Operations	Visitation Policy- The Gallery at Port Orange	Date of Issue: 2/18/2023 Last Revised: 7/29/2026 Last Reviewed: 7/29/2026

Policy Statement

The Gallery at Port Orange strives to promote autonomy and independence for residents, staff, and guests. The Gallery at Port Orange shall permit residents to receive visitors in accordance with resident's wishes, and protection of rights of other residents within the community.

Policy Interpretation and Implementation

- Residents are permitted to have visitors of their choosing, at the time of their choosing. The number of visitors is not restricted.
- The community shall facilitate a minimum of 9am-9pm daily access to visitation. At the resident's request, 24-hour access to visitation shall be facilitated by the community.
- The community may restrict or deny some types, times, or locations of visitation in order to protect the safety, security, and/or rights of the community's residents. Restrictions or denials may occur for reasons including, but not limited to:
    a. Individuals who have been found to have committed criminal acts,
    b. Individuals who appear to be inebriated or disruptive
    c. Individuals with suspected respiratory or other type of contagious infection.

  **Please note, this is not pertinent to essential caregivers.
- Visitors may include, but are not limited to:
    a. Spouses/ Domestic partners/ other family members (not restricted to individuals related by blood)
    b. Friends
    c. Clergy
    d. Healthcare providers
    e. Representatives from federal and state regulatory agencies, resident advocates, or Long Term Care Ombudsman
    f. Other individuals with whom the resident wants to associate. In the event the resident is not cognitively sound, permission for such visitation shall be obtained from the resident's legal representative.
- Residents and/ or responsible parties shall be informed by the community's Executive Director, or their designee, of visitation rights and related guidelines upon admission to the community.
- The community's Executive Director, a member of the community's management team, or a respective designee of a member of the community's

management team shall oversee staff adherence to the community's visitation policies and procedures.

- At a resident's request, space and privacy for interactions with visitors shall be afforded by the community.
- Visitation shall not be denied, restricted, or limited by the community to any individual on basis of race, color, national origin, religion, sex, gender identity, sexual orientation, or disability.
- Residents have the right to deny visitation at any time. If a resident chooses to withdraw consent for visitation by a particular individual, such denial shall be documented in writing and retained in the resident's business record and/ or the resident's electronic medical record.
- Residents have the right to participate in consensual physical contact with a visitor of the community. If a resident is not cognitively sound, and desires consensual sexual contact with a visitor, the resident's legal representative shall be contacted by the community's Director of Health and Wellness, the community's Memory Care Director, or their respective designee(s).
- The community shall not restrict visitors based on the request of family members or the healthcare power of attorney. If a family member (or HPOA) requests that a certain individual be denied access to any resident based on safety or security concerns, the staff will protect resident safety while allowing visitor access until the allegations are investigated.
- Unless otherwise permitted by the resident, visitors shall wait outside of the resident's apartment while the resident is receiving treatment, undergoing examinations, and/or receiving personal care.
- Inquiries concerning visitation and access to the community should be referred to the community's Executive Director, or their designee.
- Visitors shall not occupy the resident's apartment without the knowledge of the resident and/or community's Executive Director, or their designee. When a resident is not at the community, approval for such access shall be obtained by the community's Executive Director, or their designee.
- The length of time of a visit is not restricted by the community, however visitors shall not reside at the community in the resident's apartment without admission to the community. Visitors wishing to temporarily stay in the resident's apartment overnight shall have prior approval from the community's Executive Director, or their designee. "Temporary stay" shall be defined as no more than 3 days per month.
- Visitors shall enter and exit the community through the community's main entrance/ exit, signing in and out for each visit. Visitors shall not use side doors, patio entrances, staff access hallways, windows, or any other means to enter community. Visitors of residents who live within the community's Memory Care environment shall not be provided keypad access codes for gaining entry to the community or Memory Care environment.
- During the hours that the community's main entrance doors are locked and unattended, the community shall provide means for a visitor to request

access. Typically, this is in the form of a doorbell or 24-hour accessible phone line to contact staff within the community for access to be granted.

- Visitors shall not be required to show or provide proof of vaccination or immunization status.
- In the event of an outbreak situation within the community or local community, prioritization of the health and safety of residents shall be implemented. In this situation, The Gallery at Port Orange reserves the right to implement actions and proactive measures to contain or limit the incidence of infections and communicable diseases. Proactive measures may include, but are not limited to:
    a. Utilization of standard precautions
    b. Education about infection control protocols and the specific risks of transmission associated with the infectious disease involved in the outbreak
    c. Hand hygiene by handwashing or use of alcohol-based hand sanitizer
        i. Visitors shall be educated that handwashing is the most important method of infection control
        ii. Hands shall be washed between direct contact with any residents, after completing cleaning tasks, after using the restroom, or when/ after completing any task that provides opportunity for infection
    d. Informing residents and/or responsible parties of an outbreak situation and/or infection control protocols that have been enacted by the community.
    e. Screening of visitors for active infectious disease at the time of entrance to the community by the community's Concierge, or their designee
    f. Education and implementation of personal protective equipment (PPE) when applicable, in accordance with CDC guidelines
        i. Signage regarding proper donning and doffing of PPE shall be made available (please find appended to this policy)
    g. Limited community access, such as staying in the resident's apartment or designated area for the duration of the visit.

