



May 26, 2020

To our residents' loved ones:

We wanted to first of all extend our profound thanks for your patience and understanding as we continue to navigate the uncharted waters that the COVID-19 pandemic has inflicted. This is my 50th year in this field, and I can truthfully say that I have never been through anything like this.

The outpouring of support that is evident every day from you, our amazingly wonderful staff, and the residents themselves has provided the motivation for the hundreds of people involved with WISH in one capacity or another to show up for another day, provide care to our residents and do our best to protect them from falling victim to this insidious virus.

One enormous hole that is still left unfilled is that of you being able to connect in person with your loved ones in our facilities, and as each day goes by, that hole gets bigger. I wish this letter was to say that we can solve that problem, but sadly, we can't. The federal and state guidelines continue to restrict visitation in long-term care facilities, as you can read in the attached memo from the Department of Health. We want you to know what steps we are taking to hopefully create opportunities for visits without violating and federal or Department of Health regulations and guidelines while also keeping our residents safe from the spread of COVID-19.

1. We are working closely with our main association, the Wisconsin Health Care Association/Wisconsin Center for Assisted Living (WHCA/WICAL), to develop guidelines to present to the State to allow for some flexibility in the guidelines, particularly during the summer months, when properly controlled outdoor visits may be feasible with proper social distancing and PPE.
2. As permitted, we will continue to make allowances for what is defined as "compassionate care visits," which will follow strict guidelines for screening of any visitors, PPE usage and visitors limited strictly to the resident's room.
3. As guidance and/or regulations change, we will update you.

I can tell you without hesitation that all of us at WISH are acutely aware of the hardship caused to both you and our residents as this visitation restriction continues. While we wholly understand the rationale for it and would never do anything to knowingly compromise the health and safety of our residents and staff, we also understand that emotional and mental health are extremely important components of overall health, and they need to be addressed as well. You have our promise to continue to make all aspects of our residents' well-being our highest priority.

Thank you again for your continued support and understanding.

Sincerely,

Robert Siebel
President and CEO
Carriage Healthcare Companies Inc.
Management company for WISH
Bsiebel@carriagehealthcare.com



Visitation Guidance

People who live in our nursing homes, assisted living communities, and the staff and caregivers are at a high risk of contracting COVID-19. Their safety and wellbeing continue to be a top priority for DHS. When a resident or staff member tests positive for COVID-19, the potential for rapid spread can be extremely high and life-threatening and asymptomatic individuals who are COVID-positive can spread the virus. In order to minimize spread, we ask that long-term care settings remain vigilant about minimizing the number of people entering their buildings from the community. The Department of Health Services continues to support the following guidance regarding visitation of residents by family members. This information is consistent with the Centers for Disease Control guidance for assisted living facilities, [Considerations When Preparing for COVID-19 in Assisted Living Facilities](#) and information published on the [DHS COVID-19 webpage](#).

Restrictions on visitors:

- Facilities should restrict all visitors and nonessential health care personnel, except for certain compassionate care situations, such as an end-of-life scenario. Facilities should notify potential visitors of the need to defer visitation until further notice (through signage, calls, letters, etc.).
- In compassionate care situations, visitors will be limited to a specific room only. Facilities should require visitors to perform hand hygiene and use personal protective equipment (PPE), such as face masks. Decisions about visitation during an end-of-life situation should be made on a case-by-case basis, which should include careful screening of the visitor (including clergy, bereavement counselors, etc.) for fever or respiratory symptoms.
- Individuals with symptoms of a respiratory infection (fever, cough, shortness of breath, or sore throat) should not be permitted to enter the facility at any time (even in end-of-life situations).
- Visitors that are permitted to enter must wear a face mask while in the building and restrict their visit to the resident's room or other location designated by the facility. Facilities should also remind visitors to frequently perform hand hygiene, especially after coughing or sneezing.

Health care workers:

- Facilities should follow [CDC guidelines for restricting access to health care workers](#).
- Other health care workers, such as hospice workers, EMS personnel, or dialysis technicians, who provide care to residents should be permitted to enter the facility as long as they meet the CDC guidelines for health care workers.
- Facilities should contact their local health department for questions, and frequently review the [CDC COVID-19, website for health care professionals](#).

Additional [guidance](#) published on the [DHS COVID-19 webpage](#) includes:

- Offering alternative means of communication for people who would otherwise visit, such as virtual communications (phone, video-communication, etc.).
- Creating and/or increasing listserv communication to update families, such as advising them to not visit.
- Assigning staff to serve as the primary contact to families for inbound calls, and conducting regular outbound calls to keep families up to date.
- Offering a phone line with a voice recording updated at set times (for example, daily) with the facility's general operating status, such as when it is safe to resume visits.

Please also see the Wisconsin Board on Aging and Long Term Care (BOALTC) memo [COVID-19, Visitation and Long-Term Care Communities](#) dated April 14, 2020 which shares similar alternatives to a face-to-face visits:

- Use Facetime, Skype or other mobile media, if your resident has access to a device, or as arranged by the home.
- Send extra cards, notes, postcards, being sure to keep your message short and positive.
- Phone your resident often, but please try not to call during the busiest times of day if staff need to assist your resident with the phone.
- If your resident is unable to talk on the phone or use mobile media to stay in touch, ask the staff if someone can call you periodically to give you an update about how your resident is doing.

Residents still have the right to access the Ombudsman Program with the Board on Aging and Long Term Care by phone at 1-800-815-0015, via e-mail at BOALTC@wisconsin.gov or online at <http://longtermcare.wi.gov/>.

These recommendations are to keep our residents of Wisconsin assisted living communities protected from the COVID-19 virus, but also the staff and caregivers who work in those settings. In these days, where many long-term care settings are already working with fewer staff than they would like, they cannot afford to lose even one to this virus for any length of time. If your facility has developed additional creative ways for residents to connect with their loved ones, please share those with us on the weekly Assisted Living Provider Forums. Thank you for your help in protecting Wisconsin's most vulnerable citizens.