COVID-19: Guidance for Skilled Nursing Facilities

California Skilled Nursing Facilities
March 13, 2020

Healthcare-Associated Infections Program
Center for Health Care Quality
California Department of Public Health

COVID-19: Guidance for SNFs Webinar 3/13/20

**To see a full webinar including this guidance, visit
https://youtu.be/gYNkUkrwu1c.**

Objectives

- Describe what SNF need to do to prepare for COVID-19 to
  - ➢ **Prevent and detect** the introduction of COVID-19 into facility
  - ➢ **Prepare to receive and care for** residents with COVID-19
  - ➢ **Prevent transmission** of COVID-19 within facility

- Review recommended personal protective equipment (PPE)
  - ➢ Demonstrate safe donning and doffing sequences
  - ➢ Explain fit-testing for N95 respirators

Situation Update

- World Health Organization (WHO) declared COVID-19 a global pandemic

- Community transmission of COVID-19 is occurring in California

- Elderly SNF residents with chronic conditions at **higher risk for severe illness and death from COVID-19**

- Persons with COVID-19 who do not require acute care hospitalization may need ongoing care and monitoring in SNF

- SNF must prepare to safely care for individuals with suspected or confirmed COVID-19

Prevent and Detect the Introduction of COVID-19 into the Facility

Risk of COVID-19 Introduction and Spread in Long-term Care Facilities

- COVID-19 may be spread between
  - ➢ Residents and visitors
  - ➢ Residents and HCP
  - ➢ Residents, HCP, and visitors

- Ill HCP and visitors are the most likely sources of introduction into the facility
  - ➢ Take action now before widespread community transmission
  - ➢ Implement visitor restrictions and enforce HCP sick leave policies

Restrict Visitors

- Actively screen and restrict visitors with:

  ➢ Signs or symptoms of respiratory infection (such as fever, cough, shortness of breath, or sore throat)

  ➢ Known contact with a person with suspected or confirmed COVID-19 infection

  ➢ International travel within the last 14 days to China, Iran, South Korea, Italy, Japan or other geographic area of concern identified by CDC (https://wwwnc.cdc.gov/travel/notices)

- Post signs "Do not enter until you are screened by staff member" at facility entrance

CDPH All Facilities Letter 20-22 (https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-20-22.aspx)

CMS Memo, March 9, 2020 (PDF) (https://www.cms.gov/files/document/qso-20-14-nh-revised.pdf)

In Lieu of Visits

- Offer alternative means of communication for people who would otherwise visit, such as virtual communications (phone or video-communication)

- Create/increase listserv communication to update families, such as advising not to visit

- Assign staff as primary contact to families for inbound calls, and conduct regular outbound calls to keep families up to date

- Offer a phone line with a voice recording updated at set times (such as daily) with the facility's general operating status, such as when it is safe to resume visits

Educate Visitors if Allowed to Visit in Certain Situations

Instruct visitors to

- Perform hand hygiene at entry to the facility and before entering into a resident's room
- Follow respiratory hygiene and cough etiquette
  - ➢ Use recommended personal protective equipment (PPE)
  - ➢ Avoid touching surfaces as possible
  - ➢ Limit movement within the facility and avoid common areas

Post Visible Signs for Hand Hygiene and Cough Etiquette

Healthcare Personnel Should <u>Not</u> Report to Work if Feeling Ill

- HCP must report symptoms to their supervisor and the person who oversees occupational health at the facility

- HCP who develop fever or respiratory symptoms while at work should
  - ➤ immediately put on a facemask
  - ➤ inform their supervisor
  - ➤ leave the workplace

- Sick leave policies should be non-punitive, flexible, and consistent with public health recommendations

- HCP are strongly encouraged to receive annual seasonal flu vaccine – it's not too late

Educate Healthcare Personnel to:

- Adhere to infection prevention and control measures, including:

  ➤ Hand hygiene

  ➤ Selection and use of personal protective equipment (PPE)

  ➤ Have HCP demonstrate competency with putting on and removing PPE.

