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To: Wisconsin Local Health Officers, Tribal Health Officials, Infection Prevention Staff, Long-Term Care Facilities and Assisted Living Facilities, Other Health Care Providers

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Important Recommendations for Prevention of COVID-19 in Long-Term Care Facilities and Assisted Living Facilities

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Summary

The Department of Health Services (DHS) is issuing important recommendations to all long-term care facilities (LTCFs) and assisted living facilities (ALFs) in Wisconsin. Older and medically vulnerable adults have significantly increased risk of severe illness and death from COVID-19, necessitating that we take all reasonable efforts to prevent introduction of this infectious disease into residential care facilities. As of March 12, 2020, DHS has detected COVID-19 in numerous Wisconsin communities, and has determined the threat of widespread community transmission is imminent. To protect the most vulnerable Wisconsin residents from serious harm, DHS recommends the following actions in accordance with Wis. Stat. ch. 252, Wis. Admin. Code ch. DHS 145, ch. 50 and [Centers for Medicare & Medicaid Services \(CMS\) guidance](#):

- Appropriate limitation or restriction of visitation by non-essential personnel depending on risk
- Screening all visitors for symptoms of, or exposure to, COVID-19
- Restricting staff from work if they have fever or signs of respiratory infection
- Canceling social gatherings and community events scheduled to occur inside long-term care facilities.

These recommendations apply to facilities caring for patients who are elderly and/or have chronic medical conditions placing them at high risk of severe complications of COVID-19. This guidance will be evaluated and updated 30 days from issuance.

Recommendations

For the purpose of this guidance, **limiting** access means the individual should not be allowed to come into the facility, except for certain situations, such as end-of-life situations or when a visitor is essential for the resident's emotional well-being and care. **Restricting access** means the individual should not be allowed to come into the facility.

- Screen all individuals, including health care workers, consultants, and visitors before being allowed to enter facilities.
- To reduce the spread of influenza and other respiratory illnesses, facilities should restrict visitors younger than 18 years of age as appropriate.
- Visits by family members should be limited except to certain situations, such as end-of-life situations or when a visitor is essential for the resident's emotional well-being and care subject to law.
- Restrict individuals who meet symptom or exposure criteria for COVID-19, as described below.
- Post Respiratory Hygiene & Cough Etiquette signs.
- Signs should be posted on doors and in lobby areas.
- Provide respiratory hygiene and cough etiquette supplies at all entry locations.
- Supplies include: alcohol-based hand rub, tissues, masks, and a waste receptacle for disposal of tissues.
- Communicate with employees, consumers, and visitors on basic infection prevention measures such as: clean hands (alcohol-based hand rub or soap and water for 20 seconds), cough etiquette, and disinfection of surfaces.
- Designate an employee entrance.
- If employees have signs and symptoms of a respiratory infection, they should **NOT** work.
- If employees develop signs and symptoms of a respiratory infection while on the job they should:
 - Immediately stop work, put on a facemask and self-isolate at home.
 - Inform the facility Infection Preventionist
 - Contact the local health department for next steps

Communications with residents and families should be proactive and clearly explain the reasons for changes. References able to be shared with residents and families are available through links in this memo and on the DHS COVID-19 website. Facilities should provide specific messages to family members through a variety of methods, including posted-guidance and electronic communication to known family members and emergency contacts.

Facilities should meet with all residents to describe how remote visits (Skype, FaceTime, etc.) might be accommodated. Examples of residents in particular need of visitation include persons who may be actively dying, persons for whom behavioral challenges might worsen without contact, etc.

Screen all individuals entering LTCFs and ALFs, including health care workers.

In addition to limiting access, LTCFs and ALFs should implement robust screening for individuals entering the facility, and should keep logs documenting the dates and time of screening evaluation. All employees, visitors, volunteers, and consultants should be screened and restricted from entry if they meet any of the following criteria:

- Symptoms of COVID-19. Symptoms can be mild and may include fever, fatigue, cough, runny nose, congestion, and sore throat. Temperature measurements are not required to meet the criteria for fever. Post appropriate signage reminding individuals to not enter if they have any of the above symptoms. Travel in the past 14 days to countries or regions of the United

States known to have widespread community transmission of COVID-19. Monitor the CDC website for a list of current countries with travel notices.

(<https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>)

- Any staff or visitors who had close contact with a case of COVID-19 at home or in the community.

The health of healthcare workers should be an urgent priority during the current outbreak, because of the need to protect our provider workforce and to minimize the risk of disease transmission to residents.

Healthcare workers should be screened upon entry to work for symptoms and have their temperature monitored and logged. Staff who have had close contact with patients with confirmed COVID-19 should be restricted from work.

DHS acknowledges that in the event of more widespread community transmission of COVID-19, the occurrence of exposure to patients with the disease will become more commonplace, and restricting health care workers from care facilities may become infeasible. In that situation, DHS will re-evaluate guidance related to restricting exposed health care workers if they are symptomatic, and may revise guidance to emphasize screening for signs or symptoms of infection.

LTCFs and ALFs should review sick leave policies to minimize impact on personnel. Policies should support compliance with these recommendations.

If a healthcare worker or LTCF and ALF resident is diagnosed with COVID-19, immediately contact local public health to receive further guidance on infection control.

Prevent spread of COVID-19 within and between facilities

Respiratory illnesses such as COVID-19 can spread quickly within LTCFs and ALFs without strict infection control and prevention measures. DHS recommends LTCFs take the following measures to reduce the risk of transmission with facilities.

- Review and adhere to [CDC best practices](#), including monitoring residents for signs of illness, supporting hand and respiratory hygiene, and using appropriate personal protective equipment.
- Review outbreak recognition and management plans and policies.
- Require all individuals to wash or use a hand sanitizer containing at least 60% alcohol upon entry into the facility. Availability of hand sanitizer should be maximized by posting dispensing stations near entry areas and other high-traffic areas.
- Discourage all individuals, including workers, visitors, and residents, to avoid shaking hands, hugging, or other personal contact.

DHS and CDC recommend that LTCFs and ALFs should implement measures to prevent the spread of illnesses between facilities. LTCFs and ALFs should notify facilities before transferring residents with any respiratory illness to a higher level of care.

Recommended resources

- CMS Memo [QSO-20-14-NH](#): Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in nursing homes (Revised)
- DHS COVID-19 (Coronavirus Disease 2019) <https://www.dhs.wisconsin.gov/disease/covid-19.htm>
- DHS March 3, 2020 webinar is now posted at <https://livestream.com/accounts/14059632/events/9034343/videos/202751527>
- DHS Outbreaks in Wisconsin <https://www.dhs.wisconsin.gov/outbreaks/index.htm>
- CDC Coronavirus Disease 2019 (COVID-19) <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC Resources of Healthcare Facilities <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>
- CMS memo [QSO-20-17-ALL](#) Guidance for use of Certain Industrial Respirators by Health Care Personnel
- DHS COVID-19 (Coronavirus Disease 2019) <https://www.dhs.wisconsin.gov/disease/covid-19.htm>
March 9, 2020 webinar is now posted at <https://livestream.com/accounts/14059632/events/9034343/videos/202751527>
- CDC Resources of Healthcare Facilities <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/index.html>

Contacts

Please contact DHS with questions about the COVID-19 response. A team of DHS staff is monitoring the inbox. We will use the incoming questions to update our FAQs and guidance.

For specific questions about considerations for testing, or to discuss a particular case during business hours, please call 608-267-9003 and leave a message or send an email to dhsdphbcd@dhs.wisconsin.gov. For after-hours assistance, call 608-258-0099.