



September 14, 2022
Revised November 14, 2022

Revised Protocols for the Implementation of Isolation and Precautions for Individuals Exposed to COVID-19 residing in OPWDD Certified Facilities

This advisory supersedes OPWDDs September 14, 2022, guidance titled “Revised Protocols for the Implementation of Isolation and Quarantine of Individuals in OPWDD Certified Facilities Following COVID-19 Infection” and further supersedes any other guidance from OPWDD on this topic. This updated guidance document will clarify when individuals should be placed on isolation and/or when COVID-19 precautions should be implemented in NYS Office for People With Developmental Disabilities (OPWDD) certified facilities. The guidelines found within this document apply to providers of services to individuals with intellectual and/or developmental disabilities certified and/or operated by OPWDD, with the exception of Intermediate Care Facilities (ICFs). This guidance is based on recent updates made by the Center for Disease Control and Prevention (CDC). Please note that the CDC and the NYS Department of Health (NYSDOH) guidance is frequently updated, and this guidance is, therefore, subject to change.

Guidance for those individuals who reside in an Intermediate Care Facility (ICF), can be found in the section of this document titled “Guidance for ICFs”.

OPWDD continues to promote the importance of being up to date with vaccination as a way of protecting the individuals we support and OPWDD employees against serious illness, hospitalization, and death.

Definitions

Exposure is defined as being close to someone who has COVID-19 for at least 15 minutes within 24 hours.

Close Contact is defined as someone who was less than 6 feet away from an infected person (laboratory-confirmed or a clinical diagnosis) for a cumulative total of 15 minutes or more over a 24-hour period. For example, three individual 5-minute exposures for a total of 15 minutes. People who are exposed to someone with COVID-19 after they completed at least 5 days of isolation are not considered close contacts.

Being “*up to date*” on vaccinations is defined as having received all recommended vaccines **and** boosters when eligible.

Precautions for Individuals Exposed to COVID-19

Effective the date of this document, individuals residing in an Individual Residential Alternative (IRA) or a Community Residence (CR) who are exposed to or are in close contact with a person diagnosed with COVID-19 no longer need to quarantine. This is regardless of vaccination status.

Any individual who has been exposed to, or who has been in close contact with a person diagnosed with COVID-19 must start the following precautions immediately:

- Wear a mask as soon as the exposure is known.
- Masks should be worn for a full 10 days.
 - Day 0 is the day of your last exposure to someone with COVID-19
 - Day 1 is the first full day after your last exposure
- Do not go places where you are unable to wear a mask.
- Take extra precautions if you will be around people who are more likely to get very sick from COVID-19 (i.e., those who are immunocompromised).
- Get tested on day 6 (even if symptoms do not develop).

Isolation and Precautions for Individuals with COVID-19

Regardless of vaccination status, individuals diagnosed with COVID-19 must isolate from others. Additionally, if symptoms develop, the following precautions must be followed:

- Isolate immediately.
- Get tested.
- Remain in isolation until results are received.
 - If the test is negative, isolation can end
 - If the test is positive, the individual must isolate for 5 days

The following precautions should be followed during an isolation period:

- All individuals should stay home, in a separate room from other household members, if possible, for at least 5 full days (day 0 is the first day of symptoms, or the date of the positive test results for those who are asymptomatic).
- Wear a high-quality mask when around others in the residence.
- Individuals should not attend programming or other community activities.
- Use a separate bathroom if possible.
- Take steps to improve ventilation at home if possible.
- Don't share personal household items, like cups, towels and utensils.
- Monitor symptoms and if an individual has an emergency warning sign (including trouble breathing), seek emergency medical care immediately.

Ending Isolation

Ending isolation is currently based on how serious the COVID-19 symptoms were:

If there were NO symptoms:

- Isolation may end after day 5.

If there WERE symptoms:

- Isolation may end after day 5 if the following criteria are met:
 - The individual is fever-free for 24 hours, without the use of fever-reducing medication

- Symptoms are improving (*Note that loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation)
- If there is still a fever, or other symptoms are NOT improving, isolation must continue until symptoms improve (i.e., no fever for 24-hours without the use of fever-reducing medication)
- If the individual had a moderate illness (i.e., shortness of breath, difficulty breathing) or severe illness, meaning the individual was hospitalized due to COVID-19, or they have a weakened immune system, isolation must continue through day 10.
 - Additionally, if an individual had a severe illness or already had a weakened immune system, a physician should be consulted before ending isolation - This may require a COVID-19 test to come off of isolation
- After isolation has ended, if COVID-19 symptoms recur or worsen, isolation should restart at day 0.

Removing Masks After Isolation

The CDC continues to recommend masking for the full 10 days for an individual who has tested positive for COVID.