- Educate both facility-based and consultant personnel (e.g., wound care, podiatry, barber) and volunteers including consultants (They often provide care in multiple facilities and can be exposed to or serve as a source of pathogen transmission)

Detect COVID-19 in your Facility

- Perform active frequent monitoring of residents and HCP to promptly identify

  ➢ Residents with new or worsening respiratory symptoms

  ➢ HCP with new-onset of respiratory symptoms in the setting of residents with respiratory infection symptoms

- Report clusters of symptomatic residents to local public health

- Track suspect and confirmed respiratory infections [using a line list](https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/RecommendationsForThePreventionAndControlOfInfluenzaNov2018_FINAL.pdf) (PDF)
  (https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/RecommendationsForThePreventionAndControlOfInfluenzaNov2018_FINAL.pdf)

- Increase frequency of monitoring if widespread transmission is occurring in your community

Stay tuned to your local health department for updates

Prepare to Receive and Care for Residents with Suspected or Confirmed COVID-19

Identify Space and Staff NOW

- Identify a separate area that can be used to cohort residents with confirmed COVID-19 infection such as on the same unit, wing, or building

- Identify a minimum number of HCP dedicated to care for residents with COVID-19

  – Perform N95 respirator fit-testing for designated staff if not already fit-tested

- Educate healthcare personnel to use recommended PPE, including proper donning and doffing PPE to avoid self contamination

Prepare Infection Control Supplies

- Increase access to hand hygiene
  - ➤ Place alcohol-based hand sanitizer (with >60% alcohol) in
    - Resident rooms (ideally both inside and outside of room)
    - Care areas, such as therapy rooms
    - Common areas, such as just outside of dining hall
  - ➤ Confirm all sinks are working and well-stocked with soap and paper towels for handwashing

- Acquire recommended personal protective equipment (PPE)
  - ➤ N95 respirators
  - ➤ Face shield or goggles for eye protection
  - ➤ Gowns and gloves
  - ➤ Facemasks

Prevent Transmission of COVID-19 Within the Facility

Patient Placement

- Most SNF do not have airborne isolation rooms

- Place resident with COVID-19 in single room or cohort with other COVID-19 patients with the door closed

- Cohort residents with confirmed COVID-19 infection on the same unit, wing, or building

- Minimize the number of persons entering room

Use Recommended PPE for COVID-19

- Wear N95 respirator when collecting nasopharyngeal and oropharyngeal swab specimens

- For routine care, wear all recommended PPE, specifically
  - ➤ Gown
  - ➤ Gloves
  - ➤ N-95 respirator whenever available* or facemask
  - ➤ Eye protection

  *Use respirators based on availability; prioritize 1) fit-tested respirator, 2)respirator that has not been fit-tested, 3) expired respirator, 4) non-medical grade respirator.
  If no respirator is available, wear a facemask.

Resident/Patient Movement

- Suspend large group activities and close communal dining areas

- Restrict residents with fever or acute respiratory symptoms to their room

- When they must leave the room, such as for medical transport, the resident should be provided with a facemask (if tolerated)

- Notify facilities prior to transferring a resident with an acute respiratory illness, including suspected or confirmed COVID-19, to a higher level of care

Infection Prevention Strategies

COVID-19 Prevention Strategies - Back to Basics

Hand Hygiene

**Personal Protective Equipment and Precautions**

Cleaning and Disinfection

Basics of Infection Prevention Immediate Goals

- Emphasize that HCP
  - ➢ Perform consistent proper hand hygiene
  - ➢ Use appropriate PPE
  - ➢ Assure thorough and consistent environmental cleaning

- Educate residents, visitor and families to
  - ➢ Adhere to infection prevention measures
  - ➢ Advocate for infection prevention, such as reminding HCP and others to wash hands

