

Phase Two Guidance
Coronavirus 2019 (COVID-19): Guidance for Intermediate Care Facilities (ICF)

This document provides reopening guidance to intermediate care facilities (ICF). Given the critical importance in limiting COVID-19 exposure in such facilities, decisions on relaxing restrictions should be made with careful review of the number of facility-level and community cases, and in collaboration with Department of Disability Services (DDS) and DC Health. Support and interdisciplinary teams should consider this guidance when developing a person-centered plan to mitigate risk for persons living in the ICF. This guidance is not intended for community residence facilities for the elderly and physically disabled (Chapter 34) or persons with intellectual disabilities (Chapter 35), mental health community residence facilities (MHCRF), nursing homes or assisted living facilities. For guidance on other facilities settings, please visit coronavirus.dc.gov.

Activity	Phase Two
Communal Dining	<p>Consider using testing criteria below before allowing limited communal dining:</p> <ul style="list-style-type: none"> Weekly testing of staff (at least 2 consecutive weeks); please see “Testing Section” section below Weekly testing of all persons living in the ICF (excluding those isolated due to positive COVID-19 status at time of specimen collection or those who are less than 12 weeks from discontinuation of isolation due to positive COVID-19 status) <p>Persons living in the ICF who meet the following criteria must continue to be served in their rooms:</p> <ul style="list-style-type: none"> Currently isolated due to being positive for the virus that causes COVID-19 Currently quarantined due to possible exposure to or having symptoms of COVID-19 If there is a new infection of a resident in the facility then all other residents are considered exposed and communal dining should not occur until quarantine is completed <p>PLEASE NOTE: Communal dining will increase the risk of COVID-19 spreading in your facility. Please be cautious by ensuring all appropriate screening and testing (if applicable) practices are in place before implementing any level of communal dining. Please also do everything possible to facilitate social distancing (such as removing chairs, spacing tables to ensure persons living in the ICF are at least 6 feet apart, using visual cues or markers, staggering mealtimes, ensuring ample hand hygiene access, ensuring robust cleaning and disinfection of the dining area, etc.). Consider the person’s ability to comply consistently with social distancing and using cloth face coverings or facemask and the person’s comfort level with activity, when determining whether the person should participate in this activity.</p>
Field Trips/ Group Activities	<p>Continue to restrict field trips for people living in the ICF.</p> <p>Consider testing criteria below before allowing limited group activities within the facility or within the facility’s boundary (for example, movies, bingo, other individualized activities):</p> <ul style="list-style-type: none"> Weekly testing of staff (at least 2 consecutive weeks); please see “Testing Section” section below Weekly testing of all persons living in the ICF (excluding those isolated due to positive COVID-19 status at time of specimen collection or those who are less than 12 weeks from discontinuation of isolation due to positive COVID-19 status) <p>Persons living in the ICF who meet the following criteria should not physically* be present for group activities:</p> <ul style="list-style-type: none"> Currently isolated due to COVID-19 Currently quarantined because of exposure to or exhibiting symptoms consistent with COVID-19 If there is a new infection of a resident in the facility then all other residents are considered exposed and group activities/field trips should not occur until quarantine is completed <p>Persons living in the ICF who meet the following criteria may be physically present during group activities with social distancing (limited number of people at tables and spaced by at least 6 feet):</p> <ul style="list-style-type: none"> Never tested positive for the virus that causes COVID-19

