
Updated Guidance for Healthcare Workers in Long-term Care Settings

Why is this guidance being issued?

Multiple outbreak of coronavirus (COVID-19) have occurred across the country, including in Utah, for which the initiating entrance of the virus into the facility was an asymptomatic or pre-symptomatic healthcare worker. When these outbreaks occur, a large percentage of the patients in a facility become infected before the initial case is detected. The strategy to screen healthcare workers and exclude them based on their symptoms is not enough to prevent these outbreaks. For a description of the situation see the following:

https://www.cdc.gov/mmwr/volumes/69/wr/mm6913e1.htm?s_cid=mm6913e1_w.

Who is this guidance for?

This guidance is for all types of long-term care facilities, including skilled nursing facilities, long-term acute care facilities, assisted living/independent living, and home health. It also pertains to visitors, including essential service providers, who have contact with patients.

What is the responsibility of healthcare workers?

Patients in long-term care facilities are among the most vulnerable to COVID-19 and have the worst outcomes, including death. Caring for these patients often requires healthcare workers to be in very close proximity or touching patients. It has been shown that asymptomatic or pre-symptomatic individuals can have very high levels of viral load and can transmit the virus. As the prevalence of COVID-19 increases in the community and in healthcare facilities, an increasing number of healthcare workers can become asymptomatic or pre-symptomatic and transmit infection to patients.

Therefore, any healthcare worker should always use personal protective equipment (PPE) when caring for patients in long-term care settings. If exposed to a known case of COVID-19, s/he should also self-monitor for symptoms of fever, cough, and shortness of breath as previously recommended. If symptoms develop, s/he should immediately report to the supervisor and leave the facility to self-isolate at home and seek medical care from his/her healthcare provider, including getting tested for COVID-19.

Visitors who attend to patients or residents in more than one facility pose a unique transmission risk. These visitors should self-assess for COVID-19 exposure. The Long-Term Care Subcommittee of the Utah Governor's COVID-19 Unified Command has developed a guidance tool for healthcare workers to help inform risk and allow for appropriate decisions regarding PPE and entrance to care settings. See the document, COVID-19 Healthcare Worker (HCW) Screening Tool and Passport.

Use of personal protective equipment

Currently, in most long-term care facilities, policies have been put in place for patients to stay in their rooms as much as possible and if they leave their rooms, to maintain social distancing. At a minimum, when a healthcare worker (or visitor) enters a patient room or has direct contact with a patient for any reason, s/he should wear a surgical mask and gloves. Social distancing should be maintained as much as possible while the healthcare worker is in the room. Time in the room should be minimized. When leaving the room, the healthcare worker should use a disinfectant wipe to clean all surfaces that s/he touched. If close contact is required, e.g., bathing or cleaning, a gown should also be worn. Further PPE precautions are needed if the healthcare worker is caring for a COVID-19-positive patient. In that instance, the healthcare worker should also wear eye protection (e.g., face shield) and an N-95 respirator (or equivalent, e.g., PAPR) when conducting an aerosolizing procedure. All visitors (e.g., radiology, hospice) should be required to adhere to these standards as well.

Responsibilities of administration

Facility administration should support the change on use of PPE in the following ways:

- Create a policy requiring the use of PPE for all patient encounters.
- Update the visitor policy to require all visitors to use PPE if they have a direct patient encounter.
- Provide education, e.g., through in-service trainings, about the new policy to all staff.
- Estimate PPE needs for the facility, develop a PPE inventory and acquire PPE. Because PPE is in such short supply, administration will need to work with private and public (e.g., the local health department) resources to acquire PPE.
- Become familiar with guidelines on and develop policies for preserving and re-using PPE. Initial guidance can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>.
- Identify ways to support healthcare workers. Frontline healthcare workers are under tremendous stress in dealing with COVID-19 issues. Maintaining their morale is very important to sustaining their ability to work.

Additional resources

CDC. Preparing for COVID-19: Long-term Care Facilities, Nursing Homes. Found at: 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.

Utah Department of Health: Request assistance at HAI@utah.gov.