COVID-19:
What Assisted Living Facilities, PACE Sites, Adult Day Centers and Group Homes Need to Know

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COVID-19 OUTBREAK IN CHINA

Findings Published by the World Health Organization

Report of the WHO-China Joint Mission
on Coronavirus Disease 2019 (COVID-19): 16-24 February 2020

Submitted February 28, 2020

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COVID-19 Signs and Symptoms among Confirmed Cases Reported in China

Sign or symptom*	%
Fever	87.9
Dry Cough	67.7
Fatigue	38.1
Sputum	33.4
Shortness of breath	18.6
Myalgia or arthralgia	14.8
Sore throat	13.9
Headache	13.6
Chills	11.4
Nausea or vomiting	5.0
Nasal congestion	4.8
Diarrhea	3.7

*Among 55,924 confirmed cases

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Key Findings from the WHO-China Report (as of 2/20/20)

Age

Median Age: 51 years

Range: 2 days - 100 years

30-69 years: 77.8%

<19 years: 2.4%

Sex

Male: 51.1%

Female: 48.9%

Spectrum of Disease

Mild: 80%

Severe: 13.8%

Critical: 6.1%

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Key Findings from the WHO-China Report (as of 2/20/20)

Duration of Illness

Mild Disease: ~2 Weeks

Severe or Critical Disease: 3-6 Weeks

Onset to Severe Disease: 1 Week

Onset to Death: 2-8 Weeks

Severe Disease or Death

Increased with Age

Case-fatality Rate >80 Years: 21.9%

Case-fatality Rate in Males: 4.7%

Case-fatality Rate in Females: 2.8%

Severe Disease <19 Years: 2.5%

Critical Disease <19 Years: 0.2%

Case-fatality Rate by Comorbidity

No Comorbidity: 1.4%

Cardiovascular Disease: 13%

Diabetes: 9.2%

Hypertension: 8.4%

Chronic Respiratory Disease: 8.0%

Cancer: 7.6%

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Key Findings from the WHO-China Report (as of 2/20/20)

Pregnant Women (n=147)