	<ul style="list-style-type: none"> • Were previously positive for the virus that causes COVID-19 AND have completed the symptom-based or time-based clearance method <p>*Consider alternate modalities of participation (e.g., tele-participation, web-based).</p> <p>PLEASE NOTE: Group activities will increase the risk of COVID-19 spreading in your facility. Please be cautious by ensuring all appropriate screening and testing (if applicable) practices are in place before implementing any type of group activity.</p> <ul style="list-style-type: none"> • Please limit activities to no more than 10 people (including direct care staff and people living in the ICF). Group activities that increase possible risk of aerosolization (e.g., singing, chanting, loud vocalization, use of wind instruments) should be avoided. • For all facilities, please do everything possible to facilitate social distancing and infection control (such as removing chairs, spacing tables to ensure persons living in the ICF are at least 6 feet apart, using visual cues or markers, staggering activity start and end times, ensuring ample hand hygiene access, ensuring robust cleaning and disinfection of activity space and equipment, eliminate or minimize sharing of activity items, etc.). • Consider outdoor activities which provide better ventilation and is preferred over indoor activities. • Consider the person’s ability to comply consistently with social distancing and using masks/cloth face coverings and the person’s comfort level with activity, when determining whether the person should participate in this activity.
Visitors	<p>Consider testing criteria below before allowing outdoor visitation:</p> <ul style="list-style-type: none"> • Weekly testing of staff (at least 2 consecutive weeks); please see “Testing Section” section below • Weekly testing of all persons living in the ICF (excluding those isolated due to positive COVID-19 status at time of specimen collection or those who are less than 12 weeks from discontinuation of isolation due to positive COVID-19 status). <p>Outdoor visitation can be considered if the following measures are in place:</p> <ul style="list-style-type: none"> • Decline in the number of facility-associated COVID-19 cases OR no newly diagnosed cases in persons living in the ICF for the past 14 days <ul style="list-style-type: none"> ○ DDS can assist with making this determination • Visitors are scheduled in advance. • Policies in place to address <ul style="list-style-type: none"> ○ the appropriate number of visitors per person and per designated space that allows for adequate social distancing (at least 6 feet between persons living in the ICF and visitors). ○ education of appropriate hand hygiene practices for visitors. ○ use of alcohol-based-hand-rub (ABHR) before and after the visit and as needed. ○ temperature checks and screenings. ○ right to revoke, cancel or deny a scheduled visitation. • Ask visitors to notify the facility if they develop fever or symptoms consistent with COVID-19 within 14 days of visiting the facility. • Masking/cloth face covering for appropriate parties (e.g., visitor, person living in the ICF, direct care staff). • Social distancing (at least 6 feet between persons living in the ICF and visitors). This includes no physical contact between persons living in the ICF and visitors. • Staff present at all times, if appropriate. • Conduct in an open outdoor area with good airflow (e.g., open porch or patio). • Ensure ample opportunities for hand hygiene. • Ensure robust cleaning and disinfection of outdoor visitation area. • Maintain a daily record of visitors in the residence for at least 30 days to facilitate contact tracing. <p>Visitation inside a facility is generally prohibited, except for compassionate care situations and other exemptions documented in the Mayor’s order 2020-063.</p> <ul style="list-style-type: none"> • In those limited situations, visitors are screened, and additional precautions are taken, including social distancing, and hand hygiene. • All visitors must wear a cloth face covering or facemask during their visit.

	<ul style="list-style-type: none"> • If visitation occurs inside the facility, visits should take place in the person’s room or a designated visitation area. • Ask visitors to notify the facility if they develop fever or symptoms consistent with COVID-19 within 14 days of visiting the facility. • Maintain a daily record of visitors in the residence for at least 30 days to facilitate contact tracing. <p>Persons living in the ICF who meet the following criteria should not participate in outdoor visitation:</p> <ul style="list-style-type: none"> • Currently isolated due to COVID-19. • Currently quarantined because of exposure to or exhibiting symptoms consistent with COVID-19. • If there is a new infection of a resident in the facility then all other residents are considered exposed and outdoor visitation should not occur until quarantine is completed
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Non-Essential Medical Providers</p>	<p>Exclude all non-essential personnel from access to the ICF.</p> <ul style="list-style-type: none"> • Consider telemedicine options as much as possible. • If there is a necessary medical appointment that cannot be effectively provided through telehealth, the person can leave the facility to access that care using all necessary safety measures outlined in the section “Leaving for Medical Reasons”. • If there is a new infection of a resident in the facility then all other residents are considered exposed and non-essential medical provider visits at the facility should not occur until quarantine is completed (telehealth should still be permitted under this circumstance) <p>PLEASE NOTE: Non-essential medical personnel is determined by each individual facility. This determination should be made based on the medical needs of people living in that facility at that point in time.</p>
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Leaving for Medical Reasons</p>	<p>Keep people at the ICF unless there is a medical reason for having them leave.</p> <ul style="list-style-type: none"> • Persons living in the ICF with laboratory-confirmed COVID-19 who have not been cleared from isolation should only leave the facility for essential medical needs (i.e., dialysis). Prior notification should be provided. • Non-essential appointments/procedures should be delayed or provided via telemedicine if possible. • Persons living in the ICF with unknown COVID-19 status should take private transport to and from their appointment (do not take public transportation). • Travel for COVID-19 positive people should be provided by medical transport, with prior notification to the medical transporter. • Ensure people living in the ICF who must leave the facility wear their cloth face coverings or a facemask whenever leaving the facility.
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Non-medical Personal Care Services</p>	<p>Travel to hair salons, barbershops, nail salons, or other non-medical personal care services is strongly discouraged.</p> <p>Consider the following testing criteria prior to allowing limited non-medical personal care services to occur in the ICF (inside or outside):</p> <ul style="list-style-type: none"> • Strongly consider routine weekly testing of non-medical personal care service personnel • Weekly testing of ICF staff (at least 2 consecutive weeks) • Weekly testing of all persons living in the ICF (excluding those isolated due to positive COVID-19 status at time of specimen collection or those who are less than 12 weeks from discontinuation of isolation due to positive COVID-19 status) <p>Examples of permitted non-medical personal care services:</p> <ul style="list-style-type: none"> • Barbers • Hairdressers • Non-medical nail care (manicures, pedicures, acrylics, etc.) • Etc. <p>Persons living in the ICF who meet the following criteria should not undergo non-medical personal care services:</p> <ul style="list-style-type: none"> • Currently isolated due to COVID-19

