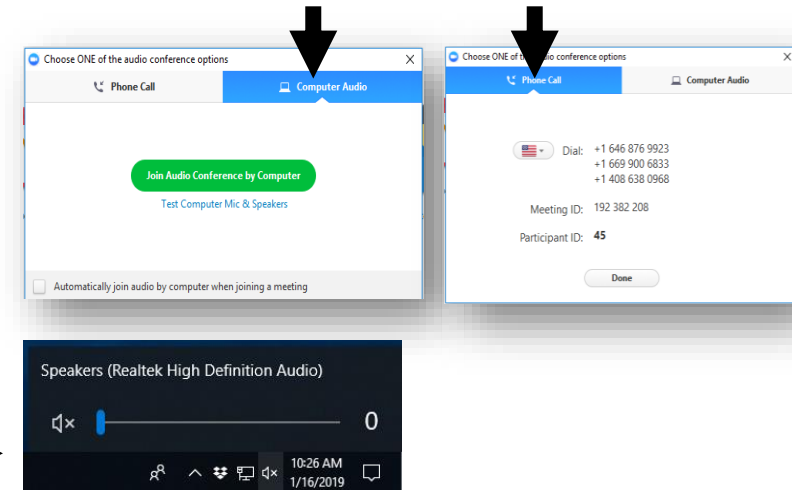


Zoom Platform Quick Reference

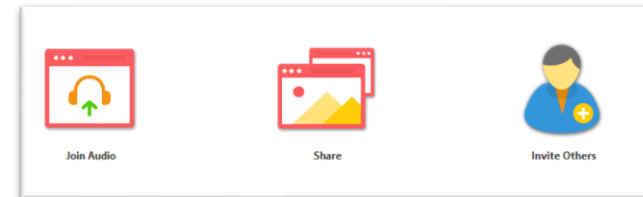
When you click on the zoom link:

- You will have to choose one of the audio conference options: Phone or Computer
- If you are experiencing a bad audio connection through your computer, try dialing in to the phone line.
- **If you are experiencing an echo and dialed in over the phone, mute your computer speakers.**

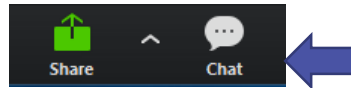


If you didn't see the phone numbers to dial in

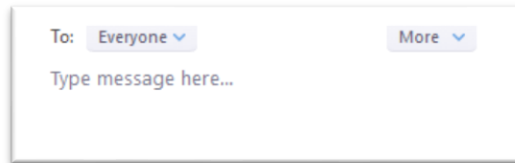
Click on the Join Audio icon



Zoom Platform Quick Reference



You can use the "Chat" feature to enter a question. Click the Chat to open the in-meeting chat.



You can type in the message box to enter your question or unmute your phone to ask a question.

Coronavirus Disease 2019 (COVID-19)

Long-Term Care Partners Call
Epidemiology and Response Division
March 10, 2020

Disclaimer

- This is a rapidly evolving response. The information and guidance contained in these slides are likely to change depending on whether:
 - Conclusive data emerges on the infectious period and the prevalence of subclinical or asymptomatic infections of COVID-19
 - The virus mutates in a way that affects its transmission or severity
 - The virus becomes widespread in the U.S. or other countries
 - Other factors we can't predict

Refer to the Centers for Disease Control and Prevention (CDC) website for the most up to date information and guidance