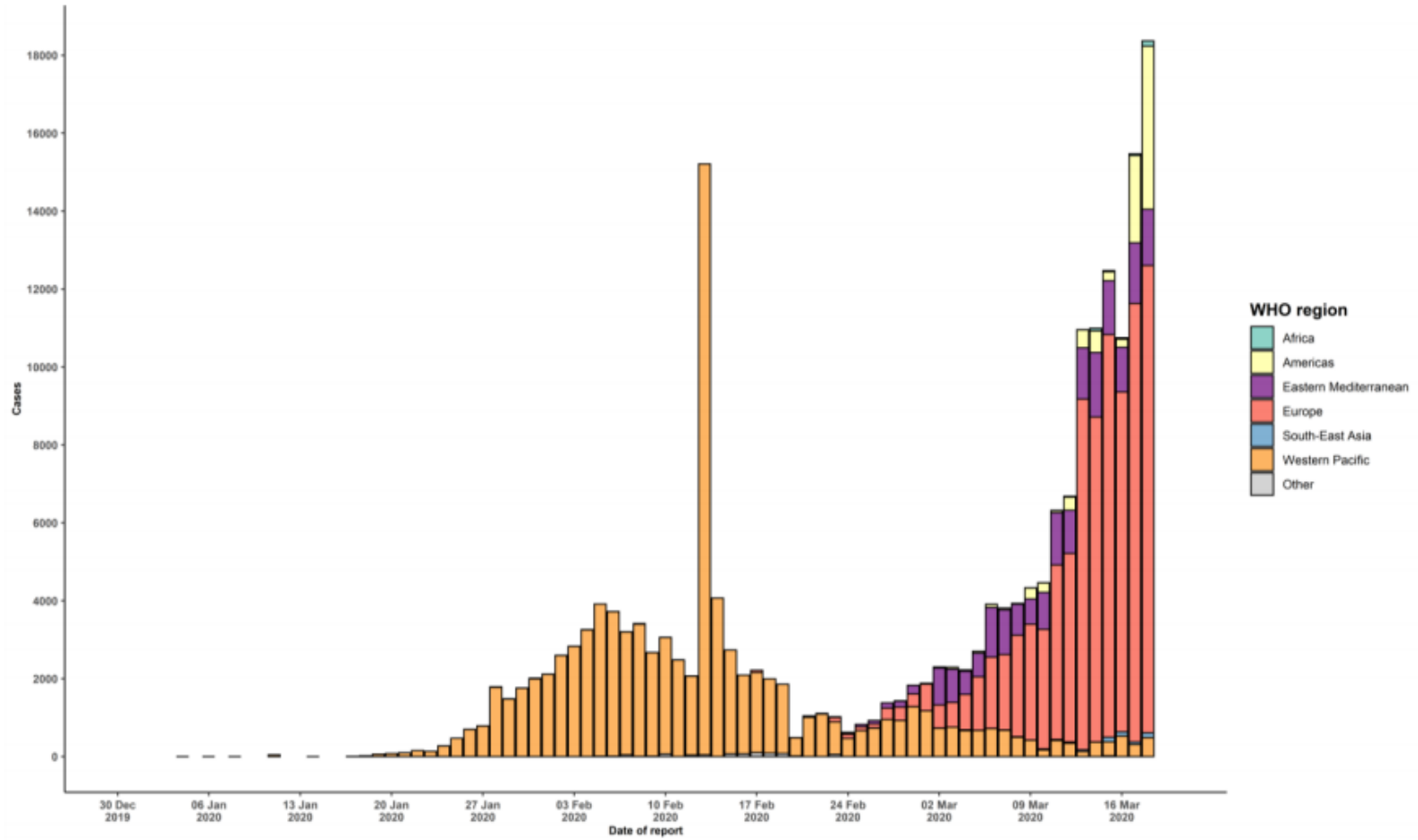**64 Confirmed Cases**

Severe Disease: 8%

Critical: 1%

Healthcare Personnel

2,055 Confirmed Cases

476 Hospitals across China

88% from Hubei Province

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Epidemic Curve of COVID-19 Cases by Date and WHO Region

