MEMORANDUM FOR AFRH RESIDENTS AND STAFF

SUBJECT: Modification of COVID Protective Measures (Change #3)

Summary of Change 3

Updates regarding vaccination, quarantine, isolation and other protocols due to the COVID Omicron variant of concern and other variants.

Previous versions dated May 2021 and September 2021 are obsolete.

Overview

This memorandum provides updated guidance to both AFRH campuses for protective measures implemented during the COVID pandemic in accordance with updated Federal guidance.

Definitions

Booster dose: Additional vaccine doses after the initial series (one or two doses depending on manufacturer). Currently the Federal government has made available the first booster. There may potentially be more sequential boosters available.

Exposure: Close contact (within 6 feet of someone for a cumulative total of 15 minutes or more over a 24-hour period) with someone who has COVID.

Healthcare personnel (HCP): All persons working in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials. The full CDC definition can be found at the footnote¹. All AFRH staff are HCP per the CDC definition and AFRH determination.

¹ https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/appendix/terminology.html (10/2/2019 rev.)
**Fully vaccinated:** Two weeks have passed since the final dose of an initial vaccine series (one or two doses depending on manufacturer). This term currently applies for personnel to meet the requirements of Executive Order 14043. Currently, any booster dose is referred to separately. The definition of fully vaccinated may change in the future to include booster doses according to Federal guidance.

**Quarantine vs isolation:** Quarantine keeps someone who *might have been* exposed to the virus away from others. Isolation keeps someone who *is sick or tested positive without symptoms* away from others.

**Staff:** Includes Federal employees, contractor employees, and volunteers.

**Required core infection prevention protocols**

All residents, staff, volunteers, and visitors *must* maintain core infection prevention protocols:

- Properly wear face masks per current campus guidelines
- Maintain at least 6 feet of social distancing per current campus guidelines
- Wash or sanitize hands frequently
- Complete sanitizing and screening steps when arriving in campus
- Self-monitor at all times for any symptoms associated with COVID (i.e., sore throat, cough, nasal drainage, dizziness, fever or chills, shortness of breath, new loss of taste or smell, headache, fatigue) and if they occur, immediately self-isolate and notify the Wellness Center staff who will provide further instructions

Staff will wear N95 respirator masks and full personal protective equipment as indicated when in close contact with a person with diagnosed COVID.

KN95 filtering face masks are recommended for all persons not wearing N95 masks due to close contact with a person with COVID. KN95 masks are significantly more effective than simpler cloth masks.

Residents and staff are encouraged to request COVID testing at the Wellness Center at any time. Testing is advised within 3 days after potential exposure, such as participating in activities off-campus that involve close contact with the general public, or any travel by common carrier.
Vaccines are one of the tools available, but are not guaranteed to prevent illness or even death from COVID. Since COVID can result in illness, hospitalization, and even death, every available defense should be deployed.

**Adjusting protective measures**

AFRH’s highest priority is to keep the two communities safe, and some limits will remain in place while others will be adjusted in response to conditions at either campus or their surrounding communities. Key conditions are:

- Local case and positivity rates, as reported by CDC
- Positive cases on campus

AFRH consults the CDC county view positivity rates and other data available online at [https://covid.cdc.gov/covid-data-tracker/#county-view](https://covid.cdc.gov/covid-data-tracker/#county-view). For Gulfport we consult Harrison County, MS. For Washington we consult Washington, DC as well as Prince George’s and Montgomery counties in Maryland.

**Conduct**

Failure to observe core infection prevention protocols or vaccination requirements may result in disciplinary measures or exclusion from certain areas. Only managers and healthcare providers have a need to query any individual regarding infection prevention protocols or their vaccination status.

**Protocols expanded**

**Vaccination**

While vaccines do not completely prevent illness, hospitalization, or death from COVID, they decrease these risks substantially and the core infection prevention protocols continue to be our essential first line of defense.
Initial information on the Omicron variant indicates that some immunity may be provided after the booster. Residents, staff, and visitors who were vaccinated more than 6 months ago but have not received a booster are advised to speak with their healthcare provider about getting a booster as soon as possible.

**Face masks and social distancing**

Residents, staff, visitors, volunteers, must properly wear face masks and observe 6 feet or more of social distancing per current campus guidelines.

Residents must wear masks while receiving individual services from staff, and only remove the mask when directed by the staff member providing the service. Staff will wear masks while providing individual services to residents.

Staff must maintain social distance of at least 6 feet from others to the maximum extent possible.

