# **COVID-19 Considerations for Long-Term Care Facilities**

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Long-term care (LTC) facilities (including nursing homes, skilled nursing facilities, and assisted living facilities) are a healthcare setting of particular concern during the COVID-19 pandemic. LTC facility residents tend to have characteristics that put them at increased risk of severe illness or death due to COVID-19, including older age and presence of comorbid conditions. According to the Centers for Medicare & Medicaid Services, there have been 198,153 confirmed COVID-19 cases, 119,701 suspected COVID-19 cases, and 49,871 COVID-19 deaths in residents as of August 16, 2020.¹ Increased risk of exposure is also a concern for LTC facility staff, who have close physical contact with patients, often work extended shifts due to a workforce shortage, and may not be familiar with robust infection prevention programs. In addition to their own increased risk of exposure, LTC facility staff present an increased transmission risk. The relatively high proportion of staff working in more than one facility and the ability of the virus to be transmitted by asymptomatic and pre-symptomatic persons are two factors that facilitate the introduction and transmission of the virus within and among LTC facilities. This toolkit is a compilation of considerations for LTC facilities based on lessons learned during the early months of the pandemic accompanied by resources to inform planning and response efforts.

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<sup>&</sup>lt;sup>1</sup> Centers for Medicare & Medicaid Services. (2020). <u>COVID-19 Nursing Home Data</u>. U.S. Department of Health and Human Services.



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## **Emergency Planning**

Regardless of whether an individual LTC facility has experienced an outbreak of COVID-19, all facilities should reassess their emergency plans and make adjustments based on the growing knowledge of the virus' characteristics and its effects on human health and the experiences of facilities that have effectively prevented or controlled outbreaks. This requires ensuring that plans and structures are in place to effectively respond to the pandemic, including the ability to contribute to the overall community response by maintaining operations throughout the incident.

- Review your facility's emergency operations plan, continuity of operations plan, and/or business
  continuity plan to identify any courses of action that require implementation or revision, as
  appropriate. If your facility experienced an outbreak earlier in the pandemic, ensure plans have
  been updated based on lessons learned.
- Ensure your employees and volunteers (if applicable) are trained in your facility's emergency operations plan.
- Ensure your plans include succession planning and a clear chain of command should leadership
  be exposed or become ill. Healthcare facilities in areas with high levels of community
  transmission recommend identifying and training at least three levels to provide relief should
  those with primary or secondary responsibility for each position be unable to work.
- Maintain awareness with daily/regular updates on the pandemic from local and state authorities, the Centers for Disease Control and Prevention, the Centers for Medicare & Medicaid Services, the World Health Organization, professional organizations, and other



- reputable sources. Sign up for federal and state health alert messages if you are not already subscribed.
- Assess your facility's current infection prevention practices and address areas of concern relative to COVID-19.
- Partner with your local healthcare coalition (HCC) and/or public health agency to communicate
  your plan; define cohorting, escalation, and testing strategies; and identify potential resource
  needs and coordination strategies.
- Know what factors trigger your local and state conventional, contingency, and crisis standards of
  care plans, particularly as they relate to personal protective equipment use (PPE) and patient
  care strategies during a surge.
- Establish a framework for ensuring quality in the context of available resources, including review of staffing and care processes.
- Identify backup systems for critical utility and information technology systems used by the facility, including electronic health records and web-based recordkeeping systems.
- Conduct workshop discussions/tabletop exercises to review the plans and processes for managing COVID-19 residents and revise as required.
- Consider other hazards in your community (e.g., hurricanes, wildfires) and assess how their occurrence concurrently with COVID-19 might affect your plans.

### **Related Resources for Emergency Planning**

## **Infection Prevention**

The health and safety of staff and residents – and the continued operations of a LTC facility – are dependent on effective infection prevention efforts. The <u>hierarchy of controls</u> offers a framework to protect those in a facility from exposure to the SARS-CoV-2 virus. The two most effective controls – elimination and substitution – are not feasible in a LTC environment. However, a combination of engineering controls, administrative controls, and PPE may substantially decrease exposure risks in LTC facilities.

#### Engineering Controls

- Evaluate heating, ventilation, and air-conditioning system to determine if options exist to isolate specific areas of the building. One option is to install temporary zippered door access dust barriers.
- Understand where and how air flows in the building and how it can be channeled to reduce infection risk (e.g., appropriate use of exhaust fans and opening of windows).
- Increase fresh air intake when possible and reduce recirculated air.
- Increase the filter level when possible to enhance filtration of recirculated air.
- Minimize use of box fans in enclosed spaces.
- Consider formal assessment by an engineer to ensure that system is performing as designed and that planned isolation techniques have the anticipated results on airflow.