As of March 19, 2020

www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports

Distribution of COVID-19 cases as of 19 March 2020

States Reporting Cases of COVID-19 to CDC

As of 3/19/20, Total U.S. Cases = 10,442; Total U.S. Deaths = 150

States Reporting Cases of COVID-19 to CDC*
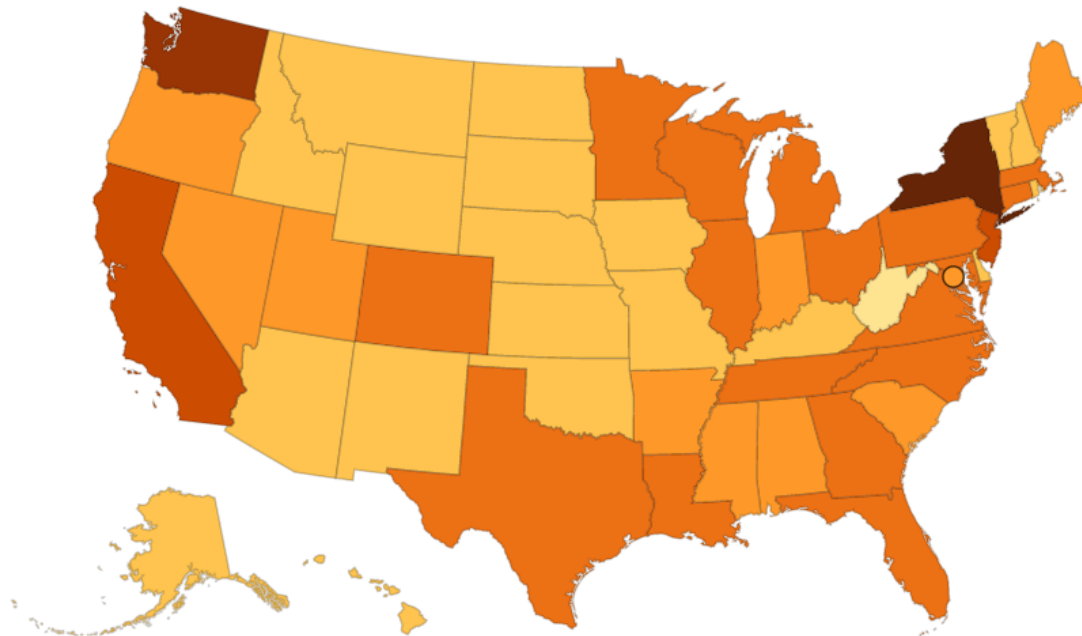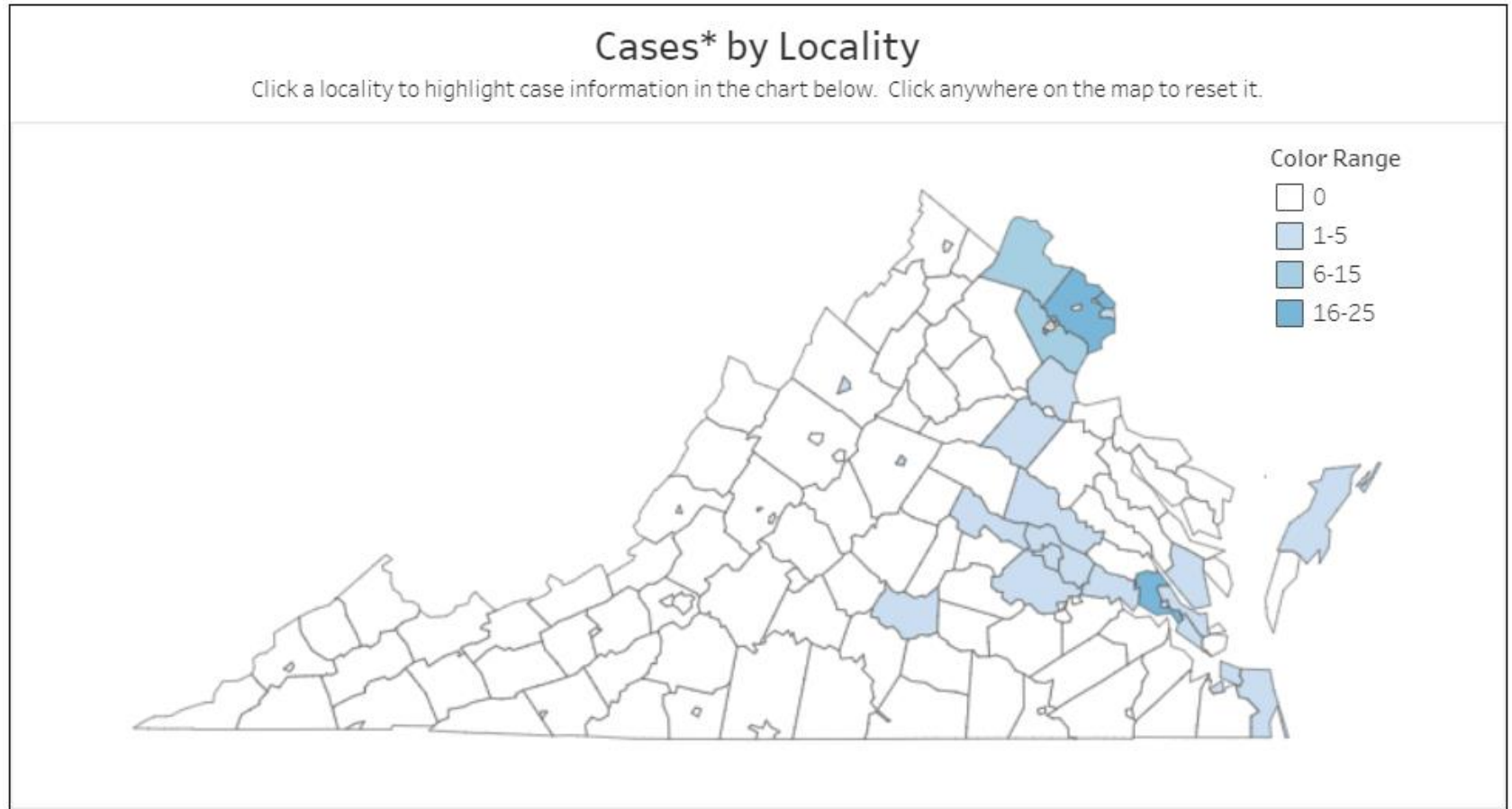
Reported Cases
- None
- 1 to 5
- 6 to 10
- 11 to 20
- 21 to 50
- 51 to 100
- 101 to 200
- 201 to 500

Territories: AS GU MH FM MP PW PR VI

COVID-19 Cases in Virginia

As of 3/20/20, Virginia has 114 cases of COVID-19

Cases* by Locality

Click a locality to highlight case information in the chart below. Click anywhere on the map to reset it.

