Long-Term Care (LTC) and Assisted Living Facility Biosafety: Identify, Isolate and Inform

Identify

Isolate

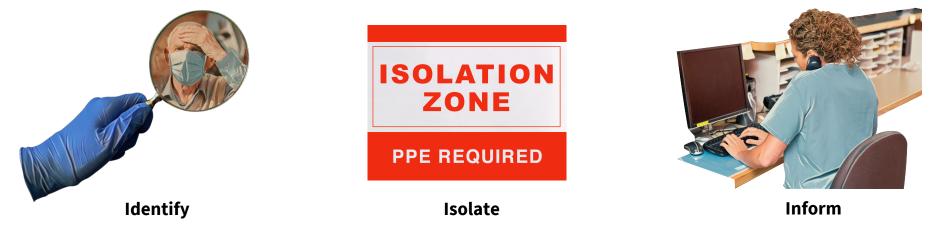
Inform

References

Introduction

According to the CDC, people who are at the most risk for severe complications after contracting COVID-19 are over the age of 65 and anyone with underlying medical conditions. Many residents in long-term care and Assisted Living facilities meet both these conditions. Because they live near each other and are cared for by staff, who move throughout the facility, a single case of COVID-19 can easily lead to an outbreak within a highly vulnerable population.

For this reason, it is imperative that long-term care facilities put measures in place to protect the residents within, and that includes being able to identify when a case or risk of a case is present, isolate the hazard, and inform individuals who need to know to activate resources to mitigate further spread.



Click each tab for an overview of each strategy when suspecting a resident(s) of having COVID-19

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Identify when someone enters the facility with signs and symptoms of COVID-19:

- Restrict entry points to control how people enter the facility.
- Have a process to screen everyone who enters the facility for signs and symptoms of COVID-19.
- Maintain a record of who is entering the facility to assist with contact tracing if necessary.
- Employ source control measures such as universal masking, hand hygiene, and physical distancing.



- LTC facilities should assess for signs and symptoms of COVID-19 during routine care activities each shift.
- In ALF, observe for and encourage residents to report signs and symptoms of COVID-19.
- Have a plan in place for staff to report the onset of COVID-19 signs and symptoms.

Identify asymptomatic carriers of COVID-19:

• Utilize routine testing to identify when residents or staff are asymptomatic carriers of COVID-19.

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In long-term care facilities, quarantine and isolation are employed as methods to mitigate the spread of infection.

Quarantine methods (for individuals who have had a potential or unknown exposure risk):

- **Restricting visitation to non-essential staff and visitors** is one way of providing reverse quarantine to protect residents from outside sources of infection.
- **Residents with no symptoms of COVID-19 but have risk factors for potential exposure,** such as a resident who attends dialysis outside of the facility where exposure to COVID-19 is unknown, should be quarantined in a designated area to prevent the possible spread of COVID-19 to other residents.

Isolation methods (for individuals confirmed to be infected with COVID-19):

- Residents who have tested positive should be isolated to prevent the spread of COVID-19.
 - Depending on your situation, residents can be isolated in their individual rooms or a dedicated space such as a wing or group of rooms at the end of a hallway.
- **Residents who have signs or symptoms and have not yet received test results** should be isolated but <u>NOT</u> in the same area as residents who are known to be positive.

Recommendation

If staffing allows, staff working with COVID positive residents should be cohorted to only work with this group.

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Inform encompasses communication with individuals external and internal to the facility.

External communication:

- CMS requirements:
 - For example: reporting information on cases, staffing, and supply information to the CDC's National Healthcare Safety Network (NHSN) or other as required by CMS.
 - Notifying representatives and families of residents on the status of COVID-19 in the facility, including updates on new cases.
- Local and State public health may also require being informed, which may activate resources and support as needed.
- Essential vendors such as home health agencies, hospice, and delivery companies will need to be informed of infection control measures such as how to enter the building and what is required for source control.

Internal communication:

- CMS internal requirements:
 - Informing all residents on the status of COVID-19 within the facility, including updates on new cases.
- Residents and staff need to be informed of infection control measures such as isolation, quarantine, and source control measures being taken.
- If a resident or staff member is identified as having symptoms of COVID-19, they will need to be informed of the next steps.

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CDC – People at Increased Risk:

https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-increased-risk.html

CDC – Nursing Homes and Long-Term Care Facilities:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-home-long-term-care.html

CDC -Long-Term Care Facilities: CMS Flexibilities to Fight COVID-19:

https://www.cms.gov/files/document/covid-long-term-care-facilities.pdf

ASPR TRACIE Toolkit for Long-term Care Facilities:

https://files.asprtracie.hhs.gov/documents/aspr-tracie-covid-19-long-term-care-considerations-toolkit-final.pdf