#### Administrative Controls

- Identify ways to encourage and enforce physical distancing:
  - o Serve meals in resident rooms rather than in common areas.
  - Discontinue group activities for residents.
  - Plan social activities that do not require the use of common areas.
  - Explore and implement remote communication strategies to maintain connections between residents and their families while in-person visitation is restricted. This may include assessing ability of residents to use different types of technology and devices on their own or with assistance, providing access to devices, and upgrading facility-wide wireless networks or other technology.
  - o Develop a safe method to continue bathing services in facilities with shared spa rooms.
  - o Provide a safe, clean space for staff to take breaks as respiratory protection will need to be removed to eat.
  - Stagger meals and other breaks for staff to enable physical distancing in break rooms.
     Remove excess chairs from the room and clearly mark areas on tables where staff may sit.
  - Allow telework as feasible for administrative staff. Plan for virtual meetings and operations to the extent possible. This includes determination of the best remote technologies to meet the facility's needs and cybersecurity considerations.
- Align facility access policies to current local, state, or federal guidance and disease transmission dynamics in your community to prevent the introduction of COVID-19 in your facility.
  - Maintain signage at your facility entrances on visitor procedures and restrictions.
     Include instructions on visitor conduct while in the facility.
  - Establish an enhanced screening process for staff and visitors.
  - Train staff on protocols for limiting access points and managing movement of providers, suppliers, surveyors, and vendors of on- and off-site services and transportation (e.g., specialty providers, dialysis, laboratory services, and beauticians). Include information on screening procedures, triage protocols, and source control measures.
  - Ensure access to palliative care, social work, or behavioral health providers to enable discussions on goals of care and end of life and ensure these goals are discussed and documented with each resident and family.
  - o Establish facility access protocols for compassionate care, such as end-of-life visitation.
- Review and update workforce policies relevant to COVID-19 transmission.
  - o Implement policies and procedures to regularly screen and monitor all staff for potential illness.
  - o Establish policies to increase protections for staff with known COVID-19 risk factors.
  - o Review workforce exposure policy and update as needed for COVID-19.
  - Establish policy and expectations for sick leave, testing, and pay if symptomatic.
  - O Update return to work policy as needed to reflect current local, state, and federal guidance.



- Identify staff and visiting providers who work in other facilities in addition to yours.
   Establish protocols for them to notify your facility of potential exposure or a known outbreak at their alternate workplace.
- Ensure staff understand that their social behaviors outside work can contribute significant risk to residents, and that in many facilities asymptomatic staff have clearly been the source of major outbreaks and deaths of residents.
- Maintain an up-to-date policy for staff who travel domestically or internationally. This
  policy should account for self-quarantine requirements imposed by your state or locality
  associated with travel in specified jurisdictions.
- Review environmental services practices in your facility.
  - Follow manufacturer instructions for proper use of an Environmental Protection Agency-registered hospital-approved disinfectant. Ensure all staff understand and comply with contact times.
  - Make disinfectants and hand hygiene materials easily available at all entrances, workstations, break areas, and other locations as appropriate. Consider the use of foaming hand sanitizers if unable to place liquid or gel solutions due to resident safety concerns.
  - o Place visible signs and reminders specific to hand and surface hygiene.
  - o Increase frequency of cleaning of resident rooms, common areas for residents and staff, and offices. Pay particular attention to high touch surfaces.
  - o Keep work areas clutter free to facilitate cleaning and disinfection.
  - Ensure frequent cleaning of bathrooms.
  - Sanitize food preparation area after each meal period and at the end of each day.
  - Advise administrative staff not to use other people's desks, phones, or other high touch items. If sharing phones, they should be disinfected after each use.
  - When cleaning carpets, use vacuum cleaners that are equipped with high-efficiency particulate air (i.e., HEPA) filters. Vacuum when the room or hallway is empty of other people; doors to adjacent rooms should be kept closed and the operator should be wearing gloves and respiratory and eye protection.
- Designate dedicated care teams for residents who are infected or recovering from COVID-19.

#### Personal Protective Equipment

- Assess the current respiratory protection program and determine the need for updates, including policies around the use of PPE and expectations for staff according to <u>CFR 1910.134</u>.
- Enforce policies on source control, including wearing of respiratory and eye protection by all staff and masks by residents who are able to do so.
- Train all staff on appropriate use of all PPE used in your facility. This should include information on PPE selection and proper donning and doffing techniques.
- Arrange for N95 fit testing as soon as feasible. Ensure that staff who need to wear N95
  respirators due to their responsibilities caring for COVID-19 residents are competent in
  performing a seal check.