KN95s are filtering face masks, often confused with N95 respirators. KN95s are not considered respirators and therefore do not fall under Occupational Safety and Health Administration regulations. Both KN95s and N95s are made of similar materials. Unless required to wear an N95 respirator for direct patient care, everyone is strongly encouraged to wear a KN95 filtering face mask at AFRH. KN95s are more protective than standard cloth masks and do not require fit testing, training, medical questionnaires, or approval before use.

**Testing**

With the recent surge in COVID variants, testing protocols will return to increased surveillance and outbreak testing. Symptomatic individuals will immediately receive both rapid and PCR tests. Asymptomatic individuals identified through contact tracing will receive a rapid test within 3 days of exposure. Unvaccinated staff will be tested every Monday, or the first duty day after leave, prior to entry into AFRH buildings.
Quarantine and isolation

It is important to remember that CDC guidance for the general public does not apply at AFRH. This is because of our close living environment, shared facilities and amenities, on-site healthcare services including higher levels of care, and the greater risk of infection and severe illness among the residents we serve. Therefore, our approach incorporates some features of CDC guidance for the general public, conventional healthcare personnel, contingency and crisis management, and for long-term care, assisted living, and healthcare settings. CDC guidelines change frequently and differently in each of these areas.

For determining the duration of quarantine or isolation, the first day of symptoms is counted as day zero. The first day with a positive COVID test is counted as day one.

Residents

Quarantine

All AFRH residents, regardless of vaccination status, who have a qualifying exposure to COVID will quarantine for 10 days.

- They will be rapid tested at the end of ten days.
- If negative, they may exit quarantine but will continue to monitor for symptoms for 14 days and immediately notify the Wellness Center of any symptoms. During this time, they should limit their movements and participation in activities and wear a mask at all times.
- If they test positive or develop any symptoms during the quarantine period, they will move to the isolation protocol below.

Isolation

All AFRH residents, regardless of vaccination status, with a positive COVID test or symptoms of COVID infection will isolate for 10 days.

- They will be rapid tested after 10 days. If the test is negative and the resident is asymptomatic, including no fever for the 24 hours prior, they may end isolation.
- Immunocompromised residents may have specialized isolation tailored by their healthcare providers in support of their needs.
Staff

Quarantine

AFRH staff, regardless of vaccination status, who have a qualifying exposure to COVID will quarantine for 10 days.

- If completely asymptomatic and a minimum of 7 days have passed since the last qualifying exposure, they may be asked by management to test out of quarantine by a negative rapid test. If negative, they may return to work and wear a N95 respirator or KN95 mask at all times onsite until 10 days have elapsed. They will continue to monitor for symptoms for 14 days and immediately notify management of any symptoms.
- If testing is not available or they are not asked to attempt a test-out, they will complete the 10-day quarantine period. They will be rapid tested after 10 days.
- If negative, they may return to work but will continue to monitor for symptoms for 14 days and immediately notify management of any symptoms. During this time, they should limit their movements and participation in activities to the extent possible and wear a mask at all times.
- If they test positive or have any symptoms during the quarantine period, they will move to the isolation protocol below.

Isolation

All AFRH staff, regardless of vaccination status, with a positive COVID test or symptoms of COVID infection will isolate for 10 days.

- If completely asymptomatic and a minimum of 7 days have passed since the last qualifying exposure, they may be asked by management to test out of isolation by a negative rapid test. If negative, they may return to work and wear a N95 respirator or KN95 mask at all times onsite until 10 days have elapsed. They will continue to monitor for symptoms for 14 days and immediately notify management of any symptoms.
- If testing is not available or they are not asked to attempt a test-out, they will complete the 10-day isolation period. They will be rapid tested after 10 days.
• If negative and asymptomatic, including no fever for the 24 hours prior, they may return to work but will continue to monitor for symptoms for 14 days and immediately notify management of any symptoms. During this time, they should limit their movements and participation in activities to the extent possible and wear a mask at all times.

Gatherings

The safest strategy is to avoid gatherings of people. Residents and staff should aim to keep on-campus indoor gatherings at 10 or fewer, and campus administrators must authorize indoor gatherings of more than 25 people. Virtual meetings are strongly encouraged, particularly for staff.

Masks must be worn and social distancing maintained in settings with others in accordance with current campus guidance. Ventilation should be maximized with fresh outdoor air whenever possible in any area where groups of people are located.

