

# Lessons Learned: A Roundtable COVID Discussion

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8/19/22 NMHCA 2022 CONVENTION



# Objectives

- ▶ Discuss Best Practices for Managing COVID-19 in nursing homes and assisted livings
- ▶ Improve preparedness for a response to a resident or staff member infected with novel coronavirus (COVID-19)
- ▶ Discuss current source control guidance interpretations

# PEOPLE WHO HAVEN'T HAD COVID BY SUMMER 2022



# NMDOH LOD 4/29/22

LAST GUIDANCE PROVIDED BY NMDOH & REFERENCES USED

- ▶ **Long-Term Care Guidance: Effective immediately, long-term care facilities including nursing homes and assisted living facilities will begin following the latest testing guidelines set forth by the Centers for Medicare and Medicaid. Department of Health and Aging and Long-Term Services will no longer provide separate guidance.**
- ▶ **CMS:** Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy, and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements <https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf>
- ▶ **CDC:** Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes <https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-termcare.html#:~:text=New%20Infection%20in%20Healthcare%20Personnel%20or%20Residents>  
Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>  
Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

# To wear an N95 or not to wear an N95? That is the question

- ❖ Based on County Transmission Rates
- ❖ CDC link for County Transmission Rates: <https://covid.cdc.gov/covid-data-tracker/#datatracker-home>
- ❖ **As of 8/4/22 all NM County Transmission levels are High, except for Harding County (Low)...anyone from Harding County?**
- ❖ What does CDC guidance state?
  - ❖ ***Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Feb 2, 2022***
  - ❖ **Defining Community Transmission of SARS-CoV-2**: Several of the IPC measures (e.g., use of source control, screening testing) are influenced by levels of SARS-CoV-2 transmission in the community. Two different indicators in CDC's COVID-19 Data Tracker are used to determine the level of SARS-CoV-2 transmission for the county where the healthcare facility is located. If the two indicators suggest different transmission levels, the higher level is selected. (p. 2/13)

# N95 Guidance First Interpretation

Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Feb 2, 2022

## Source control options for HCP include:

A NIOSH-approved N95 or equivalent or higher-level respirator

OR

A respirator approved under standards used in other countries that are similar to NIOSH-approved N95 filtering facepiece respirators

OR

A well-fitting facemask.

When used solely for source control, any of the options listed above could be used for an entire shift unless they become soiled, damaged, or hard to breathe through.

If they are used during the care of patient for which a NIOSH-approved respirator or facemask is indicated for personal protective equipment (PPE) during the care of a patient with SARS-CoV-2 infection, facemask during a surgical procedure or during care of a patient on Droplet Precautions, they should be removed and discarded after the patient care encounter and a new one should be donned. (p. 3/13)

**WHAT IS YOUR STAFF WEARING?**

# N95 Guidance Second Interpretation

Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic Feb 2, 2022

If SARS-CoV-2 infection is not suspected in a patient presenting for care (based on symptom and exposure history), HCP should follow Standard Precautions (and Transmission-Based Precautions if required based on the suspected diagnosis). **Additionally, HCP working in facilities located in counties with substantial or high transmission should also use PPE as described below:**

NIOSH-approved N95 or equivalent or higher-level respirators should be used for:

- ▶ All aerosol-generating procedures
- ▶ NIOSH-approved N95 or equivalent or higher-level respirators can also be used by HCP working in other situations where additional risk factors for transmission are present such as the patient is not up to date with all recommended COVID-19 vaccine doses, unable to use source control, and the area is poorly ventilated

To simplify implementation, facilities in counties with substantial or high transmission **may consider** implementing universal use of NIOSH-approved N95 or equivalent or higher-level respirators for HCP during all patient care encounters or in specific units or areas of the facility at higher risk for SARS-CoV-2 transmission.

**Eye protection (i.e., goggles or a face shield that covers the front and sides of the face) should be worn during all patient care encounters.** (p.4/13)

Based on both interpretations, which one should be implemented?

If all NM Counties are high, except Harding, then we “*may consider*” wearing N95’s?