- Implement conservation strategies to optimize your supply of PPE as required.
  - Develop a safe process for extended use or reuse after disinfection of N95s that includes storing them between use and is consistent with state and federal recommendations.
- Ensure staff, residents, and visitors follow proper PPE disposal practices.

#### Related Resources for Infection Prevention

## **Operational Considerations**

LTC facilities should review the normal staffing, supply chain, and structures that support the delivery of quality care to residents and determine what modifications may be needed to enable safe continued facility operations. This involves ongoing internal and external communications and information sharing, staff education, supply chain monitoring, adjusting testing protocols as needed, coordinating treatment and transfer decisions with staff and external partners, and meeting the behavioral health needs of staff and residents.

#### Communication and Education

- Update workforce/volunteer contact information, as appropriate.
- Verify emergency point of contact information for all residents.
- Verify emergency contact information for HCCs, local or state public health, emergency
  management, local hospitals, emergency medical services (EMS) and transport providers, survey
  and certification agencies, or any other important partners.
- Review procedures for contacting other organizations (e.g., other LTC facilities, hospitals, medical transport providers), including on evenings and weekends.
- Know local, state, and federal notification and data reporting requirements associated with confirmed or suspected COVID-19 cases among residents and staff.
- Keep staff informed through daily (or as needed depending on transmission dynamics in your community) communication briefings.
- Conduct just-in-time training to update staff on new information related to COVID-19.
- Develop and distribute information on COVID-19 to staff including mitigation efforts in place and actions to be taken if a resident or staff member becomes symptomatic or tests positive. Ensure all staff understand your facility's "identify, isolate, and inform" protocol.
- Follow local, state, and federal guidance on infection prevention. Be aware that guidance changes as additional knowledge is gained about the virus.
- Ensure all staff are trained in infection prevention, including information about standard and transmission-based precautions and proper hand hygiene and respiratory etiquette.
- Develop and distribute "frequently asked questions" information related to COVID-19 to
  residents and their families. Ensure information about visitation and remote communications is
  included. Provide frequent updates to reassure residents and their loved ones that your facility
  is serious about care and safety.

**Related Resources for Communication** 



#### Staffing

- Provide guidance to staff on personal and family emergency planning.
- Review policies for use of personal time, sick time, and overtime hours. Develop contingency strategies and communicate current and updated policies with all staff. This should include policies on leave cancelation, mandatory overtime, and other involuntary work schedule considerations.
- Maintain a process for tracking staff absence due to COVID-19.
- Review staffing surge plans and update as needed. Determine how you will address workforce shortages. Consider adaptations to current staffing levels/schedules, contracting options, availability of volunteers, and staffing partnerships with other LTC or healthcare facilities.
  - Review the requirements in the Centers for Medicare & Medicaid Services Final Rule on Emergency Preparedness that cover emergency staffing strategies (e.g., the use of volunteers and the process and role for integration of state and federally designated healthcare professionals) to address surge needs during an emergency.
  - Understand state requirements for staffing and determine alternatives if they would be needed (e.g., using a paramedic in place of registered nurse, staff in other roles who could assist)
  - Understand any state-based waiver of interstate licensure or other requirements that may facilitate staffing.
- Know how to access expertise to bolster staff knowledge and skills. Some facilities have
  partnered with other institutions or are located in jurisdictions with strike teams that can
  provide staff training, PPE fit testing, infection prevention techniques, and clinical advice to
  prevent or control COVID-19 outbreaks.
  - Explore whether your state has enacted a COVID-19 Personal Care Attendant Program (e.g., Florida, Kentucky).
  - Consider partnerships with academic institutions that may have staff with clinical, infection prevention, public health, and other expertise and may be able to offer training or consultation to your team.

### **Related Resources for Staffing**

#### Consumables/Supply Chain

- Identify supplies (e.g., nutrition, linens, pharmaceuticals) essential to the facility's operations and consider stockpiling or having backup vendor arrangements to minimize disruptions to supply chain.
- Connect with vendors and suppliers to discuss their projected ability to meet your supply needs.
- Identify any community sources of materials and make resource needs known to the HCC and local public health department early.
- Estimate days on hand supply of PPE for your staff.
- Develop a plan for distributing PPE items and controlling the supply inventory.



