

3/10/2020

** NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.*

Long Term Care Facilities and COVID-19

COVID-19 Update #8

Background

Gov. Jay Inslee announced new rules https://www.governor.wa.gov/sites/default/files/proclamations/20-06%20Coronavirus%20%28tmp%29.pdf?utm_medium=email&utm_source=govdelivery today around nursing homes and assisted living facilities that focus on better protecting older adults – a population more likely to be hit by COVID-19 (coronavirus) – during the ongoing statewide, health crisis.

Rule changes center around visitors, screening, and precautionary measures.

“The risk of severe illness and death from COVID-19 appears to be higher in people 60 years or older and in those with chronic health conditions,” Inslee said. “And we know there is an increased risk among people while live in congregated settings, such as long-term care facilities. We need to protect our older adults, and these rules will help.”

Rules that go into effect today:

- Visitors must be adults and the visit must take place in the resident’s room. This does not apply to end-of-life situations.
- All visitors must follow COVID-19 screening and follow reasonable precautionary measures. Precautionary measures include, but are not limited to, wearing personal protective equipment, social distancing, or visiting in designated locations.
- All visitors must sign into a visitor’s log. Owners and operators must retain that log for 30 days.
- Employees or volunteers must be screened for COVID-19 symptoms at the start of each shift.
- People who live in nursing homes or assisted living facilities and who test positive for COVID-19 must be isolated away from other people.
- Owners, operators, staff and volunteers are prohibited from disclosing protected and confidential health information, except as otherwise provided by law or with the resident’s consent.

These rules remain in effect until midnight on April 9, 2020.

We want to make you aware of correspondence sent to long term care facilities from John Wiesman, DrPH, MPH Washington State Secretary of Health and Kathy Lofy, MD Washington State Health Officer regarding COVID-19. The information follows:

Long-term care facilities are at high risk for severe COVID-19 outbreaks due to their congregate nature and vulnerable population (e.g., older adults with multiple co-morbidities). Ill healthcare personnel (HCP) or visitors are the most likely sources of introduction of COVID-19 into the facility. **To protect this fragile population, the Department of Health is urging ALL long-term care facilities to immediately take the following aggressive actions to reduce the risk of COVID-19 infection in your residents and staff.** If you have a resident with known or suspected COVID-19 infection, your local health jurisdiction may recommend you take more aggressive actions than those listed below.



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Immediate Actions for Long-term Care Facilities to Take:

Visitor Restrictions:

- Discourage visitation at your facility and offer alternative methods of visitation (Skype, Face Time, etc.), if available.
- Limit each resident to no more than 1 visitor per day. No visitors should be allowed in units with an outbreak.
- Actively assess all visitors for a fever and respiratory symptoms. Do not allow ill visitors to visit.
- Maintain a record (e.g., a log with contact information, date, travel and illness screening and temperature) of all visitors (including vendors, inspectors, etc.)
- Ensure visitors limit their movement within the facility (e.g., avoid the cafeteria and other public gathering areas).

Healthcare Personnel Monitoring and Restrictions:

- Restrict non-essential personnel including volunteers and non-essential consultant personnel (e.g., barbers, delivery person) from entering the building
- Screen all staff at the beginning of their shift for fever and respiratory symptoms.
- Actively take their temperature and document absence of shortness of breath, new or change in cough, and sore throat. If they are ill, immediately have them put on a facemask and self-isolate at home.
- Prioritize ill healthcare providers for COVID-19 testing.
- Keep a record of other facilities where your staff are working. (Note that staff who work in multiple healthcare facilities may pose a higher risk.)
- Consider having staff who provide direct patient care to wear all recommended PPE (gown, gloves, eye protection, facemask) for the care of all residents, regardless of presence of symptoms.
- If resources allow, consider universal facemask use for healthcare personnel while in the facility.

Resident Monitoring and Restrictions:

- Actively monitor all residents (at least daily) for possible signs of respiratory infection:
- Screen for fever and respiratory symptoms (shortness of breath, new or change in cough, and sore throat) and perform pulse oximetry for changes in oxygen saturation at least daily. (Note that long term care residents with confirmed COVID-19 infection may be less likely to show signs of fever and respiratory signs and symptoms may be subtle.)
- If positive for fever or respiratory signs/symptoms, isolate the resident in their room and implement recommended infection control precautions.
- Put plans in place to limit movement and ensure social distancing (i.e., staying 6 feet away from others) of your well resident.
- Cancel group activities or plan activities where people can stay 6 feet away from each other.
- Cancel communal dining or have residents eat in the dining room in smaller groups so that they can stay 6 feet away from each other.
- Limit the movement of residents around the facility.
- Make sure residents perform hand hygiene and wear a facemask (contingent on supply) if they leave their room.
- Have a low threshold to transfer ill residents to a higher level of care.
- Do not accept a resident with confirmed COVID-19 back to the long-term care facility until all appropriate infection control precautions can be ensured.



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General Infection Control:

- Train staff on how to wear PPE safely.
- Use of Standard, Contact, and Droplet Precautions with eye protection for any undiagnosed respiratory infection for which airborne precautions is not otherwise recommended (e.g., tuberculosis).
- Increase hand hygiene especially during care of residents and in between residents.
- Prior to entering and exiting the unit and a resident's room, healthcare personnel must perform hand hygiene by washing hands with soap and water or applying alcohol-based hand sanitizer.
- Increase environmental cleaning. Disinfect all frequently touched surfaces such as doorknobs, elevator buttons, bathrooms, remote controls, and wheelchairs. Limit sharing of personal items between residents.

Managing PPE Shortages:

When PPE supplies are limited, rapidly transition to extended use of eye and face protection (i.e., respirators or facemasks).

Reporting to the Health Department:

Immediately notify the health department about anyone with COVID-19 or if you identify 2 or more residents or healthcare providers who develop respiratory infections within a week.

Resources:

DOH Long Term Care -

<https://www.doh.wa.gov/Emergencies/NovelCoronavirusOutbreak2020/LongTermCareFacilities>

DOH COVID-19 - <https://www.doh.wa.gov/Emergencies/Coronavirus>

Centers for Disease Control - <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Thurston County Public Health and Social Services -

<https://www.thurstoncountywa.gov/phss/Pages/coronavirus.aspx>

THANK YOU FOR REPORTING

TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting non-immediately reportable conditions (24 hours a day)	Phone: 360-786-5470 Fax: 360-867-2601
Day time immediately reportable conditions – Call detailed information to the 24-hour Notifiable Condition Reporting Line at 360-786-5470. Messages are picked up hourly. If a call back can't wait call 360-867-2500 and ask staff to locate a Communicable Disease staff.	Phone: 360-786-5470
After hours immediately and 24-hour reportable conditions or a public health emergency	Call 1-800-986-9050
No one is available with Thurston County Public Health and condition is immediately notifiable	1-877-539-4344

Communicable Disease Updates are posted online at: <http://bit.ly/CDUpdatePHSS>