



Steps to Limit COVID-19 Spread and Outbreaks in Long Term Care

COVID-19 spreads principally person-to-person. Every interaction between people increases the risk of spread, particularly now that the virus is in most areas of the United States.

GOAL: Minimize the number of interactions with residents by:

- 1. reducing the number of various (non-essential) people entering the building;
- 2. targeting the number of interactions with residents by:
 - a. reducing the number of <u>different</u> staff entering a resident's room
 - b. increasing efficiency of tasks when entering in a resident's room to decrease the number of <u>times</u> staff enter

The typical symptom-based approach to control respiratory viral spread outbreaks cannot be the only or principle component to prevent COVID-19 spread. This virus is not typical.

- Data just released from CDC shows that in the general population, 6 to 12% of new cases of COVID-19 are the result of viral spread from asymptomatic individuals who are shedding the virus for 1-3 days before showing symptoms.
- In nursing homes, a second study by CDC in a WA nursing home, found that 57% of residents who tested positive for COVID-19 were asymptomatic but shedding virus at levels that made them probably infectious to others for up to 7 days before developing symptoms.

Therefore, CDC does not recommend using a symptom-based approach solely.

If you wait for a positive test, it's probably too late, since it can come into the facility and be silently spreading before you see symptoms in staff or residents.

To target interactions between residents and staff, explore as many ways you can feasibly do to limit contact, such as:

- Implement physical distancing among your staff as much as possible.
- **Minimize any and all staff working across units.** This may not be possible for certain types of staff positions, but explore ways to limit the number of times these individuals enter rooms and interact with each resident.
- Limit the number of different staff going into each resident's room and increase efficiency of tasks when entering a resident's room to reduce the number of entries. Look for ways to bundle care and other activities that need to be done when entering the room. This may mean CNA's will perform house cleaning activities when they go into a room in addition to ADL care.
- If COVID-19 enters the building, consider using "source control" masks on residents and staff to prevent spread. Source control masks that can include cloth masks are not the same as surgical masks or N-95 and are not a substitute for use in transmission-based precautions during care.

Ask yourself, what can you reasonably do to reduce the number of interactions?

It's a simple formula for how spread happens – the more interactions that happen with a variety of people, the greater the chance of spread. So, continue to creatively reduce the number of interactions between people and stop the spread of this deadly virus.

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