- Learn about private and public sources for PPE, including N95 respirators, in your area. Consider
  partnerships with other healthcare systems to obtain N95 respirators as a group if you are not
  able to do so through vendors and/or your state does not have adequate stock.
- Consider retail sources for simple/procedure masks, gloves, and barrier gowns if unable to obtain through usual vendors.
- Identify alternate supplies of cloth face coverings for residents.
  - Determine a method for providing residents with clean face coverings daily and laundering used masks.
- Identify environmentally controlled storage areas for stockpiling consumables.

### Related Resources for Consumables/Supply Chain

## Laboratory/Testing

- Adjust protocols for testing of suspected COVID-19 cases based on local, state, and national testing guidance.
- Consider serial testing for early identification of asymptomatic and pre-symptomatic cases and rapid implementation of control measures consistent with state guidelines.
- Review arrangements with laboratories to conduct testing of suspected cases and understand testing options in the area, including turnaround time.
- Emphasize onsite specimen collection to minimize transport of residents to offsite facilities.
- Follow and revise established testing plan for staff to align with disease transmission dynamics in your community and regulatory requirements.
- Provide or utilize resources for staff training on the specimen collection processes.

#### Related Resources for Laboratory/Testing

### Treatment/Transport/Discharge

- Continue assessing residents for COVID-19 symptoms (including symptoms such as loss of smell and taste) and vital signs, optimally including pulse oximetry. Specifically, observe older adults for generalized signs and symptoms such as malaise and change in mental status, since fever and respiratory symptoms are not always present, especially early.
- Ensure that policies on transfer to medical care are reviewed with the medical director and emphasize in-place/facility-based care when possible to minimize transfers and exposure risk.
- Consider alternatives to aerosol-generating procedures such as using metered dose inhalers instead of nebulizers. If an alternative is not an option, determine a safe way in which the therapy can be performed without putting other residents at risk.
- Cohort residents who are infected or recovering from infection separate from non-infected residents.
- Establish locations to isolate residents suspected of infection while waiting for laboratory confirmation. This may be confinement to a single room with closed door and signage listing required precautions.



- Review transport and care coordination protocols for acutely ill patients with suspected or confirmed COVID-19 with your HCC, local hospitals, and transport partners.
- Collaborate with EMS partners to develop a plan that includes entry to the facility and expected conduct (e.g., screening, PPE that should be worn, hand hygiene requirements). Consider assigning a facility escort and omitting screening for EMS staff during emergencies if the EMS personnel are screened at work.
- Coordinate with providers to identify services that may be delivered via telemedicine rather than transporting residents to an offsite facility.

## Related Resources for Treatment/Transport/Discharge

### Behavioral Health and Workplace Safety

- Support the mental well-being of your residents and staff.
- Train staff to understand and address common emotional reactions residents may have to social distancing, isolation, and quarantine.
- Make your staff aware of self-care and stress management actions, support family members of staff and residents, and provide options for 24/7 resources for acute issues and needs.
- Develop a workplace culture of safety in which staff look out for each other and:
  - Encourage staff to mentor and coach each other on following correct procedures and to correct those who are not.
  - Encourage staff to accept correction.
  - o Empower key staff members as "champions" to advocate for safe practices.
  - o Provide immediate and constructive correction of wrong behavior in a way that teaches rather than being punitive.
  - Consider education on <u>Crew Resource Management</u> or <u>Team STEPPS</u> to enhance team practices and safety.
  - Establish quality improvement metrics and program for evaluation and correction related to hand hygiene and compliance with guidelines for mask use.

#### **Related Resources for Behavioral Health and Workplace Safety**

## **Resources by Section**

## Related Resources for Emergency Planning

- American Health Care Association: <u>How You Can Help Prevent the Spread of Coronavirus</u> (COVID-19) in Long Term Care Facilities
- ASPR TRACIE: COVID-19 Long Term Care Resources Topic Collection
- ASPR TRACIE: Healthcare System Considerations for Secondary Disasters during COVID-19
- Behrens, L. and Naylor, M. (2020). <u>"We are Alone in This Battle": A Framework for a Coordinated Response to COVID-19 in Nursing Homes</u>. Journal of Aging and Social Policy. 32(4-5):316-322.
- California Department of Public Health (CDPH) and the California Association of Health Facilities (CAHF): NHICS: Nursing Home Incident Command System



