

**Policy Title:** Coronavirus disease (COVID-19) management

**Purpose:** With timely recognition and reporting of coronavirus symptoms and with the collaboration of local and state health authorities it will enhance our ability to help prevent or mitigate a COVID-19 impact and protect the physical health of our residents, staff and the public based upon the current information available on the evolving COVID-19 pandemic.

**Definition:**

According to the Centers for Disease Control (CDC) Coronavirus disease (COVID-19) is defined as a respiratory illness that can spread from person to person. With an incubation period estimated from 2-14 days, the virus may present with any of the following signs and symptoms:

- Fever
- Cough
- Myalgia/Fatigue
- Shortness of breath at illness onset
- Sore throat
- Less commonly reported symptoms include sputum production, headache, hemoptysis, and diarrhea

Older patients and those with chronic medical conditions may be at higher risk for severe illness.

Hearth communities are not equipped with airborne infection isolation rooms (AIIR).

**Procedure:**

**Senior Living:**

1. All Hearth employees will implement standard, contact and airborne precautions during care of residents with suspected coronavirus, in addition to standard precautions used with all residents regardless of symptoms.
2. Clean and disinfection should follow guidelines below and appropriate Personal Protective Equipment (PPE) should be worn during processes (applies to all neighborhoods and community areas):

### SURFACES

- a. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- b. For disinfection, use approved cleaning products EPA-registered, hospital grade disinfectant to decrease environmental contamination (follow instructions to dry times, and application).
- c. For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces.

### LINEN

- d. Do not shake dirty laundry; this minimizes the possibility of dispersing virus through the air.
  - e. Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items however at Hearth we do not comingle resident's laundry.
  - f. Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.
3. Contact and airborne precautions are continued for (14) days after illness onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer. Precautions may be continued for longer periods based on clinical judgement.
  4. All residents will be monitored during activities, meal service, and during care services, if applicable, for any change in condition with wellness offices notified to investigate further.
  5. Any residents that present with a fever and lower respiratory illness (fever equal to or greater than 100 degrees Fahrenheit), cough, sore throat, shortness of breath and without alternative explanatory diagnosis (e.g., influenza) must place a surgical mask over the resident's mouth and nose and move the resident to a private room as soon as possible with the room door closed.

6. Promptly notify the community's director of nursing/case manager/wellness director and the executive director along with the County Department of Health, in consultation with the resident's physician, will determine whether a resident is a Person Under Investigation (PUI) for COVID-19 and will need testing. Also notify your Regional nurse, as soon as possible, who will communicate with Health Management's home office to coordinate and/or provide additional support to the Health Community.
7. The Health Community should contact their local/state health department immediately to notify them of residents with fever and lower respiratory illness who have traveled internationally within 14 days of symptom onset for any person, including healthcare workers, who has had close contact with a laboratory confirmed COVID-19 patient within 14 days of symptom onset.
8. Local and state public health staff will determine if the resident meets the criteria for a person under investigation (PUI) for COVID-19. The state and local health department will assist clinicians to collect, store, and ship specimens appropriately, including after hours or on weekends/holidays.
9. Any resident that develops a fever or any respiratory symptoms, will have a facemask (N-95 mask is preferred however, if supplies are limited, a surgical mask will be utilized) placed over their nose and mouth and be placed on isolation to his or her room with the door closed and only essential staff will enter the room.
10. Any prospect/new admission will be screened by the community's nurse for signs and symptoms of suspected COVID-19 or other respiratory infections and/or travel outside of the United States or exposure to persons with COVID-19.
11. Any prospect/new admission will have a physician complete the "Admission/Readmission Medical Update form" to certify the resident has had no signs or symptoms of respiratory illness to include exposure and symptoms of the norovirus/COVID-19 and that no isolation precautions are necessary.

12. All new admissions/readmissions will have community staff take their temperature each shift for 14 days after admission/readmission and will notify the primary physician of a temperature equal to or greater than 100 degrees Fahrenheit or the development of respiratory signs and symptoms or any change in condition.
13. Pertinent charting will be utilized by the nursing staff for any residents on isolation, new admissions/readmissions, or those residents experiencing any change in condition to include but not limited to respiratory symptoms and the COVID-19.
14. All Hearth Communities will have stock supplies to include but not limited to:
  - 60%-95% Alcohol based hand sanitizer
  - Anti-bacterial soap
  - Face masks-surgical and N-95
  - Disposable Gloves
  - Isolation Gowns

\*Par levels will be maintained to the best of our ability depending upon local, state and nationwide shortages. Hearth management will exhaust all online venues as well as local distributors and the local Office of Emergency Management (OEM) to obtain supplies.