Private consumption of food and beverages is strongly encouraged, rather than in community areas, because eating and drinking involves lowering masks. Anyone eating in on-campus community facilities must be fully vaccinated. Staff and visitors may only eat in on-campus dining facilities when permitted by current campus guidance. While eating in community spaces, maintain at least 6 feet between people and only lower masks briefly when eating or drinking. Spend as brief a time as possible in the community dining area.

Off-campus activities

Residents intending to participate in activities off campus are strongly recommended to obtain a booster vaccine, in consultation with their healthcare provider, before doing so.

All residents and staff should make every effort to avoid off-campus areas with known high positivity rates. Gatherings of more than 10 people should be avoided. These include restaurants, bars, shopping malls, events, and entertainment venues such as casinos and theaters. Look for places that are well-ventilated and outdoors is better than indoors.
The CDC continues to endorse masks and social distancing even among fully vaccinated individuals with boosters as additional protection against the virus. AFRH encourages all residents and staff to continue observing these protocols at all times when off campus.

Drivers and passengers in shuttle buses or shared vehicles must sit so as to maintain 6 feet separation, wear masks at all times, and maximize ventilation.

Travel

Travel increases your chance of spreading and getting COVID. If you do travel, AFRH strongly recommends you take these actions to protect yourself and others from COVID:

- Contact the Wellness Center prior to your trip if you will travel via common carrier such as airplanes. Consider asking for a COVID test within 2 days prior to departure.
- Check [https://covid.cdc.gov/covid-data-tracker/#county-view](https://covid.cdc.gov/covid-data-tracker/#county-view) prior to making any travel plans to avoid areas with high local transmission rate.
- During travel, wear a mask over your nose and mouth, avoid crowds and stay 6 feet or more away from others and wash or sanitize your hands often.
- After travel via common carrier, if you have had the vaccinations including the booster, self-monitor for symptoms. If you are unvaccinated or vaccinated but have not received the booster, consider quarantining for 5 days. Contact the Wellness Center to request a rapid COVID test within 3 days after returning and immediately if you develop any symptoms.

Visitors and volunteers

AFRH will continue to assume that visitors represent COVID exposure risks. Campus Administrators may permit visitors outside the buildings and in designated areas inside the buildings, subject to the following:

- Visitors must follow core infection prevention protocols and screening procedures per current campus guidance at all times while on AFRH grounds.
• Visitors will not be permitted if they have had a fever or other COVID symptoms within 24 hours, or have had any COVID diagnosis or have been in isolation or quarantine within the past 10 days.

• Visitors will comply with the Safer Federal Workforce Plan. They will be provided with the Certification of Vaccination form\(^2\) and must complete it, keep it with them, and present it to staff when asked while on AFRH grounds.

• Residents are encouraged to only welcome visitors who have received a booster vaccine and at least 2 weeks have passed since the booster.

• Campuses will explain the risks associated with visitation to residents and visitors so they can make an informed decision about participation.

• Visitors must remain in designated areas to minimize contact with other residents and staff. Campus Administrators may allow volunteers who are fully vaccinated and have had at least one booster for activities in Independent Living and common areas. Volunteers will not be permitted in Assisted Living, Long Term Care, and Memory Support at this time.

• Indoor visits may need to be scheduled in advance due to space and staffing limitations and to aid contact tracing if needed.

• Indoor visitation for unvaccinated residents, or vaccinated residents in quarantine or isolation, will be limited to compassionate care situations as permitted by the campus Administrator.

**Tours for prospective residents**

Prospective residents who are fully vaccinated and had at least one booster will be allowed to schedule a campus tour. They must follow the core infection prevention protocols and guidance for visitors, particularly regarding symptoms or COVID diagnosis, at all times during their visit. They will not be permitted in Assisted Living, Long Term Care, and Memory Support at this time.

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New admissions

Incoming residents will follow protocols including testing for COVID within 48 hours prior to arrival, having a health screening upon arrival, and submitting information on their COVID vaccination status including any booster. Any new resident who has not had both the initial vaccine series and booster will follow the resident quarantine procedure above. Incoming residents will also follow all outlined rules if a companion is needed to assist them with their move-in, or if a moving company is needed. Residents are encouraged to only bring companions who have received a booster vaccine and at least 2 weeks have passed since the booster. Companions must follow the above guidance for visitors and volunteers.

Conclusion

AFRH will continue to assess current conditions and adjust protective measures as necessary, utilizing resources including but not limited to the Department of Defense, CDC, Executive Orders, and other applicable Federal guidance. Our ultimate goal has been, and continues to be, to maintain a safe and healthy environment for our residents and staff.

JOHN S. RISCASSI
Chief Operating Officer