- Centers for Disease Control and Prevention: <u>COCA Call Coronavirus Disease 2019 (COVID-19)</u>.
   Update and Information for Long-term Care Facilities Web on Demand
- Centers for Disease Control and Prevention: Preparing for COVID-19 in Nursing Homes
- Centers for Medicare & Medicaid Services: <u>Long Term Care Facilities</u> (Skilled Nursing Facilities and/or Nursing Facilities): CMS Flexibilities to Fight COVID-19
- County of Santa Clara Public Health Department: Long-Term Care Facilities COVID-19 Toolkit
- Georgia Department of Public Health: COVID-19: Long-Term Care Facilities
- Hall Render: <u>Policy Updates to Compliance Program Needed When Creating "COVID-19 Ready"</u>
   Skilled Nursing Facilities and Units
- Meyer, D., LaFave, S., Hart, A., et al.: <u>Recommendations for a Metropolitan COVID-19 Response</u>
   Special Emphasis Series: <u>Guidance on Protecting Individuals Residing in Long-Term Care</u>

   <u>Facilities.</u> Johns Hopkins Bloomberg School of Public Health.
- Minnesota Department of Health: <u>COVID-19 Toolkit: Information for Long-Term Care Facilities</u>
- NETEC: Long Term Care: Strategies to Care for Vulnerable Populations Webinar
- NETEC: <u>Tackling the COVID-19 Storm Through the Lens of Long-Term Care Facilities: Part 1</u> and Part 2 Webinars
- New Jersey Hospital Association: COVID-19 Toolkit of Resources for Long Term Care Facilities
- North Carolina Area Health Education Centers Program: <u>COVID-19 Preparedness Checklist</u>: <u>Planning Considerations for Acute Care and Long-Term Care Populations</u>
- North Carolina Department of Health and Human Services: <u>COVID-19 Outbreak Toolkit for Long-</u> <u>Term Care Settings</u>
- Office of the Assistant Secretary for Preparedness and Response: <u>COVID-19 Healthcare Planning</u>
   Checklist
- Office of the Assistant Secretary for Preparedness and Response: <u>National COVID-19 Clinical</u> Rounds: Long Term Care Facilities (5/1/2020)
- San Francisco Department of Public Health: <u>COVID-19 Preparedness and Management Toolkit</u> for Skilled Nursing Facilities
- State of Michigan: Nursing Home COVID-19 Plan
- The John A. Hartford Foundation: COVID-19 Resources for Nursing Homes and Long-Term Care
- The Society for Post-Acute and Long-Term Care Medicine: AMDA Update on COVID-19
- Washington State Department of Health: <u>Long Term Care Facilities</u>

#### Related Resources for Infection Prevention

- 3M: Center for Respiratory Protection
- Agency for Healthcare Research and Quality: <u>A Unit Guide to Infection Prevention for Long-Term</u>
   <u>Care Staff</u>
- Agency for Healthcare Research and Quality: <u>Coronavirus Disease 2019 (COVID-19) and Safety of</u> Older Adults
- American Health Care Association and National Center for Assisted Living: <u>Cohorting Residents</u> to <u>Prevent the Spread of COVID-19</u>



- American Health Care Association and National Center for Assisted Living: <u>Communal Dining</u>
   Guidance
- American Health Care Association and National Center for Assisted Living: <u>Keeping People</u>
   Connected: <u>Innovative Methods Using an Infection Prevention and Control Mindset</u>
- American Health Care Association and National Center for Assisted Living, and National Hospice and Palliative Care Organization: <u>Guidance on the Role of Hospice Services in LTC Facilities</u>
   During COVID-19 Pandemic
- American Society for Health Care Engineering: COVID-19 Recovery
- ASHRAE: Filtration/Disinfection
- ASPR TRACIE: <u>Healthcare Facility Hygiene Protocols</u>
- Bigelow, B., Tang, O., Toci, G., et al. <u>Transmission of SARS-CoV-2 Involving Residents Receiving Dialysis in a Nursing Homes Maryland, April 2020</u>. Morbidity and Mortality Weekly Report.
- California Department of Public Health: COVID-19: Guidance for Skilled Nursing Facilities
- Centers for Disease Control and Prevention. <u>Infection Prevention and Control Assessment Tool</u> for Nursing Homes Preparing for COVID-19
- Centers for Disease Control and Prevention: <u>Preparing for COVID-19 in Nursing Homes. U.S.</u>
  <u>Department of Health and Human Services</u>
- Centers for Medicare & Medicaid Services: <u>Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes</u>
- Centers for Medicare & Medicaid Services: <u>Nursing Home Reopening Recommendations</u>
   Frequently Asked Questions
- Centers for Medicare & Medicaid Services: <u>Toolkit on State Actions to Mitigate COVID-19</u>
   Prevalence in Nursing Homes
- COVID-19 Healthcare Resilience Task Force: <u>Nursing Home Concepts of Operations for Infection</u>
  Prevention and Control
  - Davis, C. (2020). <u>How to Manage Residents Who Receive Dialysis When COVID-19 is at the Door.</u> American Association of Post-Acute Care Nursing.
- Environmental Protection Agency: List N: Disinfectants for Use Against SARS-CoV-2 (COVID-19)
- Los Angeles County Department of Public Health: <u>Guidelines for Preventing and Managing</u>
   COVID-19 in Skilled Nursing Facilities
- Minnesota Department of Health: COVID-19 Toolkit: Information for Long-Term Care Facilities
- Minnesota Department of Health: <u>Personal Protective Equipment for Long Term Care/ Assisted Living/ Other Non-Acute Care Facilities</u>
- Nebraska Medicine: Infection Control Assessment and Promotion Program
- New Jersey Hospital Association: COVID-19 Toolkit of Resources for Long Term Care Facilities
- New York City Department of Health and Mental Hygiene: <u>A Handbook for Infection Control in Nursing Homes</u>
- New York State Department of Health: Recommendations to Protect Nursing Home Residents
- North Carolina Department of Health and Human Services: <u>COVID-19 Outbreak Toolkit for Long-</u> Term Care Settings



