Coronavirus:
Stay calm. Be prepared.

Guidance and recommendations compiled from the Centers for Disease Control and Prevention and the World Health Organization.

Updated 03/04/2020

The coronavirus / COVID-19 situation is rapidly changing.

All recommendations in this document are based on guidelines provided by the Centers for Disease Control (CDC).

Always follow any guidance or instructions from health care providers; local or state health departments; state regulatory agencies; and your organization’s policies and procedures.
Introduction

The information contained herein is adapted from the Centers for Disease Control and Prevention and the World Health Organization. The Coronavirus situation is rapidly changing. Follow any guidance or instructions from health care providers; local or state health departments; state regulatory agencies; and your organization’s policies and procedures.

What is the Coronavirus?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China. COVID-19 is a disease caused by a new coronavirus, which has not been previously identified in humans. Coronaviruses are a large family of viruses found in both animals and humans.

Symptoms of COVID-19

For confirmed coronavirus disease 2019 (COVID-19) cases, reported illnesses have ranged from mild symptoms to severe illness and death. Symptoms can include:

- Fever
- Cough
- Shortness of breath / difficulty breathing

Currently the CDC believes that symptoms can appear between 2-14 days after exposure.

Treatment

There is no specific antiviral treatment nor vaccine for COVID-19 at this time. People with COVID-19 should receive treatment and care to help relieve symptoms.
Transmission

There is still more to be learned, but according to the CDC, the virus is thought to spread mainly from person-to-person.

- Between people who are in close contact with one another (within about 6 feet)
- Via respiratory droplets produced when an infected person coughs or sneezes.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

Be Prepared

Our senior living communities serve a population that is generally more vulnerable to infection and serious related symptoms. We encourage everyone to remain calm, but take the time to prepare your community now:

1. Visitors
   - Ask people not to visit your community if they have or have been exposed to someone with symptoms.
   - Post appropriate signage
   - Ensure hand sanitizer is readily available at entrances
   - Consider cancelling or rescheduling group visitors/outing
   - Talk to home health, hospice and other outside agencies to ensure your infection control efforts are being coordinated

2. Encourage Good Respiratory Hygiene
   - Cover your mouth and nose with a flexed elbow or tissue when coughing and sneezing. Throw away the used tissue immediately and wash your hands with soap and water or use an alcohol-based hand rub.
   - Maintain social distance – If possible, keep a distance of 3 feet between yourself and someone who is coughing, sneezing or has a fever.
• Avoid touching your eyes, nose and mouth – Hands touch many surfaces which can be contaminated with the virus. If you touch your eyes, nose or mouth with your unclean hands, you can transfer the virus from the surface to yourself.

3. Perform Hand Hygiene
• This can be done with an alcohol-based hand sanitizer with at least 60% alcohol or by washing hands with soap and water for at least 20 seconds.
• Especially after going to the bathroom; before eating; before and after all resident care; and after blowing your nose, coughing, or sneezing.
• Always wash hands with soap and water if hands are visibly dirty.

4. Perform Routine Environmental Cleaning
• Routinely clean frequently touched surfaces (e.g., doorknobs, light switches, countertops) with the cleaners typically used.
• Use all cleaning products according to the directions on the label.
• Management of laundry, food service utensils, and medical waste should also be performed in accordance with routine procedures.

5. Facemasks
• The CDC does not recommend that people who are well wear a facemask to protect themselves from respiratory diseases, including COVID-19.
• Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others.
• The use of facemasks is also crucial for health workers and people who are taking care of someone in close.
6. Prepare your employees – We want our staff to be informed and prepared. Your review should include:
   - Infection control policies including hand hygiene, cough etiquette
   - Personal protective equipment
   - Staying home when sick
   - Acknowledge the situation and focus on facts from verified resources, such as the CDC and the WHO
   - A CDC guide on donning and removing personal protective equipment is included in this handout
   - A webinar recording is available to view with your staff by clicking the link below. Keep in mind this webinar was recorded on March 3, 2020 and information may have changed since, so always follow current CDC and health department guidelines:

   LINK TO WEBINAR

7. Gather supplies – You will want to have supplies on hand in the event your community is directly impacted by the outbreak, including:
   - Personal protective equipment (gloves, masks, gowns, eye protection)
   - Hand hygiene supplies
   - Disinfecting supplies (bleach, etc.)
   - Apartment meal delivery supplies (Styrofoam, paper, plastic, cups, utensils)

8. Review infection control protocols, with a focus on hand hygiene, droplet/respiratory precautions, and personal protective equipment.

9. Develop a communication plan – Give clear and direct communication to your staff, residents, and families. Be prepared to communicate with the media should you be approached. Focus on letting everyone know you are following CDC and health department guidelines.
If Someone Has Symptoms

If you believe someone has COVID-19 seek medical attention and report immediately to your health department.

Visitors with active symptoms of respiratory illness should be asked to stay away from your community.

Employees with symptoms of respiratory illness should be asked to stay home. Employees with a confirmed case of COVID-19 should be asked to stay home from work until cleared by a medical provider.

If a resident displays symptoms of respiratory illness:

1. Isolate the resident in his/her apartment and limit contact as much as possible.

2. Implement standard, contact, and droplet precautions. This includes the use of appropriate personal protective equipment, including gloves, disposable gown, mask, and eye protection.

