staff who are screening visitors for entrance into the community.
 9. Limit number Essential Caregiver in the building at any one time to **[Insert number here]**. *This is a recommendation you may use but is not included in the guidance. This is up to community discretion.*
 10. Educate ECs on proper PPE donning and doffing through utilizing posters demonstrating key instructions to reinforce safe practices.
 11. Communicate with ECs regularly about any changes to policies, procedures, or COVID-19 status in your building.

Effective Date: Reviewed By: Revised By:	Date: Date:
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ESSENTIAL CAREGIVER – SAMPLE APPLICATION

Applicant Information

Caregiver Name _____

Address _____

Phone Number _____

Email _____

- I am 18 years of age and older.

Resident Information

Resident Name _____

Relationship to Resident _____

What type of caregiver support did you provide prior to visitation restrictions?

- Assistance with personal hygiene
- Meal preparation/cueing
- Financial management
- Social companionship
- Other

Describe:

What is the expectation of your amount of time per week for visitation as an EC?

- 1 hour per week
- 2 hours per week
- 3 hours per week
- Other

Describe: _____

Comments: _____

Caregiver/Applicant Signature

Date

Community Verification

Discussion of EC applicant with Resident Date: _____

Verification of Caregiver Duties Date: _____

Describe: _____

Approval of EC Date: _____

EC completed EC agreement Date: _____

EC received training on Infection Control Date: _____

EC received EC Policy and Procedures Date: _____

Schedule for EC

Day	Time	Purpose of Support
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Executive Director Signature

Date

ESSENTIAL CAREGIVER – RISK ACKNOWLEDGEMENT FORM (RESIDENT)

Older adults and those with respiratory conditions are especially vulnerable to the serious consequences of COVID-19. Like you, we at [Insert Organization Name] consider the health and safety of those living in our [building/facility/setting/community] to be our top priority. As COVID-19 continues to spread in [state], we will continue to follow guidance provided to long-term care providers by the Centers for Disease Control & Prevention (CDC), the Centers for Medicare and Medicaid Services (CMS), and the [state regulatory agency].

While current guidelines do not allow us to re-open our [building/facility/setting/community] to general visitation, guidance does allow designation of essential caregivers, in appropriate cases, who may visit in order to provide care or services, as long as safety precautions are followed.

Visits to an older adult or a person with respiratory conditions may put that person at risk for serious and life-threatening infection. The CDC reports that ill visitors and healthcare personnel are the most likely sources of introduction of COVID-19 into a facility, and that infected persons can pass along the virus without even exhibiting symptoms of the virus themselves. However, we also recognize the positive impact that essential caregiver visits can have, and we believe we can successfully implement an essential caregiver program, if you and your designated essential caregiver follow our policies, procedures and instructions.

At this time, we continue to limit visitors inside our doors to all but essential healthcare personnel, compassionate care visitors, and designated essential caregivers. This policy is based on the current guidance from the CDC, CMS and the state health department. We will refine and update our policy as more information becomes available and as guidelines change. If you have questions regarding our visitation policy, please contact [insert an internal staff contact], or you may call the Ombudsman for Long-Term Care at [###].

I acknowledge that I have read this document and understand the risks of my decision to receive visits from my designated essential caregiver(s). I also agree to follow the procedures and instructions set forth in the acknowledgment form that my Essential Caregiver will sign.

