

Welcome!

COVID-19: Separation/Quarantine Units & Senior Living Best Practice

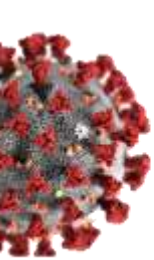
Kenneth Daily, LNHA

Elder Care Systems Group

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- Consulting and education firm focusing mainly on quality improvement, survey compliance, disaster preparation and facility management.
- Disaster preparedness planning
- Mock surveys and audits
- FSES
- Policy and procedure development
- Professional development and training

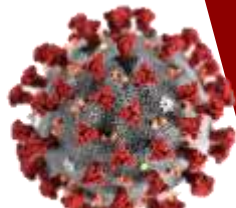


Agenda

Policy, Planning
& Preparedness

Construction &
Implementation

Resources &
Support



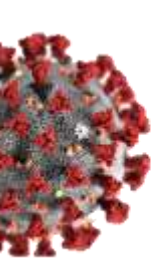
COVID-19: Separation/Quarantine Units & Senior Living Best Practice

April 10th, 2020

NH COVID-19

- Reporting earlier this week:
 - **Hundreds** of Skilled Nursing Facilities (SNF) across
 - **27+** states have reported a COVID-19 outbreak
- Extraneous demands on SNFs to meet it's needs & circumstances based on facility differences.
(e.g., patient population, facility size, scope of services, affiliations)
- In Kirkland's case:
 - Failure to rapidly **identify** and **manage** ill residents
 - Failure to **notify** the Washington Department of Health about the increasing rate of respiratory infection among residents
 - Failure to **possess a sufficient backup plan** after the facility's primary clinician fell ill.



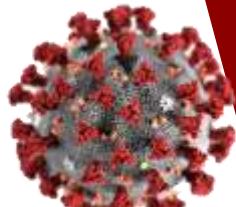


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Facility Preparations and Response

- COVID-19 has been incorporated into emergency management planning for the facility.
- Infectious disease policy now include a COVID-19 addendum
- An Incident Management Team (IMT) has been named to address COVID-19 preparedness & response.
 - Incident Commander (IC) has assigned additional individuals as necessary



Separation - Quarantine Zone

Establishing a unit or zone within the facility which is physically separated using Visqueen creates a set of rooms which can be used for the care and treatment of those suspected of or suffering from COVID-19

Policy: COVID-19 Separation - Quarantine Zone	
Date: March 2020	E-0015

Policy

The facility will establish a Separation- Quarantine Zone for increased separation for residents suspected of, presumed to be or have tested positive COVID-19.

Procedure

Separation- Quarantine Zone space will be set up in each facility as appropriate to be the designated area of the facility for the COVID-19 designated area to maintain precautions.

Setup and Planning

The Incident Commander (Administrator) along with other staff such as maintenance and nursing should review the facility layout-floor to identify a set of rooms that may work best for the Separation -Quarantine Zone. The Zone design allows for the restriction of access to reduce the risk of transmission and maximize resources such as PPE. The rooms identified must also allow for a spare room and vestibule to be constructed. This will allow for the storage

The identified set of rooms should be at end of corridor or a section of facility where there is a direct exit to the outside (not to a courtyard but to the parking lot.) The Exit will be used for removal of trash and laundry and to reduce any possibility of spread. Remember to the set of rooms should have, if possible, bathing facilities.

Add Hand Sanitizer station within the vestibule

If possible, close or turn off central airflow from the unit. Consider turning on all bathroom fans to aide in the clearing of 'dirty' air.

The Incident Commander will need to develop policies for who is permitted in the Separation-Quarantine Zone, the delivery of food, mail, linens and removal of trash.

Materials Needed multiplied by 2 for both walls

- Adequate number/length of 2x4s
- Adequate number/length of 2x2s
- 2 ½ -3" drywall screws
- Staple gun and wood staples
- Visqueen with width and length to ensure that is can cover the entire width and height of the corridor. Visqueen sheeting used should be at least .05mm thickness
- Duct Tap
- 2x6 for footer

Staff Considers

- Identify the initial and potential minimum staffing necessary if/when worst case scenario.
- Minimize any and all staff permitted to work on the Separation/Quarantine Unit
- Try to establish dedicated staff even if it is only one person out of several i.e. will allow of better continuity of care and services through the outbreak (like an incident commander for the unit)
- Train, train and then train again the use of PPE expected to be donned when on the unit.