Color Range
- ☐ 0
- ☐ 1-5
- ☐ 6-15
- ☐ 16-25

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Guidance for Assisted Living Facilities and other Adult Group Settings

Infection Control

- Review and update your infection control and preparedness plans
- Minimize chance for exposures
- Adherence to Standard, Contact Precautions, and Droplet Precautions as appropriate, including the use of eye protection
- Manage visitor access and movement within the facility/community
- Monitor and manage ill and exposed healthcare personnel and other staff
- Train and educate healthcare personnel and staff
- Implement environmental infection control

www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html

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Environmental Cleaning

- Products with EPA-approved emerging viral pathogens claims are recommended for use against COVID-19

- Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, PPE)

> Refer to List N on the EPA website for EPA-registered disinfectants that have qualified under EPA's emerging viral pathogens program for use against SARS-CoV-2

CDC Guidance

COVID-19 Preparedness Checklist for Nursing Homes and other Long-Term Care Settings https://www.cdc.gov/coronavirus/2019-ncov/downloads/novel-coronavirus-2019-Nursing-Homes-Preparedness-Checklist_3_13.pdf

Guidance for Long-Term Care Settings may be adaptable for aspects of assisted living and other group home settings: https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html

Guidance for Environmental Cleaning and Disinfection:

https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html

Guidance for Home Care on non-healthcare settings:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html

CMS Guidance

- Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in nursing homes (REVISED March 9, 2020) http://www.vdh.virginia.gov/content/uploads/sites/13/2020/03/CMS_Nursing-Homes_March92020.pdf

  - Can be adopted by assisted living and other group home settings

  - Questions and answers for transfers and admissions

Virginia Guidance

- VHCA/VCAL COVID-19 Screening Toolkit
  https://www.vhca.org/files/2020/03/VHCA-VCAL-COVID-19-Screening-Toolkit.pdf
  - Includes resources from America Health Care Association/National Center for Assisted Living
  - Screening logs
  - Healthcare Coalition contacts

Actions to Take Now – Facility Wide
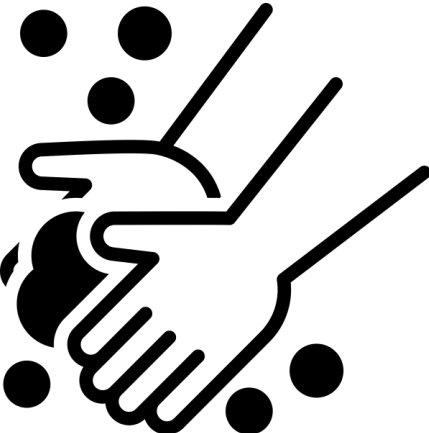
- Review and update your infection control and preparedness plans
- Educate Residents/Families, Healthcare Personnel (HCP), Staff and Visitors
  - Share the latest information on COVID-19
  - Post signage to assist with education and to encourage appropriate hygiene and prevention measures
  - Educate and train HCP including facility based personnel, consultants, and volunteers

Actions to Take Now - Facility Wide

- Restrict all visitors (except for compassionate care situations, e.g., end of life)
- Enforce social distancing measures
  - Cancel large gatherings (e.g., including group social events with 10 or more people)
  - Cancel all group activities and close communal dining facilities
  - Cancel all field trips outside the facility
  - Prepare alternative options for meal delivery and assistance
  - Alter schedules to reduce mixing and reduce group size (e.g., staggering of meal times)
- Consider suspension of accepting new residents/participants
- Restrict all volunteers and programs with external staff (e.g., barber)

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Nonpharmaceutical Interventions

Actions to Take Now - Facility Wide

- Provide and actively monitor supplies for recommended infection prevention and control practices
    - Ensure all sinks are well stocked with soap and paper towels
    - Add alcohol-based hand sanitizer with 60-95% alcohol in every resident room
    - Have respiratory hygiene and cough etiquette supplies available
    - Consider designating staff to steward these supplies and encourage appropriate use
- Ensure appropriate environmental cleaning and disinfection products are available to allow for frequent cleaning of high touch surfaces and shared equipment
    - Refer to List N https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2 on the EPA website for the registered list that qualify under EPA's emerging viral pathogens program for use against SARS-CoV-2

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Actions to Take Now

- Have necessary personal Protective Equipment (PPE) available in resident care areas
- Supplies of PPE needed include:
  - Facemasks
  - Respirators (if available and the facility has a respiratory protection program with trained, medically cleared, and fit tested HCP)
  - Gowns
  - Gloves
  - Eye protection (i.e., face shield or goggles)
- Plan to optimize your facility's supply of PPE and EPA-registered hospital grade disinfectants due to ongoing shortages
  - Report any facility supply chain issues to the Regional Healthcare Coalition https://vhass.org/regional-info/

