COVID-19 Congregate Setting Admission, Readmission, and Discontinuation of Transmission-Based Precautions Guidelines

- Individuals with COVID-19 who are medically stable may be transferred to congregate setting while still infectious and requiring isolation and transmission-based precautions. Additional testing prior to admission or readmission is not needed for individuals who have previously tested positive for COVID-19.
- Testing should be performed for residents who have not previously tested positive for COVID-19 around the time of admission or readmission, including transfers from hospitals or other healthcare facilities, to inform cohorting decisions. If the hospital does not test the patient, the congregate setting must test and quarantine upon admission.

NEW ADMISSION OR READMISSION TO A CONGREGATE SETTING

- Isolation should continue in the COVID-19 Positive Unit until:
  - At least 7 days have passed since recovery, defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); AND
  - At least 14 days have passed since symptoms first appeared or
  - If asymptomatic, at least 14 days have passed since the date of specimen collection for the first PCR-positive test.

Quarantine ideally in a single room in a separate area (Unknown Status Unit) until testing result is available.
- If not available, quarantine in a single room in the Observation Unit until testing results are available.

- Quarantine for 14 days after admission ideally in a single room in a separate area (Observation Unit)
  - If symptoms develop, re-test immediately.

- Retest at the end of 14-day quarantine

- Transfer to a designated COVID-19 Positive unit
- Follow the same guidelines for discontinuation of transmission-based precautions outlined on the left

- Release from quarantine
- Place in a *COVID-19 Negative and COVID-19 Recovered Unit

- Tested Positive
  - Isolation still indicated?
    - YES: Transfer to a designated COVID-19 Positive Unit
    - NO: Symptoms resolved?
      - YES: Can return to a *COVID-19 Negative and COVID-19 Recovered Unit
      - NO: Persistent cough or chronic symptoms above baseline:
        o Single room in the COVID-19 Positive Unit is preferred
        o Remain in room until symptoms have resolved or at baseline to the extent possible
        o Wear face mask, if tolerated, during care activities and when outside the room

- Tested Negative
  - Quarantine for 14 days after admission
  - Place in a *COVID-19 Negative and COVID-19 Recovered Unit

*COVID-19 Negative and COVID-19 Recovered Unit refers to the cohort/unit for the residents who tested negative and are without known exposure to COVID-19 in the last 14 days or who previously tested positive for COVID-19 and recovered.
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<table>
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<tr>
<th>Resident Cohorting</th>
<th>COVID-19 Positive Unit</th>
<th>Unknown Status Unit</th>
<th>Observation Unit</th>
<th>COVID-19 Negative and COVID-19 Recovered Unit</th>
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</table>
| Placement Criteria | Residents with laboratory-confirmed COVID-19 (tested PCR positive for COVID-19) who have not met criteria for discontinuation of transmission-based precautions | - Residents with pending COVID-19 PCR test results  
- Residents who refuse COVID-19 testing | Residents who tested PCR negative for COVID-19 at time of admission but were potentially exposed within the last 14 days (e.g., new admissions and readmissions transferred from another facility) | - Residents who tested PCR negative for COVID-19 without a known exposure in the last 14 days  
- Residents who have recovered from COVID-19 |
| Infection Control and Prevention Precautions | - This unit should be housed in a separate area (building, unit or wing) of the facility and have dedicated staff members who do not provide care for residents in other cohorts  
- Dedicated staff members in this unit should have separate break rooms and restrooms. These staff should remain separate from other staff members  
- To the extent possible, restrict access of ancillary personnel (e.g., dietary) to the unit  
- Assign dedicated environmental services (EVS) staff to work on this unit  
- Residents should wear a face mask, if tolerated, during care activities and when outside the room | - Ideally, place resident in a single room in a separate area. If single room is not available in a separate area, place resident belong to this unit in a single room in the Observation Unit until testing results are available  
- Maintain transmission-based precautions for all residents on the unit  
- Residents should wear a face mask, if tolerated, during care activities and when outside the room | - Ideally, place resident in a single room in a separate area  
- If single-bed rooms are not available, cohort those residents in the same room with at least 6 feet between beds and a privacy curtain drawn between them. If unable to separate beds by 6 feet, separate as far as possible, but no less than 3 feet apart  
- Maintain transmission-based precautions for all residents on the unit  
- Residents should wear a face mask, if tolerated, during care activities and when outside the room | - Residents can be placed in a multi-resident room  
- Maintain standard precautions |
| PPE Recommended During Direct Patient Care | All recommended COVID-19 PPE, which includes a N-95 or higher-level respirator (or face mask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gown, and gloves | All recommended COVID-19 PPE | All recommended COVID-19 PPE | Standard precautions plus universal face masks for source control |

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