

Coronavirus Guidance for Retirement Communities & Independent Living facilities

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Retirement communities & COVID-19

- Independent living facilities are a wonderful place of support for our aging population
- Meals, activities and companionship help those who may otherwise live alone
- Unfortunately, this type of living situation is akin to a college dormitory for seniors, and all Universities across the nation have closed!
- For this reason, special measures need to be taken to significantly minimize congregating and prevent the spread of COVID-19

<https://www.cdc.gov/coronavirus/2019-ncov/community/retirement/guidance-retirement-response.html>

Cancel all public or non-essential group activities and events.

- For essential group activities that CANNOT be canceled, implementing the following social distancing measures can help:
 - Alter schedules to eliminate mixing
 - Limit programs with external staff
 - There should be no communal dining. Place chairs and tables at least 6 feet apart if residents must be brought together for feeding assistance.
- Because canceling social interaction may increase risk of adverse mental health outcomes, particularly during a stressful event of a disease outbreak, administrators can provide information to help support residents in managing stress and anxiety during this COVID-19 outbreak.

Clean and disinfect all common areas and shared facilities.

- Clean and disinfect common spaces at least daily
- Give special attention to high-touch surfaces
- Ensure staff follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, necessary personal protective equipment, etc.).
- A list of products that are EPA-approved for use against the virus that causes COVID-19 is available on CDC website.

Inform residents, workers, volunteers, and visitors about COVID-19.

- In an attempt to decrease the stress of the outbreak and help prevent or slow spread of the disease
 - Share the facts about COVID-19
 - Ensure that residents, workers, volunteers, and visitors are aware of
 - The symptoms of COVID-19,
 - The health risks of COVID-19,
 - Health conditions that may put them at higher risk of becoming very sick
 - What to do if they become ill
- Administrators can support residents who have no or limited access to the internet by
 - Delivering print materials to their residences. Printable materials for community-based settings are available on the CDC website.
 - Providing easy to understand handouts and high-visibility posters in high-traffic locations.
 - Ensuring educational materials and information are provided for non-English speakers and low literacy persons.

Help residents establish a “buddy” system to ensure they stay connected.

- Owners, administrators, and operators of retirement communities and ILF may want to identify residents who have unique medical needs (including behavioral health needs), and access and functional needs to encourage them to develop a plan if they or their primary caretaker(s) become ill.
- They can assist in finding volunteers to assist residents who may need extra assistance in getting the medical help they need and train these volunteers in following personal protective measures. These volunteers should not be persons who are at higher risk for serious illness from COVID-19. Volunteers can also consider checking up on residents via electronic means if appropriate.

Consider limiting the number of non-essential visitors.

- Retirement communities and ILF SHOULD limit visitation to those who are essential to preserving the health (including mental health), well-being, and safety of residents.
- Advise, and continually reinforce, that maintaining social distancing (at least 6 feet) can help reduce coronavirus transmission.
- No outside non-essential workers, contractors, or volunteers should have interaction with residents or staff.

Screen, when possible, and advise workers and essential volunteers.

- Administrators should screen workers and essential volunteers who will be interacting with residents for signs and symptoms of COVID-19.
- This includes actively taking each person's temperature using a no-touch thermometer, and asking whether or not the person is experiencing shortness of breath or has a cough, or has any new or persistent signs or symptoms of illness.
- They should be advised that if they develop fever or symptoms of respiratory infection while at work, they should immediately put on a facemask, inform their supervisor, and leave the workplace.

What if you have a case of COVID-19 in your retirement community

- If a **person with COVID-19 resides in or recently has been to a retirement community or ILF**, CDC recommends the following additional measures:
 - **Coordinate with local health officials****
- Upon learning that a resident, worker, volunteer, or visitor of the retirement community or the ILF has COVID-19, ask the person to self-isolate and contact local health officials.
- Notify the local health department about any concerns, including any clusters of residents or workers with respiratory illness (e.g., 3 or more persons with onset of respiratory symptoms within 72 hours).
- Local health officials will help determine the appropriate course of action for risk assessment and public health management in the facility or community.

Communicate with residents, workers, volunteers, and visitors.

- In coordination with local health officials, communicate the possible COVID-19 exposure to all residents and workers, volunteers, and visitors.
- This can be done by placing signage in common areas and entrances/exits and by letter to all residents. Residents could be advised to inform their recent personal visitors of potential exposure.
- Maintain confidentiality as required by the Americans with Disabilities Act (ADA) and Health Insurance Portability and Accountability Act (HIPAA).
- Messages should attempt to counter potential stigma and discrimination.

Ask residents to self-monitor for 14 days and take action, if sick.

- Self-monitoring means a person takes his/her temperature twice a day and pays attention to cough or difficulty breathing. If a resident feels feverish or their temperature is 100.4°F/38°C or higher, they have a cough, or difficulty breathing during the self-monitoring period, the following actions will help prevent spreading further illness:
 - Stay home
 - Limit contact with others
 - Report their illness to retirement community and ILF administrators
 - Seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed
 - Follow CDC guidance on when to discontinue isolation

Thank you!

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