# COVID-19 Q&A Hour for Long Term Care: Nursing Homes and Assisted Living Facilities





#### 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).

Participants from long-term care, regulatory, public health

**Nursing Home** 



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

# Welcome to the 2021 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-19aa-session/

• Washington LeadingAge:

<u>https://www.leadingagewa.org/ill\_pubs\_articles/copy-resources-preparing-your-community-staff-residents-and-families-for-the-coronavirus/</u>

• Adult Family Home Council:

https://adultfamilyhomecouncil.org/department-of-health-qawebinars/

# Panelists







Washington State Health Care Authority







OF WASHINGTON STATE



# Send Us Your Questions Ahead of Time

Subject Line: COVID Q&A

Email: HAI-COVID@doh.wa.gov

**Due by:** COB Tuesday

## Infection Control Assessment & Response (ICAR) Program

Free, non-regulatory ICARs are a great opportunity for skilled nursing facilities, adult family homes, and assisted living facilities to:

- Ask a Department of Health infection prevention expert questions.
- Get help finding gaps in your infection control protocols.
- Receive personalized advice and recommendations for your facility.

# There are multiple ways to schedule an ICAR:

- Visit <u>https://fortress.wa.gov/doh/opinio/s?</u> <u>s=ICARconsultation</u>
- Email Chris Hankin
  <u>Chris.Hankin@doh.wa.gov</u>
- Email Melissa Feskin <u>Melissa.Feskin@doh.wa.gov</u>

#### In partnership with:

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

## PERSONAL PROTECTIVE EQUIPMENT (PPE): COVID-19 RESPONSE READINESS FOR LONG-TERM CARE





### Current Recommendations

- Per CDC guidelines, healthcare staff should wear surgical masks and eye protection (face shield or goggles) for all resident care in communities with moderate to substantial transmission.
- N95 respirator, eye protection, gowns and gloves during care of residents in quarantine or isolation.
- LNI requires fit testing for staff using N95 respirators.
- Reach out to your LHJ for assistance with fit testing. You can also email <u>Carolyn.Ham@doh.wa.gov</u> to request assistance with fit testing.
- KN95 respirators may be used if N95 respirators are unavailable.

# **3M 8000**

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Recommandé par 3M pour les petits travaux Recomendado por 3M folicaciones ligeras

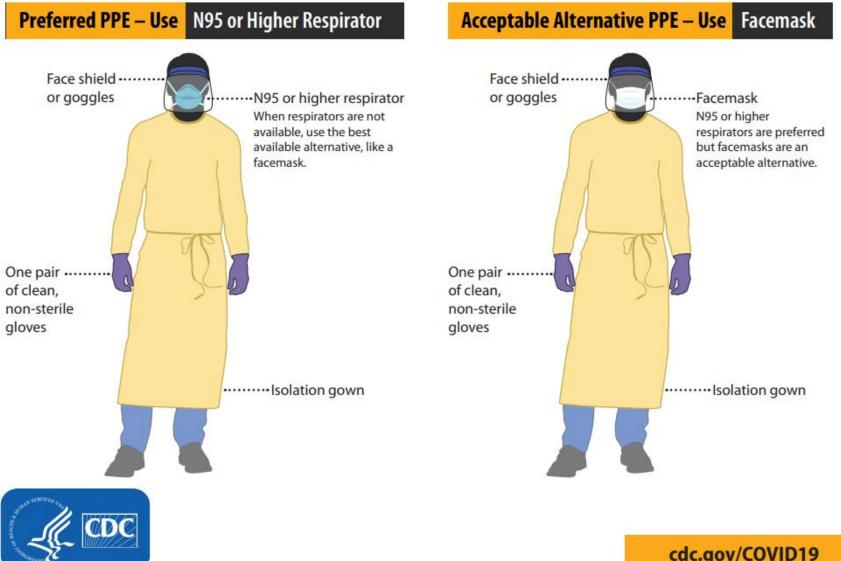
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#### Infection Control: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) | CDC Washington Coronavirus Hazard Considerations for Employers (except COVID-19 care in hospitals & clinics) Face Coverings, Masks, and Respirator Choices

