



## **ICAP Guidance to Facilities on Contact Tracing, Testing and Quarantine upon Identification of a Case of COVID-19**

Upon notification of a positive COVID-19 case at a long-term care facility by the local health department or a facility itself ICAP team contacts the facility and provides detailed guidance on infection control measures specific to that facility need. Facilities also have access to guidance that describes [actions needed to be taken](#) right away upon identification of a case so they can start implementing some basic COVID-19 containment measures while awaiting a call from ICAP Team.

During the initial call with the facility, the ICAP team also guides facilities in performing contact tracing, testing and isolation/quarantine. While every situation may be a little different and may require some modification in approach there are some basic rules that are followed and are described below:

### **Establishing period of infectivity:**

- For symptomatic healthcare worker or resident, the period of infectivity is defined as 48 hours before symptoms onset to the time when they meet criteria for discontinuation of isolation as described by the CDC.
- For asymptomatic healthcare worker or resident, the period of infectivity is defined as 48 hours before testing to the time when they meet criteria for discontinuation of isolation as described by the CDC.

### **Establishing dates and shifts of concern (potential exposure) within the facility:**

- A facility may have potential exposures when a healthcare worker worked or a resident stayed at the facility during the period of infectivity.
- Dates and shifts of those potential exposures are then determined by the facility based on the work history of the staff member and the admission/discharge dates of the resident, as appropriate

### **Identifying potentially exposed Units/Neighborhoods in the facility:**

- Once the dates and shifts of concerns (potential exposure) are identified, the facility trace where in the facility healthcare worker diagnosed with COVID-19 worked or which units the resident diagnosed with COVID-19 stayed during those dates/shifts.
- They also looked into whether the healthcare workers have contacts with colleagues outside their unit of assignments within the facility or the resident moved around and came into contacts with residents from other units.



- In general, the units where the positive healthcare worker worked during the dates of concern or those units where the positive residents have stayed are considered potentially exposed.
- Additional units may be considered exposed depending on the nature of contacts of the positive healthcare worker or residents with staff and residents of those units.

#### **Deciding who needs to be tested and quarantined:**

- Based on the CDC guidance, ICAP usually recommends to test [all the staff](#) in the exposed units who worked on the shifts of concern and similarly [all residents](#) who stayed in the exposed units during the dates of potential exposure.
  - At a minimum, all healthcare workers who worked alongside with the positive staff and all residents who received direct care from the positive staff member during the shift of concerns are advised to be tested.
  - Similarly when a resident is positive, at a minimum, ICAP recommends to test all residents that stayed on the units during the dates of concern and all staff member who provided care to the positive resident during those dates.
- In general, all residents in the exposed units (or at a minimum, all residents who are being tested) are recommended to be in quarantine ([yellow zone](#)).
- Facilities are also advised to drill down further on the healthcare worker exposures to identify if it was a significant exposure as [described by the CDC](#) (prolonged, close contact with a patient, visitor or staff who now has confirmed COVID-19)
- All healthcare workers with significant exposure are advised to be excluded from work for 14 days after last exposure, unless staffing shortages make it impossible for them to be excluded.

#### **Re-testing previously negative staff and resident:**

ICAP team recommends the facility to identify those residents who received direct care from a positive staff and those staff members who worked in the same shifts alongside their colleagues during the dates of concern. Based on the [CDC guidance](#) to prevent further transmission of COVID-19 in the facility and facilitate effective cohorting and isolation, ICAP team usually recommends to retest all of these individuals after 7 days and before lifting quarantine.

If additional staff member are identified with COVID-19 who have provided care to the residents during their period of infectivity, then the quarantine duration is extended for the residents accordingly based on the new “last potential exposure date”.

Weekly testing is usually repeated until no new cases are detected for 14 days from the last positive case as [recommended by the CDC](#) (or at least until it is established that no new potential exposure has occurred in the last 14 days)