Hand Hygiene
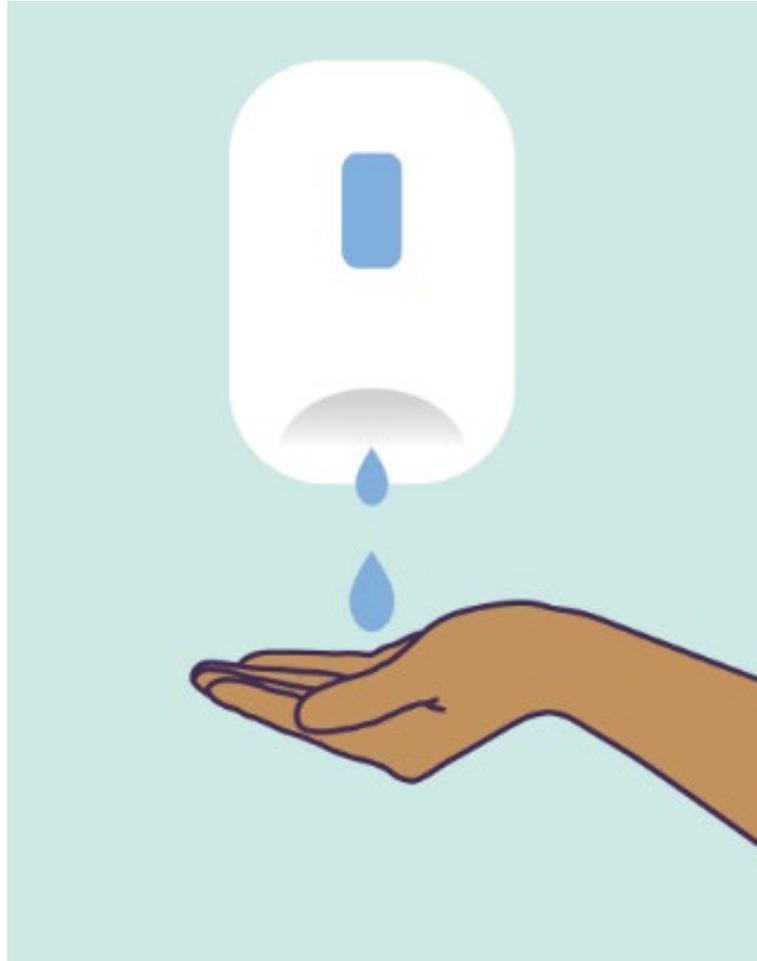
Perform Hand Hygiene

Before
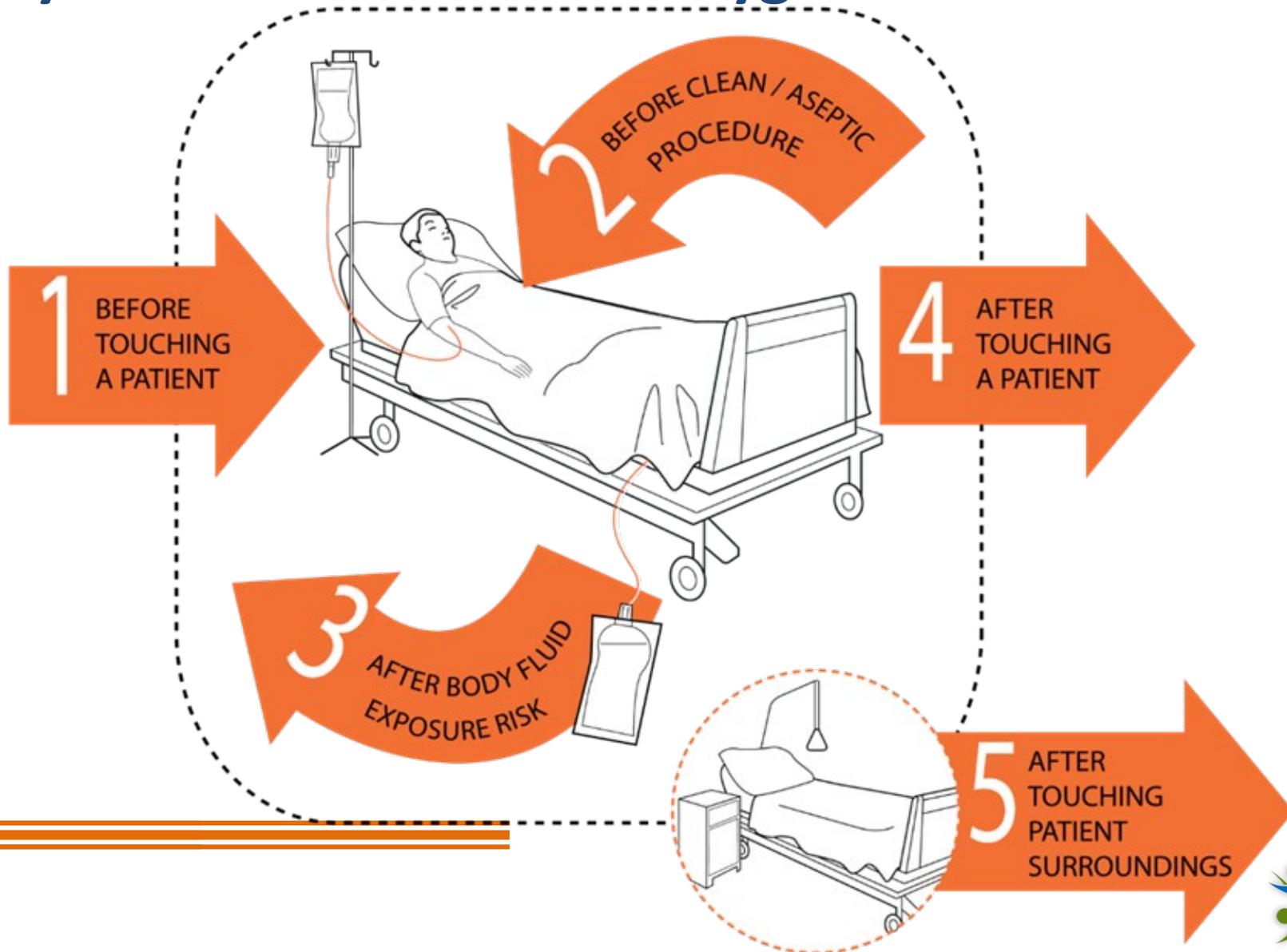
- Patient contact
- Donning gloves
- Accessing devices
- Giving medication