Resident Name

Resident Signature

Date

Legal Representative Designation: _____
(if signing on behalf of the resident)

ESSENTIAL CAREGIVER – RISK ACKNOWLEDGEMENT FORM (CAREGIVER)

Essential Caregivers visiting [Insert Organization Name] must abide by the following procedures and instructions:

1. **Screening and Check-In Prior to Entry:** Essential Caregivers will enter through [insert the designated entrance] and participate in a check-in and screening process before proceeding into the [building/facility/setting/community]. The screening process will involve having a temperature and/or oxygen level taken and answering questions. An Essential Caregiver cannot enter or visit with a resident if the Essential Caregiver has a temperature of [insert] or higher or answers yes to any of the following questions [tailor these questions to your organization's policy and procedure]:
 - a. Are you under COVID-19 investigation or do you have a pending test result for COVID-19?
 - b. Have you tested positive for COVID-19 and are currently receiving treatment or required to self-isolate?
 - c. Do you have signs or symptoms of a respiratory infection, such as fever, cough, shortness of breath, or sore throat?
 - d. In the last 14 days, have you had contact with someone with a confirmed diagnosis of COVID-19, is under investigation for COVID-19, or are ill with respiratory illness?
 - e. Have you traveled internationally within the last 14 days to countries with sustained community transmission? For updated information on affected countries visit: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
 - f. Do you live in a town or areas where community-based spread of COVID-19 is occurring?
2. **Scheduling Visits.** Essential Caregivers must schedule visits ahead of time. To schedule an Essential Caregiver visit, contact [insert name and contact information] or [insert other applicable processes – such as an online scheduling system, etc.]. Visits will not be scheduled when a resident is positive for COVID-19 or symptomatic or during a 14-day quarantine, including the first 14 days after admission, unless the visit falls into [Insert Organization Name's] compassionate care visitation policy. [Insert other appropriate information specific to your policies about scheduling visits, such as length or frequency of visits.]
3. **Conducting Visits.**
 - a. Visit only the resident for whom you are a designated Essential Caregiver.
 - b. Limit your visit to the room of the resident for whom you are a designated Essential Caregiver, or to another location designed by [Insert Organization Name], and limit your movement within the [building/facility/setting/community] to traveling to and from the resident's room or other designated visit location.
 - c. Perform frequent hand hygiene with alcohol-based hand rub or using the building's sanitization station.
 - d. Wear a face mask and eye protection during the entire visit, and any additional personal protective equipment as required by [Insert Organization Name]. [Insert Organization Name] will educate the essential caregiver on how to don/doff necessary personal protective equipment, using posters demonstrating key instructions to reinforce safe practices [tailor this final sentence to match your specific approach].

- e. Practice social distancing by remaining at least 6 feet apart from staff and other residents in the [building/facility/setting/ community].
- f. [Insert other appropriate items specific to your policies your organization's policies and procedures.]

4. **Notification of Symptoms or Exposure.** After visiting, essential caregivers should monitor for signs and symptoms of respiratory infection for at least 14 days. Essential caregivers must inform [Insert Organization Name] if they develop a fever or symptoms consistent with COVID-19 within 14 days of a visit to the resident, are aware that they have been exposed to COVID-19, or test positive for COVID-19.

I acknowledge that I have read this document and understand the risks of my decision to visit the resident for whom I am a designated essential caregiver. I agree to follow the procedures and instructions listed above and understand that [Insert Organization Name] may restrict or revoke my Essential Caregiver designation and ability to visit if I do not abide by these procedures. I also understand that [Insert Organization Name] has voluntarily chosen to allow essential caregivers and can suspend or revoke this type of visitation should it become necessary for the safety of our residents.

Caregiver Name

Caregiver Signature

Date

ESSENTIAL CAREGIVER – RESOURCES

RESOURCES:

- [Managing COVID-19 Restrictions](#)
(Argentum)
- [Guidelines for Preserving Family Presence in Challenging Times](#)
(Planetree International)
- [Compassionate Care Amidst the COVID-19 Crisis](#)
(AHCA/NCAL)
- [Communication Strategies for Keeping Families Up To Date](#)
(AHCA/NCAL)
- [Tips on Person-Centered Dementia Care During COVID-19](#)
(Person-Centered Universe)
- [Guidelines for Memory Care Units in Long-Term Care Facilities](#)
(CDC)
- [Printer-friendly factsheets, infographics and other resources](#)
(CDC)