

Understanding Quarantines in Pennsylvania Senior Living Facilities

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The continuing spread of the novel COVID-19, otherwise known as coronavirus, poses a unique threat to residents in continuing care and nursing facilities. The reason for this heightened threat is that the elderly and immune-compromised individuals appear to be at increased risk of developing complications associated with COVID-19 that may lead to death. In addition, continuing care and nursing facilities, by their nature, are communal, with residents tending to be in constant contact with other residents, facility staff and visitors.

At the federal level, the Centers for Medicare & Medicaid Services at the Department of Health and Human Services has issued guidance updated as of March 13. In the memorandum, CMS advises that all nursing homes in the nation should follow precautions such as:

- Restricting visitation of all visitors and nonessential health care personnel
- Limiting contact of necessary compassionate care personnel to specific rooms only, and require use of heightened hygiene practices and personal protective equipment, including face masks
- Removing care workers exhibiting signs of respiratory illnesses
- Canceling group activities, including dining
- Periodically screening residents, and screening staff at the beginning and end of shift for fever or respiratory symptoms
- Encouraging social distancing and heightened hygiene, including handwashing, for residents, staff and any allowed visitors

So, what is a facility to do when a confirmed case of COVID-19 shows up on its campus, despite all the recommended precautions? What if a resident, staff member or visitor was exposed to COVID-19 via contact with an infected person? Or what if a resident, staff member or visitor returns from an area with a high infection risk? And if some stringent quarantine or isolation measure becomes necessary, what happens if residents or their families object?

Facilities may be reluctant to restrict movement of residents, staff and visitors (and rightfully so). Residents in facilities subject to federal long-term care regulations generally have the legal right to be free of physical restraints or isolation.

Pennsylvania has specific regulations relating to control measures that may be implemented by the state's Department of Health (DOH) and local health departments. Representatives of the DOH have commented that, if necessary, the department will rely on its regulations to mandate control measures. If your facility experiences an event that may require more than voluntary self-quarantine, it is important to understand that governmental health authorities can assist by implementing any of the following measures:

Isolation: The separation for the communicable period of an infected person from other people to prevent the direct or indirect transmission of the infectious agent from infected people to other people who are susceptible or who may spread the disease to others.

Quarantine: The limitation of freedom of movement of a person that has been exposed to a communicable disease, for a period of time equal to the longest usual incubation period of the disease, or until judged noninfectious by a physician to prevent the direct or indirect transmission of the infectious agent from the infected person to other people.

Modified Quarantine: A selected, partial limitation of freedom of movement determined on the basis of differences in susceptibility or danger of disease transmission which is designated to meet particular situations. The term includes the prohibition or restriction of those exposed to a communicable disease from engaging in particular activities.

Segregation: The separation for special control or observation of one or more persons from other persons to facilitate the control of a communicable disease.

The DOH also could use placarding at facilities by posting signs or notices of warning of the presence of a communicable disease within the structure and danger of the infection.

The state and local health departments are able to determine the appropriate control measures, and a facility experiencing a need should contact them immediately. If there is a control measure, health agencies have the authority to enforce it. Only health authorities can authorize transfer of a person subject to a control measure.

Current Centers for Disease Control guidance related to COVID-19 in nursing homes and continuing care facilities supports the use of visitor limitation, resident and employee monitoring and self-quarantine. To our knowledge, Pennsylvania has not yet seen any instances where mandated control measures are necessary. However, Gov. Tom Wolf has instituted a "no visitor" policy that applies to nursing homes in Montgomery County, which may be expanded if the situation deteriorates. In the interim, we suggest encouraging residents who may have been exposed or that are not feeling well to self-quarantine for at least 14 days, restricting visitors, screening visitors and staff that must enter, encouraging frequent handwashing and educating staff and contractors about proper control and sanitation measures. Establishing communication with family members will be vital to maintaining cooperation. Many facilities are turning to virtual communication for keeping families updated on care of their loved ones.

If you need assistance in navigating available control measures in nursing homes and senior living facilities, contact [Christopher Churchill](#), [Timothy Dietrich](#) or anyone in the [Barley Snyder Senior Living Industry Group](#) or the [COVID-19 Response Service Team](#) for assistance.

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