After

- Contact with a patient's skin and/or environment
- Contact with body fluids or excretions, non-intact skin, wound dressings
- Removing gloves

My 5 Moments for Hand Hygiene

Efficacy of Hand Hygiene Products

- Use an alcohol-based hand rub routinely if hands are not visibly soiled
- Wash hands with soap and water when hands are visibly soiled, before and after eating, and after toileting
- During certain types of infection outbreaks, facility may allow only handwashing with soap and water

Good	Better	Best
Plain Soap	Antimicrobial Soap	Alcohol-based handrub*

*less effective in presence of organic material

COVID-19 Prevention Strategies- Back to Basics
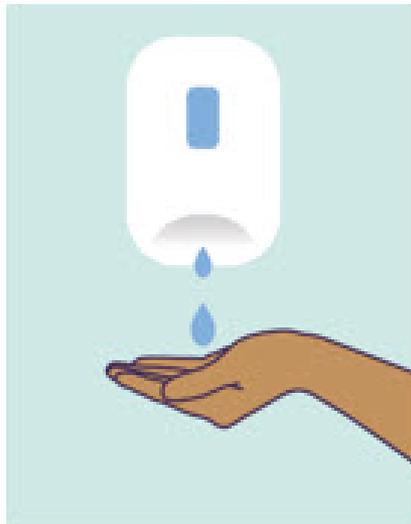
Hand Hygiene

Personal Protective Equipment and Precautions

Cleaning and Disinfection

Demo: Safely Donning and Doffing PPE

UCSF Health

https://www.youtube.com/watch?v=-sBNxli21n0&feature=emb_title

Key Points for Donning and Doffing PPE

- Don before contact with the patient, ideally just before entering the room

- Use carefully – avoid contamination

- Remove and discard carefully, either at the doorway or immediately outside patient room; remove respirator outside room

- Immediately perform hand hygiene

Sequence for Donning PPE

1. Gown first

2. Mask or respirator

3. Goggles or face shield

4. Gloves

How to Don a Gown

- Select appropriate type and size

- Opening is in the back

- Secure at neck and waist

- If gown is too small, use two gowns
    - Gown #1 ties in front
    - Gown #2 ties in back