- Occupational Safety and Health Administration: Fit Testing Procedures
- Occupational Safety and Health Administration: <u>Respirator Medical Evaluation Questionnaire</u>
- Occupational Safety and Health Administration: <u>User Seal Check</u>
- San Francisco Department of Public Health: <u>COVID-19 Preparedness and Management Toolkit</u> for Skilled Nursing Facilities\_
- San Francisco Department of Public Health: <u>Interim Guidance: Prevention and Management of COVID-19 in Long-Term Care Facilities</u>
- Sanchez, G., Biedron, C., Fink, L., et al. (2020). <u>Initial & Repeated Point Prevalence Surveys to Inform SARS-CoV-2 Infection Prevention in 26 Skilled Nursing Facilities Detroit, MI, March-May 2020</u>. Morbidity and Mortality Weekly Report. 69(27):882-886.
- Smith, P, Bennett, G., Bradley, S., et al. (2008). <u>SHEA/APIC Guideline: Infection Prevention and Control in the Long-Term Care Facility. American Journal of Infection Control</u>. 36(7):504-527.
- Spokane Regional Health District: Long-Term Care Social Distancing Checklist for COVID-19
- Washington State Department of Health: Long Term Care Facilities.

#### Related Resources for Communication

- Centers for Medicare & Medicaid Services: COVID-19 Nursing Home Data
- County of Santa Clara Public Health Department: Long-Term Care Facilities COVID-19 Toolkit
- Gaur, S., Pandya, N., Dumyati, G., et al. (2020). <u>A Structured Tool for Communication and Care Planning in the Era of the COVID-19 Pandemic</u>. Journal of the American Medical Directors Association. 21(7):943-947.
- Minnesota Department of Health: COVID-19 Toolkit: Information for Long-Term Care Facilities
- New Jersey Hospital Association: <u>COVID-19 Toolkit of Resources for Long Term Care Facilities</u>
- New York State Department of Health: Recommendations to Protect Nursing Home Residents
- San Francisco Department of Public Health: <u>COVID-19 Preparedness and Management Toolkit</u> for Skilled Nursing Facilities.
- Washington State Department of Health: Long Term Care Facilities

### Related Resources for Staffing

- Archbald-Pannone, L., Harris, D., Albero, K., et al. (2020). <u>COVID-19 Collaborative Model for an Academic Hospital and Long-Term Care Facilities</u>. Journal of the American Medical Directors Association. 21(7):939-942.
- ASPR TRACIE: <u>Healthcare Facility Onboarding Checklist</u>
- California Association of Health Facilities: Surge Strategies for SNFs (Space/Staff/Stuff)
- Centers for Disease Control and Prevention: <u>Criteria for Return to Work for Healthcare</u> <u>Personnel with SARS-CoV-2 Infection</u>
- COVID-19 Healthcare Resilience Task Force: COVID-19 Workforce Virtual Toolkit
- Florida Health Care Association: <u>Temporary COVID-19 Personal Care Attendant Program</u>
- Kaiser Family Foundation: <u>COVID-19 and Workers at Risk: Examining the Long-Term Care</u>
   Workforce



