

**VDH Table of COVID-19 Prevention Recommendations for Non-Healthcare Congregate Settings
Updated August 25, 2021**

These guidelines are intended for community-based programs and facilities that provide daytime or residential services but are not intended for healthcare facilities. These facilities include congregate day or residential programs or facilities licensed or operated by the state (e.g., correctional and detention facilities, state-licensed non-healthcare group homes). This guidance could also be applied to non-licensed residential or day programs or facilities, including homeless shelters. This guidance is not intended for independent living facilities. Guidance for [healthcare settings](#) should be applied in areas of congregate settings where healthcare services are provided.

Some recommendations in this guidance differ depending on whether a person is [fully vaccinated](#). When determining vaccination status, the privacy of the resident or staff should be maintained (e.g., not asked in front of other residents or staff). If vaccination status is not provided voluntarily or is unknown, the safest practice is for all participants to follow all recommended infection prevention and control practices, including maintaining physical distancing and wearing masks.

The guidance table below summarizes key recommendations. Persons in charge of congregate settings are encouraged to review the more detailed recommendations included in links or the [resource documents](#) listed below the table. Each facility must also follow guidance from applicable licensing bodies.

Action or Situation	Recommendation	Exception or Note
Establish a culture of prevention	<p>Have policies and procedures in place, provide training and display materials (e.g., posters) that support disease prevention.</p> <p>Ensure supplies are available for hand washing, respiratory hygiene, cleaning, and personal protective equipment (PPE) as necessary.</p>	Consider designating a person to be in charge of ensuring these are in place.
Vaccination	<p>Recommend COVID-19 vaccination for all persons who are eligible to get vaccinated.</p> <p>More information about vaccines is available at the VDH COVID-19 Vaccine website.</p>	<p>Community-dwelling staff and participants may visit vaccinate.virginia.gov for information about getting vaccinated in Virginia.</p> <p>Correctional and detention facilities should work with their local health department to</p>

		coordinate vaccination of residents.
Encourage all to self-monitor for COVID-19 symptoms and screen everyone daily for symptoms or exposure	<p>Ask all staff, volunteers, visitors, and daily arrivals about symptoms and exposures every day. No one who is ill, has been diagnosed with COVID-19 in the last 10 days, or is awaiting a test result (if not fully vaccinated) should be allowed entry. If they are already onsite, they should be directed to the designated isolation location. Those who are not fully vaccinated and had close contact with someone with COVID-19 also should be denied entry.</p> <p>Screen residents daily so action can be taken quickly to protect others if illness occurs.</p>	<p>Screening can be done electronically before arrival.</p> <p>Fully vaccinated people who have had a close contact exposure but do not have any symptoms may be allowed to work or enter the facility.</p> <p>Close contact means having a possible exposure to someone with COVID-19. Learn more here. There are some exceptions for students in K-12 settings.</p>
Masking	<p>Have a policy that everyone in the facility follow VDH mask guidance. Masks should cover the nose and mouth and contain multiple layers.</p> <p>Regardless of vaccination status, everyone should continue wearing masks in correctional and detention facilities and homeless shelters.</p> <p>Residents in these settings may remove their masks when in their rooms or on their bed/mat in shared sleeping areas, but should put the mask back on when staff or visitors enter the room and whenever the resident leaves the room.</p> <p>Staff should be on alert for persons who need reminders or assistance with masking.</p>	<p>Masks should not be placed on anyone under age 2, someone who has a disability or medical condition that precludes wearing a mask or who has trouble breathing, or anyone who is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.</p> <p>For more information about mask requirements and recommendations, refer to VDH's mask website.</p>
Distancing and Activities	6-foot distancing is recommended for people who	Singing, chanting, and shouting should be done outdoors if

	<p>are not fully vaccinated. If the vaccination status is not known for the population, then continue to use 6-foot distancing throughout the facility for dining, group activities, and sleeping arrangements.</p> <p>Regardless of vaccination status, all staff, residents, and volunteers should maintain physical distance in homeless shelters.</p> <p>In correctional and detention facilities, everyone should maintain distance, regardless of vaccination status, if conditions are not favorable based on the factors provided here. If conditions in the facility are favorable, fully vaccinated people do not need to maintain physical distance if they are completely separated from those who are unvaccinated. If fully vaccinated and unvaccinated people are together, everyone should maintain physical distance.</p> <p>Maintain distance in shared rooms by staggering schedules and limiting the number of participants as necessary to create distance.</p> <p>Provide grab-and-go foods or food served on individual plates by persons wearing masks and gloves instead of allowing a self-serve food option.</p>	<p>possible. Participants should follow VDH mask guidance and remain at least 6 feet distanced during these activities.</p> <p>Conduct other activities outdoors when feasible.</p> <p>Small groups can be maintained that interact with each other and do not mix with other groups.</p> <p>Consider installing physical barriers in areas where 6-foot distancing cannot be maintained, such as reception areas.</p>
Hand hygiene	Ensure soap and water and a way to dry hands are readily available and hand sanitizer containing at least 60% alcohol	Place posters to encourage frequent hand hygiene.