How to Don a Mask

- Place over nose, mouth and chin

- Fit flexible nose piece over nose bridge

- Secure on head with ties or elastic

- Adjust to fit

How to Don a Respirator

- **Select a fit tested respirator, preferably**
- Place over nose, mouth and chin
- Fit flexible nose piece over nose bridge
- Secure on head with elastic
- Adjust to fit
- Perform a fit check –
  - **Inhale – respirator should collapse**
  - **Exhale – check for leakage around face**

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How to Don Eye and Face Protection

- Position goggles over eyes and secure to the head using the ear pieces or headband

- Position face shield over face and secure on brow with headband

- Adjust to fit comfortably

How to Don Gloves

- Don gloves last

- Select correct type and size

- Insert hands into gloves

- Extend gloves over isolation gown cuffs
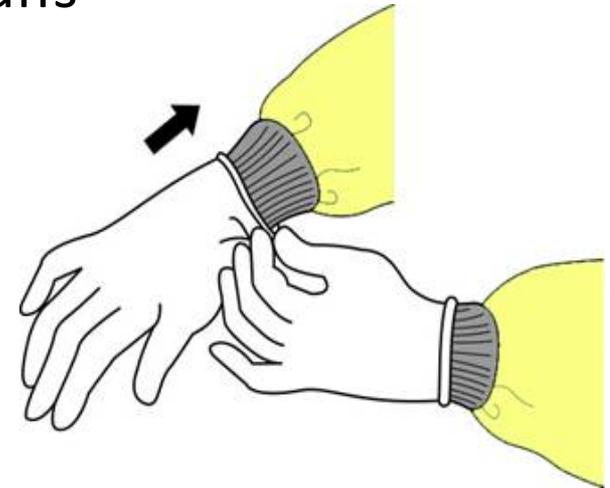
How to Safely Use PPE

- Keep gloved hands away from face

- Avoid touching or adjusting other PPE

- Remove gloves if they become torn; perform hand hygiene before donning new gloves

- Limit surfaces and items touched

How to Safely Remove PPE

Recognize the "Contaminated" and "Clean" areas of PPE

- Contaminated

  ➢ PPE areas likely to have been in contact with body sites, materials, or surfaces with infectious organisms

  ➢ Includes the outside and front of PPE

- Clean

  ➢ PPE areas that are not likely to have been in contact with the infectious organism

  ➢ Includes the inside and the outside back of PPE

# Sequence for Removing PPE

1. Remove gloves

   - Perform hand hygiene

2. Remove gown

   - Perform hand hygiene

3. Remove face shield/ goggles

   - Perform hand hygiene

4. Remove mask or respirator

   - Perform hand hygiene

Where to Remove PPE

- At doorway, before leaving patient room or in anteroom

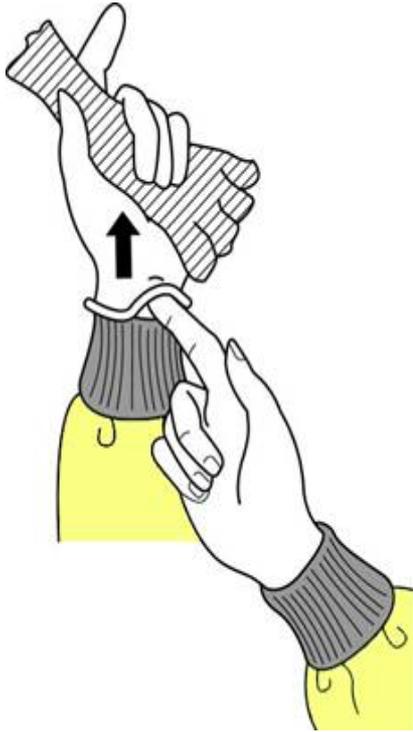- Remove respirator outside room, after door has been closed*

  *Ensure hand hygiene supplies are available at the points needed, either a sink or alcohol-based hand rub

