

COVID-19 Q&A Hour for Long Term Care



WASHINGTON STATE DEPARTMENT OF HEALTH

Healthcare-Associated Infections (HAI) Program

Shoreline, WA

Housekeeping



Attendees will be in listen only mode



Self-mute your lines when not speaking



Type questions into the question window. Please include the type of facility you are from in your question (e.g., NH) and indicate your county.



Nursing Home

Participants from long-term care, regulatory, public health



No confidential information presented or discussed. This is an educational webinar and does not constitute legal advice.



Local guidance may differ, please consult with your Local Health Jurisdiction (LHJ):

<https://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions>

This is the LTC COVID-19 Q&A Hour!

A chance to connect, ask questions, and learn about the COVID-19 response and infection prevention guidance



Where Can I Find the Q & A Document?

Posted every Wednesday

- Washington Health Care Association:

<https://www.whca.org/washington-department-of-health-covid-19-qa-session/>

- Washington LeadingAge:

FAQ emailed to members – Administrators, Directors of Nursing and Staff Development Coordinators

- Adult Family Home Council:

<https://adultfamilyhomecouncil.org/covid-19/>

Panelists

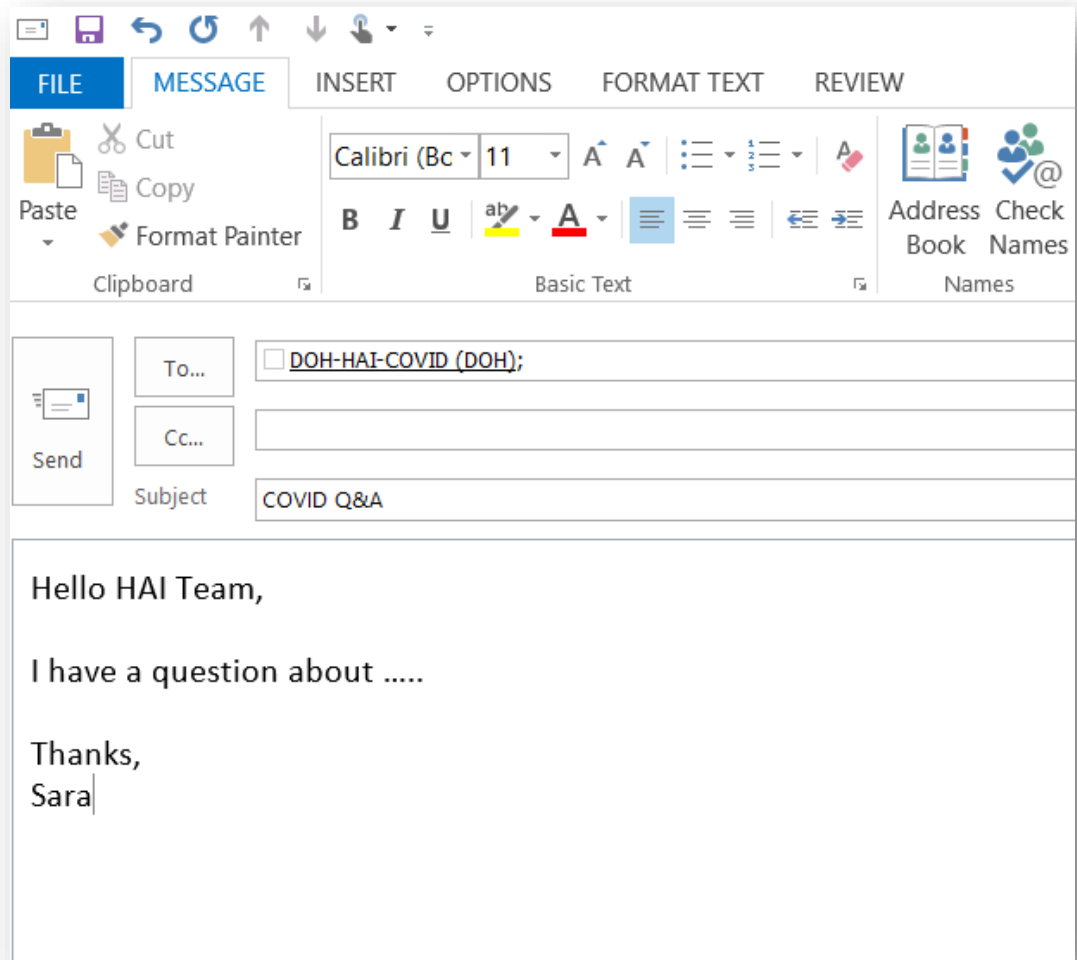


Send Us Your Questions Ahead of Time

Subject Line:
COVID Q&A

Email:
HAI-COVID@doh.wa.gov

Due by: COB Tuesday





WASHINGTON STATE DEPARTMENT OF HEALTH

ICAR PROGRAM DETAILS

Our free, non-regulatory ICARs provide facilities with infection prevention recommendations and resources on how to keep residents and staff safe.