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Minimum PPE Requirements for Suspected or Confirmed COVID-19

Providers in Close Contact

Hand Hygiene

Goggles or Face Shield

Gown

Gloves

N95 Respirator

or

Facemask

Patients

Hand Hygiene

Facemask

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PPE Prioritization

Prioritize PPE if supply chain disruption:

- **N95 respirators** – aerosol-generating procedures
- **Gowns** – aerosol-generating procedures, activities where splashes and sprays are anticipated, high-contact patient activities
- **Facemasks** – direct care personnel

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Actions to Take Now: Staff/Administration

- Actively screen all HCP for fever and respiratory symptoms before starting each shift
  - Send them home if they are ill
- Actively monitor HCP/staff absenteeism and respiratory illness
- Develop non-punitive sick leave policies that allow and encourage staff to stay home when ill
- Develop or review existing plans to mitigate staffing shortages

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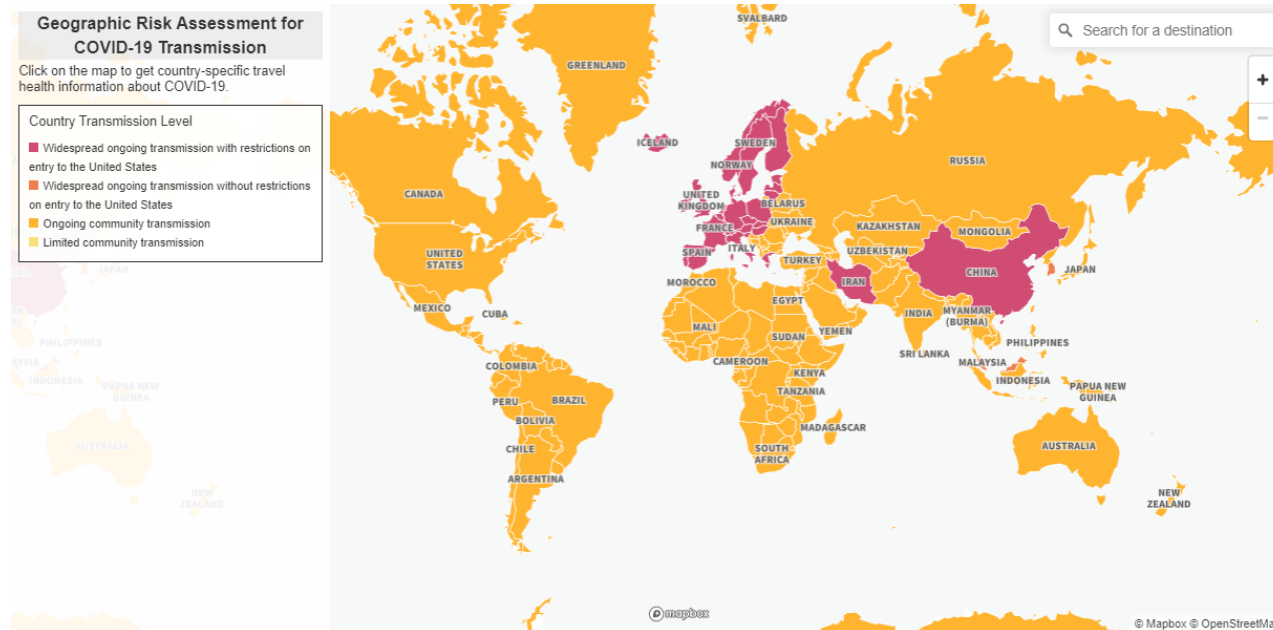
Actions to Take Now: Residents/Participants

- Consider having residents stay in facility and limit exposure to the general community
  - If residents must leave facility for medically necessary purposes (e.g., hemodialysis), have them wear a facemask
- Actively screen all residents/participants at least daily for fever and respiratory symptoms
- Encourage rescheduling of elective and non-essential healthcare procedures
- Improve access and encourage use of remote/ electronic enrichment activities and communication routes
- Encourage residents/participants to self-report possible signs/symptoms of COVID-19

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PUBLIC HEALTH SYSTEM RESPONSE

Travel Notices and Restrictions (as of 3/18/20)

Geographic Risk Assessment for COVID-19 Transmission

Click on the map to get country-specific travel health information about COVID-19.