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Outline

COVID-19 Overview

New Mexico Department of Health Preparedness Activities

Long-term Care Preparedness

Infection Prevention and PPE

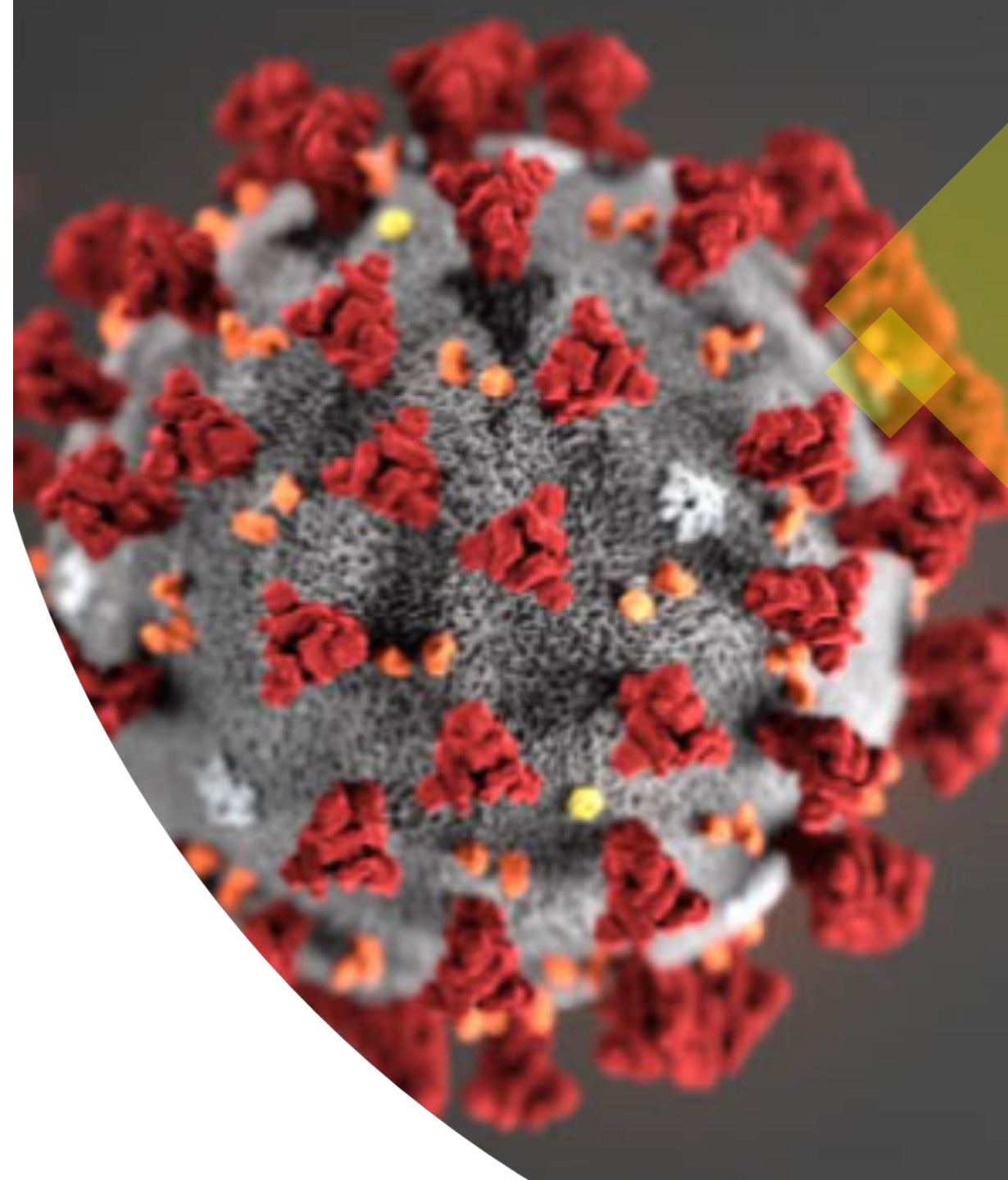
Monitoring Residents and Staff for Illness

