



Preparing the Long Term Care Sector – Coronavirus Best Practices

As the coverage of the coronavirus, also termed COVID-19, grows, IHCA wanted to reach out to our members to share best practices to help you offer the best protection to those you serve.

This is especially important now that the CDC has confirmed that California has the first possible community transmission of the virus in the United States, there has been confirmation of cases in long term care centers in Washington state, and Illinois (home to one of the busiest international airports in the world) now has five confirmed cases of the virus.

With confirmed community-based transmissions of the coronavirus as well as its presence in long term care, it is quite possible that it will spread to others in the community, especially while we are still in flu season.

There are ways you can protect yourself at work and at home - and help prevent the spread of the virus in your area. Please view the following information and resources to help you stay prepared.

Protect yourself at work:

- Advise all staff to wear their PPE diligently when appropriate. At this time, the CDC is not recommending use of PPE for workers who are not providing direct patient care.
- When it is appropriate, use social distancing from anyone displaying symptoms.
- Wash or sanitize your hands after every interaction with a resident or visitor.
- More stringent standards are called for if you have reason to suspect a possible cause, such as droplet precautions for the resident; full PPE for all staff within a six-foot radius; N95 masks; isolation gowns; and face/eye protection.
- If you suspect a possible coronavirus case, please report it to the Department of Public Health immediately.

Protect your building:

- Consider adding more robust language to your entrance signs, such as warning signs in bold letters asking visitors having flu and/or respiratory symptoms to temporarily refrain from visiting the facility even if they don't have travel history.
- Encourage all staff to self-isolate at home if they display symptoms of the flu, especially if they have received the flu vaccine.
- Take precautionary removal of care staff who identify as suspected cases. Have them self-isolate at home as well.
- Prohibit staff from reporting to work if they are sick until cleared to return.
- Consider restricting admissions or heightened screening.

- Environmental cleaning: At this time, retrain to and [follow these guidelines](#) from CDC about infection control and cleaning.
- Post visual alerts that remind everyone to wash their hands and cover their coughs.

Protect yourself at home and in the community:

- Practice social distancing when possible. Stay away from anyone coughing or sneezing - particularly, if you do not know the person.
- Practice good hand washing hygiene.
- If you are sick: Stay home and self-isolate if you have flu symptoms or a fever.
- Prepare for schools or businesses to close.
- If you are sick, call the physician, clinic or hospital before you visit them. Do not go to a clinic or hospital with symptoms without calling first - they will instruct you on the proper procedures.

While we are still taking a "wait and see" approach, the information above can be used to minimize potential impact.

In addition to the practices above, centers should contemplate taking additional precautionary measures

Visitor Restrictions: While the threat of contamination is still widespread, limiting potential contact with those who may carry the virus is important. Of course, any action you take in this regard must be done in compliance with appropriate regulations on visiting hours, but this could include:

- Restricting very young children from visiting as they are in more direct contact with a wide variety of people through school and other activities and are at a higher risk of contracting and carrying the virus.
- Restricting visitors who have flu-like symptoms from visiting the center.
- Limiting the number of visitors to a resident at a given time.

Travel Related Restrictions: Based on the CDC's [Information for Travel](#), centers should consider implementing precautions regarding staff and visitors who have traveled to countries affected by COVID-19. A good measure is a restriction of at least 14 days, at which time the disease should have presented itself and/or run its course, for those who have visited a CDC warning level 2 or 3 country or region, which are and will be updated on the [CDC travel website](#).

AHCA has compiled talking points if you should receive any media inquiries on COVID-19. You can see those [HERE](#). If you do receive media outreach, we also ask that you direct them to [Matt Hartman](#) at IHCA.

Finally, to further assist you in understanding what you can do during this time, the CDC has updated guidelines specific to healthcare facilities. As a part of that, they will be hosting a webinar titled *"Coronavirus Disease 2019 (COVID-19) Update—What Clinicians Need to Know to Prepare for COVID-19 in the United States."* The webinar is scheduled for Thursday March 5, 2020 at 1:00 CST, and you can register for it [HERE](#).

IHCA staff is here to assist you in any way that we can on this issue. We will continue to work with the CDC, CMS and DPH on this. Please reach out to me or IHCA clinical or policy staff if you have any questions or concerns.