Country Transmission Level
- Widespread ongoing transmission with restrictions on entry to the United States
- Widespread ongoing transmission without restrictions on entry to the United States
- Ongoing community transmission
- Limited community transmission

- CDC recommends travelers, particularly those with underlying health issues, defer all cruise ship travel
- Entry of foreign nationals from many destinations has been suspended

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Public Information

Comprehensive public information campaign - media, webpage http://www.vdh.virginia.gov/coronavirus/, 211 call center (**1-877-ASK-VDH3**), targeted communications

Virginia Reporting Requirements

COVID-19 is a reportable condition

Healthcare providers are legally required to report all suspected cases and confirmed cases to the local health department **immediately**

Healthcare providers are encouraged to report cases using our online electronic reporting tool whenever possible

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Locate your Local Health Department

www.vdh.virginia.gov/health-department-locator/
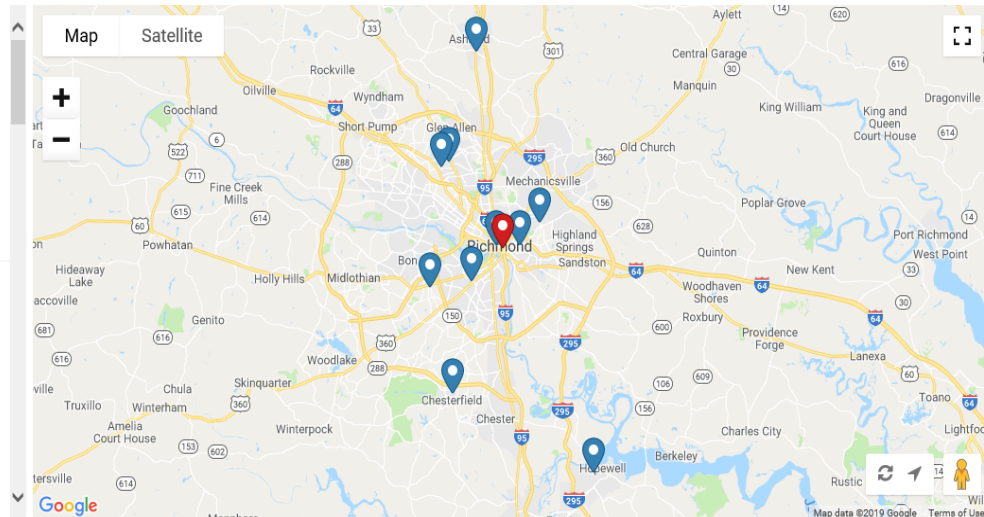
COVID-19 Testing Availability

Virginia Public Heath Lab (DCLS)

- Testing specimens as of February 29, 2020
- VDH approval required - specimens should not be sent without approval
- Specimen collection guidance available on DCLS website

Private Labs

- Select private labs are able to perform testing as of March 6, 2020
- VDH approval is not necessary
- Contact your lab provider to determine testing availability

Clinical Management

- Currently no specific antiviral treatment
- Prompt infection prevention and control and supportive management of complications is recommended
- Patients with mild illness might not initially require hospitalization
- Signs and symptoms might worsen in 2nd week of illness
- Decision to monitor patient in an inpatient or outpatient setting is made on case-by-case basis
- Avoid corticosteroids unless indicated for other reasons

List of treatments and vaccines in development
www.clinicaltrialsarena.com/analysis/coronavirus-mers-cov-drugs/

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Transporting Suspected COVID-19 Patients

If a patient with suspected or confirmed COVID-19 needs transported:

- Provide patient with a facemask
- Call ahead to receiving facility regarding symptoms and risk factors
- Keep the patient separated from other people as much as possible
  - Family members and other contacts of patients should **<u>not</u>** ride in the transport vehicle, if possible
    - If riding in transport vehicle, a facemask should be worn
- Contact your local health department to report suspected COVID-19 case
- Keep a log of all clinicians and other persons and their level of patient contact

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Guidance on Assessment and Monitoring of Healthcare Contacts

- If COVID-19 is identified, healthcare personnel are assessed and classified as high-, medium-, or low-risk depending on multiple factors
  - Exposure duration, patient symptoms, if patient was wearing facemask, aerosol-generating procedures, and type of PPE used by healthcare personnel
- Recommendations for monitoring for COVID-19 and work restrictions depend on exposure risk classification
- LHD will work with each facility to outline roles and responsibilities