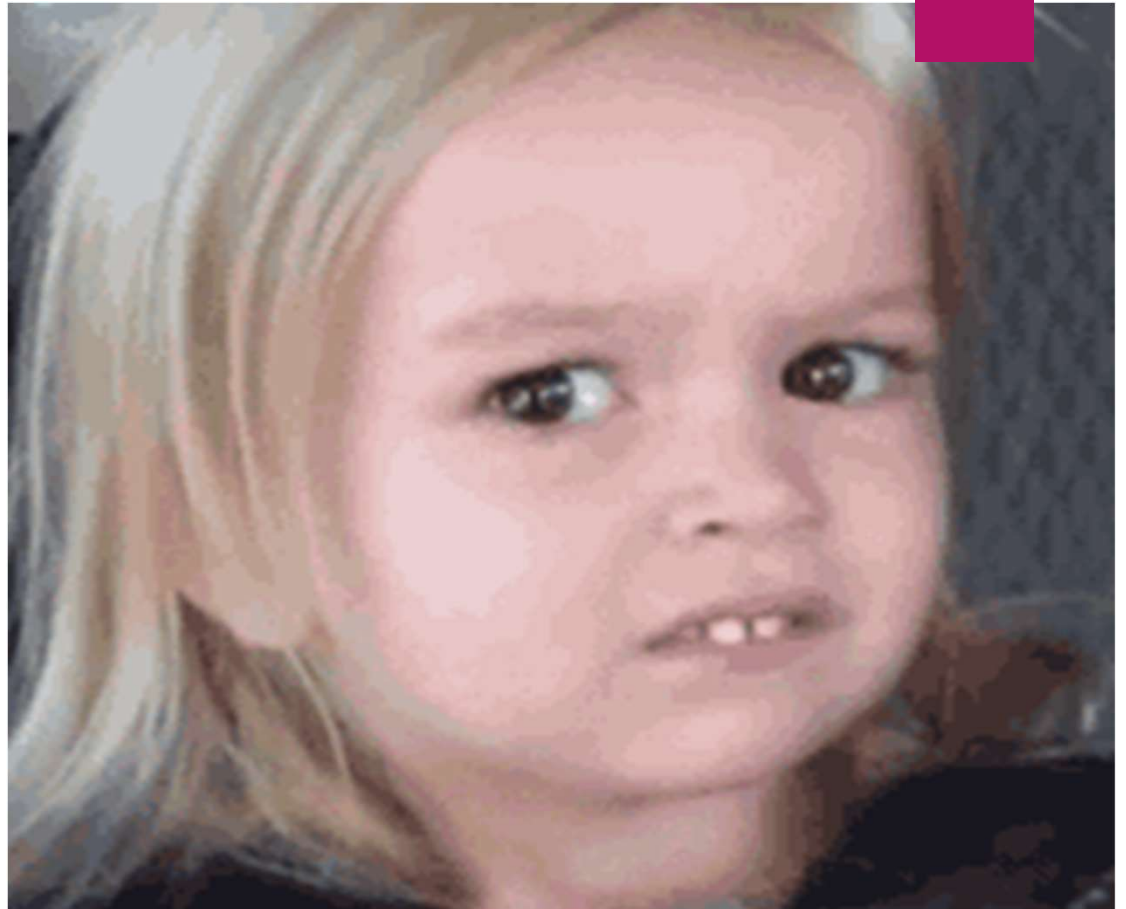
What does “*may consider*” mean and how do we decide within a facility?

Questions:

Any citations for “improper source control?”

Could this be an IDR if NM is now following CDC guidance?

NOTE: these questions have been asked; NMDOH has not provided updated clarification r/t source control yet





# Why Cloth Masks Might Not Be Enough as Omicron Spreads

Time it takes to transmit an infectious dose of Covid-19

		PERSON NOT INFECTED IS WEARING			
		Nothing	Cloth mask	Surgical mask	N95
PERSON INFECTED IS WEARING	Nothing	15 min.	20 min.	30 min.	2.5 hours
	Cloth mask	20 min.	27 min.	40 min.	3.3 hours
	Surgical mask	30 min.	40 min.	1 hour	5 hours
	N95	2.5 hours	3.3 hours	5 hours	25 hours

It will take 25 hours for an infectious dose of Covid-19 to transmit between people wearing non-fit-tested N95 respirators. If they're using tightly sealed N95s—where only 1% of particles enter the facepiece—they will have 2,500 hours of protection.

Note: Results published in Spring 2021. The CDC expects the Omicron variant to spread more easily.  
Source: ACGIH's Pandemic Response Task Force

# Open Discussion of Best Practices

Please come with questions and thoughts on these topics

- ▶ Employee Vaccination Tracking and Policy (F888)?
- ▶ Resident Vaccination Tracking? New admits...are hospital providing vaccinations and or boosters?
- ▶ Non vaccinated vs vaccinated residents...what is the difference for source control, dining, activities, etc?
- ▶ Positive COVID Residents: shelter in place or creating a space? Do you have a written process and drills completed? Does your staff know what to do after hours? Signage posted?
- ▶ PPE use for positive COVID residents? What do staff wear?
- ▶ New admit Quarantine and Positive COVID timeframes for residents?
- ▶ Quarantine set-up/PPE for residents who meet criteria?
- ▶ Screening of staff and visitors? What are you using?
- ▶ How do you notify families and staff of recent positive COVID cases?
- ▶ How do you report positive COVID to appropriate regulatory agencies?
- ▶ Visitation practices? Visitor toilets?
- ▶ Other topics r/t COVID Best Practices

# Conclusion

- ▶ NM nursing homes and assisted livings are a “team,” a team of HCP who want to provide the safest and best practices for our staff and residents against COVID.
- ▶ You are not alone on the island, reaching out to and being consistent with our practices will keep survey deficiencies minimal r/t COVID
- ▶ Project ECHO provides great info and discussions
- ▶ ICCNM can provide feedback and assistance
- ▶ New Facebook Group: NM SNF COVID Practices...a forum of open dialog and questions for NHA, ED, DON, and IP

**THANK YOU FOR YOUR PARTICIPATION!!!**