



Department of Health

KATHY HOCHUL
Governor

JAMES V. McDONALD, M.D., M.P.H.
Commissioner

JOHANNE E. MORNE, M.S.
Acting Executive Deputy Commissioner

DATE: December 20, 2023
TO: Adult Care Facilities, Local Health Departments
FROM: New York State Department of Health

Health Advisory: Infection Prevention and Control Recommendations for Adult Care Facilities (ACFs) to Reduce the Risk of COVID-19

Please distribute immediately to:
Adult Care Facility Administrators and Operators

The purpose of this advisory is to provide revised information on the infection prevention and control recommendations that Adult Care Facilities (ACFs) in New York State (NYS) should follow to reduce the risk of COVID-19. This advisory supersedes the December 23, 2022, *Health Advisory: Infection Prevention and Control Recommendations for Adult Care Facilities During the COVID-19 Pandemic*.

ACFs include adult homes, enriched housing programs, assisted living programs, and assisted living residences (including special needs assisted living residences and enhanced assisted living residences) licensed and/or certified by the New York State Department of Health (“Department” or “NYSDOH”). To determine an ACF’s licensure status, please refer to the ACF’s Department-issued operating certificate or look online at <https://profiles.health.ny.gov/acf>.

ACF COVID-19 General Infection Prevention and Control Guidance

To protect the health and safety of residents, staff, and visitors, ACFs should:

- follow the Centers for Disease Control and Prevention’s (CDC) [face mask recommendations](#).
- provide information to help residents [understand their risk](#) and to make decisions about their personal health and safety.
- provide [information about actions residents can take to prevent COVID-19](#) such as:
 - o staying up to date with COVID-19 vaccines
 - o wearing masks or increasing space and distance from others
 - o improving ventilation and spending time outdoors
 - o getting tested for COVID-19 if symptoms appear or when in close contact with someone who has tested positive for COVID-19
 - o following [recommendations about what to do if exposed to COVID-19](#)
 - o staying home if COVID-19 is suspected or confirmed
 - o seeking [treatment](#) if you have COVID-19 and are at a high risk of getting very sick
 - o avoiding contact with people who have suspected or confirmed COVID-19

- establish a process to ensure that everyone who enters the facility is aware of recommended and required actions to prevent transmission of COVID-19 to others if they have symptoms of COVID-19, a positive viral test for COVID-19, or are a close contact to someone with COVID-19. Facilities should continue either active or passive screening of anyone who enters the facility:
 - o Passive screening may be done through use of posted instructional signage at entryways and throughout the facility. Staff, residents, and visitors should be provided with information and education on COVID-19 [signs and symptoms](#), infection prevention and control precautions, and other applicable facility practices (e.g., use of face covering or mask, specific entrances, exits, and routes to designated areas).
 - o Active screening refers to requiring anyone entering the facility to complete a symptom screening questionnaire or an in-person interview and/or have their temperature taken before being allowed entry into the facility. Facilities that choose to continue active screening may do so at their discretion.
- follow CDC recommendations for managing staff and residents with COVID-19 infection or exposure:
 - o [Isolation and Precautions for People with COVID-19](#)
 - o [What to Do If You Were Exposed to COVID-19.](#)
- ensure that staff, visitors, and residents adhere to appropriate [hand hygiene practices](#).
- ensure frequent, effective, and appropriate [cleaning and disinfection](#) of high-touch environmental surfaces including in designated visitation areas after each visit.
- ensure staff are instructed in and monitored for appropriate use of personal protective equipment (PPE) according to [Standard Precautions](#) and ideally [transmission-based precautions](#) when used in an ACF.

In addition to general infection control guidance, each ACF should review CDC guidance: [Additional Information for Community Congregate Living Settings](#), and assess the unique risks of their congregate setting, the population served, and consider use of enhanced COVID-19 prevention strategies to help reduce the impact of COVID-19.

ACFs are reminded that, at minimum, proposed changes to building ventilation must be communicated with the appropriate regional office ACF program team in the Department.

Case Investigation and Contact Tracing

ACFs should have an established process to identify and manage individuals with suspected or confirmed COVID-19. ACFs should work with their local health department (LHD) in the event of a communicable disease outbreak, including, but not limited to COVID-19 and influenza. Under [Title 10, Section 2.10](#), physicians are required to report cases or suspected cases or outbreaks of communicable disease to the LHD. Additionally, under [Title 10, Section 2.12](#), the person in charge of any institution or any other person having knowledge of an individual affected with any disease presumably communicable, is required to report the case to the LHD where the facility is located.

