



## COVID-19 Guidance For New Jersey Community Providers of Services for Individuals with Intellectual and Developmental Disabilities

Release Date: November 9, 2022

Effective Date: November 16, 2022

**Topic: Residential and Day Program Screening Policy**

### Policy

Residents of provider-managed residential settings are able to engage in indoor, outdoor and off-site visits. Residential providers are required to allow visitation of any type and cannot independently stop visitation unless directed by a Federal, Local, or State Health Authority.

**Regardless of vaccination status, all staff, contracted professionals, visitors, and day program participants must be screened, including temperature checks, before entering a congregate day program. This includes scheduled staff coming onto each shift. A record of all screenings shall be maintained. Individuals who reside in congregate residential settings can be screened after entering their home. In all instances, screening is to occur in an accessible designated area that accommodates social distancing and infection control standards.**

**For day program facilities, indoor screening areas must be separated from the day program by walls or physical barriers. Outdoor screening areas must be sufficiently sheltered to allow utilization during inclement weather. In-vehicle screening is permissible for program participants.**

**First responders who are entering the facility to address an emergency do not need to be screened ahead of entering the residence or day program.**

Individuals that answer “NO” to all screening questions AND have a temperature below 100.4 degrees will be able to enter the residence or program and/or participate in a visit. Staff who only report being identified as a close contact<sup>1</sup> in the past 10 days but answer “NO” to all other screening questions are permitted to enter the residence or program but must wear a mask. Program participants/residents who only report being identified as a close contact in the past 10 days but answer “NO” to all other screening questions are permitted to enter the residence or program but should be encouraged to wear a mask based on their ability.

Providers are reminded that licensed community residences for individuals with intellectual and developmental disabilities (IDD), certified day programs for individuals with IDD and support coordinators are required to comply with [Executive Order No. 283](#), [Executive Order No. 290](#), [Executive Order No. 294](#) and Department of Health [Executive Directive 21-011](#).

Day and Residential providers shall immediately notify their local health department of any confirmed or suspected cases of COVID-19 and follow their directives. They shall also cooperate with their local health department related to any contact tracing that may be needed. After that notification, confirmed cases of COVID-19 must also be reported to the Division through established Incident Reporting Procedures. See <https://nj.gov/humanservices/staff/opia/> for more information.

<sup>1</sup> Close contact is defined as ≥ 15 cumulative minutes within 24-hours of someone who has recently tested positive for COVID-19  
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## Masking and Social Distancing

Day and/or residential providers render services in a variety of settings. Some of those settings may specialize in serving populations with specific needs (i.e., medical, behavioral, physical care needs, etc.). The Center for Disease Control and Prevention (CDC) has updated its [Use and Care of Masks](#) guidance which should be regularly reviewed for the most current information on this topic. This includes direction on when masking is to occur.

Day and/or residential providers may elect to follow this guidance or require a more restrictive policy based on the population being served in a specific location. No policy shall be less restrictive than the parameters outlined in this document. In all cases where masking is required, it should not create a risk to workplace health, safety or job duty as assessed by the employer.

If a day or residential provider elects to follow this guidance or a more restrictive one, there must always be: a voluntary masking option in circumstances where masking may not be required; daily screening; a requirement that all staff and persons served continue to be advised to stay [up-to-date](#)<sup>2</sup> with their COVID-19 vaccines in accordance with CDC guidelines (e.g., primary series and booster(s) when eligible); and be tested if they display symptoms.

Prior to adopting the policies below, providers should conduct an analysis of the population served in a specific location and determine that the new protocols outlined in this document do not pose an undue risk of severe illness from COVID-19 due to the underlying health conditions of the persons served at the location.

Providers are encouraged to regularly monitor the [CDC COVID-19 Community Levels](#) for the county in which the program is located and develop masking policies that best suit the unique needs of the persons served. Providers may also implement additional precautions such as universal masking if primarily serving medically-fragile individuals.