Below is the minimum expected by CMS:

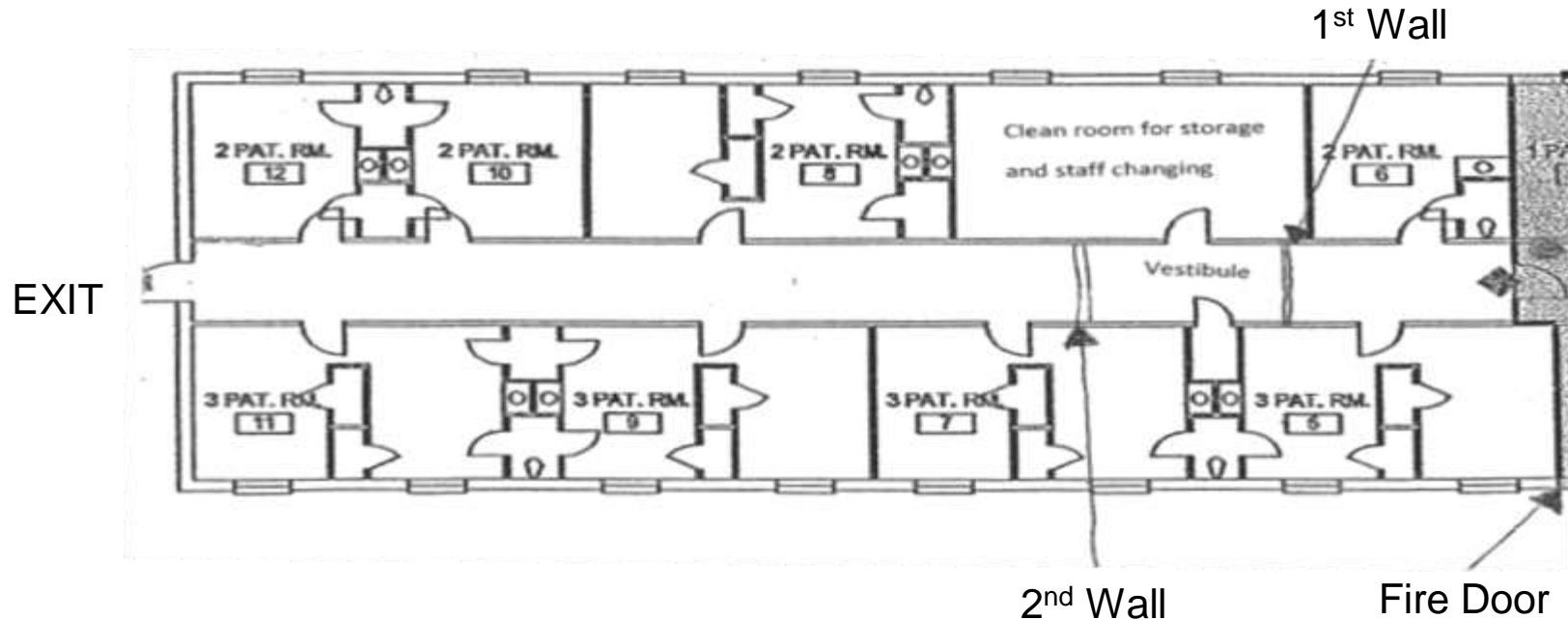
For a resident with known or suspected COVID-19: staff wear gloves, gown, eye protection and an N95 or higher-level respirator if available. A facemask is an acceptable alternative if a respirator is not available. Additionally, if there are COVID-19 cases in the facility or sustained community transmission, staff implement universal use of facemasks while in the facility (based on availability). When COVID-19 is identified in the facility, staff wear all recommended PPE (i.e., gloves, gown, eye protection and respirator or facemask) for the care of all residents on the unit (or facility-wide based on the location of affected residents), regardless of symptoms (based on availability).

- When possible, prior to unit establishment move any resident to area of the facility which does not have virus concerns
- Encourage resident activities such as telephone, Facetime, social media and “window sessions’ to sustain engagement
- Added room numbers to the outside windows
- Communicate your policies with your staff and families

Materials to Create “Fast/Easy/Flexible” Walls

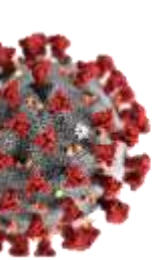
- Visqueen that can cover the entire height & width of the corridor.
Visqueen sheeting used should be at least .05mm thickness
- Adequate number/length of 2x4s
- Adequate number/length of 2x2s
- 2 ½ -3” drywall screws
- Staple gun and wood staples
- Duct Tap
- 2x6 for footer
- 2 concrete blocks
- Painters’ Zip to create the opening in the Visqueen wall

Separation/Quarantine Unit Design Example



Considerations of a Vestibule

- There should be alcohol sanitizer available for sanitizing in and out of the zone
- If possible, close or turn off central airflow from the unit. Consider turning on all bathroom fans to aide in the clearing of 'dirty' air.
- The Incident Commander will need to develop policies for who is permitted in the Separation– Quarantine Zone, the delivery of food, mail, linens and removal of trash.

