Strategies for Controlling the Spread of COVID-19 in Post-acute Care Facilities

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State of the COVID-19 in US
Community Prevalence of COVID-19

NY Times

Nursing Home prevalence of COVID-19

CMS
Virus specific lessons

Asymptomatic transmission

- Early Apr
- After case positive – 30% staff and residents positive
- 50% of the positives were asymptomatic or presymptomatic

- Implication:
- Test the whole facility after first case is identified
- Transmission based precautions
- Follow up

- Kimball A. Asymptomatic and Presymptomatic SARS-CoV-2 Infections in Residents of a Long-Term Care Skilled Nursing Facility — King County, Washington, March 2020. MMWR Morb Mortal Wkly Rep. 2020;69. doi:10.15585/mmwr.mm6913e1
Before symptom onset | After symptom onset
---|---
Detection unlikely \(^a\) | PCR - Likely positive
PCR - Likely negative \(^b\) | Antibody detection

SARS-CoV-2 exposure

Symptom onset

Week -2 | Week -1 | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6

Increasing probability of detection


Staff specific lessons
Mitigating staff risk

- First line of defense - Prevent infected staff from patient care
  - Educate to mask in community
  - Multiple buildings
  - IP role
    - Robust employee health function
    - Low threshold for testing staff
    - Contact tracing in LTC
- Second line of defense - Appropriate PPE
  - Mask AND shield
  - Buddy system
  - Resident involvement

Let’s fight COVID together:

REMIND THE STAFF TO:
- WEAR MASK OVER the NOSE and MOUTH
- USE lots of HAND SANITIZER
- NOT TOUCH anything BEFORE caring for YOU

Resident poster:
Residents specific challenges
PC: medtruth

Does positive RT-PCR mean resident is infectious?

Challenges and Lessons learned

- Ways to connect families with residents.
- Decrease po intake due to social isolation.
- Poor hydration.
- Mental health issues.

Facility specific challenges

- Person centered care
Time to rethink long term care

- Role of the triad - medical director, DON and administrator
- Emergency preparedness
- Cohorting
- Townhalls - All departments
- PPE supply chain
- Fit testing program
- Burden of telemedicine setup
Additional Resources


Society of Post Acute and Long Term Care: https://paltc.org/COVID-19

Common and Less Common Signs and Symptoms of COVID-19 in Older Adults

Typical Signs and Symptoms
- Fever ≥ 37.2°C (99.0°F)
- New cough or worsening of chronic cough
- Shortness of breath: Increased oxygen requirements or increased frequency of nebulizer treatments may be surrogate symptoms for shortness of breath.

Atypical Signs and Symptoms
- Diarrhea, nausea and vomiting
- Confusion or change in mental status. If noted, check pulse oximetry to determine if increased oxygen requirements
- Exacerbations of congestive heart failure or chronic obstructive pulmonary disease
- Chest pain
- Sore throat, runny nose
- Loss of sense of smell and/or taste
- Muscle aches, headache
- Chills with or without shivering

*Any change in condition, including any of the above symptoms—typical or atypical—should trigger consideration for COVID-19 and subsequent testing.

Unusual rashes such as rash over toes http://paltc.org/sites/default/files/COVID%2019%20QA%20Community%20Spread_5_6_20.pdf
Challenges and Lessons Learned

**Staffing**

- **Plan for staff shortages** including ADON, IP, etc.
- **Need additional staff:**
  - To move residents and their belonging
  - To take more frequent vitals, distribute fluid
  - To assist the IP with contact tracing, cohorting plans. *One full time on site IP recommended for facility >100 beds or onsite hemodialysis*
  - To assist with communication with families
  - To perform additional cleaning of shared equipment, commonly touched surfaces

**Supply of PPE**

- Don’t underestimate the amount of PPE needed
- Pay attention to equipment that goes between rooms: glucometer, pulse oximeter, thermometer, etc.
- Identify someone responsible for restocking supplies
- Increase the availability of alcohol hand rub
Challenges and Lessons Learned

**Education**
- Repeat education on sign and symptoms of COVID-19
- Repeat education on PPE use
- Education of environmental staff
- Education of physical therapy staff

**Communication**
- Communication with resident’s family
- Communication with staff and support
- Communication with Health Department
- Addressing news media concerns