What We Do

- Provide support with an infection prevention expert
- Assist with addressing gaps in your current infection control protocols for COVID-19 or other infections
- Offer up-to-date guidance and resources

Who We Serve

- Long Term Care Facilities (Assisted, Skilled, Behavioral Health, Nursing facilities, and Adult Family Homes)
- Outpatient Settings
- Acute and Critical Access Hospitals

To Learn More or Schedule an In-Person or Virtual Visit:

<http://doh.wa.gov/ICAR>

Contact Us:

HAI-FieldTeam@doh.wa.gov (General)



In Partnership With

- Local Health Jurisdictions
- LeadingAge Washington
- Washington Health Care Association
- Adult Family Home Council of WA State
- Washington State Hospital Association



WASHINGTON STATE DEPARTMENT OF HEALTH

HAI-AR SECTION EMAIL ADDRESSES

Please refer to the table below to find the email most appropriate for your needs

Email Path	Description
HAI@doh.wa.gov	General healthcare associated infection questions
HAI-Covid@doh.wa.gov	COVID19-specific healthcare associated infection questions
HAIEpiOutbreakTeam@doh.wa.gov	Epidemiological outbreak assistance and healthcare associated infection questions
HAI-FieldTeam@doh.wa.gov	Schedule an ICAR for your facility
HAI-FITTesting@doh.wa.gov	Respiratory Protection related questions www.doh.wa.gov/ltrcpp

Long-Term Care COVID-19 Immunization Champion Award

260 facilities participated in winter quarter. Notifications and postings on website shortly – congratulations to all!

Continue to track vaccinations for next award cycle: Expect next deadline March 2022



- More information: [Long Term Care COVID-19 Immunization Champion Award :: Washington State Department of Health](#)
- Any Long-Term Care facilities can participate (SNFs use NHSN to report) <https://redcap.doh.wa.gov/surveys/?s=KFRMW8JN4P>
- For questions about the awards, contact covid.vaccine@doh.wa.gov
- For questions about the survey, contact LTC-COVID-Vaccination-Survey@doh.wa.gov using subject line: LTC COVID-19 Vaccination Survey

Boosters and Vaccinations

Per the Department of Health Office of Immunizations, support for vaccinations is available if needed:

1. Contact your long-term care pharmacy for on-site support
2. Contact your local health jurisdiction (LHJ) to find out if they are already working with local partners for on-site vaccinations. Find your LHJ here: <https://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions>
3. If you're not sure about resources and do not currently have a plan for ongoing vaccinations, please take this short survey to let DOH know: www.surveymonkey.com/r/DQ5K9WV
4. Contact the Department of Health by email at COVID-Vaccine@doh.wa.gov for other questions.

Flu Resources

- DOH Resources for Public Health and Healthcare Providers:
 - <https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/PublicHealthSystemResourcesandServices/Immunization/InfluenzaFluInformation>
- Communications Toolkit:
 - toolkits.knockoutflu.org
- Flu Fighter Award for 75%+ staff vaccination
 - [Flu Fighter Facility Award :: Washington State Department of Health](#)
- Washington State Flu Report:
 - www.doh.wa.gov/Portals/1/Documents/5100/420-100-FluUpdate.pdf
- CDC Weekly Flu Report:
 - www.cdc.gov/flu/weekly



WA Department of Health's

Project Firstline

PODCAST!

**LIVE on
SoundCloud!**

Scan to listen



or search:

"WA Dept. Health Project Firstline"

**May need to download the SoundCloud App by opening the iOS or Google Play App
Store on your iPhone or Android device.**

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

Pub #: 420-379

Learn about
Infection Prevention
& Public Health
practices!

Listen as we talk to guests
about the importance and
impact these practices
bring to our lives and the
lives of our community!

Upcoming LTC Q&A Schedule

Please plan to attend these upcoming sessions!