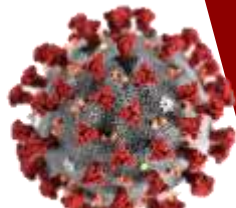


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The Initial Wall



Wall

The zipper operates from top to bottom.

There is a concrete block hold a footer which holds down the visqueen.

One side is held down and the other is allowed to swing free when unzipped.





Wall Opening

Vestibule Interior



Separation Unit



Vestibule Staff Space

Table/Cart/Shelves for supplies

Hand Sanitizer: Alcohol-Based (60% or greater)

Anti-Viral Disinfecting Wipes for Care Equipment

Sign with Reminders for Proper PPE Donning

Masks, Gowns, Eye Protection, Gloves (multiple sizes)
Shoe Covers, Surgical Caps if available



Within the Zone

- Covered trash can
- Covered barrel for dirty laundry
- Table/cart for supplies
- Covered container for equipment that needs cleaned for reuse
- Antibiotic wipes for equipment & staff shoes
- Disinfecting spray for gowns & other items
- Hand Sanitizer: Alcohol-Based (60% or greater)
- Extra trash bags
- Dedicated med/treatment cart
- Dedicated vital sign machine
- Dedicated Crash cart – stationed outside of the zone
- Dedicated housekeeping cart with mop, broom, dustpan
- Office supplies – pens, highlighters, paper
- Clean linen cart/ storage unit
- Residents lift equipment
- Ice chest - large cups for water

Going In.....

- Dedicated staff when possible will be assigned to the Separation/Quarantine Unit
- Staff will limit personal items taken into the zone.
- Signs to be clearly posted regarding
 - Reminders for Proper PPE Donning
 - Limited access to necessary staff only
- Staff should use the restroom prior to entering the Separation/Quarantine Unit
- Supplemental supplies taken in by dedicated staff to the Separation/Quarantine Unit
- Hands should be cleaned before entering the Separation/Quarantine Unit, wash with soap and water. 60% or greater alcohol-based hand sanitizer used
- PPE should be applied appropriately: gowns, mask, eye protectant, gloves
- All equipment should be hung on clothes lines with clothes pins to air out.
If an item is soiled or damaged it should be discarded appropriately.
- Gloves and clothing coverings are to be removed and placed in proper receptacles
- N95 masks will remain on the individual wearing and not removed

Supplies & Restocking Process

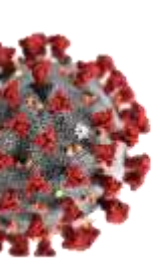
- A list of needed supplies will be communicated to the IC who will ensure designated area is stocked & re-stocked as necessary
- PPE supplies are to be checked every shift for availability and replenished as needed
- Staging room to be checked every shift:
 - dirty linen & trash will be removed
 - place new bags
- Staging room bin of equipment that needs to be cleaned for reuse will be removed at end of shift and cleaned. Cleaned items will be placed in clean supply area to be used.
- The nurse will compile a list of items needed prior to end of shift and communicate to designee to gather supplies for next shift.
- Clean linen will be delivered to the staging room in plastic bags for restocking of the cart outside the Separation/Quarantine Unit

Food & Hydration Process

- Dietary will deliver meal/s to the Separation/Quarantine Zone on a dietary cart and notify nursing staff that meals have arrived. Meal trays are to include a large Styrofoam cup of ice and water for each resident (unless contraindicated). Ensure appropriate condiments are on the trays.
- Each meal tray is to be passed through the Separation/Quarantine Zone by staff with the cart remaining on the outside to a cart that is inside the zone. Care will be taken to not touch the plastic walls or the other staff member. Delivery staff member should then perform hand hygiene before leaving the area.
- The reverse process will be used after the meal and trays are collected.
- The dietary cart will be returned to the kitchen and dishes cleaned as normally done.
- Cart will be cleaned and disinfected in kitchen.
- A separate Ice Chest will be put into the unit. Ice will be brought to the unit and transferred to the dedicated ice chest to ensure residents will receive ice water each shift or more frequently as requested.