14. Residents requiring hospitalization should be transferred as soon as feasible. A mask covering resident's mouth and nose will be placed on the resident and EMS will be notified of the potential COVID-19 symptoms/respiratory illness. Upon resident vacating room, door will be locked, and staff will not be permitted to re-enter.

15. Implement staffing procedures to minimize the number of Hearth employees that enter the resident's room.

16. If a resident is on room isolation, an employee log will be maintained on the outside of the resident's door to track potential exposure. All services that the resident will receive, will be bundled together and delivered by the same caregiver, if and whenever possible to include but not limited to housekeeping, meal delivery, temperature monitoring, personal care, and medication assistance.

17. If any equipment or activity supply that is used for more than one resident will be cleaned and disinfected according to manufacturer's instructions, before the use by another resident.

18. Staff should perform hand hygiene with antibacterial hand sanitizer before and after all resident contact, contact with potentially infectious material and before putting on and upon removal of PPE, including gloves. Hand hygiene in health care settings also can be performed by washing with soap and water for at least 20 seconds. If hands are visibly soiled, use soap and water before returning to hand sanitizer. Hearth management will try to keep hand hygiene supplies readily available at every care location.

19. Staff who develop respiratory symptoms or a fever during their shift, should remove themselves from resident contact, apply a face mask and inform their supervisor. Ill staff members may not return to work until they have been afebrile longer than 24 hours without the use of antipyretics and respiratory symptoms have improved.

20. Food service:

- Any tray service for in-apartment meals will be provided on disposable trays, utensils, plates and cups/glasses
- Will maintain all temperatures and logs as required by Food Safety and Sanitation Guidelines
- Will utilize paper napkins instead of cloth napkins

21. Activities will:

- Promote smaller group activities with distance in between residents
- Limit activities that cause residents to use the same object when it cannot be cleaned (i.e.: balloon volleyball)
- Activity personnel will provide a designated caregiver of isolated residents any activity supplies to utilize during isolation. Supplies will remain in resident's room for duration of isolation.
- Van services may be temporarily suspended at the discretion of the executive director or Hearth Management
- Outside performers/entertainers may be suspended at the discretion of the executive director or Hearth Management
- Promote the use of Skype, facetime and other forms of technology to communicate with resident's friends, family and loved ones to maintain social connections.

**Keepsake Village:**

\*Due to the decreased ability of residents on Keepsake Village to communicate effectively, they will have their temperature taken and recorded daily by staff. If their temperature is equal to or above 100 degrees Fahrenheit, their physician will be notified, they will be isolated to their room, if possible, pending further instructions from the resident's physician, taking of the temperature will be increased to every shift and pertinent charting will begin.

\*Handwashing will be performed with the assistance of staff for all residents prior to each meal.

\*All tables and chairs will be wiped down after each meal.

\*Staff will assist residents with use of hand sanitizer before snacks and during the day, as needed.

**Visitor Access:**

\*Restriction of non-essential visitation and movement within the community may be considered at the discretion of the executive director or designee and Hearth Management.

\*The community will post visual alerts (i.e. signs and posters) at the entrance and in strategic places (i.e., elevators, staff break room) to provide residents and staff with instructions about hand hygiene, respiratory hygiene and cough etiquette. Instructions should include how to use face masks or tissues to cover nose or mouth when coughing or sneezing, to dispose of tissues and contaminated items in waste receptacles, and how and when to perform hand hygiene.

\*All visitors are instructed to follow respiratory and cough etiquette precautions.

\*Visits are scheduled and controlled to allow for screening visitors for symptoms of acute respiratory illness before entering the community.

\*Visitors are instructed on hand hygiene and use of personal protective equipment (PPE) while in the resident's room.

\*At the discretion of Hearth Management, the community may restrict visitors from entering the community for the safety and well-being of its residents therefore, the receptionist or designee will screen all visitors for COVID-19 to include international travel within the last 14 days or in close contact with someone with confirmed COVID-19, or with someone who has had close contact with a person under investigation, or has any signs or symptoms of respiratory illness.

**\*AT ANYTIME, THE HEARTH COMMUNITY MAY BE REQUIRED TO FOLLOW GUIDANCE FROM THEIR LOCAL/STATE DEPARTMENT OF HEALTH (DOH) WHICH MAY SUPERCEDE ANY OF THE ABOVE PROCESSES.**

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