Q & A

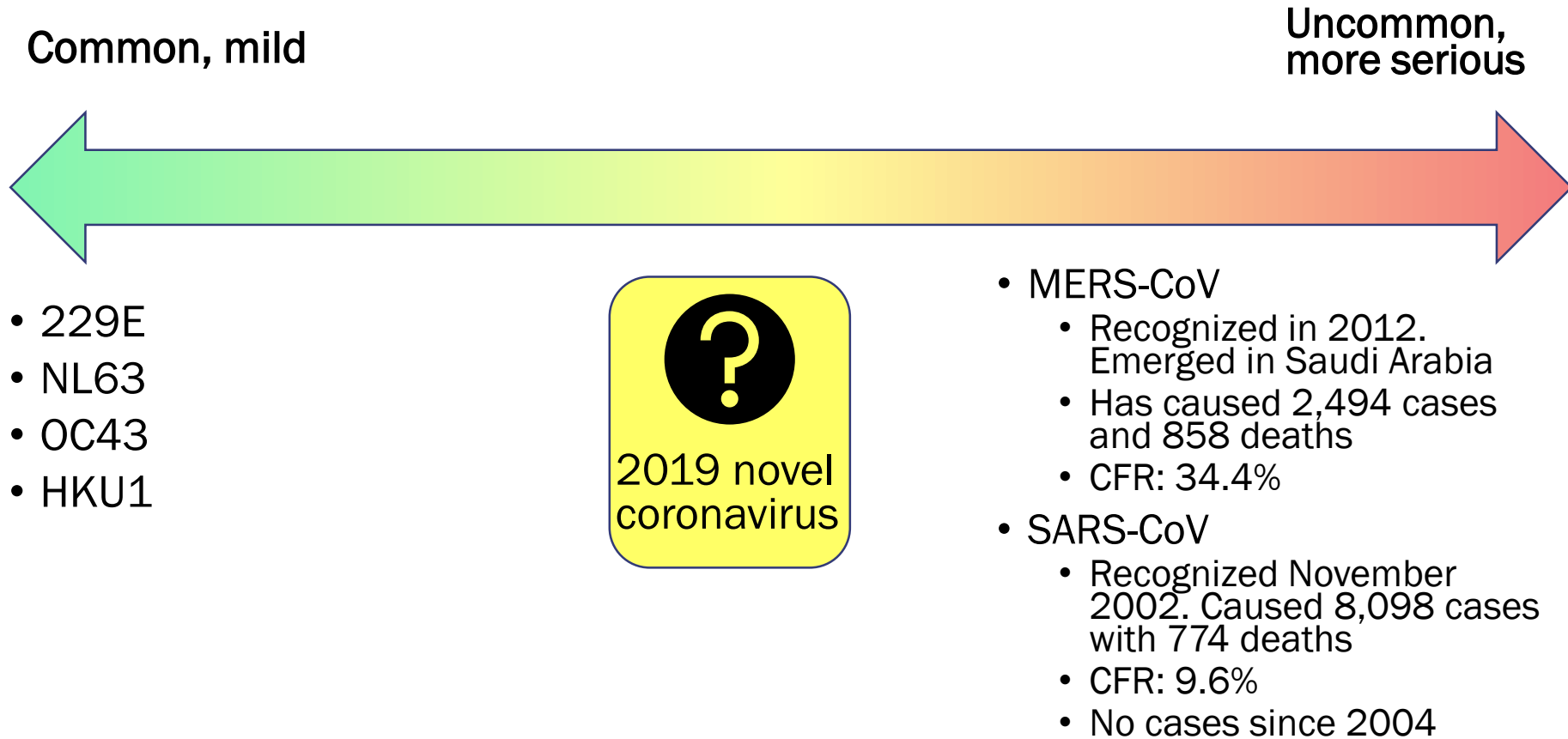
Background

- Coronaviruses are a family of RNA viruses
 - “Corona” for crown-like appearance of the virus’s glycoprotein spikes
- Currently 7 known human coronaviruses
- Novel coronavirus emerged likely in late November or early December 2019
 - First identified in visitors to an animal/seafood market in Wuhan, Hubei Province, China who developed viral pneumonia