3. Seek immediate medical care and inform them of the resident’s condition and symptoms.

4. Contact the health department and follow all directions.
Webinar Recording

A webinar recording that covers this information and more is available to view with your staff by clicking the link below. Keep in mind this webinar was recorded on March 3, 2020 and information may have changed since, so always follow current CDC and health department guidelines:

[LINK TO WEBINAR]
CORONAVIRUS UPDATE
For Senior Living Providers

During this Course:
- What is coronavirus?
- Symptoms and severity
- Transmission
- Impact in the US
- Be prepared
What is Coronavirus?

- A new type of coronavirus
- Causes respiratory illness in people
- Can spread from person to person
- First identified in Wuhan, China

Novel coronavirus
Coronavirus Disease 2019
COVID-19
3/4/2020

Symptoms

• Mild to severe respiratory illness
• Fever
• Cough
• Shortness of breath

Severity

• Range from mild illness to death
• Pneumonia
• Over 90,000 cases worldwide
• Over 3000 deaths
**Treatment**
- There is no specific treatment
- Treat symptoms
- There is no vaccine

**Impact in the U.S.**
Impact in the U.S.

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<table>
<thead>
<tr>
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<tbody>
<tr>
<td>Total Cases</td>
<td>60</td>
</tr>
<tr>
<td>Total Deaths</td>
<td>6</td>
</tr>
<tr>
<td>States Reporting Cases</td>
<td>12</td>
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As of March 2, 2020

What to Expect

- According to the CDC, more cases are likely
- Person-to-person spread will continue
- Community spread will continue
- Our communities may be impacted

Transmission
Person-to-Person Transmission
- Person-to-person
- Close contacts (within about 6 feet).
- Respiratory droplets
- Droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs

Contact with Infected Surfaces
- Possibly spread by touching a surface or object that has the virus on it
- Then touching mouth, nose, or eyes
- Not thought to be the main way the virus spreads
Spread Without Being Sick?

- Most contagious when they are most symptomatic
- Some spread might be possible before people show symptoms
- Not thought to be the main way the virus spreads

Stay Calm - Be Prepared
U.S. Deaths from Influenza

Be Prepared

Prevent Introduction
Visitors

- Ask people not to visit your community if they have or have been exposed to someone with symptoms.
- Post appropriate signage
- Ensure hand sanitizer is readily available at entrances
- Consider cancelling or rescheduling group visitors/outings

Employees

- Ask them to stay home if they have symptoms of respiratory infection

Residents

- Monitor existing residents for symptoms
- Screen new residents prior to move in for symptoms
Others

- Outside caregivers
- Private duty
- Home health
- Hospice

Prevent Spread

- Hand hygiene frequently
- Cover mouth and nose when coughing/sneezing
- Maintain social distance (3+ feet)
- Avoid touching eyes, nose, mouth
Hand Hygiene – CDC Guidelines

<table>
<thead>
<tr>
<th>Alcohol-Based Hand Sanitizer</th>
<th>Wash with Soap and Water</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Most effective</strong> products for reducing the number of germs on the hands of healthcare providers</td>
<td>Use whenever they are visibly dirty, before eating, and after using the restroom</td>
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<tr>
<td><strong>Preferred method for cleaning your hands in most clinical situations</strong></td>
<td>Use after caring for a person with known or suspected infectious diarrhea</td>
</tr>
<tr>
<td></td>
<td>Use if hand sanitizer is not available</td>
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</tbody>
</table>

Hand Hygiene - When
- Immediately before touching a resident
- Before moving from work on a soiled body site to a clean body site on the same resident
- After touching a resident
- After touching a resident’s immediate environment
- After contact with blood, body fluids or contaminated surfaces
- Immediately after glove removal
- Before/after eating
- Immediately after using the restroom

Environmental Infection Control
- Common areas
- Frequently touched surfaces
- EPA-registered disinfectants
- At least daily
Respond to Symptoms

If a Resident Has Symptoms

- Isolate
- Implement precautions
- Seek Medical attention
- Report to health department

Isolate
- Ask resident to stay in his/her apartment
- Separate roommates or isolate together
- Minimize staff activity in the apartment to what is necessary
- Limit movement out of room (resident should wear a mask)
- Disposable or single use care equipment
Precautions

- Standard precautions
- Contact Precautions
- Droplet Precautions

Personal Protective Equipment (PPE)

- Gloves
- Gown
- Mask
- Eye protection

Seek Medical Attention

- Notify physician/PCP
- Nonemergency transport
- 911
- Notify responsible party
Report to Health Department

- Excellent resource for further direction
- Ensure appropriate testing
- Help us determine what to do next

Gather Supplies

- PPE
- Hand hygiene supplies
- Disinfecting supplies
- Disposable meal service supplies
Education

Educate Staff

- Infection control policies and procedures
- Signs and symptoms
- Prevention efforts / precautions
- Regular updates
- Document

Educate Residents and Families

- Following CDC and health department guidance
- Monitoring the situation
- Implementing infection control protocols
- Monitoring residents
- Reminding people to stay home if sick
CORONAVIRUS UPDATE
For Senior Living Providers
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
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
HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. 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. GOWN AND GLOVES
   • Gown front and sleeves and the outside of gloves are contaminated!
   • If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
   • Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
   • While removing the gown, fold or roll the gown inside-out into a bundle
   • As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into 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 and without touching the front of the goggles or face shield
   • If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container

3. 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

4. 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