VDH Healthcare Personnel Risk Assessment Tool

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Guidance on Home Care of People Not Requiring Hospitalization for COVID-19

- Ensure residential setting is suitable for home care
  - Patient is stable
    - Perform monitoring of ill residents (including documentation of pulse oximetry) at least 3 times daily to quickly identify residents who require transfer to a higher level of care
  - Setting is supportive (caregiver available, food available, ideally private bedroom/bathroom, no high-risk contacts in the household)

- Patient activities
  - Stay home except to seek medical care until cleared by your provider or the health department
  - Adhere to hand hygiene and respiratory etiquette
  - Avoid sharing personal household items
  - Call your doctor ahead of time if you plan to present for care

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Note about symptoms

- Residents/participants may not show typical symptoms such as fever or respiratory symptoms
- Atypical symptoms may include:
  - New or worsening malaise, new dizziness, diarrhea, or sore throat
  - Identification of these symptoms should prompt isolation and further evaluation for COVID-19 if it is circulating in the community

- Could have influenza too (have seen co-infections)

Build on Pandemic Influenza Preparedness

- COVID-19 seems to be spreading much like flu

- Pan flu preparedness ongoing since 2004

  - 2019 - Cardinal Resolve exercise involving over 400 stakeholders from across Virginia

- VDH reviewing pan flu plans and guidance to inform COVID-19 preparedness

- VDH actively encouraging partners in all sectors to review their pandemic flu plans and adapt them to this situation

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Knowledge Gaps

- Source of infection
- Pathogenesis and virulence evolution of the virus
- Transmission dynamics
  - Role of aerosol transmission in non-healthcare settings
  - Role of fecal-oral transmission
- Viral shedding
- Risk factors for infection
  - Asymptomatic infection
- Seasonality

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Key Reminders

- All personnel should avoid touching their face while working

- Perform hand hygiene after removing PPE

- Staff should be alert for fever or respiratory symptoms (e.g. cough, shortness of breath, sore throat)
  - If symptoms develop, self-isolate and notify occupational health services and/or LHD to arrange for appropriate evaluation

- Immediately report suspect or confirmed COVID-19 cases to your local health department

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Take Home Messages

- Keep COVID-19 from entering your facility

- Identify infections early

- Prevent spread of COVID-19

- Assess supply of PPE and initiate measures to optimize current supply

- Identify and manage serve illness

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Resources for Assisted Living and Other Adult Group Settings

- Preventing the Spread of Coronavirus Disease 2019 (COVID-19) in Homes and Residential Communities: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html

- Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019 (COVID-19): https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html

- Interim Guidance for Healthcare Facilities: Preparing for Community Transmission of COVID-19 in the United States: www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/guidance-hcf.html

- Strategies to Prevent Spread of COVID-19 in Long-Term Care Facilities: www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html

- CDC Community Mitigation Strategy (tables by setting): https://www.cdc.gov/coronavirus/2019-ncov/downloads/community-mitigation-strategy.pdf

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CDC Patient Resources

COVID-19 Factsheet

- https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf

Steps to Prevent the Spread of COVID-19

- https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html

Travelers: Frequently Asked Questions and Answers

- https://www.cdc.gov/coronavirus/2019-ncov/travelers/faqs.html

People at Higher Risk and Special Populations

- https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/index.html

Preventing the Spread of COVID-19 in Communities

- https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html

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General COVID-19 Resources

Virginia Department of Health (VDH)

- [35 Local Health Districts](#)
- www.vdh.virginia.gov/coronavirus

Centers for Disease Control and Prevention (CDC)

- COVID-19 Website: www.cdc.gov/coronavirus/2019-nCoV
- Health Alert Network (HAN): https://emergency.cdc.gov/han/2020.asp

World Health Organization (WHO)

- www.who.int/emergencies/diseases/novel-coronavirus-2019

Nonpharmaceutical Interventions: Resources

- Preventing COVID-19 Spread in Communities: www.cdc.gov/coronavirus/2019-ncov/community/index.html

- CDC Community Mitigation Guidelines to Prevent Pandemic Influenza–United States, 2017: www.cdc.gov/mmwr/volumes/66/rr/rr6601a1.htm#suggestedcitation

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Thank you!

Please send questions to:

respiratory@vdh.virginia.gov