Upcoming micro learning topics -
February dates to be confirmed:

- Monoclonal Antibodies
- Preparing to do own Fit Testing

Today's DOH Infection Prevention Panelists

- Joy Chibuzo
- Trent MacAllister



PERSONAL PROTECTIVE EQUIPMENT (PPE) REFRESHER: ASSESSING AND OPTIMIZING YOUR CURRENT SUPPLIES



Joy Chibuzo, MPH
Infection Preventionist
Healthcare Associated Infections and
Antimicrobial Resistance Section

Current recommendations

- Per CDC guidelines, healthcare staff should wear source control and eye protection for all resident care in communities with substantial or high COVID-19 transmission.
- PPE for COVID-19 transmission-based precautions: fit-tested N95 respirator, eye protection, gowns and gloves during care of residents in quarantine or isolation.
- LNI requires annual fit-testing for staff working in areas where they may be exposed to respiratory hazards. This requirement is currently being enforced as of January 1, 2022.
- If you are interested in being trained to perform fit-testing for your staff, please reach out to our occupational health team at HAI-FitTest@doh.wa.gov.



Community Transmission

Minimal to no transmission

- Evidence of isolated cases or limited community transmission, case investigations underway; no evidence of exposure in large communal setting

Minimal to moderate community transmission

- Sustained transmission with high likelihood or confirmed exposure within communal settings and potential for rapid increase in cases

Substantial community transmission

- Large scale community transmission, including communal settings (e.g., schools, workplaces)



Quarantine PRECAUTIONS

In addition to Standard Precautions



Only essential personnel should enter this room
If you have questions, ask nursing staff

Everyone Must: including visitors, doctors & staff



Clean hands when entering and leaving room

Wear respirator

Fit tested N95, if not available, wear a face mask



Wear eye protection
(face shield or goggles)



Gown and glove when providing direct resident care



**Use resident dedicated or disposable equipment.
Clean and disinfect shared equipment.**

Contact Infection Control prior to discontinuing Precautions



Updated 2/11/2021
DOH 420-314

Adapted from Washington State Hospital Association



AEROSOL PRECAUTIONS

In addition to Standard Precautions



Only essential personnel should enter this room
If you have questions ask nursing staff

Everyone Must: including visitors, doctors & staff



Clean hands when entering and leaving room



Respirator

Use a NIOSH-approved N95 or equivalent or higher-level respirator especially during aerosolizing procedures



Mask

Face mask is acceptable if respirator is not available and for visitors.



Wear eye protection
(face shield or goggles)

Gown and glove at door



KEEP DOOR CLOSED



**Use patient dedicated or disposable equipment
Clean and disinfect shared equipment**

Contact Infection Control prior to discontinuing Precautions



Washington State
Hospital Association



Salmon
HEX PAD7D4
Last revised 9/23/20

PPE Donning and Doffing

- It is important to ensure that your staff are donning and doffing PPE correctly.
- Include training on this in your routine staff education and return demonstrations.
- CDC donning and doffing instructions:

- [ppe-sequence.pdf \(cdc.gov\)](https://www.cdc.gov/ppe-sequence.pdf)
- [Coronavirus disease 2019 \(COVID-19\) Factsheet \(cdc.gov\)](https://www.cdc.gov/coronavirus/2019-ncov/faq.html).

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene

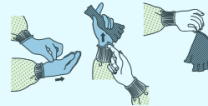


HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container!



