
This document serves to provide reopening guidance to intermediate care facilities (ICF). Given the critical importance in limiting COVID-19 exposure in such facilities, decisions on relaxing restrictions must be made with careful review of a number of facility-level and community cases, and in collaboration with Department on Disability Services (DDS) and DC Health. Support and interdisciplinary teams must 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 for 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.

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| Personal Protective Equipment | Fully vaccinated\(^1\) persons living in the ICF should wear face masks or cloth face coverings when:  
• Outside the ICF in a crowded location.  
• Outside the ICF around those unvaccinated or with unknown vaccination status.  
• Around others in the ICF if experiencing symptoms of COVID-19, had exposure to a COVID-19 positive person, or is positive for COVID-19.  

Fully vaccinated\(^1\) persons who are not immunocompromised and living in the ICF do not have to wear cloth face coverings when:  
• Outside the ICF (in and indoor or outdoor setting) around other non-household persons who are verified to be fully vaccinated (e.g. family members, adult day providers).  
• When outdoors, except in certain crowded settings and venues.  
• Visiting with unvaccinated people (including children) from a single household.  

Persons living in the ICF who are immunocompromised (regardless of vaccination status) or NOT fully vaccinated should wear cloth face coverings when:  
• Outside the ICF at all times.  
• Around others in the ICF if experiencing symptoms of COVID-19, had exposure to a COVID-19 positive person, or is positive for COVID-19.  

Masks should NOT be worn by anyone who is unconscious, incapacitated or otherwise unable to remove the face covering without assistance.  

Direct care staff\(^2\) must follow Required Personal Protective Equipment (PPE) for Healthcare Facilities AND Screening in a Healthcare Settings at, coronavirus.dc.gov/healthguidance. |

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\(^1\) Fully Vaccinated: An individual is considered fully vaccinated 14 days after completion of a COVID-19 vaccination series (after the second dose of a 2-dose series, or after one dose of a single-dose vaccine). More information can be found in Guidance for Quarantine after COVID-19 exposure at coronavirus.dc.gov/healthguidance.  

\(^2\) Direct care staff: All paid or unpaid staff who have direct contact and provide care services to persons in the ICF.
### Activity

#### Group Dining

Persons living in the ICF who meet the following criteria may participate in group dining:
- If not currently isolated due to being positive for the virus that causes COVID-19,
- If not experiencing signs or symptoms of COVID-19 or under quarantine for exposure,
- Was previously positive for the virus that causes COVID-19 AND has completed the symptom-based or time-based clearance method

Direct care personnel must dine at dedicated staff areas, if possible, and maintain social distance regardless of vaccination status.

**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. For persons not living in the ICF (e.g., direct service providers), please do everything possible to facilitate social distancing when applicable (such as removing chairs, spacing tables 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."

### Activity

#### Non-Essential Medical Providers

Allow entry of non-essential healthcare personnel/contractors.
- Consider telemedicine options as much as possible.
- All non-essential personnel must follow the same personal protective equipment requirements as for staff.
- All non-essential personnel must undergo screening.


**PLEASE NOTE:** Non-essential medical personnel are determined by each individual facility. This determination should be made based on the medical needs of individual persons living in the ICF at that point in time.

### Activity

#### Leaving for Medical Reasons

- Persons living in the ICF may leave for routine/elective medical appointments with the following considerations:
  - Persons living in the ICF are not required to quarantine upon return, regardless of vaccination status, unless they were exposed to a person with confirmed COVID-19.
  - Persons living in the ICF who leave for medical appointments AND engage in any other activity prior to returning to the ICF must follow guidelines outlined in the “Outings” section of this document.
  - Persons living in the ICF who are leaving for inpatient admission to a medical facility must follow the “Plan to manage new admissions” section of this document upon return.
- Persons living in the ICF with laboratory-confirmed COVID-19 who have not been cleared from isolation should only leave the ICF for essential medical needs (i.e., dialysis), with prior notification.
- Travel for COVID-19 positive persons should be provided by the ICF provider.
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| Non-medical personal care services are permitted. | **For non-medical care services that occur outside the facility, see the “Outings” section on page 3.** Persons living in the ICF who meet the following criteria should not undergo personal care services:  
  - Currently isolated due to COVID-19.  
  - Currently quarantined because of exposure to or exhibiting symptoms consistent with COVID-19. Screen all non-medical personnel at the beginning of their shift for fever and symptoms of COVID-19  
  - For full guidance on *Screening in a Healthcare Setting* and *Screening Tool Guidance*, visit coronavirus.dc.gov/healthguidance. Ensure additional precautions are maintained:  
  - Use of cloth face covering or facemask is required for persons living in the ICF.  
  - Non-medical personnel must wear a facemask for source control while in the ICF.  
  - Provision of infection control education and competency to personnel  
    - 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.  
  - 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. **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.  
  - 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.  
  