Current understanding about how the virus that causes COVID-19 spreads is largely based on what is known about similar coronaviruses



Spectrum of Coronaviruses



How COVID-19 Spreads

Person to Person Spread

- Through respiratory droplets produced when an infected person coughs or sneezes
- Between people who are in close contact with one another (within about 6 feet)
- Spread is greatest during periods of severe symptoms
- Some spread might be possible before people show symptoms, but this is not currently thought to be the main way the virus spreads
- Incubation period 5-6 days (range 2-14 days)

Geography

- **There are no confirmed cases of COVID-19 in New Mexico**
- For most people the risk of being exposed to the virus that causes COVID-19 is thought to be low, the virus is not widespread in the United States
- Several countries now have sustained community transmission, China, Iran, Italy, South Korea and Japan
- 19 states in the US now have reported cases of COVID-19

Clinical Characteristics

COVID-19 Symptoms Include:

- Fever
- Cough
- Shortness of breath

Emergency Warning Signs in Adults

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

<https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html>

Illness Severity

- The complete clinical picture is not fully known. Reported illnesses range from very mild to severe, including illness resulting in death.
- Those at higher risk of developing severe illness include:
 - Older adults
 - People of all ages with serious chronic medical conditions, such as:
 - Heart disease
 - Diabetes
 - Lung disease
 - Symptoms include cough, fever, shortness of breath

Risk Assessment

- Close contacts of confirmed cases of COVID-19 are at elevated risk of exposure
- Travelers returning from affected international locations where community spread is occurring are at elevated risk of exposure
- Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure

Preparedness Activities

NMDOH Preparedness and Response

Communications

Health Alert Notices (HAN)

Weekly Press Releases

NMDOH COVID-19 Webpage

Preparedness

Revised the Pandemic Influenza Plan for COVID-19

Weekly assessment of hospital beds and PPE supply

Holding calls with stakeholders: Hospitals, schools, childcare, EMS, employers, local government, etc.

Epidemiology and Testing

Monitoring persons returning from Level 3 countries for 14 days

24/7/365 Epidemiology Hotline for the healthcare providers, public, laboratory, etc.

State laboratory has capability for testing

NMDOH is adapting influenza surveillance systems for COVID-19 surveillance



Coronavirus Disease 2019 in New Mexico

[Newsroom](#) [Public Info](#) [Clinician Info](#) [Laboratory Info](#) [About COVID-19](#) [FAQ's](#)

2019 Novel Coronavirus Disease (COVID-19)

A new coronavirus is causing an outbreak of pneumonia. The virus was first identified in December 2019, among people who visited a seafood and animal market in Wuhan City, China. Health authorities have confirmed that the virus is able to spread from person to person. Cases have been identified in the United States.

[FREQUENTLY ASKED QUESTIONS](#)

0

Confirmed Cases of
COVID-19 in New Mexico

COVID-19 Test Results in New Mexico

As of end-of-day March 9, 2020

Positive	0
Negative	69
Total Tests *	69

**Numbers are cumulative persons tested through March 9, 2020 and test results are from the state Scientific Laboratory Division, New Mexico Department of Health*

Steps Long-Term Care Facilities Can Take

Before COVID-19 arrives in New Mexico



Update your facility's Emergency Operations Plan (EOP) and share with staff

Educate staff on how COVID-19 spreads, clinical management, and infection control

Stay informed about the local COVID-19 situation.

