Coronavirus 2019 (COVID-19): Risk Assessment for Community Visits

DC Health has adopted a risk-based strategy when determining the need to quarantine residents of long-term care facilities following trips into the community. This document is intended to provide guidance on how to complete the risk assessment. The template included on page 2 of this document may be used as is appropriate, based on current DC Health guidance. This is not intended to substitute normal screening procedures for those entering the facility. For more information about health screening recommendations, quarantine, or guidance for specific settings, please refer to coronavirus.dc.gov/healthguidance.

Definitions
Close contact: Someone who was within 6 feet of an infected person for at least 15 minutes over a 24-hour period, starting from 2 days before illness onset (or for asymptomatic infected people, 2 days prior to positive test collection) until the time the infected person is isolated.

Fully Vaccinated: An individual is considered fully vaccinated at day 14 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).

Implementation Guidelines
- This community activity risk assessment can be used in a variety of ways:
  - To assess individual residents before they leave the facility/home for activities. Using the tool before a resident goes on a community outing encourages transparency and shared decision-making that could help mitigate risks before they occur to reduce subsequent need for quarantine.
  - To ensure that the proper infection prevention procedures are initiated after a resident returns to the LTC facility/home following community activities. Long-term care facilities/agencies should always follow DC Health guidance appropriate to their setting and contact DC Health for clarification if needed.
  - To track and document the frequency that residents leave the LTC facility/home for community visits.
  - To develop policy for a list of activities and subsequent interventions common to the facility/home (shopping, dinner out with family, getting nails done, etc.)
- Community visits and risk assessment should be documented in the resident’s care plan.

For any resident taking a trip outside of the facility, the facility/agency should:
- Provide the resident/client with any items needed to follow infection prevention recommendations (e.g., hand sanitizer, face covering or mask).
- Educate the resident and friends/family of appropriate precautions as listed in the attached letter on page 3.
- Continue daily symptom screening of residents on their return to their facility/home.
- If quarantine is required based on the resident’s risk assessment, follow DC Health guidance for quarantine applicable to the resident’s setting.
Coronavirus 2019 (COVID-19): Community Activity Risk Assessment Template

Instructions: Please fill in the following information.

Resident Name: ___________________________ Date of Birth: __________
Departure Date/Time: _____________________ Return Date/Time: ________________

Instructions: Please select either “YES” or “NO” to each question below.

For ALL Residents, Regardless of Vaccination Status

1. Is the resident fully vaccinated or has recently recovered from a confirmed COVID-19 infection within the last 90 days, AND not immunocompromised? □ No □ Yes

   If “YES”, assess as lower-risk and the risk assessment is complete.

If no to Question 1:
2. Did the resident have close contact with anyone confirmed to have COVID-19 during their time away from the facility/home? □ No □ Yes

   If “YES”, assess as higher risk and the risk assessment is complete.

If “NO” to Questions 1 and 2, continue:
3. Did the activity include ONLY interacting with individuals who are fully vaccinated (unknown should be treated as unvaccinated)? □ No □ Yes

   If “YES”, assess as lower-risk and the risk assessment is complete.

If NO to Question 3, please select either “YES” or “NO” to each question and assign 1 point for each “YES”.

Non-Medical Community Activities

4. Did the resident participate in an indoor activity? □ No □ Yes

5. Was the resident unable to maintain social distancing? □ No □ Yes

6. Did the activity include ≥10 people (including the resident)? □ No □ Yes

7. Did the duration of the activity exceed 24 hours? □ No □ Yes

8. Was the resident unable to wear a mask during the entire outing? □ No □ Yes

Total Score ______

Score Interpretation
0-2 = Lower risk activity (e.g., walking in an uncrowded park or walking the dog around the block)
3-5 = Higher risk activity (e.g., eating in a crowded restaurant). Recommendation to quarantine residents with higher risk (Score 3-5).
Coronavirus 2019 (COVID-19): Community Activity Letter to Family Template

Dear Residents, Families, and Friends:

We are committed to keeping our residents and clients safe, and we need your help. The virus causing Coronavirus Disease 2019 (abbreviated COVID-19) can cause outbreaks in long-term care facilities. Many of our residents and clients are in the high-risk group for COVID-19 and may have medical conditions putting them at a very high risk of becoming sick, or even severely ill, with COVID-19. For the safety of your loved one and our community, we encourage you to consult with the facility or agency staff before taking trips into the community. Though masking and distancing recommendations have been relaxed for the general public, we recommend residents of long-term care facilities maintain core infection prevention practices during visits outside of the facility.

When taking trips into the community, residents and those accompanying them must:

- Wear a well-fitting face covering or face mask at all times and maintain a distance of at least 6 feet from others as much as possible while in the community.
  - If the resident is fully vaccinated, they can choose to have close contact (including touch) with others in the community while wearing well-fitting face mask. If taking a walk outdoors and not in close contact with the community, a face mask is optional.
  - Fully vaccinated residents or visiting friends or family that are also fully vaccinated, may choose to interact without face masks 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 a mask and maintain social distancing at all times, regardless of vaccination status.
- Clean hands frequently, using alcohol-based hand sanitizer when soap and water is not available.
- Be aware of potential risks of taking trips into the community, including a potentially increased risk of COVID-19 for your friend or family member as well as a potential risk of introducing COVID-19 into the facility/home.
- With your friend or family member’s permission, keep a log of activities to allow for contract tracing if cases are identified.

The facility or agency should:

- Provide the resident/client with any items needed to follow infection prevention recommendations (e.g., hand sanitizer, face covering or mask).
- Educate the resident and friends/family of the risks and benefits of community visits and appropriate precautions as listed above.
- Continue daily symptom screening of residents on their return to their facility/home.
- If quarantine is required based on the resident’s risk assessment, follow DC Health guidance for quarantine applicable to the resident’s setting.