- If a new case of COVID-19 is identified in the facility, ACFs in collaboration with the LHD should:
- conduct an outbreak investigation to identify residents, staff, and visitors with close contact. The focus of such investigation is to prevent or control COVID-19 transmission within the facility.

- identify close contacts by interviewing the person with COVID-19, if possible. ACF staff, residents, and visitors are considered close contacts if they were less than 6 feet away from someone with COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period, regardless of face masks or any other PPE worn by the contact or the person with COVID-19. When evaluating close contacts at the ACF, consider the time spent with someone with COVID-19 starting 2 days before the person developed symptoms, or the date of collection of the positive test if the person remained asymptomatic, until the most recent day of contact.

When facility transmission occurs, expanded testing might be considered in collaboration with the LHD. Expanded testing may include testing of staff and residents as determined by the distribution and number of cases in the facility and the facility's ability to identify close contacts effectively.

Managing COVID-19 Infection or Exposure

Residents, staff, and visitors should adhere to CDC guidance regarding:

- isolation for people with COVID-19 including when to isolate, how long to isolate, and how to end isolation. For more information, see CDC [Isolation and Precautions for People with COVID-19](#).
- precautions to be taken after exposure to COVID-19. For more information, see [What to Do If You Were Exposed to COVID-19](#).

COVID-19 Treatment

ACFs should review [CDC clinical considerations](#) for care of people with confirmed COVID-19. Information about clinical management and treatment of COVID-19 depends on whether the patient has mild or moderate illness that often can be managed in the outpatient setting, or severe or critical illness that requires hospitalization.

ACFs should review [information on the use of antiviral medications](#) for treatment of mild-to-moderate COVID-19 in adults who are at high risk for progression to severe disease.

Return to Work for ACF staff:

- ACF staff on isolation for a COVID-19 infection may return to work according to [CDC Isolation and Precautions for People with COVID-19](#) (e.g., ACF staff with COVID-19 should be excluded for at least 5 days, return to work considerations should include whether symptoms are resolved or improving, severity of symptoms, and ability of the staff member to adhere to all recommended CDC precautions).
 - If an ACF determines it is unable to provide essential services and therefore plans to have staff return to work before all recommended CDC criteria to end isolation are met, the ACF should contact the NYSDOH Surge and Flex Operations Center at (917) 909-2676.
- Work restrictions are generally not necessary for asymptomatic ACF staff with a close contact exposure to a person with COVID-19 if the staff member is able to adhere to all recommended [CDC precautions](#) (e.g., staff member is able to wear a well-fitting facemask, obtain the recommended testing for COVID-19, and follow other precautions).
- ACFs should also follow work exclusion recommendations provided by the LHD.

ACFs should ensure that staff who provide in-person services for a resident with COVID-19 are familiar with CDC recommended infection prevention and control practices in the [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\)](#) to protect themselves and others from potential exposures, including hand hygiene, PPE, and cleaning and disinfection practices.

COVID-19 Vaccination

The NYSDOH continues to endorse the Centers for Disease Control and Prevention (CDC) recommendation that everyone [stay up to date](#) with all CDC recommended COVID-19 vaccine doses. Healthcare personnel, patients, and visitors should be offered resources and counseled about the importance of receiving the COVID-19 vaccine. Facilities should monitor the CDC and NYSDOH websites frequently for information on updated COVID-19 vaccine administration recommendations.

Long-term care facilities are expected to exercise diligence, act proactively, and document efforts to ensure all residents and staff who are eligible and consent to vaccination remain up to date with CDC recommended COVID-19 vaccine doses. ACFs are reminded that the operators and administrators should make diligent efforts to arrange for all consenting, existing residents to register for a vaccine appointment to receive COVID-19 vaccinations when eligible and shall document attempts to schedule and methods used to schedule the vaccine in the individual's case management notes, as applicable.

The Department reminds long-term care facilities that they should coordinate COVID-19 and influenza vaccination clinics for efficiency. Both vaccines can be administered at the same time.