	<ul style="list-style-type: none"> • Currently quarantined because of exposure to or exhibiting symptoms consistent with COVID-19 • If there is a new infection of a resident in the facility then all other residents are considered exposed and non-essential personal care services should not occur until quarantine is completed <p>Screen all personnel (personal care service providers) for fever and symptoms of COVID-19 before providing services in the ICF.</p> <ul style="list-style-type: none"> • Actively take their temperature and document absence of symptoms consistent with COVID-19. If they are ill, have them keep their cloth face covering or facemask on and leave the facility. • Ask personnel to notify the facility if they develop fever or symptoms consistent with COVID-19 within 14 days of visiting the facility. • Maintain a daily record of external visitors in the ICF for at least 30 days to facilitate contact tracing. <p>Ensure additional precautions are maintained:</p> <ul style="list-style-type: none"> • Persons living in the ICF should use cloth face coverings or facemask, as much as possible. • Personnel should use facemask and eye protection (goggles or face shield) when providing personal care services. • Provision of infection control education and competency to personnel <ul style="list-style-type: none"> ○ Hand hygiene ○ Personal protective equipment ○ Cleaning and disinfection (e.g., contact time) • Ensure cleaning and disinfection is performed in between services provided to persons living in the ICF using products on EPA List N. • Services are provided to only one person at a time. • Designate a space for non-medical personal care services to occur in the ICF. Outdoors is preferred over indoors. If the service has to be done indoors, ensure proper ventilation in the space. <p>PLEASE NOTE: Non-medical personal care services will increase the risk of COVID-19 spreading in your facility. Please be cautious by ensuring all appropriate screening and testing (if applicable) practices are in place before allowing any non-medical personal care services.</p> <ul style="list-style-type: none"> • Personal care services provided in the facility can be monitored and procedures can be reinforced to reduce infection control risk. Because of this, personal care services provided in the facility may offer less risk than having people leave the facility to receive services. • Consider the person's ability to comply consistently with social distancing and using cloth face coverings or facemask and the person's comfort level with activity, when determining whether the person should participate in this activity.
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Screening Persons Living in the ICF</p>	<p>Continue to screen persons living in the ICF for possible signs and symptoms of COVID-19. Screening should include the following:</p> <ul style="list-style-type: none"> • Active temperature check and pulse oximetry. • Questions about and observations for other signs or symptoms of COVID-19. • An up-to-date list of COVID-19 symptoms can be found on the CDC's website: cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html • Screening all persons living in the ICF at least once a day, and as needed. • Consider increasing screening frequency for all persons living in the ICF if there is an ongoing outbreak in your facility.
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Screening Direct Care Staff¹</p>	<p>Screen all direct care staff¹ at the beginning of their shift for fever and symptoms of COVID-19;</p> <ul style="list-style-type: none"> • Facilities undergoing COVID-19 outbreaks should consider screening direct care staff at the start, middle and end of each shift. Actively take their temperature and document absence of symptoms consistent with COVID-19. If they are ill, have them keep their cloth face covering or facemask on, notify their supervisor, and leave the workplace. <p>Continuously educate direct care staff to remain vigilant for symptoms of illness consistent with COVID-19.</p>

¹ **Direct Care Staff:** all paid and unpaid persons who have direct contact and provide care services to people who live in ICFs.

