

Adult Foster Home Provider Alert

Policy updates, rule clarifications and announcements

Date: April 12th, 2022
To: APD Adult Foster Home Providers
From: Safety, Oversight and Quality Unit
Topic: **Updated Screening Sheet**

The Governor's State of Emergency has been lifted which brings us into the next phase of responding to COVID-19 infections in long-term care settings. Older Oregonians remain vulnerable, and we will continue to be committed to resident safety and wellness as we address positive cases in adult foster homes (AFH).

Attached you will find an updated screening sheet. This sheet, or one with similar questions, is to be used to screen all visitors coming in to your AFH. Please note, screening sheets need to be retained for 90 days and can then be destroyed.

Also, the [provider alert](#) issued March 31, 2022, gave details as to the provider response should there be a positive COVID-19 case in your AFH. Those measures are only to be implemented when COVID-19 is present in your AFH and then be relaxed as the risk has passed. If you have any questions about these requirements, please email the AFH Policy Team at: APD.AFHteam@dhsoha.state.or.us.

Positive cases are to be reported to SOQ.LTCinfo@dhsoha.state.or.us

As always, thank you for the work you do every day to keep Oregonians safe.

Facility name: _____ Date/Time: _____

Screener name: _____

Visitor name and phone #: _____

- 1. Regardless of vaccination status, have you had any of the symptoms listed below in the last 48 hours? If yes, entry is not approved. If no, please proceed to the next question.**

Fever or chills	New loss of taste or smell
Cough	Sore throat
Shortness of breath	Congestion or runny nose
Fatigue	Nausea or vomiting
Muscle or body aches	Diarrhea
Difficulty breathing	Headache

- 2. Regardless of vaccination status, have you had a positive viral test for COVID-19 in the last 10 days? If yes, entry is not approved. If no, please proceed to the next question.**

- 3. Have you been in close contact* in the last 10 days with anyone who has tested positive for COVID-19? If yes, your entry is not approved. If no, please proceed to the next question.**

*Close physical contact is defined as being within 6 feet of an infected/ symptomatic person for a total of 15 minutes over a 24-hour period starting from 48 hours before their symptom onset.

I certify that my responses are true and correct

You are also acknowledging these important conditions for access to this facility:

- Wear a mask
- Perform hand hygiene before and after contact with a resident
- Contact our team if you develop symptoms or test positive for COVID-19 within 48 hours of visiting the facility SOQ.LTCinfo@dhsosha.state.or.us