	is positioned at multiple locations within the facility.	
Visitation	<p>Visitors should not come if they have symptoms of COVID-19, have been diagnosed in the past 10 days, or are awaiting COVID-19 test results (if not fully vaccinated). Those who are not fully vaccinated and have been in close contact with someone with COVID-19 should also postpone their visit.</p> <p>Visitors should be screened and free of symptoms and exposure before being allowed entry.</p>	<p>Visitors should follow VDH guidance for masking and maintaining 6-foot distance from others in common areas.</p> <p>Visitors should not be allowed for persons in COVID-19 isolation or quarantine.</p> <p>Maintain a log of everyone who enters to assist with contact tracing.</p> <p>If visitation is suspended, explore alternative ways for residents to communicate with their families, friends, and other visitors.</p>
Cleaning and disinfection	<p>Daily cleaning with soap or detergent is sufficient if no one with suspected or confirmed COVID-19 was in the space.</p> <p>Clean and disinfect if anyone with COVID-19 symptoms or a positive test was in the space in the past 24 hours; if more than 24 hours, clean and consider disinfection; if more than 3 days have passed since the person was in the space, routine cleaning is sufficient.</p> <p>Wear gloves when cleaning or handling trash and wash hands after removing gloves.</p> <p>If disinfecting, use products from EPA's List N, ventilate the area, and follow directions on the label.</p>	<p>Consider cleaning more frequently or adding a disinfection step in high traffic areas and on high-touch surfaces, especially if COVID-19 transmission rates are high in the community, people are not following masking, distancing, or hand hygiene recommendations, or the space contains a number of persons at increased risk of severe illness from COVID-19.</p>
Ventilation	<p>Maximize room ventilation by opening windows and doors when safe to do so, using fans, increasing filtration, and</p>	<p>Increase the circulation of outdoor air in the facility.</p>

	increasing air flow settings in heating and air conditioning systems.	Refer to CDC guidance and VDH Best Practices for more detail.
PPE	Workers who could be splashed or sprayed by bodily fluids during their work should use standard precautions . Personal protective equipment (PPE) includes a facemask (e.g., surgical mask), eye protection (e.g., goggles or face shield), disposable gloves, and a gown.	Staff providing direct care to someone suspected or confirmed to have COVID-19 or who is in quarantine should wear a fit-tested N95 respirator in addition to eye protection, gloves, and a gown.
Admissions/Readmissions	<p>If possible, consider a 14-day quarantine (intake quarantine) for persons newly admitted to a congregate setting who do not have COVID-19, even if they test negative.</p> <p>New admissions/readmissions who have COVID-19 should be housed in a separate COVID-care unit until special PPE is no longer needed.</p>	<p>Persons newly admitted to a congregate setting do not need to be quarantined if they are fully vaccinated and do not have symptoms of COVID-19 or if they have had COVID-19 within the past 3 months, do not have symptoms of COVID-19, and have followed disease prevention recommendations (e.g., masking, distancing).</p> <p>Quarantine is not needed if a person leaves the facility for less than 24 hours, has no close contact with someone with COVID-19, and follows all recommendations.</p> <p>Communicate with transport services and receiving facilities to ensure compliance with recommendations for masking, distancing, cleaning, and ventilation.</p>
Testing for COVID-19	Test anyone who develops symptoms of COVID-19, regardless of vaccination status. Those who have had close contact with someone suspected or confirmed to have COVID-19 should get tested even if fully vaccinated. Information about the timing of	Testing is not necessary after close contact exposure for most people who have recently recovered from COVID-19, but should still be considered if the person has a weakened immune system or if the earlier diagnosis is thought to be based on a false positive test result. More information is available here .

	<p>testing and other details are available here.</p> <p>CDC has detailed testing guidance for correctional and detention facilities and homeless shelters.</p> <p>Intake screening testing and screening testing before discharge/release may also be considered.</p>	<p>Routine screening testing (i.e., testing people who do not have COVID-19 symptoms or known exposure) could also be considered, but is not necessary for fully vaccinated people who do not have symptoms and have not had an exposure.</p> <p>If a case of COVID-19 occurs in the facility, more widespread testing should be considered, in consultation with the local health department.</p>
<p>If someone develops symptoms</p>	<p>Place the sick person in an isolation area. Day programs can arrange for the person to be sent home or to a healthcare facility.</p> <p>Residents suspected to have COVID-19 would ideally be placed in a private room with a private bathroom while awaiting test results. If that is not possible, they can stay in their current room.</p> <p>Residential settings should provide a dedicated space to care for persons with confirmed COVID-19, with dedicated staff to care for them.</p> <p>Identify and confidentially notify close contacts so they can monitor themselves for symptoms for 14 days and follow testing and quarantine recommendations.</p> <p>Roommates who are not fully vaccinated are considered exposed and should not share a room with someone else for 14 days.</p>	<p>A person confirmed to have COVID-19 should stay away from others until meeting criteria to stop isolation.</p> <p>Staff should monitor ill residents 3 times/day and wear PPE when within 6 feet of a person with COVID-19.</p> <p>If multiple cases occur, consult with the local health department about testing, halting activities, and other restrictions that are needed.</p>