The following guidelines should be followed for masking:

- Individuals who have tested positive should be encouraged to wear a well-fitting mask for the full 10 days (5 days of isolation and days 6-10 after isolation ends).
- For those individuals who are unable to tolerate wearing a mask, after the 5-day isolation period has ended and they are improving (no fever without the use of fever-reducing medications and symptoms are decreasing), the following steps may be followed:
 - Testing can be done at this time - With two sequential negative tests, 48 hours apart, the mask may be removed sooner than day 10 (i.e., the mask can be removed after the **second** test if it is negative)
 - If the test continues to be positive, they should continue to isolate through day 10
- Information on this may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html#:~:text=If%20you%20test%20positive%20for,unable%20to%20wear%20a%20mask>

Guidance for ICFs

1. Providers should follow the **same** guidance in an ICF as is documented within this guidance document for an IRA. Individuals who meet the following criteria must follow transmission-based precautions (contact precautions & droplet precautions) when there has been an exposure or close contact with a person who has tested positive for COVID-19:
 - Those who are unable to be tested or wear a mask as recommended for the 10 days following their exposure.
 - Those who are moderately to severely immunocompromised.
 - Those who reside in a home with others who are moderately to severely immunocompromised.

- Those who reside in a home experiencing ongoing COVID-19 transmission that is not controlled with initial intervention.
2. Individuals who are exposed should be tested on days 1, 3 and 5. If any of these tests are positive, testing can cease, and the individual should immediately be placed on isolation.

Information on transmission-based precautions can be found at:

<https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html>

Social Distancing

While social distancing of 6 feet is no longer mandatory, it is important to try to maintain space and distance between individuals and others. To avoid a possible exposure, try to avoid crowded areas or keep a distance between others.

Screen Testing

The CDC no longer recommends routine screen testing. However, in addition to monitoring for symptoms, individuals who have been exposed to COVID-19 should test at day 6. In addition, any individual experiencing symptoms must test immediately and isolate pending test results.

Symptoms may include:

- Fever
- Loss of taste or smell
- New or increased cough
- Shortness of breath
- Difficulty breathing
- Muscle or body aches
- Sore throat

Masking

Effective September 7, 2022, OPWDD is no longer requiring that masks be universally worn in OPWDD certified or operated programs, except for Specialty Hospitals pursuant to DOH and CDC requirements for hospitals and health care settings. Staff and visitors will be required to wear appropriate face coverings in Specialty Hospitals. Nothing in this guidance shall prevent an individual municipality (county/city), federal regulator, or individual provider from maintaining a masking requirement if it chooses to do so. Providers should communicate the changes in masking to their employees.

OPWDD certified programs are strongly encouraged to review and, as necessary, strengthen all health and safety measures to compensate for the end of universal masking. These include promoting vaccination, encouraging COVID testing, improved ventilation, social distancing, cleaning and disinfection, excluding sick individuals from program, and proper hand hygiene and respiratory etiquette.

There are still circumstances when masking should be used in certified programs such as described in the precautions and isolation sections of this document. In addition, individuals and staff in an OPWDD certified program should still wear a mask, regardless of vaccination status, in the following circumstances:

- If they are moderately-to-severely immunocompromised and have discussed the need to mask with their healthcare provider(s);
- If they feel more comfortable wearing a mask for personal reasons;
- If they are required to mask by their municipality (city/county);
- If required to mask by any relevant federal licensure or regulator;
- For staff: if required as part of a reasonable accommodation.

If they completed a minimum 5-day isolation period because of a COVID-19 infection and have returned to program, masks must be worn on days 6-10. Individuals who cannot tolerate the wearing of masks because of their disability may be exempt from masking requirements. In this instance, such individuals may not attend programming for days 6-10.

To the extent that persons are expected or required to mask, masks may be removed when eating, drinking, singing, napping, going outside, or playing a wind instrument. When masks are removed for these purposes, maximize social distancing as much as possible (ideally six feet or more).

Obtaining Tests For Screening

Test kits previously sent to providers may be used for the screening as discussed in this guidance. Additionally, should this supply run out, Medicare and Medicaid both cover the cost of 8 at home COVID-19 test kits per month for members. A partial listing of participating pharmacies can be found at <https://www.medicare.gov/medicare-coronavirus>. This list is for those participating under Medicare. There is no up-front charge by Medicare for these test kits. Medicaid does require that the member pay for the test and complete the paperwork for reimbursement. This remains in effect until the end of the COVID-19 Public Health Emergency.

Transportation

Masking and social distancing is not required for individuals on non-public transport vehicles. Note that those individuals who have been exposed and are required to wear a mask for other reasons (i.e., post-isolation period) should wear a mask during non-public transportation. Any individual utilizing public transportation should be encouraged to mask.

Intermediate Care Facilities (ICFs)

Individuals and staff in ICFs are no longer required to wear masks except in specific circumstances such as when they are recovering from COVID-19 or when they have been exposed to COVID-19.

Reasonable Accommodation

To the extent an employee has been granted a reasonable accommodation that may conflict with these guidelines, the employee must discuss their particular situation with their

supervisors and DRA Coordinator and comply with alternative protective measures that are necessary to protect the health and safety of individuals and staff. Providers of ICFs should follow the CMS guidance with regard to offering reasonable accommodations of staff who cannot be vaccinated.

Additional Questions

General questions or comments about this advisory can be sent to Susan B. Prendergast, RN, BS, OPWDD Director of Nursing and Health Services at:

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