

Frequently Asked Questions about COVID-19 Vaccination Status and Resident, Staff, and Visitor Guidance

3/31/2021

Background

On Wednesday, March 10, 2021, the Centers for Medicare and Medicaid Services (CMS), in conjunction with the Centers for Disease Control and Prevention (CDC), updated visitation guidance for post-acute care facilities, including long-term care facilities, factoring in resident vaccination status. On Monday, March 15, 2021, the Iowa Department of Public Health (IDPH) hosted a live webinar for long-term care facilities in Iowa, explaining the new guidance and answering questions from attendees. The following represents a summary of the common themes asked during the one-hour webinar, but is not all inclusive of every potential situation a facility may face.

Topics covered:

- [Dining](#)
- [Visitor PPE](#)
- [Isolating & Quarantining Residents](#)
- [Quarantining Staff](#)
- [Screening for COVID-19](#)
- [New Admissions](#)
- [Visitation](#)

Dining

Q: How does the new guidance impact communal dining in our facility?

A: Dependent on the facility and community's current COVID-19 status, implement social distancing measures, including:

- Canceling communal dining and group activities, such as internal and external activities.

Considerations for when restrictions are being relaxed include:

- Allowing communal dining and group activities for residents without COVID-19, including those who have fully recovered while maintaining social distancing, source control measures, and limiting the numbers of residents who participate.

Furthermore when communal dining is allowed, the Communal Activities and Dining section of the updated CMS visitation guidance in [QSO-20-39-NH REVISED](#), dated March 10, 2021, notes that residents may eat in the same room with social distancing (*limited number of people at tables and spaced by at least 6 feet*). CDC's guidance [Preparing for COVID-19 in Nursing Homes](#) of maintaining aggressive social distancing measures (*remaining at least 6 feet apart from others*) remains unchanged. Permitting dining with residents sitting less than 6 feet apart, even with plexiglass in place, would not meet the intent of CMS and CDC guidance.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

This guidance reflected in this document is subject to change as federal guidance is updated and as additional Iowa-specific data is collected.

Visitor PPE

- Q:** How does the new guidance change the PPE recommendations we make to anyone entering our facility?
- A:** Guidance has not changed. Visitors and residents (*if tolerated*) should still wear a [well-fitting cloth mask, facemask, or respirator](#) (*N95 or a respirator approved under standards used in other countries that are similar to NIOSH-approved N95 filtering facepiece respirators*) for [source control](#).

Links to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html> & <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

- Q:** If a visitor is refusing to wear a mask, stay within a confined area, or refuses to practice in social distancing with staff and residents, can they be asked to leave and not allowed to visit in the future?
- A:** Asking a visitor to leave is at your discretion and based on the policies in-place at your facility and how they are enforced. Consider providing education on the importance of following your policies during future opportunities to visit.
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Isolating & Quarantining Residents

- Q:** Does the new guidance change the length of a quarantine period for residents with a known COVID-19 exposure?
- A:** All inpatients and residents in healthcare settings (*regardless of their COVID-19 vaccination status*) should continue to [quarantine](#) following prolonged close contact[‡] with someone with COVID-19 infection; outpatients should be cared for using recommended [Transmission-Based Precautions](#). This is due to limited information about vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with physical distancing in healthcare settings.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

- Q:** Do residents that are not fully vaccinated but have recovered from COVID-19 more than 90 days ago need to be quarantined if they are exposed again to COVID-19?
- A:** It is recommended that residents that are not fully vaccinated but have had COVID-19 in the past, and more than 90 days have passed since their initial symptom onset or positive test results if they were asymptomatic, continue to [quarantine](#) following prolonged close contact[‡] with someone with a COVID-19 infection.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

[‡] The CDC defines prolonged [close contact](#) as contact within 6 feet from an infectious person for a cumulative total of 15 minutes or more over a 24-hour period. The Iowa Department of Public Health defines prolonged close contact as within 6 feet away from an infectious person for more than 15 consecutive minutes **AND** one or both persons not utilizing proper PPE during the interaction.

Isolating & Quarantining Residents cont.

Q: Does a resident's COVID-19 vaccination status change how long they should isolate after testing positive for COVID-19?

A: Resident's that show any symptoms that could be consistent with COVID-19 (*fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea*) should remain in isolation (**regardless of their COVID-19 vaccination status**) until:

- Residents with **mild to moderate** illness who are *not* severely immunocompromised:
 - If a symptom-based strategy is factored in, at least 10 days have passed *since symptoms first appeared* **AND** at least 24 hours have passed *since last fever* without the use of fever-reducing medications **AND** symptoms (*e.g., cough, shortness of breath*) have improved (*note: loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation*)
- Residents with **severe to critical illness** or who are severely immunocompromised:
 - If a symptom-based strategy is factored in, at least 10 days and up to 20 days have passed *since symptoms first appeared* **AND** at least 24 hours have passed *since last fever* without the use of fever-reducing medications **AND** symptoms (*e.g., cough, shortness of breath*) have improved (*note: loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation*)
- Residents who were asymptomatic throughout their infection and are *not* severely immunocompromised:
 - At least 10 days have passed since the date of their first positive COVID-19 viral diagnostic test

Ultimately, facilities are encouraged to work with their medical director when making the determination if a resident is ready to be removed from isolation.

