

Steve Sisolak
Governor
Richard Whitley, MS
Director



DEPARTMENT OF
HEALTH AND HUMAN SERVICES
Division of Public and Behavioral Health
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator
Ihsan Azzam, Ph.D., M.D.
Chief Medical Officer

RESIDENT RISK ASSESSMENT FOR RESIDENTS LEAVING & RETURNING TO A PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY (PRTF) APRIL 8, 2021

Introduction

Visitation in residential facilities can be conducted through different means based on a facility's structure and residents' needs, such as in resident rooms, dedicated visitation spaces, outdoors, and for circumstances beyond compassionate care situations. The Centers for Disease Control and Prevention (CDC) continues to emphasize the importance of maintaining infection prevention practices, given the continued risk of COVID-19 transmission.

Risk Assessment and Infection Control Recommendations for Returning Residents

This risk assessment template should be used as a framework to guide COVID-19 infection prevention policy and practices for resident outings into the community.

This guidance can be used for non-medical community activities (e.g., shopping) and for medical visits (e.g., dentist, outpatient clinic visit, outpatient dialysis, etc.). For each visit utilize the risk assessment tool on page two to determine if the visit was low, medium, or high risk, so you may implement the appropriate interventions, based on the risk score, to keep residents safe.

Fully vaccinated residents are equal to or greater than 2 weeks following receipt of the second dose in a 2-dose series, or equal to or greater than 4 weeks following receipt of one dose of a single-dose vaccine.

During visits in the community, residents (whether vaccinated or unvaccinated) should adhere to the core principles of COVID-19 infection prevention, including effective hand hygiene, and use of face-coverings as source control. Facilities should:

- Screen and increase monitoring for signs and symptoms of COVID-19.
- Test a resident for COVID-19 if signs or symptoms are present or if a resident or their family reports possible exposure to COVID-19 while outside the facility. A facility may also opt to test residents without signs or symptoms if they leave the facility frequently or for a prolonged length of time, such as over 24 hours. For more information on testing guidelines see CMS memorandum QSO-20-38-NH (<https://www.cms.gov/files/document/qso-20-38-nh.pdf>).
- Place the resident on transmission-based precautions (TBP) if the resident or family member reports possible exposure to COVID-19 while outside of the facility, or if the resident has signs or symptoms of COVID-19 upon return. Please note that residents and loved ones should report to facility staff if they have had any exposure to COVID-19 while outside of the facility.



In addition to the above interventions, on a resident's return to the facility from a leave of absence, facilities should use the following risk assessment template to guide COVID-19 infection prevention policy and practices.

Risk Assessment Template for All Residents, Regardless of Vaccination Status:

Prolonged contact with a person who has COVID-19 Yes No

If "yes", consider high risk.

If "no", and family that the child is visiting are fully vaccinated and no other children are present, assess as low risk and the risk assessment is complete.

If unvaccinated or not fully vaccinated, proceed to the risk assessment below - Risk Assessment Template for Unvaccinated or Not Fully Vaccinated Residents

Unvaccinated or Not Fully Vaccinated Residents:

Assign 1 point to each "Yes"	Yes or No?	Points
Prior to visit, family participated in activity w/ greater than 5 people	Yes No	
Took resident out of home to high risk area (ex: crowded areas, shopping mall, another home, etc.)	Yes No	
Gathering at home with greater than 5 people at activity	Yes No	
Duration of activity more than 1 hour with members of the outside community	Yes No	
Those in contact with resident not in the nuclear family unmasked for any portion of the visit	Yes No	
Contact with someone who is having COVID-19 like symptoms/ Confirmed COVID-19.	Yes No	
	Total Points:	

Based on the results of the above risk assessment, facilities should implement the following actions based on the level of risk determined:

Score	Risk Level	Example Activities	Recommended Actions for Facility
0 - 1	Low	<ul style="list-style-type: none"> Walk in an uncrowded park Doctor's appointment where universal masking is required 	Educate on infection prevention, hand hygiene, and respiratory/cough etiquette. Actively screen residents daily for symptoms, before leaving and after returning.
2 - 3	Medium	<ul style="list-style-type: none"> Retail shopping with social distance maintained 	Implement all Low-risk actions AND refrain from group activities for 14 days since most recent outing.

Steve Sisolak
Governor

Richard Whitley, MS
Director



**DEPARTMENT OF
HEALTH AND HUMAN SERVICES**
Division of Public and Behavioral Health
Helping people. It's who we are and what we do.



Lisa Sherych
Administrator

Ihsan Azzam, Ph.D., M.D.
Chief Medical Officer

4 - 6	High	<ul style="list-style-type: none">• Eating in a crowded restaurant• Social public gatherings• Home visits with extended family present• Casino visits	Implement all Low and Medium risk actions AND place in quarantine for 14 days since most recent outing.
-------	------	--	---

Note: Please have your visitation plan available at your facility for review by surveyors during an inspection. You are **not** required to submit your plan to the Bureau of Health Care Quality and Compliance (HCQC) for prior approval.

References:

- [CDC: Preparing for COVID-19 in Nursing Homes](#)
- [CDC: Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)
- [CDC: Considerations for Preventing Spread of COVID-19 in Assisted Living Facilities](#)