

## Guidance for Long-term Care Facilities\* on Managing Resident Quarantine after Non-Medical Community Outings April 30, 2021

Given the length of the COVID-19 pandemic and the burden of isolation, many residents of long-term care facilities may wish to leave their facilities for non-medical outings. This guidance was developed to support that activity in a manner that helps keep long-term care facility residents safe and assists the facilities in evaluating and managing the risk of community outings.

This guidance is based on the Centers for Disease Control and Prevention's guidance for nursing homes and long-term care facilities regarding "[New Admissions and Residents who Leave the Facility](#)" found in "[Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes.](#)"

### **General Recommendations for all Outings**

Residents leaving facilities and those accompanying them should be educated about infection prevention recommendations and the importance of adhering to them regardless of vaccination status. These recommendations include:

- Wearing a face mask when around others
- Cleaning hands frequently
- Maintaining 6 feet physical distancing between individuals, when feasible

Facilities should consider providing the resident with supplies needed to comply with infection prevention recommendations (e.g., face masks and alcohol-based hand sanitizer), as appropriate.

Facilities should consider tracking outing dates and the risk level determination of the outing.

### **Post-Outing Quarantine Recommendations**

The decision to place a resident in quarantine following an outing is based on the resident's risk of exposure to SARS-CoV-2 and their potential to spread the virus. Residents who are fully vaccinated are at lower risk of becoming ill with COVID-19 following community outings. They are, however, still at some risk for becoming infected with SARS-CoV-2 and then potentially spreading the virus to others even if they have no symptoms. Residents who are not fully vaccinated are still at risk of becoming seriously ill with COVID-19 and spreading the virus to others.

In general, residents who leave the facility for less than 24 hours do not need to quarantine on return to the facility unless:

- The resident had close contact\*\* with a person who has SARS-CoV-2 infection during a community outing.
- Uncertainty exists about a resident's adherence or the adherence of those around them to recommended infection prevention measures or the resident engaged in a higher-risk activity (see examples, below).

If a resident is away from the facility for 24 hours or longer, they should generally be managed as a new admission, as related to COVID-19 precautions:

- Residents who are not fully vaccinated should be placed in a 14-day quarantine.
- Residents who are fully vaccinated or within 3 months of a SARS-CoV-2 infection do not need to quarantine if they did not have prolonged close contact with someone with SARS-CoV-2 infection in the prior 14 days. If a facility cannot confirm that the resident did **not** have prolonged close contact with someone with SARS-CoV-2 infection (e.g., the resident engaged in a higher-risk activity such as dining indoors with unvaccinated individuals), the facility may consider quarantining the resident upon return.

### **Assessing Risk of Resident Outings**

In deciding whether or not to quarantine residents upon their return, facilities will need to assess a resident's risk of exposure to SARS-CoV-2 based on the particular activity and the adherence to infection prevention and control recommendations. The following scenarios demonstrate examples of risk levels associated with different outing activities:

Examples of a higher-risk activities:

- Dining in a restaurant or indoors with a large group
- Visiting indoors, especially with unvaccinated individuals from multiple households
- Resident is not willing or able to wear a face mask and perform regular hand hygiene
- Individuals accompanying the resident are not willing or able to wear a face mask and perform regular hand hygiene

Examples of lower-risk activities:

- Eating outdoors while maintaining physical distancing
- Visiting with a few vaccinated individuals from a single household
- Resident and those around him/her wear face a mask at all times and regularly perform hand hygiene

\* "Long-term care facilities" means nursing home, assisted living facilities, and intermediate care facilities for individuals with intellectual disabilities (ICFs/IID). Nursing homes may follow this guidance as long it does not conflict with any Centers for Medicare & Medicaid Services (CMS) requirements.

\*\* "Close contact" means that an individual was within 6 feet of an individual with confirmed SARS-CoV-2 infection for a cumulative total of 15 minutes or more over a 24-hour period.

\*\*\* "Fully vaccinated" means 2 weeks after the second dose in a 2-dose COVID-19 vaccine series, like the Pfizer or Moderna vaccines, or 2 weeks after a single-dose vaccine, like Johnson & Johnson's Janssen vaccine.

## **REFERENCES**

Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes. Centers for Disease Control and Prevention (CDC).

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

Interim Public Health Recommendations for Fully Vaccinated People. CDC.

[https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html#anchor_1615134468166)

[guidance.html#anchor\\_1615134468166](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html#anchor_1615134468166) . Updated April 2, 2021. Accessed April 4, 2021

Risk Assessment Template to Assess COVID-19 Exposure Risk for Residents/Clients after Community Visits. Washington Department of Health.

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Travel During COVID-19. CDC. <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>. Updated April 2, 2021. Accessed April 5, 2021.

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