When Residents Want to Take an Outing into the Surrounding Community During COVID-19

The CDC, CMS and many states have recommended cancelling all group activities outside of the building. However, some residents may want to leave the building on their own or to go out with others into the community at-large, such as to family gatherings. These activities increase the risk of the residents contracting COVID-19 from the community at-large and introducing it into the facility. This guidance provides steps to take when residents or their families want to take the resident out into the community at-large for a brief outing.

We recommend the facility do the following:

1. Explain to the resident the risk of contracting COVID-19, including:
   a. A large number of cases are being spread from people who are infected but do not have symptoms.
   b. Several outbreaks have happened by people attending family gatherings and parties.
   c. The risk not only to their own health but to other residents (COVID-19 has a 15-20% mortality rate for the elderly).

2. Explain to them that while they may not be as concerned about their risk of contracting the virus, if they bring the virus back into the building, they could threaten the lives of other residents and staff by spreading the virus.
   a. Remaining in the facility is not just for their health but also for the health of all the other residents and staff.

3. Offer them alternative ways to connect with loved ones they wish to see in the community at-large, or to fulfill the reason they wish to leave the building:
   a. Help residents connect with their families and loved ones through video chat, phone, or other methods of communication.
   b. If they need essential items, see if staff or a loved one can acquire these items for them. If a loved one is bringing items to a resident, work with them to make sure items are safely exchanged at the main entrance to adhere to restrictions on visitors.
   c. If family is providing laundry services, assist the resident where you can help via our guidance on laundry.
   d. If they need to visit with a doctor or other medical professional, see if you can help arrange a telehealth visit instead or reschedule the appointment for a later time.
e. For other reasons that a resident may want to go out into the community, get creative on helping them find solutions to help them achieve their main purpose for wanting to leave.

4. If they still insist on leaving, explain that if they come back, they will be:
   a. Confined to their room for 14 days, which is the incubation period for this virus, and
   b. Asked to wear a mask for those 14 days.
   c. Note that this is not retaliation but is consistent with guidance on people exposed to COVID-19 and is a practice to protect the health of the other residents.

5. Explain, if they can’t comply with the follow-up plan of a 14-day isolation period and wearing a source control mask, they may be discharged to their family against medical advice (AMA) or to the hospital if their family can’t care for them, as they are a risk to the health of other residents and staff.

6. Contact the Ombudsman to provide notice that a resident plans to leave the building against medical advice and may be putting other residents and staff at risk.

7. Contact the local or state public health agency and notify them that a resident wants to leave the facility for an outing into the community which may expose them to COVID-19 and puts other residents and staff at risk.

For skilled nursing centers, current CMS regulations and waivers do NOT allow you to discharge a resident against medical advice if they choose to go out and return. However, if they refuse to comply with recommendations to limit exposure to other residents or staff once they return, you may discharge them for putting other residents and staff at risk. You need to make sure they have an appropriate follow up, which may require discharge to the hospital if home care is not possible. For assisted living communities, please consult your specific state regulations regarding resident discharge.