Navigating Resident Outings, Leave of Absence, Medical Appointments, and Everything in Between

Decisions on what to do when residents return to the facility is based on their exposure risk during their “outing”. According to the Centers for Disease Control and Prevention (CDC), “part of the challenge is being able to determine the level of risk for a particular exposure.” The reason for this is due in part to the individual risks that are associated with community prevalence of COVID-19 transmission rates and the infection prevention and control practices that are being performed during transport, care delivery, and during other interactions associated with the outings.

Here are some steps long term care facilities can take to educate, inform, and guide decisions about outings that can potentially reduce residents and staff’s risk of exposure.

- Educate the resident, family members, and resident representatives on the risk of contracting COVID-19 from the potential exposures that may happen during the leave.
- Educate, train, and seek demonstration from residents, family members, transfer chauffer’s, etc. on the infection prevention and control practices that should be implemented and maintained while the resident is out in the community. This may include, but is not limited to:
  - Physical distancing practices (at least a 6-foot distance between people)
  - Face coverings (worn at all times)
  - Hand hygiene (wash with soap & water or alcohol-based hand sanitizer rubs)
  - Cleaning and disinfecting frequently touched objects
  - Resist the urge to participate in group activities or social gatherings
- Communicate with the health care provider (e.g., doctor’s office, hospital, dialysis center, etc.) the resident is visiting to seek information on how they are working to keep residents/patients safe and to ensure infection prevention and control practices are being utilized. Inquire about:
  - How and when they are cleaning frequently touched objects?
  - How they are implementing physical distancing?
  - Are all staff, visitors, patients, etc., wearing face coverings at all times?
  - Are all persons who enter the premises required to do hand hygiene, physical distance, and wear face coverings?
  - What are their screening practices to early identify potential exposure risks?
  - Any other pertinent information that helps you ensure the resident, staff, and public's safety.
- Ask resident upon return about their outing to seek information on any potential exposure risks.
  - Ask the resident to wear a face covering at all times while out of their room and while others are in their room with them.
- Seek input from local/state health departments on community transmission and steps your facility can take to limit your exposure risk.
In communities where COVID-19 prevalence is medium or high, when residents return to the facility they should:

- Wear a mask when out of the room or during care delivery
- Maintain physical distancing with other residents for 14 days
- Be screened at least daily for COVID-19 symptoms
- Follow recommendations from state/local health department

Test the resident for COVID-19 if:

- Signs and symptoms are present;
- There was potential for exposure while outside of the center/community; or
- The resident left the facility for an extended period of time.

Place the resident on transmission-based precautions (e.g., keep them isolated to their room) if:

- The resident is symptomatic;
- Left the center/community for an extended period of time; or
- They may have been exposed while outside of the center/community

Recommendations for infection prevention and control precautions, such as those listed above, may continue to change and it is important to follow local, state, and federal guidance.