



Answers to Frequently Asked Questions about COVID-19 Guidance for Assisted Living Residences

Last updated April 12, 2022

Masking

Should staff at assisted living residences (ALRs) continue to wear masks?

Healthcare workers who are not up to date on their vaccines in ALRs are required to wear N-95 masks during periods of substantial and high transmission ($\geq 50/100,000$ cases per 100,000 persons) in accordance with RIDOH regulations (1). Regardless of their vaccination status, HCW in ALRs should wear procedure or surgical masks in resident-facing areas regardless of community transmission rates (2,3). ALRs should develop best practice infection control policies that meet the needs of their staff and residents.

Should residents of assisted living residences continue to wear masks?

Residents should wear masks in areas where they interact with other residents (2,9). Masking is an effective way to reduce transmission of COVID-19. Older persons and immunocompromised residents in congregate care settings are at the highest risk of infection and severe disease. Vaccines are highly effective in reducing severity of illness and reduce, but do not eliminate risk of infection or transmission.

Should visitors to ALRs continue to wear masks?

Visitors are currently required to wear masks during visits to ALRs (4). This regulation is due to expire May 10, 2022. Visitors should continue to wear masks during their visits after this date, but it will no longer be required (2,9).

Vaccination

Are healthcare workers in ALRs required to be vaccinated?

All healthcare workers in RIDOH-licensed facilities, including ALRs are required to be up to date with their COVID-19 vaccines. If a healthcare worker chooses not to be vaccinated for any reason, they must wear a NIOSH-approved N95 mask during periods in which COVID-19 prevalence in the State is greater than or equal to 50 cases per 100,000 people per week, as reported by RIDOH (1).

COVID-19 data can be found at health.ri.gov/data/covid-19. These data are updated Monday through Friday by approximately 3 p.m.

What does up to date on vaccination mean?

Being up to date with COVID-19 vaccines means a person has received all recommended doses of their primary series and a booster dose when recommended. Currently, a second booster is not required to be considered up to date.

Will RIDOH continue to offer on-site vaccination?



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On June 30, 2022, the State's contract with MedTech and Alert Ambulance to provide on-site vaccinations free of cost to nursing homes and ALRs will end. All nursing homes and ALRs have been provided information on vaccination options available to them after June 30, 2022. These options include, among others, MedTech and Alert (though any costs for their services will not be covered by the State).

While nursing homes and ALRs are encouraged to continue using MedTech and Alert until June 30, 2022, they are also encouraged to take this time to put in place necessary arrangements to ensure vaccine availability beyond this date. Questions and concerns may be directed to nicholas.larmore@health.ri.gov.

Testing

Do residents of ALRs need to be tested weekly?

No. There are no current regulations requiring surveillance testing for residents. New admissions or residents who have left the facility for more than 24 hours should be tested on arrival and, if negative, 5 to 7 days after admission. Close contacts of someone who has tested positive for COVID-19 should also be tested immediately and 5 to 7 days after exposure. Residents should be tested if they have symptoms consistent with COVID-19 infection (6). ALRs may choose to implement broad-based surveillance testing during periods of high community transmission.

Do healthcare workers or staff need to be tested weekly?

There are no current regulations requiring healthcare workers or staff in ALRs to be tested regularly. Facilities may choose to implement broad-based surveillance testing during periods of high community transmission.

Do ALRs still need to report positive tests to RIDOH?

Yes, facilities must continue to report positive COVID-19 cases in residents and staff and visitors to RIDOH. Results from point-of-care rapid antigen tests administered at the facility can be reported through portal.ri.gov/reportcovidresult. Anyone who would like to report the result of a COVID-19 test administered at home should enter their results through portal.ri.gov/s/selftest.

Quarantine

Do new admissions need to be quarantined on arrival?



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Residents who are up to date on their vaccines do not need to be quarantined upon arrival. Residents who are not up to date on their vaccines should be quarantined upon admission and tested upon arrival and after 5 to 7 days regardless of vaccination status (6).

Do close contacts of residents with COVID-19 need to be quarantined?

Residents who are up to date with their vaccines do not need to be quarantined after close contact exposure. The COVID-19 infected resident does need to be isolated for the duration of illness. Residents who are not up to date with their vaccines should be quarantined after close contact with someone with COVID-19 for at least 7 days with a negative test or 10 days. All residents with close contact exposure should be tested after exposure and after 5 to 7 days regardless of vaccination status (6).

Do staff need to be quarantined after close contact with residents who have COVID-19?

Staff in ALRs should follow the RIDOH quarantine and isolation by population guidance that recommends quarantine for 5 days with enhanced precautions for an additional 5 days for staff that are not up to date on their vaccines. If staff are up to date on their vaccines, there are no work restrictions with enhanced precautions (6).

Isolation

Residents diagnosed with COVID-19 must be isolated in accordance with appropriate infection control protocols for 10 days. Staff diagnosed with COVID-19 may return to work after 5 days with a negative test using enhanced precautions. Longer isolation periods may be appropriate for residents and staff who are immunocompromised or who have severe illness.

References

1. RIDOH 216- RICR 20-15-9 and RICR 20-15-7
2. CMS QSO 20-39
3. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html> accessed 3/29/2022
4. RIDOH 216- RICR 40-10-27 expires 5/10/2022
5. CMS QSO 22-07
6. <https://health.ri.gov/publications/guidance/COVID-19-Quarantine-and-Isolation-Guidance-by-Population.pdf> accessed 3/30/2022
7. CMS QSO 20-38 updates 3-10-2022, accessed 3/30/2022
8. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html> accessed 3/30/2022
9. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html> accessed 3/30/2022