Linen & Trash Process

- All dirty linen will be placed in a plastic bag. Roll the bag edges to create an opening.
- Roll dirty linen, outside to inside, being careful to not shake linen and place inside the bag. Unroll the bag and tie closed.
- Bag of linen will be removed from rooms & placed in a covered, no-touch dirty linen container in the dirty room.
- When the linen container is full but not overflowing, the bag will be tied closed, removed from the container, carried through the Separation/Quarantine Unit and placed into a covered dirty linen container to be taken to laundry for processing.
- Trash will be removed from rooms in tied bags and placed in the covered, no-touch trash container in the dirty room.
- When the trash container is full but not overflowing, the bag will be tied closed, removed from the container, carried through the Separation/Quarantine Unit and placed into a covered dirty trash container to be taken out to the dumpster.
- All trash and dirty linens will be exited the zone by the direct exit door and rolled to the dumpster or the rear of the facility door near the laundry room. Laundry staff may retrieve dirty laundry for washing from the back of the facility.

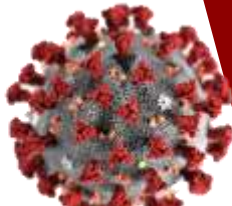


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PPE & Cloth Face Coverings

1. Using Personal Protective Equipment (PPE)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html>

A general checklist for donning and doffing.

2. Strategies to Optimize the Supply of PPE & Equipment

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

These guidelines on conserving PPE includes separate sub-guidance for eye protection, isolation gowns, facemasks, N95 respirators, decontamination and re-use of filtering facepiece (N95) respirators, and ventilators.

3. Use of Cloth Face Coverings to Help Slow the Spread of COVID-19

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Discusses use of cloth face coverings/masks by the general public to prevent transmission. Includes instructions on how to make and use cloth face coverings.

Infection Control for COVID-19 in Healthcare

1. Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings

https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html

This guidance is the foundation of all the others, covering an extensive range of topics. “The Bible.”

2. Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

This document discusses test-based and non-test-based strategies for determining when a patient no longer requires precautions (is not infectious). It also addresses when a hospitalized patient can be discharged home or to a long-term care facility.

3. Evaluating and Testing Persons for Coronavirus Disease 2019 (COVID-19)

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>

These guidelines establish the priorities for COVID-19 testing.

Healthcare Personnel

1. Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

This guidance contains a chart outlining when health care personnel with exposure to a confirmed COVID-19 case should be quarantined based on the extent of exposure and use of personal protective equipment. It also clarifies that exposure to persons under investigation does not require quarantine.

2. Criteria for Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19 (Interim Guidance)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

Explains test-based and non-test-based strategies for determining when health care personnel with actual or suspected COVID-19 may return to work, including precautions to take upon return.

Facility-Based Long-Term Services and Supports

1. Preparing for COVID-19: Long-term Care Facilities, Nursing Homes

https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhealthcare-facilities%2Fprevent-spread-in-long-term-care-facilities.html

Contains specific recommendations for SNFs that also apply to other facility-based settings, as appropriate.

2. Alternate Care Sites and Isolation Sites

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/alternative-care-sites.html>

Discusses in detail how to set up Isolation Sites (higher acuity) and alternate care sites (lower acuity). The guidelines cover physical infrastructure, services, and patient care in these sites.

Questions?

Please contact webinars@directsupply.com if you have any questions.

Questions will be consolidated & responses shared to all registered attendees early in the week of 4/13/20.

Put Policy in Action



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TELS Training

COVID-19 Emergency Preparedness Program and Plans Manual



A Source for Critical Resources

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Date: March 2020	E-0015

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- 2x8 for footer

Call 888-433-3224 or visit [TELS.net](https://www.tels.net).

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TELS Checklist Template

COVID-19 Separation Unit
COVID-19 CMS Focused Survey



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To Access: Corporate or Regional