	<ul style="list-style-type: none"> An up-to-date list of COVID-19 symptoms can be found on the CDC's website: cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
Testing Persons Living in the ICF	<p>Facilities are required to test all persons living in the ICF if:</p> <ul style="list-style-type: none"> Anyone who has been in the ICF (e.g., person residing in facility, direct care staff, exempt visitor²) is confirmed to have COVID-19; OR There is on-going transmission of the virus that causes COVID-19 in the ICF; OR There is 1 or more COVID-19 cases in persons living in the ICF; OR There are 3 or more cases of acute illness compatible with COVID-19 in persons living in the ICF with onset within a 72 hour period. <p>Test all persons living in the ICF as needed who meet the following criteria:</p> <ul style="list-style-type: none"> Showing possible signs or symptoms of COVID-19. <p>If weekly testing of persons living in the ICF are performed, test all residents weekly who meet the following criteria:</p> <ul style="list-style-type: none"> Anyone not currently isolated for laboratory-confirmed COVID-19 at time of specimen collection (asymptomatic or symptomatic) Anyone who does not have a test pending for the virus that causes COVID-19 at time of specimen collection (asymptomatic or symptomatic) Anyone who is beyond 12 weeks of the date they were cleared from isolation due to a laboratory-confirmed COVID-19 diagnosis
Testing Staff	<p>All staff are tested weekly indefinitely until indicated to stop by DC Health after the District has moved out of Phase Three.</p> <ul style="list-style-type: none"> Exclude staff who meet the following criteria from weekly surveillance testing: <ul style="list-style-type: none"> Those isolated due to positive COVID-19 status at time of specimen collection Those who are less than 12 weeks from discontinuation of isolation due to positive COVID-19 status.
Routine Data Reporting	<p>Continue reporting persons living in the ICF and staff consistent with DDS guidance and requirements.</p>
PPE for Staff	<p>Universal masking (surgical or procedural facemask) at all times while in the facility for staff who provide direct care or are in care areas.</p> <p>All staff who do not provide direct care or enter care areas should wear a cloth face covering at all times while in the facility.</p> <p>Universal eye protection (goggles or face shield) at all times.</p> <p>Staff providing care to (or entering the room of) persons living in the ICF quarantined or isolated for COVID-19 should wear the following:</p> <ul style="list-style-type: none"> Eye protection Face mask (or respirator) <ul style="list-style-type: none"> Respirators should be worn during aerosol-generating procedures and by personnel who are medically cleared and fit tested for the specific brand and size. Gown Gloves

² **Exempt visitor:** Those who are visiting for compassionate care situations and other exemptions documented in the Mayor's order [2020-063](#)
Coronavirus 2019 (COVID-19): Guidance for Intermediate Care Facilities (Phase Two)
 Last updated: August 5, 2020
 Page 5 of 6

<p>PPE for Persons Living in the ICF</p>	<p>Cloth face coverings when:</p> <ul style="list-style-type: none"> • Symptomatic for, had exposure to, or positive for COVID-19, if they need to be around others in the ICF.
<p>Plan to Manage New Admissions</p>	<p>Dedicate space for cohorting and managing care for the following:</p> <ul style="list-style-type: none"> • Isolating persons living in the ICF with COVID-19. • Quarantining new/readmissions with an unknown COVID-19 status. • Quarantining persons living in the ICF who develop symptoms. <p>Have plans in place to dedicate staff for cohorting and managing care for each of the following:</p> <ul style="list-style-type: none"> • Persons living in the ICF isolated for COVID-19; AND • Persons living in the ICF quarantined for their unknown COVID-19 status (new/readmissions); AND • Persons living in the ICF quarantined for possible symptoms of COVID-19.
<p>Plan to Manage Persons Living in the ICF Who Re-enter the Facility After Leaving for Essential Reasons (medical visits, etc.)</p>	<p>Conduct a risk assessment to determine if a person who is re-entering the facility should or should not be quarantined upon re-entry. Take the following into consideration:</p> <ul style="list-style-type: none"> • Presence of COVID-19 at their destination (for example, if they went to dialysis, has their dialysis facility provided care to COVID-19 cases on that same day?). • Number of other people with whom the resident interacted. • Was the destination indoors or outdoors? • What was the length of time that the person interacted with other people with whom they don't reside? • Did the person comply with social distancing? • Were other people at the destination wearing masks or cloth face coverings? • Did the person comply with masking the entire time?