



Frequently Asked Questions (FAQs) on Managing New Admissions and Readmissions for Maryland Nursing Homes

The following document is intended to assist nursing homes and local health departments with the interpretation of the requirements for managing new admissions and readmissions for Maryland Nursing Homes during the COVID-19 pandemic. Depending on the level of care and services provided in an assisted living facility, this document could also assist assisted living facilities with the management of newly admitted and readmitted residents. This document contains frequently asked questions meant to clarify guidance and requirements from the April 29th [Amended Secretary's Order and Directive on Nursing Home Matters](#) and the [CDC's Considerations for New Admissions or Readmissions to Nursing Homes](#).

1. When must a resident be admitted to observation?

All new admissions and readmissions returning after an overnight stay away from the facility must be admitted on observation for 14 days using contact and droplet precautions while monitoring the resident for signs and symptoms of COVID-19. For the purposes of this guidance, we define "overnight" as 24 hours or longer.

2. Where can a newly admitted or readmitted resident be placed in the facility?

The resident should be placed in a single-person room (without a roommate), ideally in a separate observation area (i.e. a separate unit, floor, or wing of the facility) where all residents will be monitored and isolated on contact and droplet precautions for 14 days. If a separate observation area is not available, a resident may be isolated to a single-person room anywhere within the facility, using contact and droplet precautions.

3. If a facility does not have a single-person room available, can they place a resident in a room with another resident?

As a last resort, if a facility does not have an open single-person room available for admission or readmission, then they may admit a resident to a multi-person room with another resident on observation. Facilities are encouraged to keep a single-person room available at all times for admissions, especially when expecting residents to return to the facility for readmission.

4. Can we remove the resident from observation after a negative test for COVID-19?

No. Admissions to observation are not impacted by any number of negative tests prior to or during admission.

5. Does a resident with laboratory-confirmed COVID-19 have to be admitted to observation?

No. Newly admitted or readmitted residents with laboratory-confirmed COVID-19 who have not met the criteria to discontinue transmission based precautions must be admitted to the COVID-19 unit.

6. If a resident has recently recovered from COVID-19, do they have to be admitted to observation?

Newly admitted or readmitted residents with laboratory-confirmed COVID-19 who have met the criteria to discontinue transmission-based precautions within the last 8 weeks prior to admission may be placed in a regular unit. If the admission occurs >8 weeks after the discontinuation of transmission-based precautions for COVID-19, then the resident should be admitted to observation.

7. If a resident is returning from a same day appointment, are they required to be admitted to observation upon their return?

Residents returning to the facility after a same day leave of absence are not required to be admitted to observation upon their return but should be screened upon re-entry for signs and symptoms of COVID-19, including temperature checks. Residents who screen positive upon re-entry must be placed on observation and tested for COVID-19. When possible, facilities are encouraged to send someone with residents to medical appointments to ensure compliance with prevention and control of COVID-19.