Pursuant to [Executive Order No. 294](#) and NJDOH [Executive Directive 21-011](#), providers should continue to reference the [CDC Community Transmission Levels](#) to inform the frequency of mandated testing for staff granted a COVID-19 vaccination exemption. This metric is included in the NJDOH [COVID-19 Weekly Surveillance Report](#) (In most current report refer to #2 *Community Transmission Levels used in Healthcare Settings*). The provider should notify all persons served of any changes to their masking policy/social distancing policy at least five business days before the change in policy goes into effect.

Regardless of vaccination status, providers should ensure that staff, visitors, and persons served wear a mask and socially distance based on their personal preference and informed by their personal level of risk. All persons, especially those who are immunocompromised or at [high risk for severe illness](#) due to COVID-19, are encouraged to speak with their healthcare provider to determine recommendations on masking and social distancing. This may include wearing surgical masks or respirators (i.e., N95) and social distancing while indoors and on a vehicle.

## Procedure for Entering a Residence or Day Program – Staff and Support Coordinators

All staff and support coordinators who, after undergoing screening, are permitted to enter the residence or day program shall:

- Perform hand hygiene upon entering the residence or day program.
- Follow standard precautions and provider guidance related to preventing COVID-19 spread, including [basic infection prevention and control measures](#).

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<sup>2</sup> Up-to-date with recommended vaccines means having received both primary doses in a two-dose series or a single-dose vaccine and booster shots recommended for the individual. See <https://nj.gov/infobank/eo/056murphy/pdf/EO-290.pdf> and <https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html> for more information.

Due to the evolving nature of isolation and quarantine protocols around COVID-19, providers are directed to follow [CDC Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2](#) and, as appropriate, [CDC Strategies to Mitigate Healthcare Personnel Staffing Shortages](#).

### **Procedure for Entering a Day Program – Participants**

Regardless of vaccination status, program participants shall be screened for COVID-19 before boarding an agency vehicle that will transport them to the day program. Screening should include taking and recording their temperature. Individuals exhibiting symptoms and/or fever shall not be permitted on the transport vehicle. Inform their caretaker regarding symptoms and direct them to see a healthcare professional. Program participants transported by an agency vehicle and screened before boarding do not need to be screened again prior to entry to the day program. Program participants transported by an entity other than the day program provider shall be screened prior to entry to the day program.

Regardless of vaccination status and to reduce the risk of COVID-19 transmission during transportation, providers shall require staff to wear a well-fitted mask while on the vehicle and increase ventilation through the opening of windows and use of vehicle HVAC systems to circulate fresh air, if safely permitted. All participants who are able should wear a well-fitted mask while on the vehicle. Individual/guardian/family shall be informed that social distancing on a vehicle may not be possible when traveling to and from program, as well as during community outings. The CDC COVID-19 Community and/or Transmission Level does not indicate a directive to cease community outings.

Regardless of their vaccination status, if a participant tests positive, or is symptomatic for COVID-19 and either was not tested or is awaiting test results, they cannot return to program until:

- For participants who are unable to consistently wear a well-fitting mask while at program:
  - 10 days have passed (day 0 is the first day of symptoms or the day of the positive viral test for asymptomatic persons);
- For participants who are able to consistently wear a well-fitting mask while at program:
  - 5 days have passed (day 0 is the first day of symptoms or the day of the positive viral test for asymptomatic persons) followed by an additional 5 days of consistently wearing a well-fitting mask while at day program; and
- 24 hours have passed since resolution of fever without the use of fever-reducing medication, as applicable; and
- Symptoms have improved, as applicable. This can be as long as 20 days for participants with severe or critical illness<sup>3</sup>.

Should a symptomatic participant's test result come back negative they may return to program when they pass screening. Symptomatic participants who test negative may return to the program based on criteria for alternate diagnosis following resolution of fever for 24 hours without use of fever reducing medication, when applicable.

