

**VDH Table of COVID-19 Prevention Recommendations for Non-Healthcare Congregate Settings**  
**Last Updated: May 5, 2021**

These guidelines are intended for community-based programs and facilities that provide daytime or residential services but are not healthcare facilities. These include adult day programs, shelters for persons experiencing homelessness or domestic violence, group homes, behavioral/developmental health or rehabilitation units, correctional and detention facilities, and other places where groups congregate for services. This table represents a summary of key recommendations. Persons in charge of congregate settings are encouraged to review the more detailed recommendations included in the resource documents listed below the table, especially if services are provided that may be considered health-related. Each facility must also follow guidance from applicable licensing bodies.

| Action or Situation   | Recommendation   | Exception or Note   |
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| Establish a culture of prevention                           | Have policies and procedures in place, provide training and display materials (e.g., posters) that support disease prevention. Ensure supplies are available for hand washing/sanitizing, cleaning, and personal protective equipment (PPE) as necessary.  | Consider designating a person to be in charge of ensuring these are in place.   |
| Screen everyone every day for COVID-19 symptoms or exposure | All staff, volunteers, visitors, and daily arrivals are asked about symptoms and exposures every day. No one who is ill, has been diagnosed with COVID-19 in the last 10 days, is awaiting a test result, or had close contact is allowed entry.<br><br>Residents are screened daily so action can be taken quickly to protect others if illness occurs. | Screening can be done electronically before arrival.<br><br>Close contact is defined as being within 6 feet of someone who has COVID-19 for a total of 15 minutes in a 24-hour period.  |
| Masking   | Have a policy that everyone in the facility wear a mask and that masks fit well, cover the nose and mouth, and contain multiple layers.<br><br>Residents may remove their masks when in their rooms, but should put the mask back on   | Masks may be removed during small group interactions (indoors or outdoors) when everyone in the group has been fully vaccinated.*<br><br>Masks should not be placed on someone who has a disability or medical condition that |

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|                           | <p>when staff or visitors enter the room and whenever the resident leaves the room.</p> <p>Staff are on alert for persons who need reminders or assistance with masking.</p>   | <p>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>   |
| Distancing and Activities | <p>6-foot distancing is recommended throughout the facility for dining, group activities, and sleeping arrangements. Maintain distance in shared rooms, 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>Postpone activities that involve wind instruments, singing, shouting, or chanting.</p> <p>Small groups can be maintained that interact with each other and do not mix with other groups. Small groups of fully vaccinated* individuals may interact (indoors or outdoors) without distancing.</p> <p>Conduct activities outdoors when feasible.</p> <p>Consider installing physical barriers in areas where 6-foot distancing cannot be maintained, such as reception areas.</p> |
| Hand hygiene              | <p>Ensure soap and water and a way to dry hands are readily available and hand sanitizer containing at least 60% alcohol is positioned at multiple locations within the facility.</p>  | <p>Place posters to encourage frequent hand hygiene.</p>  |
| Visitation                | <p>Visitors should not come if they have symptoms of COVID-19, have been in close contact with someone with COVID-19, have been diagnosed in the past 10 days, or are awaiting COVID-19 test results. Visitors should be screened and free of symptoms and exposure before being allowed entry.</p>  | <p>Visitors should wear masks and maintain 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</p>   |

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|                           |   | their families, friends, and other visitors.   |
| Vaccination               | Vaccination is recommended for all staff and residents/program participants.  | Community-dwelling staff and participants may visit <a href="https://vaccinate.virginia.gov">vaccinate.virginia.gov</a> for information about getting vaccinated in Virginia.<br><br>Correctional and detention facilities should work with their <a href="#">local health department</a> to coordinate vaccination of residents.                                  |
| Cleaning and disinfection | Daily cleaning with soap or detergent is sufficient if no one with suspected or confirmed COVID-19 was in the space.<br><br>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.<br><br>Wear gloves when cleaning or handling trash and wash hands after removing gloves.<br><br>If disinfecting, use products from <a href="#">EPA's List N</a> , ventilate the area, and follow directions on the label. | 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. |
| Ventilation               | Maximize room ventilation by opening windows and doors when safe to do so, using fans, increasing filtration, and increasing air flow settings in heating and air conditioning systems.   | Increase the circulation of outdoor air in the facility.   |
| PPE                       | Workers who could be splashed or sprayed by bodily fluids during their work should <a href="#">use</a>  | Staff providing direct care to someone suspected or confirmed to have COVID-19 or  |

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|                          | <p><a href="#">standard precautions</a>. Personal protective equipment (PPE) includes a facemask (e.g., surgical mask), eye protection (e.g., goggles or face shield), disposable gloves, and a gown.</p>   | <p>who is in quarantine should wear a fit-tested N95 respirator in addition to eye protection, gloves, and a gown.</p>  |
| Admissions/ Readmissions | <p>Persons newly admitted to a congregate setting who do not have COVID-19 should be placed in a separate area for 14 days (intake quarantine) before interacting with others in the facility, 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* or have had COVID-19 within the past 3 months as long as they 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, 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     | <p>Test anyone who develops symptoms of COVID-19 or has had close contact with someone suspected or confirmed to have COVID-19, even if they are fully vaccinated*. Intake screening testing and screening testing prior to discharge/release may also be considered.</p> <p>CDC provides detailed testing guidance for <a href="#">correctional and detention facilities</a></p> | <p>Testing is not necessary after close contact exposure for a person who has had COVID-19 within the past 3 months, but should still be considered if the person has a weakened immune system, has been exposed to a variant of the virus, or the diagnosis is thought to be based on a false positive test result.</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</p>  |

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|  |  | <p>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 <a href="#">local health department</a>.</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, follow <a href="#">testing recommendations</a>, and quarantine if not fully vaccinated*.</p> <p>Roommates are considered exposed and should not share a room with someone else for 14 days.</p> <p>Follow cleaning and disinfection guidelines listed above.</p> | <p>A person confirmed to have COVID-19 should stay away from others until meeting <a href="#">criteria for discontinuing isolation</a>.</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 <a href="#">local health department</a> about testing, halting activities, and other restrictions that are needed.</p> |
| <p>If someone has close contact with someone suspected or confirmed to have COVID-19</p> | <p>Close contacts should be on alert for symptoms of the disease, and take their temperature at least once a day, for 14 days and always</p>   | <p>Options for ending quarantine early should not be applied for residents and participants in congregate settings.</p>  |

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|  | <p>follow recommended COVID-19 prevention measures.</p> <p>A 14-day quarantine is the safest policy but is not necessary for residents/participants or staff of congregate settings after close contact, <b>if they have been fully vaccinated* and do not have any symptoms of COVID-19.</b></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>Someone who has had COVID-19 in the last 3 months and does not have any symptoms of the disease does not need to quarantine after having close contact.</p> <p>Even in these exception categories, quarantine should be considered if the exposed person has a condition that weakens the immune system, was exposed to a variant of the virus that causes COVID-19, or the earlier diagnosis of COVID-19 is thought to have been based on a false positive test result.</p> |
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\*People are considered fully vaccinated for COVID-19 2 weeks after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna), or 2 weeks after they have received a single-dose vaccine (Johnson and Johnson (J&J)/Janssen). Individuals with a weakened immune system should consult with a healthcare provider about ways to protect themselves from COVID-19, even if they are fully vaccinated.

Resources for Additional Detail:

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

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

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

CDC Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html>

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

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