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

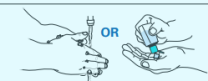


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



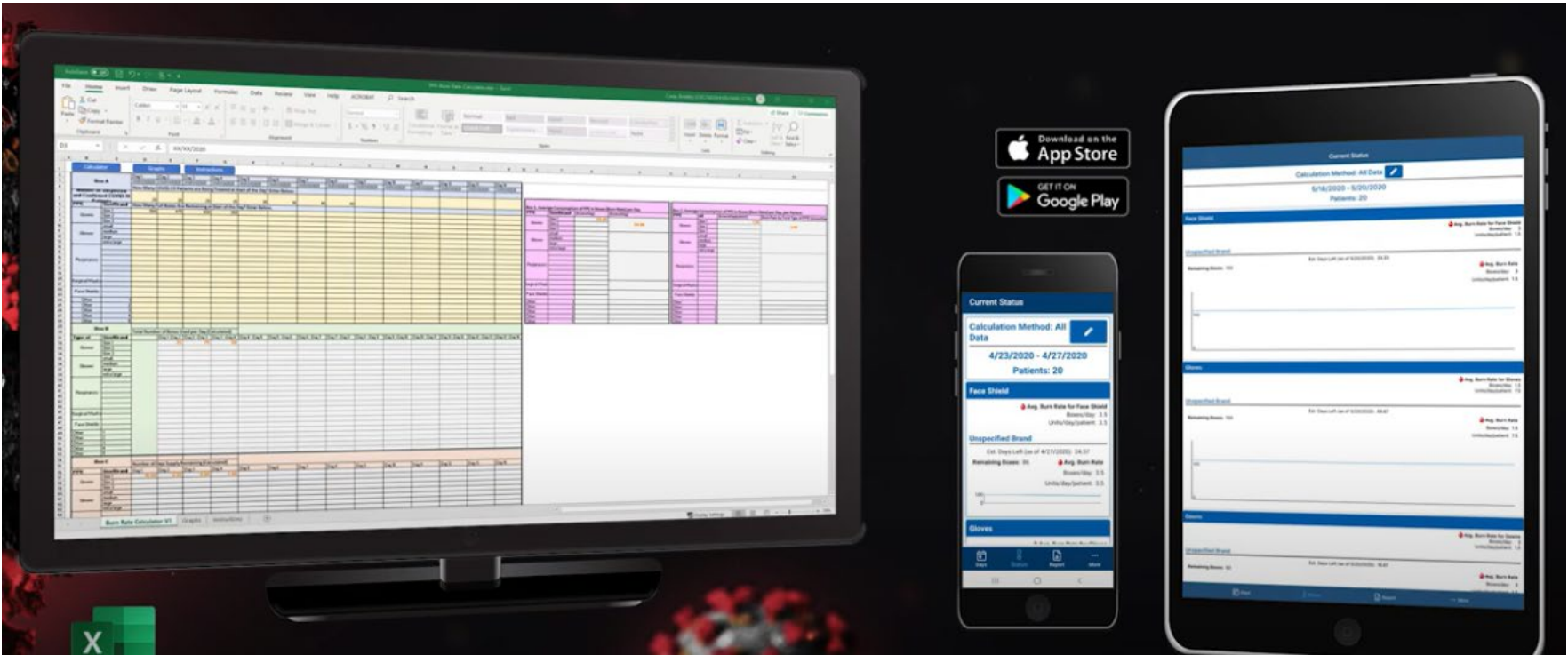
PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



Assessing PPE Supplies

- NIOSH PPE tracker app
- CDC burn rate calculator

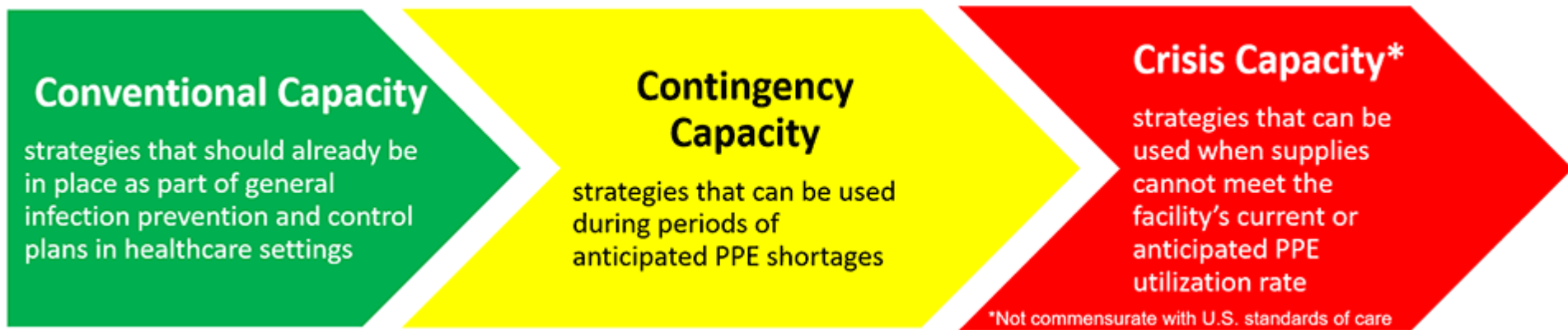
[NIOSH PPE Tracker App Tutorial - YouTube](#)



NIOSH PPE Tracker App

1. Select your facility type.
2. Select your tracking method. You can choose to count by boxes or by individual units.
3. Enter total count of suspected or confirmed COVID-19 residents in your facility for the day.
4. Add your PPE by type (respirator, gowns, etc.) under “Daily Inventory.”
5. Before proceeding to the next screen, tap “# of Boxes” to record your current stock under each PPE type.
6. Tap the check mark to save your entry for the day.
7. Repeat the steps to enter PPE for each day and to add restocked items.
8. Use the “Status” and “Reports” tabs to see your burn rate and estimate how long supplies will last.