Regardless of vaccination status, asymptomatic participants who have had a close contact<sup>4</sup> with someone positive for COVID-19 should not be restricted from work/program following their exposure. Participants who are able must wear a well-fitting mask as tolerated/medically advisable around others for 10 days from the date of their last close contact with someone with COVID-19. Day 0 starts the day they had close contact with someone positive for COVID-19, and day 1 is the first full day following the last close contact. They should get tested at least 5 days

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<sup>3</sup> [https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html?s\\_cid=10496:cdc%20covid%20guidelines:sem.ga:p:RG:GM:gen:PTN:FY21](https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html?s_cid=10496:cdc%20covid%20guidelines:sem.ga:p:RG:GM:gen:PTN:FY21)

<sup>4</sup> Close contact is defined as  $\geq 15$  cumulative minutes within 24-hours of someone who has recently tested positive for COVID-19

after they last had close contact with someone with COVID-19, and follow isolation recommendations if they test positive.

### **Procedure for Entering a Residence/Returning from an Off-Site Visit with Family/Friends – Residents**

Regardless of vaccination status, residential providers are required to screen all residents and monitor them for sudden or emerging symptoms/signs of illness. This includes taking and recording their temperature. If they are showing symptoms and/or fever, they should be isolated away from other residents and a healthcare professional immediately consulted to determine if further isolation and/or COVID-19 testing is needed. If symptoms appear to be immediately life-threatening, 911 shall be called.

Regardless of vaccination status, upon a resident's return from an off-site visit they will be screened for signs and symptoms of COVID-19, including determination if they experienced a close contact with someone positive for COVID-19. Regardless of vaccination status, symptomatic residents who report a close contact shall be tested for COVID-19 and the advice of a medical professional be followed based on test results, including direction on isolation/quarantine.

Regardless of their vaccination status, if a resident tests positive, or is symptomatic for COVID-19 and either was not tested or is awaiting test results, they must isolate as follows:

- For residents who are **unable** to consistently wear a well-fitting mask:
  - 10 days have passed (day 0 is the first day of symptoms or the day of the positive viral test for asymptomatic persons);
- For residents who are **able** to consistently wear a well-fitting mask:
  - 5 days have passed (day 0 is the first day of symptoms or the day of the positive viral test for asymptomatic persons) followed by an additional 5-days of consistently wearing a well-fitting mask; and
- 24 hours have passed since resolution of fever without the use of fever-reducing medication, as applicable; and
- Symptoms have improved, as applicable. This can be as long as 20 days for participants with severe or critical illness<sup>5</sup>.

Should a symptomatic resident's test result come back negative they should return to program when they pass screening. Symptomatic residents who test negative may return to the program based on criteria for alternate diagnosis following resolution of fever for 24 hours without use of fever reducing medication, when applicable.

Regardless of vaccination status, asymptomatic residents who have had a close contact<sup>6</sup> with someone positive for COVID-19 should not be restricted from work/program following their exposure. Residents who are able must wear a well-fitting mask as tolerated/medically advisable around others for 10 days from the date of their last close contact with someone with COVID-19. Day 0 starts the day they had close contact with someone positive for COVID-19, and day 1 is the first full day following the last close contact. They should get tested at least 5 days after they last had close contact with someone with COVID-19, and follow isolation recommendations if they test positive.

### **Procedure for Entering a Residence or Day Program – Visitors**

Regardless of vaccination status all visitors must be screened, including temperature check, before entering a provider-managed residence or day program. Indoor visitation must be permitted for those visitors who pass

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<sup>5</sup> [https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html?s\\_cid=10496:cdc%20covid%20guidelines:sem.ga:p:RG:GM:gen:PTN:FY21](https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html?s_cid=10496:cdc%20covid%20guidelines:sem.ga:p:RG:GM:gen:PTN:FY21)

<sup>6</sup> Close contact is defined as  $\geq 15$  cumulative minutes within 24-hours of someone who has recently tested positive for COVID-19

screening. Visitors must wear a well-fitted mask if that is the policy of the provider and physically distance from other staff/residents/participants/visitors with whom they are not visiting. Support Coordinators shall follow the parameters in [Support Coordinator Field Visits](#).