- Minnesota Department of Health: COVID-19 Toolkit: Information for Long-Term Care Facilities
- Minnesota Department of Health: Long-Term Care (LTC) Emergency Preparedness
- National Academies of Sciences, Engineering, and Medicine: <u>Rapid Expert Consultation on</u>
   Staffing Considerations for Crisis Standards of Care for the COVID-19 Pandemic (July 28, 2020)
- New Jersey Hospital Association: COVID-19 Toolkit of Resources for Long Term Care Facilities
- North Carolina Department of Health and Human Services: <u>COVID-19 Outbreak Toolkit for Long-</u> <u>Term Care Settings</u>
- Occupational Safety and Health Administration: <u>COVID-19 Guidance for Nursing Home and Long-</u> <u>Term Care Facility Workers</u>
- San Francisco Department of Public Health: <a href="Months:20VID-19 Preparedness and Management Toolkit for Skilled Nursing Facilities">COVID-19 Preparedness and Management Toolkit for Skilled Nursing Facilities</a>
- State of Indiana: <u>Emergency Order Authorizing Temporary Personal Care Attendant Positions</u> and Training for Nursing Homes
- U.S. Army: CAL Guard Assisting Skilled Nursing Facilities in LA County

### Related Resources for Consumables/Supply Chain

- ASPR TRACIE: <u>COVID-19 Supply Chain Resources</u>
- California Association of Health Facilities: Surge Strategies for SNFs (Space/Staff/Stuff)
- Centers for Disease Control and Prevention: <u>Optimizing Supply of PPE and Other Equipment</u> <u>during Shortages</u>
- New Jersey Hospital Association: COVID-19 Toolkit of Resources for Long Term Care Facilities
- North Carolina Department of Health and Human Services: <u>COVID-19 Outbreak Toolkit for Long-</u> Term Care Settings

#### Related Resources for Laboratory/Testing

- American Health Care Association and National Center for Assisted Living: <u>Algorithm for Testing</u> and Cohorting Nursing Home Residents
- Centers for Disease Control and Prevention: <u>Considerations for SARS-CoV-2 Antigen Testing in Nursing Homes</u>
- Centers for Disease Control and Prevention: Testing Guidelines for Nursing Homes
- Centers for Medicare & Medicaid Services: <u>Frequently Asked Questions: COVID-19 Testing at Skilled Nursing Facilities/Nursing Homes</u>
- Centers for Medicare & Medicaid Services: <u>Interim Final Rule (IFC)</u>, <u>CMS-3401-IFC</u>, <u>Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency Related to Long-Term Care (LTC) Facility Testing Requirements and Revised COVID-19 Focused Survey Tool
  </u>
- Centers for Medicare & Medicaid Services: <u>Trump Administration Strengthens COVID-19</u>
   Surveillance with New Reporting and Testing Requirements for Nursing Homes, Other Providers



- Dora, A., Winnett, A., Jatt, L., et al. (2020). <u>Universal and Serial Laboratory Testing for SARS-CoV-2 at a Long-Term Care Skilled Nursing Facility for Veterans Los Angeles, California, 2020</u>.
   Morbidity and Mortality Weekly Report. 69(21):651-655.
- European Centre for Disease Prevention and Control: <u>Surveillance of COVID-19 at Long-Term</u> Care Facilities in the EU/EEA
- Hatfield, K., Reddy, S., Forsberg, K., et al. (2020). <u>Facility-Wide Testing for SARS-CoV-2 in Nursing Homes Seven U.S. Jurisdictions, March-June 2020</u>. Morbidity and Mortality Weekly Report.
- Minnesota Department of Health: Long-Term Care (LTC) Emergency Preparedness
- San Francisco Department of Public Health: <u>COVID-19 Preparedness and Management Toolkit</u> for Skilled Nursing Facilities
- Sanchez, G., Biedron, C., Fink, L., et al. (2020). <u>Initial & Repeated Point Prevalence Surveys to Inform SARS-CoV-2 Infection Prevention in 26 Skilled Nursing Facilities Detroit, MI, March-May 2020</u>. Morbidity and Mortality Weekly Report. 69(27):882-886.
- The Society for Post-Acute and Long-Term Care Medicine: <u>Policy Statement: COVID-19 Testing</u>
  <u>Strategies Should be Tailored to the Clinical Situation</u>
- Washington State Department of Health: Long Term Care Facilities