    **Please note, this is not pertinent to essential caregivers.
- The community may request a visitor agree to visitation guidelines, policies, and procedures in writing. The community reserves the right to suspend in-person visitation of a specific visitor if the visitor violates the community's policies and procedures.

REFERENCES

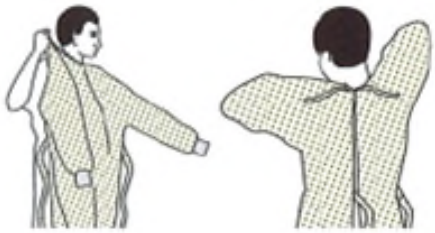
- Donning and Doffing Signage

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator

3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit

4. GLOVES

- Extend to cover wrist of isolation gown

USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

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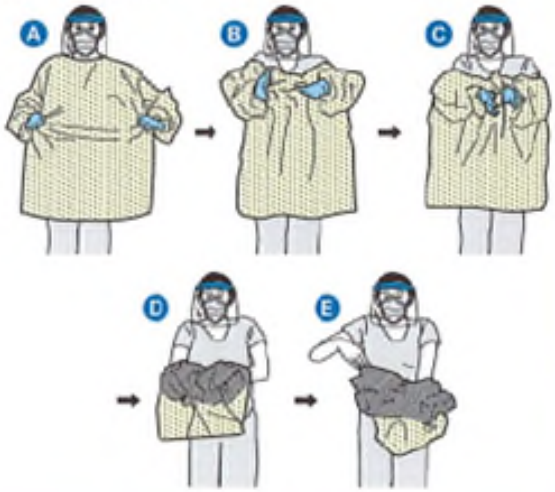
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container

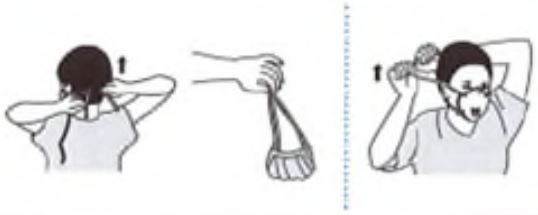


2. GOGGLES OR FACE SHIELD

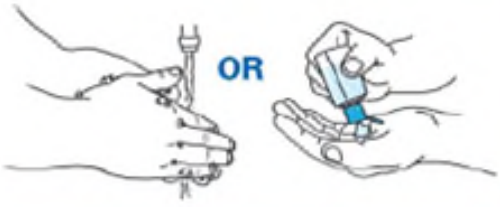
- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

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REVISION HISTORY:

Date	Version	Changes
2/18/2023	2023.1	Original Document
3/19/2024	2024.1	Spun off individual Florida communities from main policies, as applicable. Within first bullet point, detail added "the number of visitors is not restricted" Combining second and third bullet point. Reduction in details of denials of visitation Removal of bullet points 4 and 5. Addition of "The Executive Director/Designee or Concierge shall oversee team members adhere to the visitation policy." Removal detail of medical restrictions to visitation Addition that ESL does not ask for vaccination status. Addition of detail regarding outbreak scenarios
9/10/2024	2024.2	Update to format template. No contextual changes to document.
4/28/2025	2025.1	Addition of "Individuals with suspected respiratory or other type of contagious infection." Within third bullet point. Addition of "**Please note, this is not pertinent to essential caregivers." Within third bullet point Update bullet point outlining Executive Director being responsible for

		overseeing adherence to the visitation policy to include "a member of the community's management team, or a respective designee of a member of the community's management team" Removal of "Incidents of disruptive behavior by any visitor(s) shall be documented within the resident's business record." Addition of "During the hours that the community's main entrance doors are locked and unattended, the community shall provide means for a visitor to request access. Typically, this is in the form of a doorbell or 24-hour accessible phone line to contact staff within the community for access to be granted." Addition of detail within an outbreak situation and that detail is not pertinent to essential caregiver. Addition of "The community reserves the right to suspend in-person visitation of a specific visitor if the visitor violates the community's policies and procedures."
12/23/2025	2025.2	Removal of "or are undergoing an investigation related to allegations of abuse, exploitation, or coercion" within the first

		sub-bullet of the third bullet point Update to Infection Control protocols to: a. "Informing residents and/or responsible parties of an outbreak situation and/or infection control protocols that have been enacted by the community. b. Screening of visitors for active infectious disease at the time of entrance to the community by the community's Concierge, or their designee c. Education about infection control protocols and the specific risks of transmission associated with the infectious disease involved in the outbreak d. Hand hygiene by handwashing

		or use of alcohol-based hand sanitizer e. Wearing medical-grade surgical face masks, or other PPE for the duration of their visit, as required by the community, the resident's healthcare provider, CDC guidelines, or guidelines set forth by the community's local health department or other regulatory agency. f. Limited community access, such as staying in the resident's apartment or designated area for the duration of the visit. "
7/29/2026	2026.1	Addition of donning/ doffing instructions

REGULATORY REFERENCES

Source	**Section**