Providers are permitted to inquire about vaccination status of participants, visitors and staff so long as they follow all privacy requirements and are in compliance with HIPAA protections, (e.g., do not ask the status in front of others) and any other applicable federal or state law. Visitors are not required to provide this information. If vaccination status is unknown it is to be assumed the person is not vaccinated.

Those who clear screening and enter a residence are advised to monitor for signs and symptoms of COVID-19 for at least 10-days after their visit. If symptoms occur, they should self-isolate at home, contact their healthcare provider, and immediately notify the residence of the date they visited, the individuals with whom they were in contact, and the locations within the home they visited. The residence will immediately screen the individuals of a reported contact, and implement necessary actions based on findings.

Visitation is not recommended if the individual being visited and/or another resident/participant of the program is/are:

1. Positive for COVID-19 within the last 10 days;
2. Symptomatic of COVID-19 infection within the last 10 days;
3. Not up-to-date with recommended doses of the COVID-19 vaccine and have been identified as a close contact to a known COVID-19 case within the last 10 days.

In the above circumstances, if the individual, their guardian (as applicable) and visitor(s) are aware of the risks associated with visitation (on-site or otherwise) as described at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/non-us-settings/hcf-visitors.html>, visitation is still permissible<sup>7</sup>. In these cases, visits should occur in the resident's room or other area away from others and the resident/participant/visitor should wear a well-fitting mask if tolerated/medically advisable. Providers shall advise visitors whether they are aware of any staff/residents/participants who have tested positive, are symptomatic or are not up-to-date with their COVID-19 vaccinations, including a booster shot, and been exposed to COVID-19 in the past 10 days to help inform their decision to visit. Please note that providers must maintain compliance with HIPAA and other applicable federal and state laws when engaging in the sharing the above information.

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<sup>7</sup> <https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf>  
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## Screening Questions

### 1. Signs and symptoms consistent with COVID-19 (Regardless of vaccination status)

- a. Have you had a temperature over 100.4° within the past 48 hours?
  - **Current temperature must be verified and recorded as directed.**
  - **Thermometer must be completely sanitized between uses.**
- b. Have you had any of the following symptoms in the past 48 hours: 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, diarrhea (see [CDC Symptoms of Coronavirus](#)).

### 2. Close contact with someone who has COVID-19 (Staff who respond YES are permitted to enter the residence or program but must wear a mask. Program participants/residents who respond YES are permitted to enter the residence or program but should wear a mask based on their ability)

- a. Have you had close contact with someone\* who has tested positive for COVID- 19 in the past 10 days?

*Please note that if close contact was solely due to continuing care for an infected individual in the residence or other healthcare setting and appropriate personal protective equipment was worn during that encounter answering Yes to this question does not preclude the staff person from working or someone participating in a visit. In this instance, the staff person can continue to work, unless they display symptoms, and should follow universal precautions including wearing PPE.*

**Close contact for healthcare exposures is defined as follows:** Someone who was: (a) within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the individual has isolated for at least 5 days, and/or (b) had direct contact with the infectious secretions of a person with laboratory-confirmed COVID- 19.

#### **Examples:**

- Caring for or visiting the person; having unprotected direct contact with infectious secretions or excretions of the individual (for example, being coughed on or handling a dirty tissue).

#### CDC Contact/Exposure Resources:

- [CDC Guidance for Potential COVID-19 Exposure Associated with International or Domestic Travel](#)
- [CDC Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#)
- [Guidance for COVID-19 Diagnosed and/or Exposed Healthcare Personnel](#)
- [NJDOH Healthcare Personnel Exposure to a Confirmed COVID-19 Case CONVENTIONAL Risk Algorithm](#)