	<p>Follow cleaning and disinfection guidelines listed above.</p>	
<p>If someone has close contact with someone suspected or confirmed to have COVID-19</p>	<p>People who have been exposed to COVID-19 need to stay home (quarantine) until it is safe to be around others. There are some exceptions (i.e., for fully vaccinated or recently recovered people).</p> <p>Close contacts should be on alert for symptoms of COVID-19 and always follow recommended COVID-19 prevention measures. Staff should monitor quarantined residents at least once daily, including temperature checks, for 14 days after exposure.</p> <p>Persons in quarantine should be housed in a single room, if possible. If not, they can quarantine in their usual room. Individuals with close contact may quarantine as a cohort if individual rooms are not available.</p> <p>Staff should wear PPE when caring for residents in quarantine.</p>	<p>VDH recommends a full 14-day quarantine because this is safest. Options for ending quarantine early are available for those who cannot quarantine for 14 days. These options should not be applied for residents or staff in correctional and detention facilities.</p> <p>More information about steps to take after being exposed to someone with COVID-19 is available here.</p>

Resources for Additional Detail:

CDC Cleaning and Disinfecting Your Facility - www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html

CDC Ventilation in Buildings - www.cdc.gov/coronavirus/2019-ncov/community/ventilation.html

CDC Interim Public Health Recommendations for Fully Vaccinated People - www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated-guidance.html

CDC Guidance for Adult Day Services Centers - www.cdc.gov/coronavirus/2019-ncov/community/adult-day-care-service-centers.html

CDC Resources for Correctional and Detention Facilities - <https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/index.html>

CDC Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities - www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html

CDC Interim Guidance for Homeless Service Providers to Plan and Respond to COVID-19 - www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/plan-prepare-respond.html

CDC Guidance for Group Homes for Individuals with Disabilities - www.cdc.gov/coronavirus/2019-ncov/community/group-homes.html

Updates Made Since Last Version (dated August 25, 2021)

- Removed certain details about the steps to take after exposure to COVID-19, quarantine, isolation, masking, and information for fully vaccinated people and added links to VDH or CDC websites throughout the document. This is because guidance on these topics is subject to change, and the websites are the best resources for the most current guidance.

Updates Made Since Last Version (dated June 25, 2021)

- Clarified that all staff, residents, and volunteers should maintain physical distance in homeless shelters, regardless of vaccination status.
- Added that correctional and detention facilities should consider the factors provided [here](#) to determine when physical distancing measures can be relaxed. Provided information based on vaccination status in these settings.
- Added that congregate settings could consider a 14-day intake quarantine for new admissions. Previously, the guidance stated that all new admissions who do not have COVID-19 should be quarantined for 14 days.

Updates Made Since Last Version (dated June 8, 2021)

- In the introduction, clarified the types of facilities for which this guidance is intended and noted that healthcare guidance should be followed in areas of facilities in which healthcare services

are provided. Added information about determining vaccination status of residents/staff and following all precautions if status is not volunteered or unknown.

- Added that staff should encourage everyone to self-monitor for symptoms. Fully vaccinated close contacts who do not have symptoms should be allowed to work and enter facilities.
- Updated mask recommendations to state that all residents and staff of correctional and detention facilities and homeless shelters should continue wearing masks, regardless of vaccination status. In other non-healthcare congregate settings, those who are not fully vaccinated should continue wearing masks.
- Updated distancing recommendations to state that maintaining 6 feet of distance is still recommended for those who are not fully vaccinated and when vaccination status cannot be determined.
- Updated tested recommendations to state that all close contacts who are not fully vaccinated should be tested. In correctional and detention facilities and homeless shelters, all close contacts should be tested, regardless of vaccination status.
- Added that staff should monitor quarantined residents and take their temperatures at least once daily.
- Updated the definition of fully vaccinated to include vaccines authorized by the World Health Organization. Also added that people with weakened immune systems might not be protected even after they are fully vaccinated and they should consult with their healthcare provider about following prevention recommendations even after they are fully vaccinated.