On-site group activities can occur within the ICF or the ICF’s boundary. Persons living in the ICF who meet the following criteria may be physically present during group activities:  
  - Is not currently isolated due to being positive for the virus that causes COVID-19,  
  - Is not experiencing signs or symptoms of COVID-19 or under quarantine for exposure,  
  - Was previously positive for the virus that causes COVID-19 AND has completed the symptom-based or time-based clearance method Fully vaccinated persons (who are not immunocompromised) living in the ICF can participate in on-site group activities with visitors who are also fully vaccinated without the use of face masks for source control or social distancing. Social distancing and source control (e.g., wearing a mask or cloth face covering) is still required for any immunocompromised (regardless of vaccination status) or unvaccinated person living in the ICF who is participating in a group activity with visitors that are unvaccinated or with unknown vaccination status. **Group** size and activity space must allow for social distancing as described above. Persons living in the ICF who meet the following criteria should not physically* be present for group activities:  
  - Currently isolated due to COVID-19  
  - Currently quarantined because of exposure to or exhibiting symptoms consistent with COVID-19  
  *Consider tele-participation **PLEASE NOTE: Group activities will increase the risk of COVID-19 spreading in your facility.** Implement robust infection control measures (e.g., encourage residents to wear a cloth face covering or medical facemask, ensure ample hand hygiene access, ensure robust cleaning and disinfection of activity space and equipment, etc.) and take measures to facilitate social distancing (e.g., remove chairs, space tables, stagger activity start and end times, etc.).

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### Outings

- Persons living in the ICF may leave the facility for non-medical community activities with the following guidelines:
  - Persons living in the ICF and those accompanying them must:
    - Wear a mask during the entire outing (if possible) and maintain social distancing while outside the facility.
      - If the person living in the ICF is fully vaccinated, they can choose to have close contact (including touch) with others in the community while wearing well-fitting source control (e.g. facemask, cloth face covering).
      - Fully vaccinated persons living in the ICF visiting friends or family that are also fully vaccinated, may choose to interact without face masks as source control or physical distancing.
      - Physical touch for an extended period of time with those either unvaccinated or of unknown vaccination status should be avoided.
      - Immunocompromised residents should wear well-fitting face masks and maintain social distancing at all times, regardless of vaccination status.
      - Fully vaccinated persons living in the ICF no longer need to wear a mask outdoors, except in certain crowded settings and venues and as long as social distancing from other individuals outside their group can be maintained.
    - Clean hands frequently, using alcohol-based hand sanitizer when soap and water is not available.
    - Keep a log of activities to assist in completing the risk assessment and allow for contact tracing if needed.
  - Persons living in the ICF and family members should be educated about potential risks of public settings and to avoid crowded, poorly ventilated areas.
  - Upon return:
    - Screen the person living in the ICF for signs & symptoms of COVID-19.
    - A risk assessment to evaluate the need for quarantine is required while DC is in Phase 2 of reopening and should still be considered during Phase 3. Complete a risk assessment for the person living in the ICF if 2 or more persons living in the ICF are NOT fully vaccinated. Risk assessment should include:
      - Was the person exposed to someone who is positive for COVID-19? (Answering yes to this question requires quarantine from other persons in the ICF, regardless of vaccination status.)
      - What was the vaccination status of others involved in the activity?
      - Approximate number of other people with whom the resident interacted.
      - Was the destination(s) indoors or outdoors?
      - What was the approximate 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?
      - Can the person wear a mask if needed?
      - Did the person comply with masking the entire time?
  - **If a risk assessment is completed, persons living in the ICF determined to have participated a higher risk activity are required to quarantine.**

### Testing Persons Living in the ICF

- Facilities are required to test all persons living in the ICF if:
  - Anyone who has been in the ICF (e.g., person residing in facility, direct care staff, visitor) 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.

Test all persons living in the ICF as needed who meet the following criteria:

- Showing possible signs or symptoms of COVID-19.

If weekly, non-outbreak testing (i.e. surveillance testing) of persons living in the ICF is performed, test all persons weekly who meet the following criteria:

- 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 90 days of the date they were cleared from isolation due to a laboratory-confirmed COVID-19 diagnosis
- Unvaccinated or partially vaccinated
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| Testing Staff     | Consider weekly testing of staff (at least 2 consecutive weeks). Exclude staff who meet the following criteria from weekly surveillance testing:  
• Those isolated due to positive COVID-19 status at time of specimen collection  
• Those who are less than 90 days from discontinuation of isolation due to positive COVID-19 status.  
• Those who are fully vaccinated unless showing signs or symptoms of COVID-19 infection. |
| Routine Data      | Continue reporting persons living in the ICF and staff consistent with DDS guidance and requirements.                                                                                                  |
| Reporting         | Dedicate space for cohorting and managing care for the following:  
• Isolating persons living in the ICF with COVID-19  
• Quarantining new/readmissions with an unknown COVID19 status who:  
  o Are NOT fully vaccinated.  
  o Have NOT recently recovered from a confirmed COVID-19 infection within the last 90 days.  
  o Have been exposed to a person with confirmed COVID-19 regardless of vaccination status.  
  o Are being transferred or admitted from an area or facility with a confirmed COVID-19 outbreak.  
• Quarantining persons living in the ICF who develop symptoms.  
• Quarantining persons living in the ICF who had exposure to a COVID-19 positive person  
• Quarantining persons living in the ICF based on risk assessment. |
| Plan to manage    | Have plans in place to dedicate staff for cohorting and managing care for each of the following:  
  • Persons isolated for COVID-19  
  • New/readmissions requiring quarantine.  
  • Persons quarantined for possible symptoms of COVID-19  
  • Persons quarantined who had exposure to a COVID-19 positive person |
| new admissions    | **Facilities must verify vaccination status before quarantine is deferred.**  
• Acceptable forms of verification include:  
  o Documentation in the medical record,  
  o CDC vaccination card.  
• Verbal statement of vaccination must not be accepted. |

*Coronavirus 2019 (COVID-19): Guidance for Intermediate Care Facilities*

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