## **COVID-19 Personal Protective Equipment (PPE)** for Healthcare Personnel



(\$ 315838-( 03/23/2020

COVID-19 PPE illustrations-p.pdf (cdc.gov)

cdc.gov/COVID19

## 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)

Non-COVID-19 Care Framework | CDC

#### Contingency Strategies for PPE use during COVID-19 Pandemic

Personal Protective Equipment (PPE) for Long-Term Care Settings

What To Wear	Cloth Mask (used for source control, not PPE)	Procedure Mask (medical-grade facemask, PPE)	Respirators (N95, and others)	Eye Protection	Gown	Gloves	Hand Hygiene	Comments
RESIDENTS								
Presumed or confirmed COVID+		x					x	Stay in room as much as possible. Wear mask if need to leave room or when within 6 feet of others, if tolerated. If shortages, facemasks should be prioritized for HCP.
Presumed healthy	x						x	Wear mask when out of room or within 6 feet of other residents or HCP, if tolerated.
HEALTH CARE PROFESSIONALS**								
Close contact with residents presumed or confirmed COVID+		*	x	x	x	x	x	Plus Standard Precautions and any posted Transmission- based Precautions. Extended use of N95 and eye protection may be practiced between residents of the same COVID-19 status. N95 (or other respirator) must be worn for AGPs.
Close contact with new admissions, readmissions, or potentially- exposed persons		*	x	х	x	x	x	Gowns may be prioritized for high-contact care activities or activities where splashes and sprays are anticipated as outlined in CDC crisis standards of care. If shortages, N95s (and other respirators) may be prioritized for residents with known or suspected COVID-19 and for AGPs.
Close contact with residents presumed healthy		x		x			x	Plus Standard Precautions and any posted Transmission- based Precautions. N95 (or other respirator) should be worn for AGPs.
NON-HEALTH PROFESSIONALS**								
Periodic contact with residents		x		х			x	Plus Standard Precautions.
No contact with residents		x		х			x	
VISITORS								
Visiting resident presumed COVID+	*	x		x	X	x	x	Avoid being present during AGPs.
Visiting resident presumed healthy	x							Follow LTCF Safe Start guidance.

\* only permissible if next-highest protection is unavailable

\*\* Implement universal extended use of facemask and eye protection.

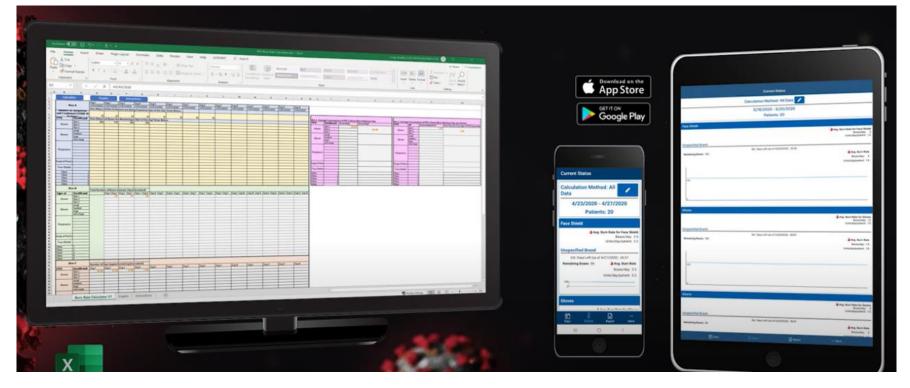
<u>Contingency Strategies for PPE use during COVID-19 Pandemic –</u> <u>Personal Protective Equipment (PPE) for Long-Term Care Settings</u> (wa.gov)

Adapted from the Minnesota Department of Health

## 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.

NIOSH PPE Tracker App Tutorial - YouTube

# **Requesting Additional PPE**

#### **PPE** Request Flow

Provider purchases PPE

#### Sources:

- Local and online medical suppliers
- Local and online retail stores

If critical shortage or PPE unattainable, contact local emergency management.

• Refer to the EMA directory below.

If EMA unable to supply, contact ALTSA Incident Management.

