



Key Messaging to Long-term Care Facilities (LTCF) for COVID-19

Date: March 3, 2020

Public Health Message Type: Alert Advisory Update Information

Intended Audience: All public health partners Healthcare providers Infection preventionists
 Local health departments Schools/child care centers ACOs
 Animal health professionals Other:

Key Points or Updates:

- Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel (new) coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.
- The risk to the general public in the U.S. remains low. However, healthcare workers caring for residents/patients with COVID-19 are at elevated risk of exposure. The current risk assessment is available at CDC Situation Summary (<https://www.cdc.gov/coronavirus/2019-nCoV/summary.html>).
- CDC has issued documents including, [Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 \(COVID-19\) or Persons Under Investigation for COVID-19 in Healthcare Settings](#) and [Healthcare Providers Preparedness Checklist](#) in an effort to prevent the spread of infection during healthcare delivery.
- Guidance is based on the currently limited information available about COVID-19 related to disease severity, transmission efficiency, and shedding duration. This cautious approach will be refined and updated as more information becomes available and as response needs change in the United States.
- **The general strategies CDC recommends to prevent the spread of COVID-19 in LTCF are the same strategies these facilities use every day to detect and prevent the spread of other respiratory viruses like influenza.**
- Healthcare Facility Preparedness
 - The true impact of a COVID-19 outbreak in a U.S. community cannot be predicted. However, all healthcare facilities can take steps now to prepare for such an outbreak and protect both their patients and staff. Review CDC "[Steps Healthcare Facilities Can Take](#)" (<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>)
 - Review Emergency Preparedness plans
 - i. [Centers for Medicare and Medicaid Services, State Operations Manual Appendix Z – Emergency Preparedness for All Provider and Certified Supplier Types](#) specifies that "Planning for using an all-hazards approach should also include emerging infectious disease (EID) threats. Examples of EIDs include Influenza, Ebola, Zika Virus and others. All facilities must develop an all-hazards emergency preparedness program and plan."
 - Review CDC's "[Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States](#)" for specific information including:

- i. Designate a time to meet with your staff to educate them on COVID-19 and what they may need to do to prepare
 - ii. Limit visitors to the facility
 - iii. Post visual alerts (signs, posters) at entrances and in strategic places providing instruction on hand hygiene, respiratory hygiene, and cough etiquette
 - iv. Ensure supplies are available (tissues, waste receptacles, alcohol-based hand sanitizer)
 - 1. Put alcohol-based hand sanitizer in every resident rooms (ideally both inside and outside)
 - v. Take steps to prevent known or suspected COVID-19 patients from exposing other patients
 - vi. Restrict the movement of COVID-19 patients (e.g., have them remain in their room)
 - vii. Identify dedicated staff to care for COVID-19 patients
 - viii. Observe newly arriving patients/residents for development of respiratory symptoms
- Prevention and Control Measures
 - Review CDC [“Strategies to Prevent Spread of COVID-19 in Long-Term Care Facilities LTCF”](#). **The general strategies CDC recommends to prevent the spread of COVID-19 in LTCF are the same strategies these facilities use every day to detect and prevent the spread of other respiratory viruses like influenza.**
 - In general, for care of residents with *undiagnosed* respiratory infection use **Standard, Contact and Droplet Precautions with eye protection** unless suspected diagnosis requires Airborne Precautions (e.g., tuberculosis).
 - Routine surveillance of healthcare-associated infections, including fever and symptom monitoring, should remain on-going and include respiratory tract infections. Continue to monitor for trends and suspect facility transmission. **Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza.** Verify the diagnosis using clinical, epidemiological and lab test information, considering seasonal disease occurrence. Ensure the facility has the laboratory capacity to test residents/patients. Refer to the [NJDOH Guidelines for Control of Respiratory Virus Outbreaks in LTC and other Institutional Settings](#) for additional information on routine control measures; and the [CDS-11](#) or [CDC document](#) for a template line listing.
 - i. Rapid influenza testing and/or PCR should be done by collecting two simultaneous swabs. Use one swab for on-site rapid testing (if available) and send the second swab to the laboratory for PCR or virus culture. Some laboratories perform a respiratory virus panel, which would test for more than one respiratory virus. Bacterial culture should be considered as well, particularly during an outbreak of pneumonia.
 - ii. Residents presenting with fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization **and** without alternative explanatory diagnosis **and** no known exposure to COVID-19 should be referred to the local health department to determine whether a resident may be a person under investigation or PUI for COVID-2019.

