

Isolation Procedure: Residential Client Tests Positive for COVID-19

This procedure has been developed to provide guidance for when an individual in one of our Residential homes tests positive for COVID-19.

Upon notification of the positive PCR (swab) test result.

1. The individual is placed in a private room with the door closed (if possible). A mask is placed on the individual.
2. Contact the Executive Director.
3. ED logs the case in the Company [COVID-19 Tracker](#) under Patient/Client Cases.
4. ED notifies the Department of Health.
 - a. [Local Health Departments Directory](#)
 - b. [State Health Departments Directory](#)
5. ED is responsible for immediately sending isolation PPE kits to the home, including N95 masks for use in providing care and services for the individual infected with COVID-19.
6. Contact the Regional Director of Clinical Practice for additional direction, training, and support in implementing isolation procedures.
7. Regional Director of Clinical Practice logs into the Company COVID-19 Tracker and views the case entered by the ED and makes a note in “Disposition – Director Clinical Practice Notes.”
8. ED notifies the primary physician (if not already aware) and secure needed orders.
9. ED notifies family/guardian (if not already aware).
 - a. Where appropriate, encourage the family to take the individual home.
10. Notify the family/guardians of other individuals living in the home.
11. Implement full visitor restriction to the home by posting [this sign](#).
12. Staff who enter the room must wear an N95 mask, gloves, gown and eye protection.
13. Begin [Isolation Precautions](#):
 - a. Note: NN95 masks are to be worn by all persons providing care and services
 - b. Individuals in the home are always separated from others by a minimum of 6 feet.
 - c. Individual with COVID-19 infection should be assigned their own bathroom. NO ONE ELSE should use this bathroom. Disinfect the bathroom after each use.
 - d. DO NOT share household items.
 - e. Encourage the individual with COVID-19 infection to remain in their room, wear a mask if coughing, and to wash their hands frequently.
 - f. Staff in close contact should wear PPE (N95 mask, gown, gloves, eye protection).
 - g. PPE is disposed of inside the individual’s room.
 - h. Common surfaces should be cleaned twice daily.
 - i. Refer to the process flow for symptom management process.
14. The individual is not to attend work, school or community events.
15. Other individuals in the home will be educated and reminded to practice social distancing.
16. Determine whether other individuals in the home have been in close contact with the infected person (if so, implement [quarantine procedures](#))

Additional Considerations:**Where compliance with isolation procedures is unlikely:**

Due to individual abilities, isolation procedures may not be well tolerated, creating a potential safety issue for staff or individuals living in the home. In these cases, contact your Regional Quality Director for direction:

- Hold an IDT meeting to discuss and resolve issues.
- Consider moving the individual to another home.
- Consider moving the other residents to another home.
- Contact the state/case manager to discuss alternative living situation for the individual.
- Consider using a nearby home with a vacancy to relocate the other individuals or the individual with the virus.
- Some questions to consider:
 - Are there sufficient staff to care for the person in isolation at this location?
 - Are there sufficient supplies available for an alternate location – PPE, food, water, etc.?
 - Can other homes increase capacity (with appropriate approvals) to assist in complying with isolation procedures?
 - Are there family resources that could help provide support? Can individuals temporarily relocate to be with their family?

See also: [Criteria for Discontinuing Client/Patient Isolation Protocol](#)