- Contact ALTSA Incident
  Management:
- ppebranch.ltcimt@dshs.wa.gov



#### STATE OF WASHINGTON DEPARTMENT OF SOCIAL AND HEALTH SERVICES Aging and Long-Term Support Administration P.O. Box 45600, Olympia, Washington 98504-5600

January 28, 2021

ALTSA: AFH #2021-004 ALTSA: ALF #2021-003 ALTSA: CCRSS #2021-003 ALTSA: ESF #2021-003 ALTSA: ICF/IID #2021-003 ALTSA: NH #2021-008 PROCESS TO REQUEST EMERGENCY PERSONAL PROTECTIVE EQUIPMENT (PPE) DURING A SHORTAGE

Dear Administrator / Superintendent / Provider:

We acknowledge that access to personal protective equipment (PPE) has been difficult during the pandemic. In general, all long-term care facilities and agencies must purchase necessary PPE. However, if your facility has a shortage of PPE, you may request an emergency supply.

#### NORMAL CONDITIONS (NO SHORTAGE)

Under normal conditions, long-term care facilities and agencies must purchase all necessary PPE through the open market. It is the responsibility of the facility or agency to outfit workers with the PPE required to safely perform their duties and comply with Washington State Department of Labor & Industries (L&I) <u>Coronavirus Hazard Considerations for Employers</u> and Centers for Disease Control and Prevention (CDC) infection control guidance.

#### SHORTAGE CONDITIONS (10 TO 20 DAYS OF SUPPLY)

If your PPE inventory falls below 20 days of projected use, you may request an emergency supply from your <u>local emergency management agency</u> (EMA). Typically, EMAs will have PPE supply to provide an emergency amount for a facility or agency. PPE delivery lead time may be as long as 10 days.

PROCESS TO REQUEST EMERGENCY PERSONAL PROTECTIVE EQUIPMENT (PPE) DURING A SHORTAGE

## Web Resources

- Infection Control: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) | CDC
- Washington Coronavirus Hazard Considerations for Employers (except COVID-19 care in hospitals & clinics) Face Coverings, Masks, and Respirator Choices
- <u>Personal Protective Equipment (PPE) Burn Rate Calculator | CDC</u>
- <u>COVID-19\_PPE\_illustrations-p.pdf (cdc.gov)</u>
- Non-COVID-19 Care Framework | CDC
- <u>Contingency Strategies for PPE use during COVID-19 Pandemic Personal</u> <u>Protective Equipment (PPE) for Long-Term Care Settings (wa.gov)</u>
- NIOSH PPE Tracker App Tutorial YouTube
- PPE for Facilities | DSHS (wa.gov)
- Process To Request Emergency Personal Protective Equipment (PPE) During <u>A Shortage</u>

# Questions?







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.

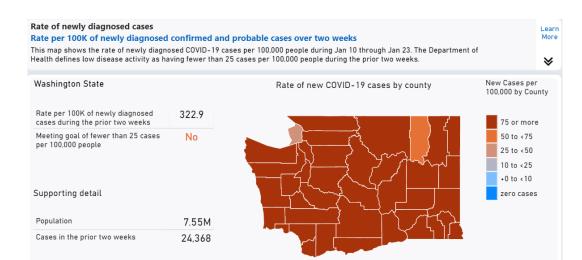
## LTCF Safe Start update:

#### Road to Recovery Phases ≠ LTCF Safe Start Phases

LTCF Phases are by county not region:

Phase 1: >75 cases/100,000 Phase 2: 25-75 cases/100,000 Phase 3: 10-25 cases/100,000

Phase 4: <10 cases/100,000



#### Where to find incidence:

https://coronavirus.wa.gov/what-you-need-know/roadmap-recoverymetrics#RiskAssessmentDashboard

# I'm vaccinated...now what?

We are continuing to monitor and guidance may change in the future, but for now...

Vaccinated HCW:

- Am I still excluded from work if exposed? Yes.
- Do I still need to wear all recommended PPE? Yes.

Vaccinated Residents:

- Do residents still need to be placed in quarantine for 14 days? Yes.
- Are there any changes to visitation or any components of LTCF Safe Start? No.

Everyone:

• Do I still need to wear source control (face mask) and maintain distancing if I've been vaccinated?

Yes.