September 14, 2022

Revised Protocols for the Implementation of Isolation and Quarantine of Individuals in OPWDD Certified Facilities Following COVID-19 Infection

This advisory will clarify when individuals should be placed on isolation and/or quarantine in NYS Office for People With Developmental Disabilities (OPWDD) certified facilities. This guidance supersedes any other guidance from OPWDD on this topic. 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.

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.

The NYSDOH issued guidance dated May 31, 2022, titled “*NEW REVISED* Isolation and Quarantine Guidance” which describes the NYS approach to COVID-19 quarantine and isolation. The NYS DOH guidance document can be found at the following link: https://coronavirus.health.ny.gov/system/files/documents/2022/06/quarantine-and-isolation-guidance_05.31.22.pdf.

Definitions

*Exposure* is defined as having contact with someone infected with SARS-CoV-2, the virus that causes COVID-19, in a way that increases the likelihood of getting infected with the virus.

*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.

*Fully vaccinated* is defined as anyone who has received all doses in the primary series of a
COVID-19 vaccine series.

*Fully Boosted* is defined as receiving all boosters recommended, when eligible. Vaccine recommendations are different depending on your age, the vaccine you first received, and time since last dose.

**Quarantine**

Effective the date of this document, individuals who are fully vaccinated and fully boosted on their COVID-19 vaccinations, who are living in Individual Residential Alternatives (IRAs) or Community Residences (CR) certified by OPWDD may follow a **5-day** quarantine/isolation, as described below.

Exceptions to this are those individuals who reside in an Intermediate Care Facility (ICF), where the quarantine/isolation period remains at **10 days**. Additional information on this can be found on page 8 of this document.

The following sections provides additional information on who does and does not need to quarantine, including information on criteria for who must quarantine.

Specifically:

**Who does Not Have to Quarantine After Close Contact with Someone With COVID-19?**

- Anyone who is fully vaccinated and fully boosted on their COVID-19 vaccinations.
- Anyone who has had confirmed COVID-19 within the last 90 days (tested positive using a **viral test**, e.g., antigen or PCR).

**If Not Subject to Quarantine, take the following precautions:**

- Wear a well-fitting mask around others for 10 days from the date of last close contact with someone with COVID-19 (the date of last close contact is considered day 0).
- Get tested at least 5 days after the date of last close contact with someone with COVID-19. If test is positive or COVID-19 symptoms develop, isolate from other people and follow agency guidelines on isolation.
- Anyone who had COVID-19 within the last 90 days and has since recovered and remained symptom free, does not need to get tested after close contact with someone with COVID-19.
• If an exposed person who does not have to quarantine cannot separate from one or more individuals with COVID-19 who are in isolation (e.g., because the exposed person lives in the same household with a sick individual who needs care), then the exposed person will have ongoing exposure until the infected person is no longer contagious. See detailed testing and mask recommendations in the “Ongoing COVID-19 Exposure FAQs” section of CDC’s quarantine and isolation page at: https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html

• If an exposed person who does not have to quarantine travels during the 10 days after last close contact, the person should wear a well-fitting mask when around others for the entire duration of travel during the 10 days. Anyone unable to wear a mask should not travel during the 10 days. Travelers should get tested at least 5 days after the date of the last close contact, receive a negative test result before travel or further travel, and be symptom free.

Who Must Quarantine After Close Contact With Someone With COVID-19?

• Anyone who is not fully vaccinated and fully boosted on their COVID-19 vaccinations as defined in this document.

• The quarantine time period for this group is 5 days. Exceptions to this may be made based on nursing judgement. Examples of when quarantine may increase include:
  ➢ Individuals who are medically fragile or immunocompromised
  ➢ Individuals who begin to exhibit symptoms of COVID-19.
  ➢ For any individual who is unable to comply with the wearing of a mask.

• In order for an individual to come off of quarantine at 5 days, they must be able to adhere to the post-exposure recommendations which includes the need to wear a well-fitting mask through day 10. If they are unable to do so, quarantine would continue until day 10.

• The 5-day quarantine allowance is a flexibility that is applicable to IRA and CR only when clinically indicated. Nursing staff must use judgement when determining if an individual must quarantine for a longer period of time. A longer quarantine period may be put into place by a nurse for those who are medically fragile or immunocompromised, or who may not be able to
comply with the mask requirement. This should be done on an individual basis and should not be applied to the IRA or CR setting in its entirety unless, in the nurse’s judgement, it applies to each individual in the IRA or CR setting.

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.

Exposure
Any individual or employee who has been exposed to COVID-19 should begin wearing a mask as soon as the exposure has been determined. Mask wearing should continue for 10 full days. Note that day 0 is the day of the last exposure to COVID-19. Day 1 is the first full day after the last exposure.

Those who are exposed should be monitored for symptoms and if they begin to exhibit symptoms, should immediately isolate.

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 5. 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

When to Isolate
• All individuals with a confirmed diagnoses of COVID-19 must isolate, regardless of vaccination status.
• Any individual who tests positive for COVID-19 must isolate from others in the home and stay home for 5 days.
Any individual who develops symptoms must immediately isolate while awaiting test results.
  ➢ If test results are positive, isolate for 5 days.
  ➢ If test results are negative, isolation ends.

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<thead>
<tr>
<th>If the Individual Had NO Symptoms</th>
<th>If the Individual HAD Symptoms</th>
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<tbody>
<tr>
<td>• Day 0 is the day individual was tested (not the day they received the positive test)</td>
<td>• Day 0 of isolation is the day of symptom onset, regardless of when the individual tested positive.</td>
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<tr>
<td>• Day 1 is the first full day following the day the individual was tested.</td>
<td>• Day 1 is the first full day after the day the individual’s symptoms started.</td>
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<tr>
<td>• If the individual develops symptoms within 10 days of when they were tested, the clock restarts at day 0 on the day of symptom onset.</td>
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**How to Isolate**
- 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 day of the positive test for asymptomatic persons).
- Use a separate bathroom if possible.
- Wear a well-fitting mask when it is not possible to be separate from others in the home.
- Monitor symptoms, and if individual has an emergency warning sign (including trouble breathing), seek emergency medical care immediately.
- Take steps to improve ventilation at home, if possible.
- Avoid contact with other members of the household and pets.
- Don’t share personal household items, like cups, towels, and utensils.

**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.
• 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.

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 quarantine, exposure 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.

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).

**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](https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html#:~:text=If%20you%20test%20positive%20for,unable%20to%20wear%20a%20mask)

**Obtaining Tests For Screening**
Test kits previously sent to providers may be used for the screening 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](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 also wear the 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. There are currently no changes to the guidelines for those individuals residing in an ICF which is considered a health care setting. Isolation must continue for any individual who is presumed positive or who has tested positive for COVID-19 for a full 10 days. When there is an individual who is positive for COVID-19, all other individuals in the home must be quarantined for 10 days.

**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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