MEMORANDUM FOR AFRH RESIDENTS AND STAFF

SUBJECT: Modification of COVID Protective Measures (Change #4)

Summary of Change 4

Updates regarding masks and other protocols due to revised CDC guidance. Previous versions 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.

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.

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.

Community levels: CDC calculation of COVID-19 community levels of COVID by county available at https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html. These levels do not apply in healthcare settings, such as clinics and nursing homes, per the CDC.
**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 footnote\(^1\). All AFRH staff are HCP per the CDC definition and AFRH determination.

**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.

**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:

- Positive cases on campus
- Local data, as reported by CDC at [https://covid.cdc.gov/covid-data-tracker/#county-view](https://covid.cdc.gov/covid-data-tracker/#county-view)

\(^1\) [https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/appendix/terminology.html](https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/appendix/terminology.html) (10/2/2019 rev.)
Required core infection prevention protocols

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

- Properly wear face masks per current guidelines (see details below)
- Maintain at least 6 feet of social distancing per current 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

Detailed protocols

Masks

The CDC has advised that mask wearing is not required when out in the community in counties with low and medium community levels. See the definition for COVID-19 community levels for online county information.

It is important to recognize that healthcare settings have separate CDC guidelines and masking continues to be mandatory in healthcare settings at AFRH.

- Residents and visitors must wear masks in the Wellness Centers, Assisted Living, Long Term Care, and Memory Support units, and are encouraged to wear KN95 masks specifically. KN95s are more protective than standard cloth masks and do not require fit testing, training, medical questionnaires, or approval before use.
- Staff must wear N95s or KN95s in the Wellness Centers, Assisted Living, Long Term Care, and Memory Support units.
- Signage requiring masking for all, regardless of vaccination status or CDC community level, will be posted at entrances to healthcare units.
- Staff must wear PPE including gowns, gloves, and N95s when caring for residents with diagnosed COVID.

Masks are encouraged, but not required, in all other indoor areas at AFRH where others are present when CDC community levels are low or medium. Masks are
required by everyone in all areas at AFRH whenever CDC community levels are high.

**Vaccination**

The AFRH community has high rates of initial COVID vaccine series and boosters. Residents, staff, and visitors who were vaccinated 6 months ago yet have not received a booster and are medically eligible to receive a booster, are advised to speak with their healthcare provider about getting a booster as soon as possible. Immunocompromised individuals are encouraged to speak with their personal healthcare provider to determine if an additional booster is recommended.

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.

**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.

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.

**Quarantine and isolation**

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, and residents in Assisted Living, Long Term Care, and
Memory Support who are returning from hospitalization, 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 and social distancing

Large crowds of greater than 30 people should be avoided when possible. Social distancing of 6 feet between all people at all times should be maintained regardless of group size, including in the dining hall. Ventilation should be maximized with fresh outdoor air if possible in any area where groups of people are located. Independent Residents should limit the number of visitors in their apartment to ensure 6 feet of social distancing can be maintained between all guests. Virtual meetings are strongly encouraged, particularly for staff.
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 try to avoid off-campus areas with known high community levels, available at: https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html. Large groups and crowds over 30 should be avoided if possible. AFRH encourages residents and staff to continue wearing masks when interacting off-campus with the general public.

Drivers and passengers in shuttle buses or shared vehicles must sit so as to maintain 6 feet separation 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://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html prior to making any travel plans to avoid areas with high local community levels. If the destination has high community levels, it is advised to wear a mask while there.

- During travel by common carrier, 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 by common carrier, if you have had the vaccinations including the booster, self-monitor for symptoms and contact the Wellness Center immediately if you develop any symptoms. Consider requesting a rapid test 3 days after returning.
**Documentation for contractors, visitors, and volunteers**

Contractor personnel, visitors, and volunteers must complete DD Form 3150, "Contractor and Visitor Certification of Vaccination," \(^2\) maintain a current copy, and show it to authorized AFRH personnel upon request. Visitors who are not fully vaccinated against COVID-19, or who decline to volunteer their COVID-19 vaccination status, are asked to show an electronic or paper copy of negative results from a U.S. Food and Drug Administration authorized or approved COVID-19 test administered no earlier than 72 hours prior to their visit.

**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 are encouraged to wear masks at all times in AFRH buildings, even when the CDC community levels are low or medium.

- Visitors must wear masks in healthcare units and whenever the CDC community level is high.

- 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.

- 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.

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\(^2\) [https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3150.pdf](https://www.esd.whs.mil/Portals/54/Documents/DD/forms/dd/dd3150.pdf)
• 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

AFRH will remain closed to the general public for indoor tours without prior approval by Campus Administrators. Prospective residents may tour the facilities by appointment only. Tour participants must follow the core infection prevention protocols and guidance for visitors at all times during their visit, particularly regarding symptoms or COVID diagnosis. They will not be permitted in Assisted Living, Long Term Care, and Memory Support at this time.

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.

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.
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