

# Bureau of Assisted Living

Assisted Living Forum  
May 19, 2020



**Alfred C. Johnson, Director**

## High SARS-CoV-2 Attack Rate Following Exposure at a Choir Practice

[CDC Morbidity and Mortality Weekly Report \(MMWR\) – May 15, 2020](#)

After choir practice with one symptomatic person,  
87% of group developed COVID-19



● Index case    ● 32 confirmed and 20 probable cases    ● unaffected person

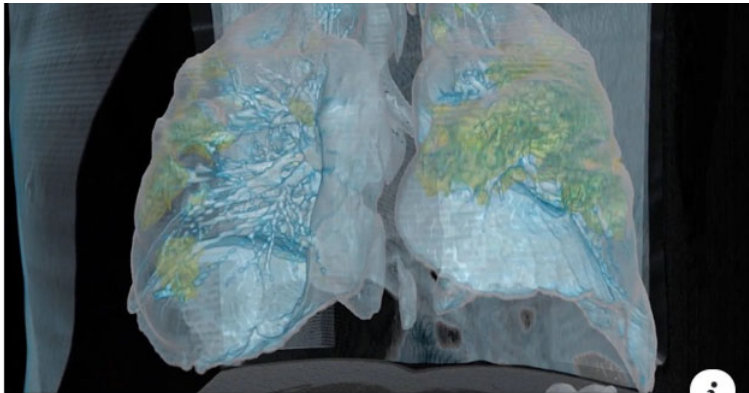
**COVID-19 spreads easily**

- Avoid groups
- Stay at least 6 feet apart
- Wear face coverings

CDC.GOV

[bit.ly/MMWR51220](https://bit.ly/MMWR51220)

MMWR



NYTIMES.COM

### How Coronavirus Attacks the Body

It doesn't take long for mild coronavirus symptoms to turn serious. ...

From The New York Times:  
How Coronavirus Attacks the Body

<https://nytl.ms/34hbOow> - Note: Ad will play prior to video

## New Admission & Readmission

### **COVID-19 status is unknown = Observation (aka Quarantine)**

- Actively screen at time of admission and at least daily for fever and respiratory symptoms
- Options include:
  - Separate observation area OR
  - Single-person room
- All recommended PPE to be worn for Transmission Based Precautions for COVID-19.
- Transferred out of observation after 14 days if afebrile & no symptoms
- Can consider testing to increase certainty

### **COVID-19 status is Positive (Case) or has symptoms (Suspected) = Isolation**

- Facility can accept residents as long as it can follow Transmission Base Precautions for COVID-19
- Ideally placed in private room with own bathroom and ideally cared for in a dedicated unit/section of facility with dedicated HCP
- Increased monitoring of ill residents 3x a day with symptom screen, vital signs, pulse ox and respiratory exam
- Can Discontinue Transmission-Based Precautions either using test-based or symptom based strategy.

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### Remember:

- PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting).
- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted (e.g., retying gown, adjusting respirator/facemask) during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination. A step-by-step process should be developed and used during training and patient care.

#### Preferred PPE – Use N95 or Higher Respirator



#### Acceptable Alternative PPE – Use Facemask



## Transferring Resident - Suspected or Confirmed COVID-19 Case to a Hospital

- Contact local health department
- If symptoms mild and patient does not require hospital level care then can isolate in facility as long as facility can adhere to infection prevention and control practices recommended for care of resident with COVID-19
- If more severe symptoms develop and require transfer to a hospital for a higher level of care – inform EMS and receiving facility of resident's diagnosis.
- Pending transfer or discharge, place a facemask on the resident and isolate him/her in a room with the door closed