

IOWA'S PHASED EASING OF LTC RESTRICTIONS

THE PATH TO REGAIN HOME

On June 4, 2020, the Iowa Department of Public Health and the Iowa Department of Inspections and Appeals released [guidance](#) for the Phased Easing of Restrictions in Long-Term Care (LTC) Communities. The guidance utilizes a three-phased approach to strike a balance between the need to maintain mitigation efforts that minimize exposure to COVID-19 and the need to maintain the quality of life and dignity necessary for the psychosocial well-being of residents. To reflect additional federal guidance, the guidance was revised on June 29 to permit additional visitation opportunities. (Note: Assisted Living will have variations of the following phases).

Phase 1

- Heightened virus spread in the community and potential healthcare system limitations (hospital capacity, staffing, PPE).
- Due to heightened risk, most stringent restrictions designed for vigilant infection control.
- NEW 6/29-Permits outdoor visitation upon appointment if no outbreak and resident asymptomatic and COVID-19 negative.

Phase 3

- Sustained lack of LTC community activity and downward trend with county for past 28 days. Healthcare system remains stable and adequate (hospital capacity, staffing, PPE, testing).
- Additional easing of restrictions to accommodate limited visitation for all residents and modified communal activities and dining.

Phase 2

- No outbreak or new virus activity in the LTC community within last 14 days and a downward trend within county. Healthcare system is stable and adequate (hospital capacity, staffing, PPE, testing).
- Modest easing of restrictions to accommodate visitation for compassionate care and limited communal activities and dining.
- ❖ **Detection of COVID-19 community spread within LTC provider results in return to Phase 1.**

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	Phase 1	Phase 2	Phase 3
Visitors & Entry	<ul style="list-style-type: none"> • Closed Window visits may occur. • Outdoor resident visits by appointment only if no outbreak and resident asymptomatic and COVID-19 free. Indoor visits for end-of-life. • Virtual Visitation available to communicate with friends, family, and the spiritual community. • Restricted entry of non-essential healthcare personnel. • Anyone entering/visiting must be screened before entry, practice hand hygiene and wear appropriate PPE use, determined by task. 	<ul style="list-style-type: none"> • Closed Window visits may occur. • Outdoor resident visits by appointment only if resident asymptomatic and COVID-19 free. Indoor visits for end-of-life and care planned compassionate care. • Virtual Visitation available to communicate with friends, family, and the spiritual community. • Low risk non-essential healthcare personnel based on risk analysis of infection control team. • Anyone entering/visiting must be screened before entry, practice hand hygiene and wear appropriate PPE use, determined by task. 	<ul style="list-style-type: none"> • Closed Window visits may occur. • Limited visitation available for all residents by appointment. Preference given to outdoor. • Virtual Visitation remains available to communicate with friends, family, and the spiritual community. • Additional non-essential healthcare personnel based on risk analysis of infection control team. • Anyone entering/visiting must be screened before entry, practice hand hygiene and wear appropriate PPE use, determined by task.
Dining	<ul style="list-style-type: none"> • Communal dining not recommended but must be limited to 10 individuals in the dining area at one time, and residents must always remain socially distanced. • Communal dining prohibited for suspected or confirmed COVID-19 cases. 	<ul style="list-style-type: none"> • Communal dining limited to 50 percent capacity of dining room but not less than 10 people. • Residents may eat in same room with social distancing. Tables must be spaced at least 6 feet apart with limited number of people. 	<ul style="list-style-type: none"> • Modified communal dining with social distancing. (limited number of people at tables to ensure space of at least 6 feet).
Activities & Travel	<ul style="list-style-type: none"> • Group activities limited; if no outbreak, indoor or outdoor group activities permitted for 10 people or less with social distancing and use of face covering. • Preference for engagement through technology. • Non-medically necessary trips should be avoided; telemedicine should be utilized whenever possible. • Quarantine for 14 days upon return from off-campus trip. 	<ul style="list-style-type: none"> • Indoor or outdoor group activities limited to 10 people or less with social distancing and use of face covering. • Non-medically necessary trips should be avoided; telemedicine should be utilized whenever possible. • Quarantine for 14 days upon return from off-campus trip. 	<ul style="list-style-type: none"> • Group activities may occur with social distancing and use of face covering. • Limited non-medically necessary trips with use of face covering; residents with high risk conditions should continue to avoid. • Observe for 14 days upon return from off-campus trip.
Salons & Barbers	<ul style="list-style-type: none"> • Salon and Barbers prohibited as non-essential personnel. 	<ul style="list-style-type: none"> • Barbers and beauticians determined to be low risk for entry through risk analysis may provide services with additional precautions like screening before entry, staged appointments, limit residents in salon to maintain social distancing, use of facemasks, and extra sanitation efforts. 	<ul style="list-style-type: none"> • Barbers and beauticians may provide services with additional precautions like screening before entry, staged appointments, limit residents in salon to maintain social distancing, use of facemasks, and extra sanitation efforts.