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Date: March 20, 2020

To: All Adult Residential Care, 1-2 bed Adult Family Home Providers, & Supportive Home Care Services

From: Betsy Genz, Director
Bureau of Adult Programs and Policy

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Kiva Graves, Director
Bureau of Adult Quality and Oversight

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Subject: Adult Family Home Guidelines

The Department of Health Services (DHS) provides the following important recommendations to adult residential care, 1-2 bed adult family home providers, and supportive home care services during the COVID-19 pandemic. Older and medically vulnerable adults have significantly increased risk of severe illness and death from COVID-19 infection, necessitating that we take all reasonable efforts to prevent introduction of this infectious disease into 1-2 bed adult family homes and supportive home care settings. DHS has detected cases of COVID-19 infection in numerous Wisconsin communities, and the state has implemented significant social distancing measures to protect against widespread community transmission.

To protect the most vulnerable Wisconsin residents from serious harm, DHS has recommended the following actions in accordance with Wis. Stat. Ch. 252, Wis. Admin. Code Ch. DHS 145, Ch. 50 and Centers for Medicare & Medicaid Services (CMS) guidance. These actions are appropriate for implementation in adult residential care, including 1-2 bed adult family homes and supportive home care settings:

- Appropriate limitation or restriction of visitation by non-essential personnel
- Screening all visitors for symptoms of COVID-19 infection, or exposure to someone with a confirmed COVID-19 infection
- Restricting staff/caregivers from work or providing care if they have fever or signs of respiratory infection
- Canceling social gatherings and community events

Additionally, adult family home, 1-2 bed providers, and supportive home care services should discourage nonessential outings into the community with residents. Providers and services should strongly encourage residents to comply with social distancing guidelines.

For the purpose of this guidance:

- **Limiting access** means individuals should not be allowed to come into the home, except under certain circumstances, such as end-of-life situations or when a visitor is essential for a resident's emotional well-being and care.
- **Restricting access** means individuals should not be allowed to come into the home.

Supportive home care services and 1-2 bed adult family home providers should conduct self-screening prior to entering the home. Individuals should restrict their own access in the event they have:

- Symptoms of COVID-19 infection, such as fever, dry cough, and shortness of breath. In some cases, symptoms can be mild and may include runny nose, congestion, and sore throat. Temperature measurements are not required to meet the criteria for fever.
- Contact with an individual who has a laboratory-confirmed case of COVID-19 infection

If caregivers in an owner-occupied home develop signs and symptoms of a respiratory infection, they should stay away from others as much as possible, in a separate room away from the rest of the residents of the home, and contact their health care provider. They should also use a separate bathroom, if possible. More information can be found at:

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>.

Respiratory illnesses such as COVID-19 can spread quickly within and between homes without strict infection control and prevention measures. DHS recommends providers take the following measures to reduce the risk of transmission between homes:

- Review and adhere to CDC's best practices, including monitoring residents for signs of illness, and supporting/promoting hand and respiratory hygiene.
- Providers should wash or use a hand sanitizer containing at least 60% ethanol or 70% isopropanol upon entry into the home.
- Communicate with workers, residents, and visitors on basic infection prevention measures, such as cleaning of hands (alcohol-based hand rub or soap and water for 20 seconds), cough etiquette, and disinfection of surfaces.
- Discourage all individuals, including workers, residents, and visitors from shaking hands, hugging, or other personal contact.

Communications with residents and families should be proactive and clearly explain the reasons for any changes to normal practices.