



October 20, 2020

MEMORANDUM

TO: Community Residential Care Facilities
Nursing Homes

FROM: DHEC Healthcare Quality

SUBJECT: Compassionate Care Visits

The Department of Health and Environmental Control (DHEC) strongly recommends that licensed community residential care facilities and nursing homes in South Carolina establish a policy addressing compassionate care visits for each facility. This policy should adhere to both DHEC's [Guidelines for Outdoor and Indoor Visitation](#) and [CMS's guidance for reopening nursing homes](#).

The policy should clearly outline:

- What situations are included in a compassionate care visit;
- How often will a visitor in a compassionate care situation be allowed to visit;
- The length of time for a compassionate care visit;
- How the compassionate care visit will take place;
- Alternate ways to conduct a visit if a resident has a roommate; and
- If a designated area of the facility will be used for compassionate care visits.

Compassionate care visits by family, religious leaders, or other persons who meet the needs of the resident are permitted regardless of the facility's visitation status.

[CMS's Nursing Home Visitation FAQs](#) clarifies that it is imperative for facilities to know that, while end-of-life situations were used as examples of compassionate care situations in previous CMS memoranda, **the term "compassionate care situations" does not exclusively refer to end-of-life situations.** An example of an eligible compassionate care visit that is not an end-of-life situation is if a resident who was living with family before recently being admitted to a nursing home is facing a traumatic experience due to the changes in environment and people. According to CMS, allowing a visit from a family member in this situation would be consistent with the intent of the term "compassionate care situations." Similarly, allowing someone to visit a resident whose loved one recently passed away would also be consistent with the intent of these situations.



We encourage facilities to consult with residents and their families to help determine if a visit should be conducted for compassionate care as there are a myriad of situations that can constitute a compassionate care visit. Also, while CMS acknowledges that compassionate care situations may extend past end-of-life situations, it is still recommended that **these visits should not be routine** and should be allowed on a limited basis as an exception to restricting visitation.

DHEC, in adherence with [CMS guidance](#), also reminds facilities and visitors that all actions to prevent the transmission of COVID-19 should be taken when these visits are allowed.

Infection control and prevention actions should be integrated into the policy, such as:

- Screening all visitors for symptoms of COVID-19;
- Practicing social distancing;
- Performing hand hygiene (e.g., use alcohol-based hand rub upon entry); and
- Having both residents and visitors wear a cloth face covering or facemask for the duration of the visit.

Community residential care facilities and nursing homes can also create a safe space within each facility specifically reserved for compassionate care visits and may consider setting up appointment times to ensure control of the number of visitors at any given time. Additionally, facilities should continue to limit the number of visitors allowed in the building at the same time and limit the number of individuals visiting with any one resident (e.g., two visitors for one resident visit). **The compassionate care visit policy for each facility should clearly define what situations are eligible for such visits and what measures both staff and visitors are expected to take to ensure the health and safety of everyone.**

Facilities can contact acc-healthreg@dhec.sc.gov with questions about compassionate care visits.