## Related Resources for Treatment/Transport/Discharge

- Agency for Healthcare Research and Quality: <u>Coronavirus Disease 2019 (COVID-19) and Safety of</u> Older Adults
- American Health Care Association and National Center for Assisted Living: <u>Accepting Admissions</u> from Hospitals During COVID-19 Pandemic
- Birdsall, J., Lind, L., and Lane, J. (2020). <u>How to Provide Telehealth in Nursing Homes.</u> American Psychological Association.
- Centers for Medicare & Medicaid Services: <u>Long-Term Care Nursing Homes Telehealth and Telemedicine Tool Kit</u>
- Florida Health Care Association, Florida Hospital Association, and Leading Edge Florida: <u>Hospital</u> to <u>Post-Acute Care Facility Transfer – COVID-19 Assessment</u>
- Florida Health Care Association, Florida Hospital Association, and Leading Edge Florida: Post-Acute Care and Behavioral Health to Hospital Transfer – COVID-19 Assessment and Communication
- Florida Hospital Association: <u>Clarification of COVID-19 Guidance Pertaining to Testing and</u>
  Disposition of Hospitalized Patients
- Institute for Healthcare Improvement: <u>Age-Friendly Health Systems Design to Address COVID-19</u>
- Los Angeles County Department of Public Health: Patient Transfer Criteria from Hospitals
- New Jersey Hospital Association: COVID-19 Toolkit of Resources for Long Term Care Facilities
- Peter Lamy Center on Drug Therapy and Aging: Optimizing Medication Management during the COVID-19 Pandemic: Implementation Guide for Post-Acute and Long-Term Care
- Project ECHO: Transitions of Care: From Acute Care to Long Term Care



- San Francisco Department of Public Health: <u>COVID-19 Preparedness and Management Toolkit</u> for Skilled Nursing Facilities
- Washington State Department of Health: Long Term Care Facilities

## Related Resources for Behavioral Health and Workplace Safety

- Agency for Healthcare Research and Quality: <u>TeamSTEPPS</u>
- American Health Care Association and National Center for Assisted Living: <u>Keeping People</u>
   Connected: Innovative Methods Using an Infection Prevention and Control Mindset
- American Health Care Association and National Center for Assisted Living, and National Hospice and Palliative Care Organization: <u>Guidance on the Role of Hospice Services in LTC Facilities</u> <u>During COVID-19 Pandemic</u>
- American Hospital Association: Crew Resource Management Training
- ASPR TRACIE: <u>COVID-19 Behavioral Health Resources</u>
- ASPR TRACIE: Disaster Behavioral Health Self Care for Healthcare Workers Modules
- ASPR TRACIE: Mini Modules to Relieve Stress for Healthcare Workers Responding to COVID-19
- Birdsall, J., Lind, L., and Lane, J. (2020). <u>How to Provide Telehealth in Nursing Homes.</u> American Psychological Association.
- Center for the Study of Traumatic Stress: <u>Caring for Patients' Mental Well-Being During</u>
   <u>Coronavirus and Other Emerging Infectious Diseases: A Guide for Clinicians</u>
- Center for the Study of Traumatic Stress: <u>Sustaining the Well-Being of Healthcare Personnel</u>
   <u>During Coronavirus and Other Infectious Disease Outbreaks</u>
- COVID-19 Healthcare Resilience Task Force: <u>Managing the Effects of Social Distancing in Older</u>
   Adults During COVID-19
- New York State Department of Health: Recommendations to Protect Nursing Home Residents
- Substance Abuse and Mental Health Services Administration: Disaster Distress Helpline

#### **Additional Resources**

- ASPR TRACIE: Novel Coronavirus Resources Page
- Centers for Disease Control and Prevention: Coronavirus (COVID-19) Web Page
- Centers for Medicare & Medicaid Services: Current Emergencies Web Page
- Centers for Medicare & Medicaid Services: <u>Nursing Home Strategies for COVID-19 Only Isolation</u> of COVID-19 Residents
- Centers for Medicare & Medicaid Services: <u>Toolkit on State Actions to Mitigate COVID-19</u>
   <u>Prevalence in Nursing Homes</u>
- Kim, G., Wang, M., Pan, H., et al. (2020). <u>A Health System Response to COVID-19 in Long-Term Care and Post-Acute Care: A Three-Phase Approach</u>. Journal of the American Geriatrics Society. 68(6):1155-1161.
- National Association of Counties: Nursing Homes and COVID-19
- National Emerging Special Pathogens Training and Education Center: Long-Term Care Facilities



- Occupational Safety and Health Administration: COVID-19 Web Page
- Office of the Assistant Secretary for Preparedness and Response: <u>COVID-19: 2019 Novel</u> <u>Coronavirus Disease Web Page</u>
- The National Academies of Sciences, Engineering, and Medicine: <u>How Nursing Homes are</u> <u>Handling COVID-19</u>: <u>Best Practices from Maryland and Massachusetts</u>
- U.S. Department of Health and Human Services: Coronavirus (COVID-19) Web Page
- World Health Organization: <u>Preventing and Managing COVID-19 Across Long-Term Care Services</u>