Plan to optimize your facility's supply of personal protective equipment in the event of shortages

Prepare your facility to safely triage and manage patients with respiratory illness, including COVID-19

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>

Steps Long-Term Care Facilities Can Take

General Information



Share Your Plans with Patients, Staff and Visitors

- Place posters that encourage [staying home when sick](#), [cough and sneeze etiquette](#), and [hand hygiene](#) at the entrance to your facility and in other areas where they are likely to be seen
- Communicate visitor policies and visitor restrictions
- Maintain adequate supplies of hand sanitizer, soap and paper towels in common areas
- Share your plan with employees and explain what resources, workplace and leave flexibilities, and pay and benefits will be available to them
- Talk with companies that provide contract services or temporary employees about sick staff policies

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>

Strategies to Prevent Spread in Long-Term Care Facilities



Prevent the introduction of respiratory germs INTO your facility

- Post signs at the entrance instructing visitors **not to visit** if they have symptoms of respiratory infection, have traveled to certain countries in the last 14 days, or have had contact with a confirmed or suspect COVID-19 case.
- Ensure sick leave policies allow employees to stay home if they have symptoms of respiratory infection
- Assess residents symptoms of respiratory infection upon admission to the facility and implement appropriate infection prevention practices for incoming symptomatic residents.

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>

Strategies to Prevent Spread in Long-term Care Facilities



Prevent the spread of respiratory germs WITHIN your facility

- Keep residents, employees and families informed
- Describe what actions the facility is taking to protect them, and explain what they can do to protect themselves and fellow residents.
- Monitor residents and employees for fever or respiratory symptoms
 - Restrict residents with fever or acute respiratory symptoms to their room. If residents must leave the room for medically necessary procedures they should wear a mask. Sick employees should stay home.
 - Staff caring for residents with undiagnosed respiratory infection should use Standard, Droplet and Contact precautions
- Support hand and respiratory hygiene
 - Ensure staff clean their hands including before and after contact with residents, after contact with surfaces or equipment, and after removing PPE
 - Make sure alcohol based hand rub is available at each resident room
 - Make sure tissues are available and any sink is well stocked with soap and paper towels for handwashing.

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>

Strategies to Prevent Spread in Long-term Care Facilities

If COVID-19 is spreading in New Mexico



Prevent the spread of respiratory germs WITHIN your facility, continued

- Identify dedicated staff to care for COVID-19 patients and provide infection control training.
- Provide the right supplies to ensure easy and correct use of PPE
 - Post signs on the door or wall outside of the resident room that clearly describe the type of precautions needed and required PPE.
 - Make PPE, including facemasks, eye protection, gown, and gloves available immediately outside the resident room.
 - Position a trash can near the exit inside any resident room to make it easy for employees to discard PPE
- Notify facilities prior to transferring a resident with an acute respiratory illness, including suspected or confirmed COVID-19
- Report any possible COVID-19 illnesses in residents and staff to the Department of Health (505-827-0006)

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>

Steps Healthcare Facilities Can Take

If COVID-19 is spreading in
New Mexico



Work with NMDOH,
health coalitions and
other local partners
to understand
spread and impact
in your area

Designate staff who
will care for
suspected or known
COVID-19 patients,
and ensure Infection
Prevention and
Control (IPC) training

Monitor health of
healthcare workers
and ensure
maintenance of
essential staffing

Explore using video
chat or other
communication
methods for families

- Ensure staff with respiratory illnesses stay home
- Advise checking for symptoms before coming to work, or screen staff before entering facility if widespread transmission
- Make contingency plans for increased absenteeism, including extending hours, cross-training or hiring temporary employees

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>



Sign Up for the HAN
[Sign Up Here](https://nmms.org) or Go to
nmms.org, navigate to
Public Health → Disaster
Preparedness → NM
Department of Health HAN
→ Click link to register for
HAN