- Occupational Health Considerations
 - Occupational Safety and Health Administration (OSHA) recordkeeping requirements at [29 CFR Part 1904](#) mandate covered employers record certain work-related injuries and illnesses on their OSHA 300 log. While 29 CFR 1904.5(b)(2)(viii) exempts recording of the common cold and flu, **COVID-19 is a recordable illness when a worker is infected on the job.**
 - Worker Training:
 - i. Train and educate all workers about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure.
 - ii. Review applicable standards include the PPE ([29 CFR 1910.132](#)), Eye and Face Protection ([29 CFR 1910.133](#)), Hand Protection ([29 CFR 1910.138](#)), and Respiratory Protection ([29 CFR 1910.134](#)) standards. The OSHA website offers a variety of [training videos](#) on respiratory protection.
 - iii. CDC and OSHA recommend that healthcare workers wear:
 1. Gown
 2. Gloves
 3. Eye/face protection (e.g., goggles, face shield)
 4. National Institute for Occupational Safety and Health (NIOSH)-certified, disposable N95 or better respirators. **Use respiratory protection as part of a comprehensive respiratory protection program that meets the requirements of OSHA’s Respiratory Protection standard ([29 CFR 1910.134](#)) and includes medical exams, fit testing, and training.**

Action Items:

- (1) Administrators, department leadership, Infection preventionists and healthcare providers should carefully **review existing emergency preparedness and outbreak response plans.**
- (2) Ensure healthcare personnel infection prevention **competency-based training**, i.e., the provision of job-specific education, training, and assessment to ensure that healthcare personnel possess infection prevention competency, is in place.
- (3) **Screen patients and visitors for symptoms of acute respiratory illness (e.g., fever, cough, difficulty breathing) before entering your healthcare facility.** Keep up to date on the recommendations for preventing spread of COVID-19 on [CDC’s website](#).
- (4) **Ensure proper use of personal protection equipment (PPE).** Healthcare personnel who come in close contact with confirmed or possible patients with COVID-19 **should wear** the appropriate [personal protective equipment](#).
- (5) **Conduct an inventory of available PPE.** Consider conducting an inventory of available PPE supplies. Explore strategies to [optimize PPE supplies](#).
- (6) **Encourage sick employees to stay home.** Personnel who develop respiratory symptoms (e.g., cough, shortness of breath) should be instructed not to report to work. Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies.
- (7) Review CDC Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States at <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html>

Contact Information:

- Jessica Arias, Infection Preventionist or Rebecca Greeley, Infectious Disease Team Lead at haiar@doh.gov, (609) 826-5964
- The Communicable Disease Service at (609) 826-5964 during business hours

References and Resources:

- World Health Organization COVID-19 situation reports <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>
- CDC case counts <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>
- OSHA COVID-19 <https://www.osha.gov/SLTC/covid-19/controlprevention.html>
- Healthcare Infection Prevention and Control FAQs for COVID-19 <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/infection-prevention-control-faq.html>
- Evaluating and Reporting Persons Under Investigation (PUI) <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-criteria.html>
- Association for Professionals in Infection Control and Epidemiology (APIC) PPE Do's & Don'ts <https://professionals.site.apic.org/infographic/ppe-dos-and-donts/>
- National Institute for Occupational Safety and Health (NIOSH) Respiratory Protection Infographics <https://www.cdc.gov/niosh/npptl/RespiratorInfographics.html>
- CMS Infection for Healthcare Facilities Concerning 2019 Novel Coronavirus Illness <https://www.cms.gov/files/document/qso-20-09-all.pdf>
- CDC LTC Respiratory Surveillance Line List <https://www.cdc.gov/longtermcare/pdfs/LTC-Resp-OutbreakResources-P.pdf>