How to Remove Gloves (1)
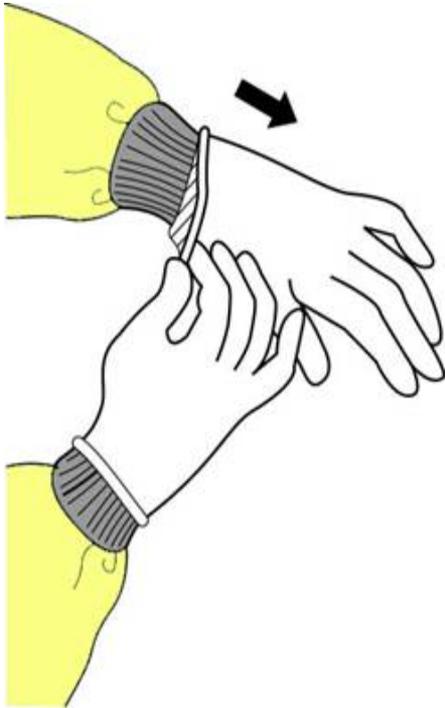
- Grasp outside edge near wrist
- Peel away from hand, turning glove inside-out
- Hold in opposite gloved hand

How to Remove Gloves (2)

- Slide ungloved finger under the wrist of the remaining glove

- Peel off from inside, creating a bag for both gloves

- Discard

How to Remove Isolation Gown

- Unfasten ties
- Peel gown away from neck and shoulder
- Turn contaminated outside toward the inside
- Fold or roll into a bundle
- Discard
- Perform hand hygiene

How to Remove Goggles or Face Shield

- Grasp ear or head pieces with ungloved hands

- Lift away from face

- Place in designated receptacle for reprocessing or disposal

How to Remove a Respirator

- Remove outside the room or in the ante-room

- Lift the bottom elastic over your head first

- Then lift off the top elastic

- Discard

[CDC PPE Sequence (PDF)](https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf)
(https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf)

How to Remove a Tied Facemask

- Remove at least 6 feet away from the patient/resident – at the door
- Untie the bottom, then top, tie
- Remove from face
- Discard

Perform Hand Hygiene After All PPE Removed

- Perform hand hygiene immediately after removing PPE and preferably after each step

- Use alcohol-based hand rub or wash with soap and water

  Exception: If hands become visibly contaminated during PPE removal, wash hands with soap/water before continuing PPE removal

Respirator and fit testing

- Ensure designated HCP are fit tested to the N95 respirator available in the SNF; can be within the past year

- Conduct fit testing using [OSHA-accepted fit test methods](https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134AppA)
(https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134AppA)

- Fit-testing is one aspect of a respiratory protection program
  - ➤ CAL/OSHA will provide guidance for SNF to meet regulatory requirements

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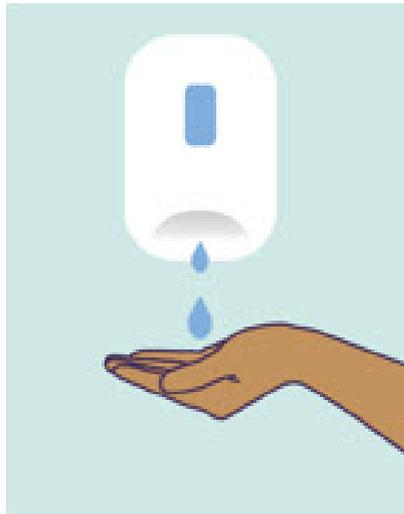
Hand Hygiene

Personal Protective Equipment and Precautions

Cleaning and Disinfection

Environmental/ Equipment Cleaning

- Limit the number of staff entering the room of resident with COVID-19

  ➢ Consider assigning staff nurse to do daily high-touch surface cleaning

- Follow routine environmental infection control procedures such as waste management, laundry, food service, and environmental cleaning

- Use dedicated medical equipment for patient care

- For non-disposable medical equipment, clean and disinfect according to manufacturer's instructions, including contact times

- All EPA-registered hospital-grade disinfectants can be used for COVID-19

Resources

- For more information, see CDC guidance for nursing homes https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html , March 10, 2020

- For the most up-to-date infection control guidance for healthcare facilities, visit CDC coronavirus website at https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html

- For general infection control training resources, please visit: https://www.cdc.gov/longtermcare/

Questions?

For more information,
please contact any
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