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To: All Health Care
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Subject: **Universal Testing in Congregate Living Settings**
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UNIVERSAL TESTING IN CONGREGATE LIVING SETTINGS

Maine CDC has adopted the following recommendations regarding universal testing in congregate living settings. This policy may be updated as scientific understanding of COVID-19 evolves.

I. BACKGROUND

- This guidance applies **where a single, confirmed case of COVID-19 (using a SARS-CoV-2 PCR test) is detected among staff or residents of a congregate living setting**. Such settings include, though are not limited to, long-term care facilities, shelters for people experiencing homelessness, correctional facilities, group homes, and assisted living facilities.
- Universal testing in this context refers to testing done by unit or building, not at a facility level, unless staff are shared or rotate among various units or buildings.
- This policy is a recommendation; facilities may opt to pursue universal testing before a single case is confirmed.
- For mass testing at this time, Maine CDC's Health and Environmental Testing Laboratory (HETL) will only test samples collected pursuant to this policy (*i.e.*, when there has been at least one confirmed COVID-19 case).

II. UNIVERSAL TESTING RECOMMENDATIONS

- When a congregate living setting as described above has a single case of confirmed COVID-19 among staff or residents, Maine CDC recommends universal testing for all other staff and residents in the unit or building, except as noted above.
- Facilities should conduct the sample collection using their own staff or outside staff, and must coordinate with a health care provider to order the tests and obtain all necessary and appropriate consent.
- HETL will test specimens collected by a facility pursuant to this policy. If a facility opts to send specimens to HETL for testing pursuant to this policy, the facility must:

- Arrange for appropriate transport of the specimens to HETL; and
- Notify Maine CDC epidemiology staff that samples are being sent to HETL prior to transport.
- Facilities should email Coronavirus@maine.gov or call the case investigator and include the number of specimens being sent and the approximate arrival time.
- Facilities must first establish an account with HETL prior to sending any specimens.
- Maine CDC may be able to furnish PPE and/or swabs and viral transport media, as Maine CDC supplies allow.
- Tests done using supplies furnished by Maine CDC must be sent to HETL for testing.
- Facilities may choose to use other laboratories to accomplish universal testing. Those laboratories may have preferred swabs and test kits, so please check with that laboratory before initiating sample collection.

III. RE-TESTING RECOMMENDATIONS

- For facilities in which universal testing has been recommended:
 1. Maine CDC recommends re-testing of COVID-negative staff in facilities 7 days after the initial specimen collection.
 2. If re-testing yields further COVID-positive staff, Maine CDC recommends re-testing of COVID-negative staff every 7 days until there are 2 successive weeks of only negative tests, or when all staff have tested positive. Additional re-testing beyond these guidelines will not be performed at HETL.
- Maine CDC may recommend re-testing residents in the following circumstances:
 1. There is a newly identified positive staff who worked in a unit where there are no COVID-positive residents.
 2. There is a newly identified, symptomatic, COVID-positive resident in a unit where there are no other known COVID-positive residents.
 3. There are a significant number of new COVID-positive staff.

IV. CONSIDERATIONS FOR FACILITIES

- Staff who are COVID-positive will not be allowed to work for a minimum of 10 days.
 - Thus, facilities must ensure that they have a staffing plan in place prior to pursuing universal testing in accordance with this policy.
 - Certain facilities, such as long-term care facilities, are required to have such plans in place.
- Facilities will need to furnish a medical order for testing. This will not be supplied by Maine CDC.
- Facilities must ensure that testing is on an opt-in basis and that residents and staff may decline.
- Resident who decline testing should be considered close contacts and placed into quarantine for 14 days.
- Staff who decline testing should be referred to internal HR policies.
- Testing may be traumatic for certain patients. Mid-turbinate swabs are an acceptable alternative to nasopharyngeal (NP) swabs, especially for clients for whom sedation is required or who are medically frail.