



## Essential Caregiver Guidance for Long-term Care Facilities

This interim guidance provides guidelines for nursing homes and other long-term care (LTC) facilities on the appropriate use of essential caregivers (ECs) to provide companionship and assist residents with activities of daily living.

The risk of COVID-19 transmission within nursing homes and other LTC facilities is high due to congregate living. At the same time, the Illinois Department of Public Health (IDPH) understands and acknowledges that restricting family and loved one's access to residents creates prolonged physical separation and isolation, which in turn impacts the health and well-being of residents. Many states have developed guidance to allow for the essential caregiver role as they appreciate the crucial role of family and other loved ones in the care and support of residents.<sup>1</sup> This guidance is consistent with Centers for Medicare and Medicaid Services (CMS) guidance.<sup>2</sup> The goal of this guidance is to ensure residents are able to receive individualized person-centered care.

Using a person-centered approach when applying this guidance should cover all types of visitors, including those who have been categorized as "essential caregivers." Specific guidance follows that should clarify how essential caregivers may interact with both the resident and the facility.

**Definition.** *Essential Caregiver (EC)* – Essential Caregivers are **not general visitors**. These individuals meet an essential need for the resident by assisting with activities of daily living or positively influencing the behavior of the resident. The goal of such a designation is to help ensure high-risk residents continue to receive individualized, person-centered care. The plan of care should include services provided by the Essential Caregiver.

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<sup>1</sup> Essential Caregiver Guidance for Long-term Care Facilities, Minnesota Department of Health, <https://www.health.state.mn.us/diseases/coronavirus/hcp/lccaregiver.pdf>

<sup>2</sup> <https://www.cms.gov/files/document/qso-20-39-nh.pdf>

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- The facility should establish policies and procedures for how to designate and utilize ECs that include visitation parameters and a process for communication with residents and families.
- The facility should encourage visits by ECs except during outbreak situations in the facility or when the resident being provided essential care has tested positive or is symptomatic for COVID-19. At such times, the administrator or director of nursing should determine if EC visits are appropriate or can be considered under compassionate care visitation.
- The facility should permit flexibility in scheduling EC visits, such as allowing evening and weekend visits, to accommodate the needs of the resident and the EC.
- The facility may establish time limits as needed to keep residents safe. Scheduling of EC visits may consider the number of ECs in the building at the same time.
- The facility must consult the resident or guardian to determine whether the resident or guardian wants to designate someone as an EC. Consider family members, outside caregivers, friends, or volunteers who provided regular care and support to the resident prior to the pandemic. Individuals may also be designated if different care needs arise (e.g. significant change in condition resulting from a fall, weight loss, or change in mental or psychosocial status).
- Residents may designate more than one EC based on needs (e.g., more than one family member may split time to provide care for the resident). If multiple ECs are designated, a schedule should be established by the administrator or director of nursing, in collaboration with the ECs and resident.
- The EC will maintain a distance of at least 6 feet from **other residents and staff** and wear appropriate PPE when they are in the facility.
- ECs must be screened, tested, and provided PPE in accordance with the health care personnel guidance in the facility's COVID-19 plan. The facility must document that it has trained the EC on proper infection control, including hand hygiene and appropriate use of PPE. LTC facilities licensed by IDPH must test ECs for COVID-19 as required by emergency rule.

- The EC will provide care and support in the resident’s room or in facility-designated areas within the building. The EC must limit movement in the facility and ensure separation from other residents in shared rooms by use of curtains or partitions.
- The EC may take the resident outdoors, while wearing appropriate PPE. The resident should wear a face covering, as tolerated. The EC should not take the resident off campus, except in accordance with the IDPH Reopening Guidance.<sup>3</sup>
- If the EC fails to follow appropriate use of PPE, social distancing from **other residents and staff**, other COVID-19 related rules, or any other facility policies, the facility may restrict or revoke EC visits.<sup>4</sup> Facility staff must first discuss the violation and the necessary corrective action with the EC and resident prior to instituting any restriction or revocation of EC visits.

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<sup>3</sup> IDPH Reopening Guidance,  
[https://www.dph.illinois.gov/sites/default/files/20201021\\_Revised\\_LTC\\_Reopening\\_Guidance.pdf](https://www.dph.illinois.gov/sites/default/files/20201021_Revised_LTC_Reopening_Guidance.pdf)

<sup>4</sup> <https://www.cms.gov/files/document/qso-20-39-nh.pdf>