Connecticut Department of Public Health

Policies and Procedures

Essential Support Persons, and State-wide Visitation for Residents of Long-Term Care Facilities

Pursuant to Public Act 21-71, the following definitions apply to the designation of a primary essential support person, and secondary essential support persons and state-wide visitation in long term care facilities:

Definitions.

(a) Definitions. For purposes of this guidance, the following definitions as defined in Public Act 21-71 shall apply:

(1) "Primary essential support person" means a person designated by a long-term care facility resident, or a resident representative, who may have access to the resident in accordance with rules set by the Commissioner of Public Health to provide essential support as reflected in the resident's person-centered plan of care;

(2) "Essential support" means support that includes, but is not limited to, (A) assistance with activities of daily living, and (B) physical, emotional, psychological and socialization support for the resident;

(3) "Secondary essential support person" means a person designated by the resident, or resident representative, to serve as a backup to a primary essential support person;

(4) "Person-centered plan of care" means a care plan for a resident developed by a resident or resident representative in consultation with multi-disciplinary team that focuses on the resident's physical, emotional, psychological and socialization needs and shall include a primary essential support person or secondary essential support person if designated by a resident;

(5) "Long-term care facility" means a nursing home facility, as defined in section 19a-490 of the general statutes, or a managed residential community, as defined in section 19a-693 of the general statutes that provides services offered by an assisted living services agency, as defined in section 19a-490 of the general statutes;

(6) “Department” means the Department of Public Health;

(7) “Representative” means: (A) a court appointed health care representative; (B) “health care representative” as defined in chapter 368w; (C) designation of person for decision-making and certain
rights and obligations as documented in section 1-56r; or (D) if such representative has not been legally appointed, means the resident’s representative, such as a guardian, who makes health-care decisions on the resident’s behalf, or a resident-selected representative who participates in making decisions related to the resident’s care or well-being, including but not limited to, a family member or an advocate for the resident. The resident determines the role of the representative, to the extent possible;

**Visitation.**

A long-term care facility shall have a policy in place to allow for visitation to take place in the facility. The policy shall include, but not be limited to, the following parameters:

(a) Residents right to visitation.

(1) To support the health, safety and well-being of a resident, the long-term care facility shall permit a resident of a facility to have visitation from any individual designated by the resident.

(2) The provisions of section 42 CFR 483.10, which include the resident’s right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility.

(3) The resident and visitor shall follow all policies or protocols implemented by the facility for visitation. Such policies or protocols shall be provided directly to the visitor, electronically or in writing, and shall be posted at visitor entrances.

(4) A facility may ask a visitor to leave if such visitor is not adhering to the policies or protocols implemented for visitation, or is endangering the health, safety, or welfare of the resident or other residents or staff.

(5) Any individual hired by the resident or the resident’s representative to provide personal care or home health or hospice services to the resident shall follow the same policies and protocols as facility staff.

(b) Residents right to elect a primary and secondary essential support person.

(1) All residents of a long-term care facility may elect to designate two individuals, one who may act as a primary and one who may act as a secondary essential support person, as part of their person-centered plans of care.

(2) Such designated primary and secondary essential support persons shall not be considered visitors for purposes of any Department guidance that limits visitation in a facility to protect the health, safety, and welfare of the residents.

(2) If a resident is unable to select a primary and secondary essential support person, the resident’s representative can make the designation.

(3) The resident may appoint their primary or secondary essential support person to provide input in the development, implementation, or any revisions to the resident’s comprehensive care plan.

(4) If, during a public health and civil preparedness emergency, declared by the General Assembly or by the Governor, pursuant to section 19a-131a and 28-9 of the Connecticut General Statutes, any state or applicable federal requirements and guidance restricts the access to residents, at such time, the primary or secondary essential
support person shall have access to the resident not less than twelve hours per day, provided such access shall not endanger the health or safety of the resident or other residents. The primary or secondary essential support person shall follow any applicable state or federal requirements and guidance. If end of life care is taking place for the resident, the primary or secondary essential support person shall have unrestricted access.

(5) In order to be designated a primary or secondary essential support person, such individuals shall follow the same safety and infection control protocols, currently in place, for long-term care facility staff. The long-term care facility staff shall provide the primary or secondary essential support person with any policies or protocols, or other necessary safety measures put in place by the long-term care facility for their facility staff. No individual may be designated primary or secondary essential support person unless they can adhere to the facilities policies or protocols in place.

(6) No primary or secondary essential support person shall be denied access to the resident unless the facility demonstrates that said person poses a danger to the health or safety of the resident or other residents, including the primary or secondary essential support person’s ability to comply with any policies or protocols in place, or pending allegations pursuant to section 42 CFR 483.12. If such access is denied, the long-term care facility shall provide written justification to the primary or secondary essential support person, electronically or in writing via certified mail, within twenty-four hours of the denial of access. The justification shall include, but not be limited to the reason for denial.

(7) If the resident’s primary or secondary support person is denied access by a facility, in writing, they may submit information included with the denial by the facility to the Office of the Long-Term Care Ombudsman. The resident or primary or secondary support person may also contact the Department and submit a complaint. Upon receipt of such complaint the Department of Public Health may initiate a complaint investigation.