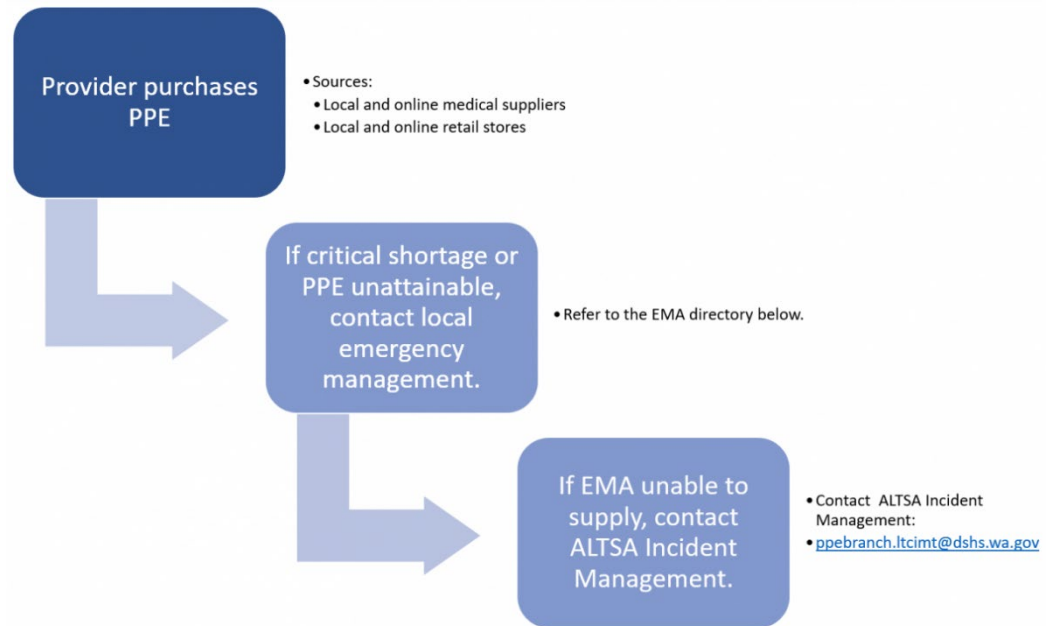
PPE Optimization Strategies



- Facilities should aim to have up to a 30-day supply of PPE if possible and at minimum a 7-day supply of necessary PPE. Choose optimization strategy based on your burn rate and availability of supplies.
- Facilities who have 30-day PPE supply should practice **conventional** use (single use and discard).
- Switch to **contingency** use (extended use before discarding PPE) when you have 7 to 14 days of supplies and anticipate supply shortages.
- When unable to obtain supplies and facility has **less than 7 to 14 days** of supplies on hand, switch to **crisis** capacity (limited reuse before discarding).
- Please consult with your local health department when switching to crisis capacity.

Requesting PPE Supplies

- Under normal conditions, facilities are encouraged to obtain PPE from their regular suppliers or the open market.
- You may request supplies from your local Emergency Management Agency (EMA) if you are experiencing an urgent shortage.
- Please complete this survey: [PPE Issues in Long-Term Care Facilities Survey \(surveymonkey.com\)](https://www.surveymonkey.com/s/ppe-issues)



Web Resources

- [Infection Control: Severe acute respiratory syndrome coronavirus 2 \(SARS-CoV-2\) | CDC](#)
- [Personal Protective Equipment \(PPE\) for Long-Term Care Settings during the COVID-19 Pandemic \(wa.gov\)](#)
- [Temporary Enforcement Guidance: Annual Fit-Testing, Respiratory Protection and Face Coverings during COVID-19 Pandemic. DOSH Directive \(DD\) 11.80 \(wa.gov\)](#)
- [Respiratory Protection Program :: Washington State Department of Health](#)
- [Community Mitigation Framework | Table 1](#)
- [DOH Quarantine Precautions Sign](#)
- [DOH/WSHA Aerosol Precautions Sign](#)
- [PPE Donning and Doffing Sequence](#)
- [COVID-19: Strategies for Optimizing the Supply of PPE | CDC](#)
- [Prioritization Guidelines for Allocation of Personal Protective Equipment \(wa.gov\)](#)
- [PPE Tracker App | NIOSH | CDC](#)
- [NIOSH PPE Tracker App Tutorial - YouTube](#)
- [PPE for Facilities | DSHS \(wa.gov\)](#)
- [Process To Request Emergency Personal Protective Equipment \(PPE\) During A Shortage](#)
- [PPE Issues in Long-Term Care Facilities Survey \(surveymonkey.com\)](#)

Questions?





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Q & A Portion

Please type your questions into the question window and tell us what type of facility you are from (e.g., ALF, SNF, AFH) and what county you are in