

California Department of Public Health, Healthcare-Associated Infections Program  
 COVID-19 PPE, Resident Placement/Movement, and Staffing Considerations by Resident Category

Recommendation	COVID Positive Residents (Red Area)	Symptomatic, Suspected COVID, Awaiting Test Results (Yellow PUI, Single Room if Available) ††	COVID Exposed Residents (Yellow – Exposed) ††	Newly Admitted Residents Under Observation (Yellow – Observation) ††	Residents with No Known Exposure, or COVID Recovered (Green Area)
N95 respirator *	Yes	Yes	Yes	Yes	No, unless caring for resident undergoing an aerosol generating procedure in a facility located in a county with moderate to substantial community transmission**, or during an outbreak.
Facemask *	Only in crisis if N95 not available	Only in crisis if N95 not available	Only in crisis if N95 not available	Only in crisis if N95 not available	Yes
Eye Protection	Yes	Yes	Yes	Yes	No, unless facility is located in a county with moderate to substantial community transmission**, during an outbreak, or per Standard precautions

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Gowns	<p>Yes</p> <ul style="list-style-type: none"> <li>– Extended use† permitted in supply crisis, except for residents with known multidrug resistant organism (MDRO).</li> <li>– Maintain clean areas on unit where gowns are not worn such as nurses’ station.</li> </ul>	<p>Yes</p> <ul style="list-style-type: none"> <li>– Extended use† NOT recommended.</li> <li>– When gowns in short supply, may reserve gown use for when indicated for high contact activity per Enhanced Standard precautions, or may dedicate gown for each resident and keep in room.</li> </ul>	<p>Yes</p> <ul style="list-style-type: none"> <li>– Extended use† NOT recommended.</li> <li>– When gowns in short supply, may reserve gown use for when indicated for high contact activity per Enhanced Standard precautions, or may dedicate gown for each resident and keep in room.</li> </ul>	<p>Yes</p> <ul style="list-style-type: none"> <li>– Extended use† NOT recommended.</li> <li>– When gowns in short supply, may reserve gown use for when indicated for high contact activity per Enhanced Standard precautions, or may dedicate gown for each resident and keep in room.</li> </ul>	As needed per Enhanced Standard precautions
Gloves with hand hygiene before donning and after doffing gloves	Yes, upon room entry and between residents (if multi-occupancy room)	Yes, upon room entry and between residents (if multi-occupancy room)	Yes, upon room entry and between residents (if multi-occupancy room)	Yes, upon room entry and between residents (if multi-occupancy room)	As needed per Enhanced Standard precautions

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Resident placement and movement considerations	Follow CDC guidance on discontinuation of isolation; recovered residents can be moved directly to COVID-negative/ recovered Green area.	<p>While awaiting test results, move only if can go to private room; otherwise, leave in current room with as much space as possible between beds and curtains drawn. Do not move to Observation area.</p> <p>Do not move to COVID positive Red area until test results confirm COVID-19 positive.</p>	<p>Leave on current unit. Do not move or admit any other residents to the unit where the exposure occurred until 2 rounds of testing with no new positive residents.</p> <p>Individual residents should not be moved off the unit until all residents on the unit have 2 sequential rounds of negative tests.</p>	<p>Do not mix new admissions with any other resident groups.</p> <p>Individual residents in the observation area may be moved to the COVID-19 negative Green area after 14 days observation complete and negative test.</p>	Leave on current unit.

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Staffing considerations	<p>Dedicate HCP/staff to the unit; separate restroom and breakroom, no co-mingling with other HCP/staff on other units.</p> <p>If necessary to maintain dedicated staffing for a small number of positive residents in Red area, dedicated HCP can continue to care for recovered residents in a designated area within or just outside the Red area (not Green area).</p> <p>If staffing crisis, asymptomatic positive HCP may work in the dedicated COVID-19 positive Red area, only.</p>	<p>Ensure HCP understand need to change gloves and gowns (if used) and perform hand hygiene between residents.</p> <p>Consider grouping care activities such that HCP care for all residents in the Yellow-observation area before caring for residents in the Yellow-exposed area or PUI.</p>	<p>Dedicated HCP/staffing ideal, but if infeasible, ensure HCP understand need to change gloves and gowns (if used) and perform hand hygiene between residents.</p> <p>Consider grouping care activities such that HCP care for all residents in the Yellow-observation area before caring for residents in the Yellow-exposed area or PUI.</p>	<p>Dedicated HCP/staffing ideal, but if infeasible, ensure HCP understand need to change gloves and gowns (if used) and perform hand hygiene between residents.</p> <p>Consider grouping care activities such that HCP care for all residents in the Yellow-observation area before caring for residents in the Yellow-exposed area or PUI.</p>	<p>Dedicated HCP/staffing ideal, but if infeasible, ensure HCP understand need to change gloves and gowns (if used) and perform hand hygiene between residents.</p> <p>Consider grouping care activities such that HCP care for all residents in the Green- negative area before caring for residents in the Yellow-areas.</p>

\* Cal/OSHA removed the *Cal/OSHA Interim Guidance on COVID-19 for Health Care Facilities: Severe Respirator Supply Shortages* that allowed certain strategies to extend supplies of respirators during severe shortages. Pursuant to title 8 sections 5144 and 5199, healthcare facilities are to use respirators in full accordance with their manufacturers' instructions and their NIOSH approval. Extended use may be implemented for facemasks or N95 respirators **only when used for source control**; when used for source control, facemasks or N95 respirators may be used until they become soiled, damaged, or hard to breathe through and should be immediately discarded after removal.

\*\*CDPH and CDC recommends HCP wear eye protection for all direct patient/resident care, and N95 or higher level respirator while caring for residents undergoing aerosol generating procedures, in counties with moderate or higher levels of [community COVID-19 transmission](#) (> 2 cases per 100k population or > 2 % test positivity; search by county at: <https://covid19.ca.gov/state-dashboard/#location-california>). Eye protection and N95 respirators for aerosol generating procedures should also be worn in the "green zone" during a COVID-19 outbreak. Eye protection should always be worn per Standard precautions when performing tasks that could generate splashes or sprays of blood, body fluids, secretions and excretions.

‡ Extended use and reuse of gowns can transmit MDRO and should be avoided whenever possible (i.e., these are crisis strategies). Extended use of gowns refers to the practice of wearing the same the same gown by the same HCP when interacting with more than one resident known to be infected with the same infectious disease when these residents are housed in the same location, only if residents do not have other diagnoses transmitted by contact (e.g., *C. difficile*, *C. auris*). If the gown becomes visibly soiled, it must be removed and discarded. When extended use of gowns is practiced, e.g., on a dedicated COVID-19 positive "Red" unit, gowns should **not** be worn in clean areas on unit, e.g., nurses' station, clean supply room, breakrooms, etc.

‡‡Although residents that are symptomatic with suspected COVID pending test results, COVID exposed residents, and newly admitted residents under observation would be placed in the yellow status, these residents should be cohorted based on their designation and not placed with residents on yellow status for different reasons.

#### Resources:

- [Summary of Strategies to Optimize Use of PPE in Presence of Shortages](#)
- [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)