

# **COVID-19 outbreak checklist for long-term care facilities**

This checklist lists the first and second priorities which should be completed within the first 24-72 hours of an outbreak. The checklist is not comprehensive. Read the Recommendations and resources for COVID-19 in LTCF for more details to help guide your response. Assisted living facilities may follow the guidance in this document or adopt community prevention strategies based on COVID-19 community levels.

#### First priority (within 24 hours)

Contact tracing
☐ Identify residents and staff who may have had <u>close contact</u> / <u>higher-risk</u> exposure to the
person who tested positive for COVID-19
Outbreak testing
<ul> <li>Test all exposed residents/staff right away (but no sooner than 24 hours after the</li> </ul>
exposure)
<ul> <li>Test again 48 hours after the first negative test</li> </ul>
<ul> <li>Test again 48 hours after the <b>second</b> negative test</li> </ul>

- □ Consider broad-based testing (testing the entire unit or building) if all close contacts cannot be identified or if COVID-19 continues to spread
- ☐ Contact HAI for mobile testing team support (PCR only) for broad-based testing

## Managing positive cases

- Isolate residents who test positive in a private room and use transmission-based precautions (N95 respirators, gloves, gown, eye protection) for a minimum of 10 days, regardless of vaccination status
   Group positive residents together in the same hallway or area when possible
   Positive staff should not work for 10 days (they may return to work after 7 days if they test
- negative two times with an antigen test on days 5-7)

## Personal protective equipment (PPE)

- ☐ Use N95 respirators, eye protection, gown, and gloves when entering isolation rooms
  ☐ Staff should wear masks and consider using eye protection while working in an area (
- Staff should wear masks and consider using eye protection while working in an area (unit, hallway) or facility where a COVID-19 outbreak is occurring
- □ Encourage residents to wear masks in common areas
- □ <u>Don and doff PPE</u> correctly between COVID-19 and non-COVID-19 resident interactions

## Reporting

- □ Submit all individual COVID-19 test results via NHSN or the state portal (EDX)
- ☐ Contact HAI (<u>HAI@utah.gov</u>) and your local health department to report all new cases



#### **Therapeutics**

s to get COVID-19

# **Second priority (within 48-72 hours)**

#### Co

Comi	munication and documentation
	Post signs on outside doors to let visitors and vendors know about a COVID-19 outbreak
	Tell residents, resident families/guardians, visitors, and new admissions about the
	outbreak status at the facility
	Document all testing and preventive measures performed
Comi	munal dining and group activities
	Encourage all residents to wear masks in common areas
	Consider small group dining and/or activities to reduce exposures
	Consider canceling group activities and dining if COVID-19 continues to spread
Visita	ation
	Implement strategies to reduce the spread of COVID-19 for visitors (e.g., recommend
	visitors wear masks, limit contact of visitors in other areas of the facility)
	Post signs at entry points to let visitors know about proper infection prevention practices
	(e.g., hand hygiene, masking, don't visit if they're sick)
Disin	fection
	Schedule regular cleaning and disinfection of surfaces and objects which are touched often
	Disinfect shared equipment between each use
	Use EPA registered N List disinfectants

#### **Definitions:**

COVID-19 testing: COVID-19 testing can include any of the following: point of care (POC), antigen, PCR, and NAAT testing

Close contact: Cumulative time period of 15 minutes or more in a 24-hour period within six feet of a person with confirmed COVID-19 infection or any unprotected direct contact with infectious secretions or excretions. Any duration should be considered prolonged if exposure occurred during an aerosol-generating procedure.

Higher risk exposure: Occurs when the healthcare provider (HCP) had prolonged close contact with someone with confirmed COVID-19 and any of the following:

- HCP was not wearing a respirator (N95) or eye protection and the person with COVID-19 infection was also not wearing a face mask
- HCP was not wearing all recommended personal protective equipment (gown, gloves, eye protection, respirator) while performing an aerosol generating procedure