TELS Checklist Template

COVID-19 Separation Unit
COVID-19 CMS Focused Survey



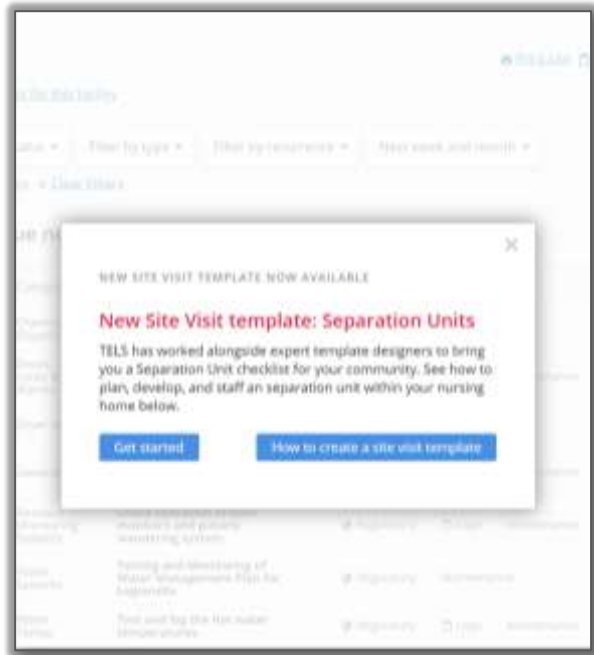
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TELS Checklist Template

To Access: Facility Administrator

COVID-19 Separation Unit
COVID-19 CMS Focused Survey



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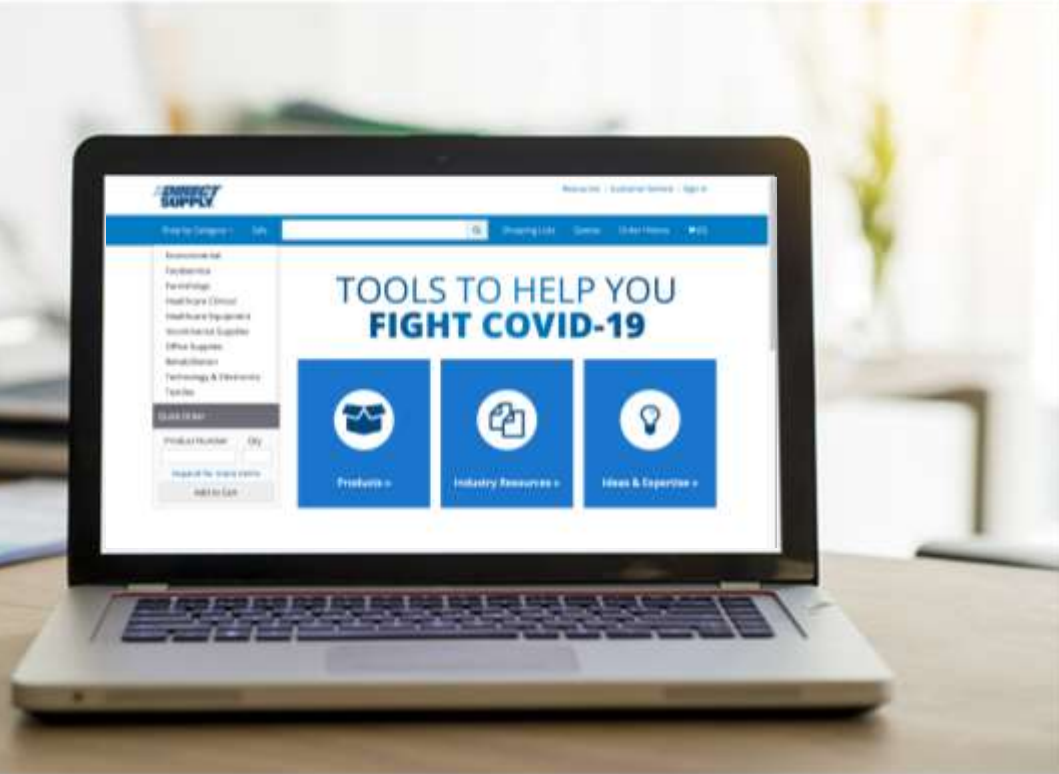


