COVID Outbreak Control in Adult Care Facility

Updated 6/5/2023

Prepare

- Vaccinate all residents and staff
  - Clackamas: PHIDCP@Clackamas.us
  - Multnomah: 503-988-8939
  - Washington:https://www.washingtoncountyor.gov/disease-control/vaccine-information
- Have a COVID testing plan in place
- Promote handwashing and covering coughs
- Order a 14 day supply of Personal Protective Equipment (PPE). Use PPE Calculator to estimate how much to order.

Identify & Report

- Monitor and test residents and staff who have symptoms of illness
- When two or more residents or staff members have COVID:
  - Notify licensor
  - Notify local health department to report
    - Clackamas: **PHIDCP@clackamas.us**
    - Multnomah: **503-988-3406**
    - Washington: **HHSPublicHealth_DCAP@washingtoncountyor.gov**

Stop the Spread

When COVID is suspected in the home:

- Isolate positive or sick residents
- Test all residents and staff after a case is discovered, even people without symptoms
- Avoid group activities
- Monitor residents and staff
- Wear N95's in facility and full PPE with sick residents

Treat

- Notify residents' medical providers as soon as possible to discuss antiviral medication
- Monitor for worsening symptoms and contact medical provider for changes in condition

Stop the Spread of COVID

Isolate positive residents for 10 days

- Separate sick residents or residents with COVID to stop the spread of illness
- Keep resident in a private room with private bathroom if possible
- Keep the bedroom door closed if it is safe to do
- If resident must come out of room, mask the resident, have them wash their hands when leaving room, clean and disinfect surfaces they touch, and keep them 6 feet from other residents if possible

Wear full PPE with residents who are sick or have COVID

- Wear a NIOSH approved N95, gown, eye protection, and gloves when in the positive or sick resident's room, or within 6 feet of the resident
- Remove PPE; disposable gown and place in trash (reusable gowns in soiled linen bin), then discard gloves before leaving resident room. Clean hands before removing N95, throw away in separate area of house. Disinfect eye protection.
- Use PPE for 10 days after resident's symptoms started. If no symptoms, use PPE for 10 days after they tested positive.

Check all residents for COVID during outbreak

- Closely check every resident for symptoms at least 2 times a day, including fever, weakness, cough, sore throat, headache
  - Isolate and test residents with symptoms
- Check all residents for COVID by testing them every 48 hours until they have had 3 tests or have a positive result
  - Residents who have had COVID in the last 90 days do not need to be tested unless symptomatic.

Avoid social activities

- Serve meals in rooms and keep all residents in rooms as much as possible
- Find alternative activities to discourage residents gathering together
- Mask and distance residents who must be out of their rooms
- Resume group activities after at least 7 days have passed since the last case.
- Screen visitors for symptoms and limit non-essential visits (refer to licensor for regulations)
- Provide masks and hand hygiene for visitors

Staff: Stay home when sick

- Monitor for symptoms of fever, sore throat, headache, cough, shortness of breath, runny nose, nausea, vomiting, diarrhea, or loss of smell or taste
- Stay home when sick (avoid common rooms and residents for live-in staff).
- Test for COVID. If rapid antigen test is negative, then repeat in 48 hours.
- If negative for COVID, return to work after 24 hours without fever and feeling better.
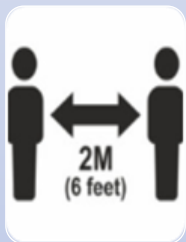
No work for staff with COVID

- **Outside staff**: Stay home for 10 days. May return to work if negative antigen COVID test on day 5 and 7, fever is gone, feeling better, and continue to wear a mask at work.
- **Live-in staff**: No contact with residents and stay out of communal areas for 10 days (or may return earlier if negative antigen COVID test on day 5 and 7, fever gone, feeling better, and mask for additional 3 days).

Test staff who have been exposed

- Wear a NIOSH approved N95 respirator mask when in the home
- Self-monitor for symptoms every day
- Stay home if sick and test for COVID
- Test staff 3 times. Start testing 24 hours after exposure and then every 48 hours.
- Additional testing is no longer required for an individual once they have a positive result.

Stop spread of COVID between staff

- Encourage all staff to wear a NIOSH approved N95s throughout the home during an outbreak
- Avoid more than one person unmasked at a time for breaks or smoking
- Maintain 6 feet distancing
- Discourage working between different homes

Decrease germs in the home

- Clean and disinfect high touch surfaces daily and more often after sick residents have had contact
  - Focus on doorknobs, handles, rails, tables, chairs, bathrooms, and communal areas
- Allow fresh air into the home as much as possible.
  - Open windows and outside doors, even if only for a few minutes

Clean hands frequently

- Place hand sanitizer throughout the home where it is safe to do so
- Encourage residents to clean their hands frequently; when leaving or entering their room, and in communal areas
- Remind staff to clean hands between contact with residents, after contact with sick resident, in common areas, before and after food prep, after touching something dirty, and after removing gloves

Resources for Operators

OHA Interim Summary of Long-Term Care Facility Infection Control Policies for COVID-19 and other Respiratory Pathogens – 8 page table outlining infection control recommendations on screening, visitation, cleaning, PPE, ventilation, hand hygiene, vaccines, testing, work exclusion, and more.

OHA At-A-Glance Infection Control for Respiratory Pathogens – Table explaining PPE use and staff work exclusion for COVID, flu, and RSV

Long-term Care Facilities Webpage - Many helpful documents explaining things about PPE, cleaning, ordering supplies, shared rooms, group activities, visitation, respiratory protection, and much more!

CDC Stay Up to Date with COVID-19 Vaccines Including Boosters – Explains what it means to be up-to-date

CDC Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic – Describes best practice for managing COVID in long-term care facilities.

CDC Interim Guidance for Managing Healthcare Personnel with COVID-19 Infection or Exposure – What to do when staff are exposed or get COVID.