Infection Prevention and PPE

Prepare and Train for Proper Use of PPE

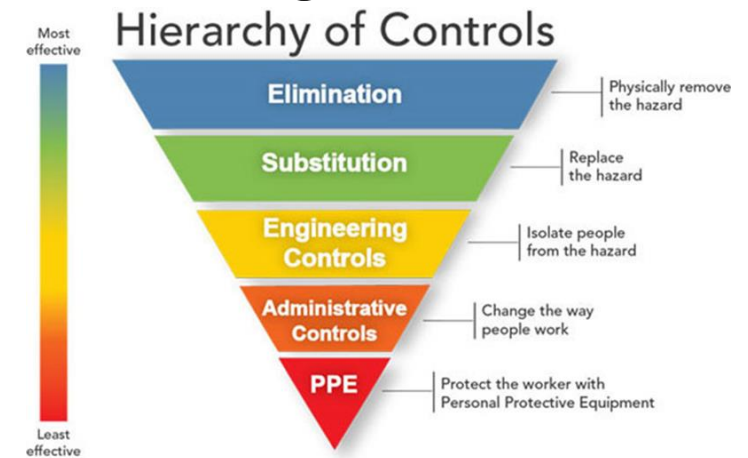
- Provide training on proper use of PPE, including donning and doffing. Training video available from National Ebola Training and Education Center (NETEC)

[NETEC PPE Training Resources](#)

- Assess your supply of PPE and implement tiered strategies for optimizing supplies

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html>

- Prepare signage to communicate transmission based precautions to all staff who enter the resident room
- Ensure carts or cabinets are well stocked with the necessary PPE and alcohol based hand rub at room entrances
- Include EVS staff in PPE training





DROPLET PRECAUTIONS

EVERYONE MUST:

Clean their hands, including before entering and when leaving the room.



Make sure their eyes, nose and mouth are fully covered before room entry.



or



Remove face protection before room exit.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CDC 30619-A



CONTACT PRECAUTIONS

EVERYONE MUST:

Clean their hands, including before entering and when leaving the room.



PROVIDERS AND STAFF MUST ALSO:



Put on gloves before room entry.
Discard gloves before room exit.



Put on gown before room entry.
Discard gown before room exit.

Do not wear the same gown and gloves for the care of more than one person.



Use dedicated or disposable equipment.
Clean and disinfect reusable equipment before use on another person.



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CDC 30619-A

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org



Who needs PPE:

Patients with confirmed or possible SARS-CoV-2 infection should wear a **facemask** when being evaluated medically.

Healthcare personnel should adhere to [Standard, Contact, and Airborne](#) Precautions, including the use of eye protection (e.g., goggles or a face shield) when caring for patients with SARS-CoV-2 infection. These precautions include the use of PPE, including NIOSH-approved N95 respirators, gowns, gloves, face shield/eye protection, etc. This includes, but is not limited to, surgical N95 respirators.



Who does not need PPE:

CDC does NOT currently recommend the general public use facemasks. Instead, CDC recommends following [everyday preventive actions](#), such as washing your hands, covering your cough, and staying home when you are sick.



COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel



For more information: www.cdc.gov/COVID19

Print version

Infection Prevention

- Have a plan for cohorting ill residents in specific rooms or wings
- Have a plan for cohorting staff
 - Facility should also keep a log of all staff who care for, enter the room of, or otherwise interact with the patient
 - The number of staff interacting with the patient should be as small as is safe and feasible for maintaining adequate care
- Have a plan for closing dining halls and canceling group activities
- If visitors are allowed, designate staff to screen visitors, keep a log of visitors, provide PPE and instruction for use, and ensure visitors limit their movement within the facility

Environmental Infection Control

- Dedicated medical equipment should be used for patient care
- All non-dedicated, non-disposable equipment should be cleaned and disinfected according to manufacturers instructions and facility policies
- Ensure environmental cleaning and disinfection procedures are followed consistently and correctly
- Routine cleaning and disinfection procedures for healthcare settings, including those patient-care areas in which aerosol-generating procedures are performed using products with EPA-approved emerging viral pathogens claims are recommended for use against the virus causing COVID-19
- Management of laundry, food service utensils, and medical waste should also be performed in accordance with routine procedures.

Monitoring Residents and Staff in Long-Term Care

Who is at Higher Risk?