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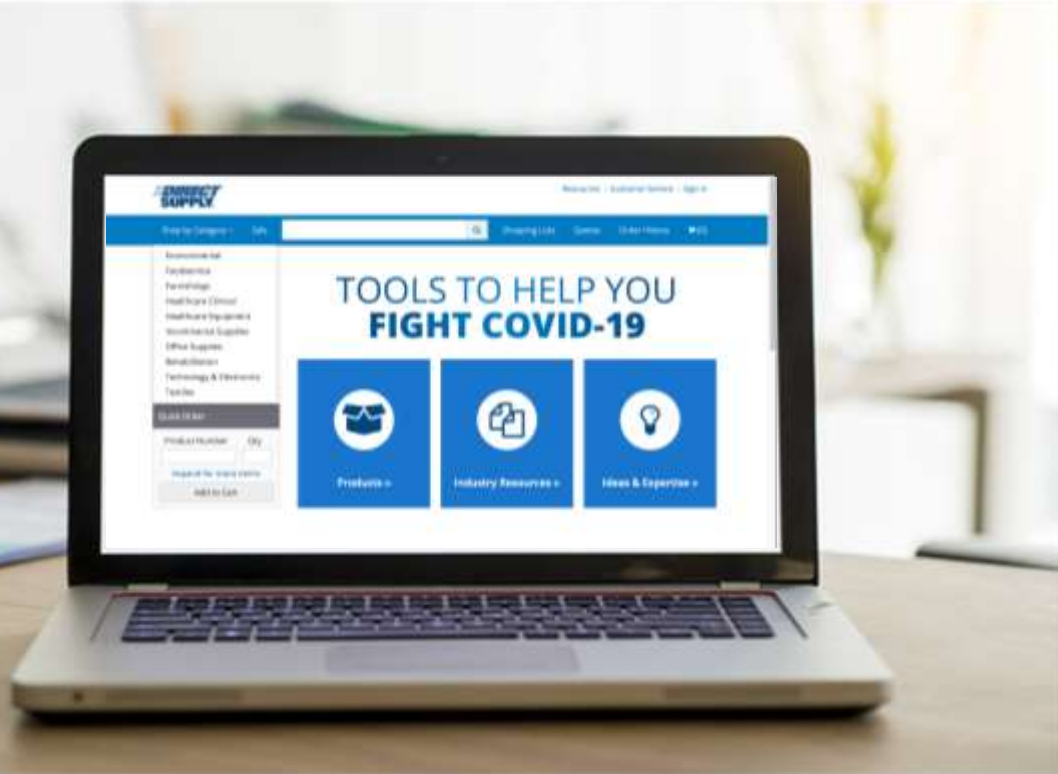
www.DirectSupply.net



<https://www.directsupply.com/wp-content/uploads/2020/04/COVID-19-Separation-Unit.pdf>

Direct Supply Network

www.DirectSupply.net



The Latest COVID-19 Updates



COVID-19 Long-Term Facility Guidance (FDA)




How to Foster Resident Engagement



Choosing the Best Thermometers for Your Sensors




Fun Ways to Entertain Residents



Provon Foam Handwash with Advanced Moisturizers for TFX Dispenser, 1200ml

Currently ships in 2 days



Provon Foaming Antimicrobial Handwash with Moisturizers, 1,250 mL Refill by GOJO Industries

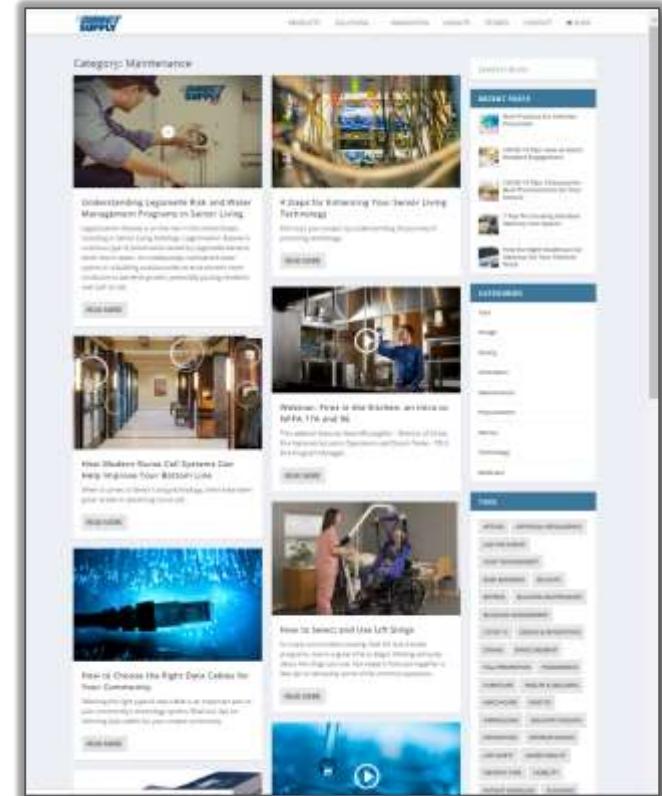
#70590 • Manufacturer #5186-03 • CT of 3

Free Shipping [DETAILS](#) **Currently ships in 2 days**

Product availability and lead times are being kept current online.

Direct Supply Insights

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