Links to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html> & <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html#:~:text=Anyone%20who%20has%20had%20close,someone%20who%20has%20COVID%2D19> & <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

Q: Do residents that leave our facility for medically necessary appointments need to quarantine when they return?

A: The Centers for Disease Control and Prevention (CDC) and the Centers for Medicare and Medicaid Services (CMS) do not have any guidance or requirements stating that residents who leave the facility (*e.g., for medical appointments, community outings with family or friends*) and return within 24 hours undergo a quarantine, **UNLESS** the resident has known exposure to COVID-19 while outside the facility.

Links to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html#:~:text=Fully%20vaccinated%20inpatients%20and%20residents,for%20using%20recommended%20Transmission%2DBased> & <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

This guidance reflected in this document is subject to change as federal guidance is updated and as additional Iowa-specific data is collected.

Quarantining Staff

Q: Should we continue to exclude staff from work if they are fully vaccinated after an exposure?

A: Fully vaccinated staff with higher-risk exposures who are asymptomatic do not need to be restricted from work for 14 days following their exposure.

Work restrictions for the following fully vaccinated staff with higher-risk exposures should still be considered for those with underlying immunocompromising conditions (*e.g., organ transplantation, cancer treatment*), which might impact level of protection provided by the COVID-19 vaccine.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

Q: Should staff that travel, on vacation for example, be allowed to immediately return to work?

A: Any staff from a healthcare facility who travel should follow CDC travel recommendations and requirements, including restriction from work, which would apply for any traveler.

Links to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html> &
<https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-during-covid19.html>

Screening for COVID-19

Q: As vaccination rates increase, do we need to keep screening people as they enter our facility?

A: It is recommended to continue screening **EVERYONE** entering your facility (*regardless of their COVID-19 vaccination status*). This is true for visitors entering your facility as well as residents leaving your facility for any reason. During screening, all visitors should be assessed before entering the healthcare facility for symptoms of acute respiratory illness consistent with COVID-19. If a visitor has symptoms, they should not be allowed to enter the facility.

Links to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/non-us-settings/hcf-visitors.html> &
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html>

Q: Should we continue to regularly screen fully vaccinated residents for COVID-19?

A: It is recommended to continue monitoring **ALL** residents upon admission and at least daily for COVID-19 (*regardless of their COVID-19 vaccination status*).

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

Q: Do we need to continue testing fully vaccinated residents for COVID-19 if they show any symptoms that could be consistent with COVID-19 ([fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea](#))?

A: Yes. Any resident that is showing any symptoms that could be consistent with COVID-19 should be tested, regardless of the resident's COVID-19 vaccination status.

Link to guidance: <https://www.cms.gov/files/document/qso-20-38-nh.pdf>

New Admissions

For specific guidance on new admissions, review the document titled “Discharge to LTC” on the IDPH COVID-19 Long-Term Care webpage [<https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/Long-Term-Care>].

Q: If a new admission is fully vaccinated, do they need to quarantine upon being admitted from a hospital or home?

A: Quarantine is no longer recommended for residents who are being admitted to a post-acute care facility if they are fully vaccinated and have not had prolonged close contact with someone with COVID-19 infection in the prior 14 days.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

Q: If a new admission is not considered fully vaccinated ([more than 2 weeks after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines; or more than 2 weeks after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine](#)) but has received a COVID-19 vaccination, should they remain in quarantine for the entire 14 day period?

A: It is recommended to place the new admission described in this question in quarantine upon entering the facility and maintain the quarantine for the full 14-days, even if during the quarantine period the new admission crosses into the fully vaccinated classification ([14 days after their final COVID-19 vaccine](#)). Any potential exposure occurring prior to the admission would have happened before the fully vaccinated status was achieved.

Link to guidance: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

Visitation

For specific guidance on visitation, review the document titled “*Long Term Care Visitation Guidance*” on the IDPH COVID-19 Long-Term Care webpage [<https://idph.iowa.gov/Emerging-Health-Issues/Novel-Coronavirus/Long-Term-Care>]. In general, regardless of a resident’s COVID-19 vaccination status, visitation beyond compassionate care visits should be limited for residents currently confirmed to have COVID-19 or those under quarantine for COVID-19.

Q: Can we allow pastors, volunteers, entertainers, friends, neighbors, etc. into our facility without them being fully vaccinated?

A: It is recommended to screen **EVERYONE** who enters a facility for signs and symptoms of COVID-19 (*e.g., temperature checks, questions about and observations of signs or symptoms, contact with someone with COVID-19 infection in the prior 14 days*), and deny entry to anyone who do not pass the screening, regardless of their vaccination status.

Link to guidance: <https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf>

Q: What is the guidance regarding children under 18 years of age entering our facility?

A: The Centers for Disease Control and Prevention (CDC) and the Centers for Medicare and Medicaid Services (CMS) do not have any guidance recommended to base visitation on a visitor’s age. It is recommended to screen **EVERYONE** who enters a facility for signs and symptoms of COVID-19 and deny entry to anyone who do not pass the screening, regardless of the person’s age.

Link to guidance: <https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf>

On March 29, 2021, the Centers for Disease Control and Prevention (CDC) recently updated and consolidated COVID-19 guidance for long-term care facilities. This revised page includes most of the relevant guidance a long-term care facility might need and should be the first resource checked when a facility is seeking guidance if a question is not directly addressed in this document.

This revised webpage can be located at the following link: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>.