Early information out of China, where COVID-19 first started, shows that some people are at higher risk of getting very sick from this illness. This includes:

- Older adults
- People who have serious chronic medical conditions like:
 - Heart disease
 - Diabetes
 - Lung disease

Maintain a low threshold for identification of respiratory illness in long-term care facilities

- Implement protocol for daily monitoring of influenza like illness (ILI) lower respiratory infection, or pneumonia among residents and staff
 - For tracking residents, McGeer criteria for ILI, lower respiratory infection, and pneumonia can be found here <https://spice.unc.edu/wp-content/uploads/2017/03/Respiratory-Tract-Infection-Worksheet-McGeer-SPICE.pdf>
- If you have a resident or staff with new or worsening ILI notify NMDOH epidemiology at 505-827-0006
 - Notify NMDOH even if laboratory tests for influenza or other respiratory pathogens are pending
 - Don't wait until you have more than one resident with ILI to notify the Department of Health



Criteria to Consider (McGeer 2012)

<input type="checkbox"/> Influenza – like illness (ILI)	<p>___ MUST HAVE fever*</p> <p>___ MUST HAVE at least 3 of the following:</p> <ul style="list-style-type: none"><input type="checkbox"/> Chills<input type="checkbox"/> New headache or eye pain<input type="checkbox"/> Myalgias or body aches<input type="checkbox"/> Malaise or loss of appetite<input type="checkbox"/> Sore throat<input type="checkbox"/> New or increased dry cough
---	---

<input type="checkbox"/> Lower respiratory tract (bronchitis or tracheo-bronchitis)	<p>___ MUST HAVE chest radiograph not performed OR negative results for pneumonia or new infiltrate</p> <p>___ MUST HAVE at least 2 of the following:</p> <ul style="list-style-type: none"><input type="checkbox"/> New or increased cough<input type="checkbox"/> New or increased sputum production<input type="checkbox"/> O₂ saturation < 94% on room air or a reduction in O₂ saturation of > 3% from baseline<input type="checkbox"/> New or changed lung examination abnormalities<input type="checkbox"/> Pleuritic chest pain<input type="checkbox"/> Respiratory rate ≥ 25 breaths/min <p>___ MUST HAVE at least 1 of the <i>constitutional criteria</i> (Refer to Appendix):</p> <ul style="list-style-type: none"><input type="checkbox"/> Fever*<input type="checkbox"/> Leukocytosis*<input type="checkbox"/> Acute change in mental status from baseline*<input type="checkbox"/> Acute functional decline*
---	--

If you have a resident or staff with signs or symptoms of ILI, lower respiratory infection, or pneumonia an NMDOH epidemiologist will work with you to obtain further testing and provide infection control recommendations

- McGeer criteria are surveillance criteria, not clinical criteria
- All residents with signs or symptoms of illness should be evaluated by a clinician as soon as possible



Laboratory Testing

- Testing for COVID-19 through the State Scientific Laboratory (SLD) is now available in New Mexico
- All requests for testing are coordinated through epidemiologist 505-827-0006
- Positive tests will be sent to CDC for confirmatory testing
- Testing through other clinical laboratories in New Mexico is limited at this time



Partner Agencies

Questions

Additional Resources

- Resources for Healthcare Facilities <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/steps-to-prepare.html>
- New Mexico Department of Health COVID-19 Website <https://cv.nmhealth.org/>
- Strategies to optimize PPE supply <https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html>
- Interim Infection Control Recommendations <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>
- CDC planning tool for long-term care <https://www.cdc.gov/flu/pandemic-resources/pdf/longtermcare.pdf>
- CMS Guidance for Infection Control of COVID-19 in nursing homes <https://www.cms.gov/medicareprovider-enrollment-and-certificationsurvey/certificationgeninfo/policy-and/qso-20-14-nh.pdf>
- Planning tool from Washington Department of Health https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/RecommendationsForLTC-COVID19.pdf?utm_medium=email&utm_source=govdelivery