

COVID-19 Isolation Precaution Decision Tree

Individual is identified who has confirmed or suspected COVID-19 infection (e.g., meets criteria in the [Identification Process Flow](#)) However, vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required [quarantine](#) if they meet all of the following criteria:

- Are fully vaccinated (i.e., \geq two weeks following receipt of the second dose in a two-dose series, or \geq two weeks following receipt of one dose of a single-dose vaccine)
- Are within three months following receipt of the last dose in the series
- Have remained asymptomatic since the current COVID-19 exposure
- Reside in a home with all fully vaccinated clients in Community Living

Persons who do not meet all three of the above criteria should continue to follow current quarantine guidance after exposure to

1. Notify Regional Director, Clinical Practice
2. Place [client on isolation](#)
Individual is not to go to work/school or community events

Isolation quick start guide: (refer to [Isolation Procedure](#) for details)

- Notify Leadership immediately
- Director of Clinical Practice will provide support and assistance (including PPE order, isolation set up and education of team members)
- Individuals should in a single-person room with the door closed
- Separated from others by a minimum of 6 feet
- Individual should be assigned their own bathroom - NO ONE ELSE should use this bathroom (disinfect after each use)
- DO NOT share household items
- Encourage the individual served to wear a mask and frequently wash their hands
- Implement full visitor restriction by posting [this sign](#)
- Team members in direct contact should wear PPE (N95 mask, gloves, gown and eye protection)
- PPE is disposed of inside the individual's room
- Common surfaces should be cleaned twice daily

Does the individual served have symptoms requiring immediate hospitalization:

- Very difficult breathing (not helped by prescribed medication)
- Loud wheezing
- Increased confusion
- Fever/chills
- Mental changes
- Chest pain
- Blue Lips or tongue
- Clammy skin
- Decreased level of consciousness

[Pneumonia Protocol](#)

NO →

Does the person served require non-emergent medical attention:

- More difficulty breathing than usual, made worse by activity
- Increased coughing
- Increased restlessness, confusion or behaviors
- Irritability

YES

YES

NO

Call 911: notify dispatch that the individual has confirmed/suspected COVID-19

If transporting individual:

- Health care provider, MD/ER must be notified in advance that the individual has confirmed or suspected COVID-19 infection
- Persons transporting the individual should wear an N95 mask, gloves, gown and eye protection.

Is individual returning to the home following medical treatment?

YES →

Evaluate for ability to safely provide care/support services in ICF/Waiver Home:

1. **Contact Region Clinical/Quality Resource**
2. **Conduct IDT meeting to review modifications to person's plan**

Considerations:

- Is it possible to isolate the individual served?
- Is staffing sufficient to meet the needs of the individuals served?
- Are family involved and able to assist?
- What activities can team members utilize to engage the individual (board games, movies, puzzles, FaceTime with families, etc.)?
- Are documentation changes required? (use of paper)

NO

End: Follow up per usual procedure