



Department of Health

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DATE: April 18, 2022
TO: Adult Care Facilities, Local Health Departments
FROM: New York State Department of Health (NYSDOH)

Health Advisory: Infection Prevention and Control Recommendations for Adult Care Facilities During the COVID-19 Pandemic

Please distribute immediately to:
Adult Care Facility Administrators and Operators

The purpose of this advisory is to provide information on the infection prevention and control recommendations that Adult Care Facilities (ACFs) in New York State should follow during the COVID-19 pandemic. ACFs include adult homes, enriched housing programs, assisted living programs, and assisted living residences licensed and/or certified by the New York State Department of Health (“Department”). 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>.

General infection prevention and control recommendations

Upon identification of a resident or staff member who tests positive for SARS-CoV-2, irrespective of the individual’s vaccination status, all ACFs should contact their local health department for infection prevention and control recommendations.

All ACFs should adhere to current guidance issued by the Department including:

- March 3, 2022, [DAL #22-26 Revised Visitation Guidelines](#)
- March 2, 2022, [Use of face masks by personnel and visitors](#)
- March 1, 2022, [Isolation and quarantine guidance](#)

All ACFs must ensure residents are educated on [strategies to protect themselves from COVID-19 infection](#). The Centers for Disease Control and Prevention (CDC) also has many [resources for older adults](#), including considerations for memory care units.

All ACFs should:

- Ensure staff, residents, and visitors are aware of recommended infection prevention and control practices in the facility. Consider posting signs or posters at the entrance and in strategic places (e.g., waiting areas, elevators, common areas) with instructions about current recommendations (e.g., when to use source control and when to perform hand hygiene).
- Have an established process to identify and manage individuals with suspected or confirmed SARS-CoV-2 infection.

- Have a screening process in place to identify individuals entering the facility, regardless of their vaccination status, who have had a positive viral test for SARS-CoV-2 within the past 10 days, have [symptoms of COVID-19](#), or have had close contact or higher-risk exposure (as described below) to someone with SARS-CoV-2 infection within the past 10 days, so that they can be properly managed. Residents leaving and returning to the facility should be screened according to the guidance in [DAL #22-26 Revised Visitation Guidelines](#).

ACFs licensed as an Assisted Living Residence (ALR), and/or certified as Enhanced Assisted Living Residence (EALR) or Special Needs Assisted Living Residence (SNALR) and Adult Homes or Enriched Housing Programs that offer services through an Assisted Living Program (ALP), or any ACF that is caring for one or more residents with SARS-CoV-2 infection, should adhere to applicable recommendations issued by the CDC in "[Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)".

Case investigation and contact tracing

In collaboration with local health departments, all ACFs should continue to conduct case investigations to identify residents, facility staff, and visitors with [close contact](#) or facility staff with [higher-risk exposure](#) to a person with SARS-CoV-2 infection. The focus of such investigation should be on preventing or reducing COVID-19 transmission within the facility.

- ACF staff, residents, and visitors are considered [close contacts](#) if identified as being less than 6 feet away from someone with confirmed or suspected SARS-CoV-2 infection 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 infection.
 - However, ACF staff who are trained in the use of all recommended personal protective equipment as well as standard and transmission-based precautions recommended for use in the care of residents with SARS-CoV-2 infection (as in healthcare settings), should be evaluated as contacts using [higher-risk exposure](#) criteria according to CDC, "[Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2](#)". Isolation and quarantine recommendations should be followed according to the March 1, 2022, [NYSDOH *NEW REVISED* Isolation & Quarantine](#) guidance.
- When evaluating a close contact or higher-risk exposure, consider the time spent with someone with SARS-CoV-2 infection starting 2 days before the infected person developed symptoms, or the collection date of the test if they remained asymptomatic, until the start of isolation.
- Close contacts should be identified by interviewing the person with COVID-19, if possible.
- A facility resident, staff member, or visitor identified as a close contact should be notified of their exposure as soon as possible. The confidentiality of the person with COVID-19 infection should be maintained.
- CDC resources for conducting contact tracing are [here](#).

Isolation and quarantine for residents, facility staff, and visitors

All ACFs should adhere to isolation and quarantine guidance according to recommendations in the March 1, 2022 [NYSDOH *NEW REVISED* Isolation & Quarantine](#) guidance. For ACFs, the [March 1, 2022 Health Advisory](#) supersedes the May 3, 2021, Department-issued Health Advisory, "*** Revised *** Discontinuation of Transmission-Based Precautions for Patients with

COVID-19 Who Are Hospitalized or in Nursing Homes, Adult Care Facilities, or Other Congregate Settings with Vulnerable Residents”.

Facility modifications

ACFs must contact the Division of Adult Care Facility and Assisted Living Surveillance regional office program staff before implementing any plans to modify heating, ventilation, or air conditioning systems within the building.

Keep up to date

ACFs should adhere to CDC infection control guidance as outlined above, except when specific Department-issued guidance is available.

ACF personnel are advised to regularly and frequently review the [NYSDOH website](#), the [New York State Health Commerce System](#), the [CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#) for updates to NYS and CDC guidance.

General questions or comments about this advisory can be sent to: covidadultcareinfo@health.ny.gov or icp@health.ny.gov.