Visitation

- All visitation is allowed.
- At all times, ACFs must follow all regulatory guidelines and principles, including those related to access and supervision.
- Visitors two years and older and able to medically tolerate a face covering/mask should wear an appropriate face mask based on [CDC recommendations](#).
- Although there is no limit on the number of visitors that a resident can have at one time, visits should be conducted according to the ACF's COVID-19 infection prevention and control procedures, so visits do not increase risk to other residents, visitors, or staff.
- Residents and their visitors when alone in the resident's room or in a designated visitation area, may choose to have close contact (including touch). Before the visit, residents (or their representative) and their visitors should be advised of the risks of physical contact.
- Asymptomatic residents exposed due to a close contact to a person with COVID-19 can still receive visitors. The resident should adhere to all recommended [CDC precautions](#). Visitors should be made aware of the potential risk of visiting and of the precautions necessary before the visit.
- Visitors with confirmed COVID-19 infection or compatible symptoms should defer non-urgent in-person visitation until they meet CDC criteria to [end isolation](#). Visitors who have been exposed to COVID-19 should follow [recommended CDC precautions](#).
- While it is safer for visitors not to enter the ACF while the LHD conducts an outbreak investigation, visitors may be allowed in the ACF but should be made fully aware of potential risks associated with visitation during an outbreak investigation and must always adhere to the infection prevention and control measures implemented in the facility.

- Unless directed by the LHD, communal activities and dining do not have to be paused during an outbreak. However, residents who are on isolation should not participate in communal activities and dining until the criteria to [discontinue isolation](#) have been met.

Visiting or Shared Healthcare Personnel who Provide Services to Residents

This document provides guidance for staff, visitors, and residents in ACFs. However, healthcare services delivered in these settings should be conducted with adherence to CDC's [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#). Visiting or shared healthcare personnel, (e.g., employees of home care or hospice agencies certified under New York State Public Health Law Article 36 or Article 40) who enter an ACF to provide healthcare services to one or more residents (e.g., physical therapy, wound care, intravenous injections/infusions, or catheter care) should follow recommendations applicable to healthcare settings in the CDC [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#) and [NYSDOH healthcare personnel return to work](#) protocols.

Questions about this advisory can be sent to: covidadultcareinfo@health.ny.gov.

Resources

NYS Adult Care Facility Profiles
<https://profiles.health.ny.gov/acf>

Title 10: Section 2.10 Reporting cases or suspected cases or outbreaks of communicable disease by physicians
<https://regs.health.ny.gov/content/section-210-reporting-cases-or-suspected-cases-or-outbreaks-communicable-disease-physicians>

Title 10: Section 2.12 Reporting by others than physicians of cases of diseases presumably communicable
<https://regs.health.ny.gov/content/section-212-reporting-others-physicians-cases-diseases-presumably-communicable>

NYS Dear Administrator Letter COVID-19 Vaccination and Booster Doses
https://www.health.ny.gov/professionals/nursing_home_administrator/dal/docs/dal_nh_22-19.pdf

NYS Return-to-Work Protocols for Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2
https://coronavirus.health.ny.gov/system/files/documents/2023/02/doh-hcw_rtw_advisory_11_30_22.pdf

COVID-19 Understanding Risk
<https://www.cdc.gov/coronavirus/2019-ncov/your-health/understanding-risk.html>

COVID-19 How to Protect Yourself and Others
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>

COVID-19 What to do if You Were Exposed to COVID-19

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/if-you-were-exposed.html>

COVID-19 Following Recommendations for What to do if You Have Been Exposed
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html#recommendations>

COVID-19 Symptoms of COVID-19
<https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

COVID-19 Isolation and Precautions for People with COVID-19
<https://www.cdc.gov/coronavirus/2019-ncov/your-health/isolation.html>

COVID-19 Treatments and Medications
<https://www.cdc.gov/coronavirus/2019-ncov/your-health/treatments-for-severe-illness.html>

Standard Precautions for All Patient Care
<https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html>

Transmission-Based Precautions
<https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html>

COVID-19 Additional Information for Community Congregate Living Settings (e.g., Group Homes, Assisted Living)
<https://www.cdc.gov/coronavirus/2019-ncov/community/community-congregate-living-settings.html>

COVID-19 Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Use and Care of Masks
<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html>

Handwashing in Communities: Clean Hands Save Lives
<https://www.cdc.gov/handwashing/index.html>

When and How to Clean and Disinfect a Facility
<https://www.cdc.gov/hygiene/cleaning/facility.html>