

COVID-19 Infection Procedures – Resident Triage

Emergency Warning Signs

These are the **emergency warning signs** for COVID-19: get **medical attention immediately by calling 911**. Emergency warning signs include*:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

When possible, meet EMTs at the door with the resident in order to limit access to the facility by non-employees.

Residents that require hospital care, for any reason, must remain at the hospital or care center until a COVID-19 test is negative.

*This list is not all inclusive. Please consult the resident's medical provider for any other symptoms that are severe or concerning.

Monitoring and preventing COVID-19 in residents

Daily, take the temperature of every residents and monitor for signs and symptoms of COVID-19, observed or reported by the resident, and document results in PCC (for AL) or Caretracker (for ID and MH).

These symptoms may appear 2-14 days after exposure:

- Temperature of 99.0° or above
- New shortness of breath or difficulty breathing
- New cough
- Headache
- Sore throat
- Chills
- Muscle or body aches
- New loss of taste or smell
- Fatigue
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

If residents show any of the above symptoms, **immediately call their Primary Care Physician (PCP) and assertively push for COVID-19 testing by telling the PCP that the resident lives in a long term care congregate living facility with many other elderly and/or vulnerable residents.** If the PCP refuses to test, consult with the Administrator or Program Manager. They will then consult with the Division Director regarding the situation.

What to do when there are suspected cases in the facility

Isolate residents with symptoms as soon as possible.

1. Place residents with suspected or confirmed COVID-19 in private rooms with the door closed and private bathroom (as possible). If a private bathroom is not possible, then a bathroom near the resident's room should be designated for that resident or a commode will be used.
2. Roommates of individuals being tested should also be assumed positive for COVID-19 and remain isolated in the original room until their roommate's test results return negative.
3. Residents must remain isolated until test results indicate they are negative for COVID-19 or until the PCP determines that the resident does not meet the clinical criteria for testing, and we should therefore assume there is no risk of COVID-19 infection.
4. Staff must communicate the status of the possible COVID-19 resident to the Team Leader and Team Leader must notify the Administrator or Program Manager.

Resident should wear a disposable procedure mask as soon as symptoms are identified. As long as a resident is suspected or confirmed to be positive for COVID-19, the resident must remain isolated in a private room. When the resident is in a private room with the door closed, they do not need to wear a mask. However, the resident must wear a procedure mask whenever staff enter their room and when they exit the room for a medically essential purpose.

Station the COVID-19 Precaution Kit at the entrance to the bedrooms of isolated residents. All employees should know the location of their facility's Precaution Kit. Consult with your supervisor if you don't know. The Precaution Kit contains necessary PPE, how to don and doff PPE, and cautionary signs. A list of items can be found here: [COVID-19 Precaution Kit](#). When implemented, the designated CRMA will ensure the Kit is fully stocked at the start of each shift.

Limit and protect staff working with suspected or known COVID-19 residents.

- Only the designated CRMA on duty may enter the resident's room and designated COVID bathroom using **all** the required Personal Protective Equipment (PPE) (mask, face shield or goggles, long-sleeve gown, gloves) and all efforts should be made to limit entrance into room. Only staff who have been trained and fitted for N95s will wear them, all others will use procedure masks.
- PPE should be donned (put on) and doffed (taken off) as detailed [in this video](#) (also available on www.newcommunitiesinc.org/homepage).
- The designated CRMA should limit the number of times they enter the resident's room by performing multiple functions upon entering: delivering food, removing dirty dishes, managing laundry, administering medications, performing personal care, etc.
- All other personnel may only enter the room and designated COVID bathroom under the direction of the designated CRMA and must use the recommended PPE of mask, face shield or goggles, long-sleeve gown, and gloves.

Dedicated medical equipment should be used when caring for residents with known or suspected COVID-19. This includes blood pressure cuffs, thermometers, oxygen monitors, stethoscopes, glucometers, etc. Non-disposable medical equipment used for patient care should be cleaned and disinfected both before and after each use and should remain in the resident's isolation room.

Handling used PPE

- **Disposable PPE** used for care of suspected or known COVID-19 residents must be bagged and discarded properly. Disposable PPE are gloves, gowns, and procedure masks. If N95s are in short supply, they should be carefully removed and placed in a paper bag for re-use by the individual for one day.
- **Reusable PPE** (goggles and face shields) must be placed in a designated bin. **At this time, continue to use new face shields until you receive guidance to reuse.**
- **Facility administrators and program managers will be responsible for oversight of the disinfection process of reusable PPE, when needed.**
- **Disinfect as follows:**
 - While wearing gloves, carefully wipe the inside, followed by the outside of the face shield or goggles using a clean cloth saturated with neutral detergent solution or cleaner wipe.
 - Carefully wipe the outside of the face shield or goggles using a wipe or clean cloth saturated with EPA-registered hospital disinfectant solution.
 - Wipe the outside of face shield or goggles with clean water or alcohol to remove residue.
 - Fully dry (air dry or use clean absorbent towels).
 - Remove gloves and perform hand hygiene.
- Any items requiring laundering must be bagged, moved to the laundry area, and separately laundered.

What to do when there are confirmed COVID-19 cases in the facility

If a resident is positive for COVID-19 according to testing performed by the PCP, **ensure the resident remains in isolation** and provide the resident name, date of birth, and facility to:

- Division Director, Darcy Dumont for Assisted Living or Intellectual Disabilities Services: (207) 240-6283
- Division Director, Paul Piche for Mental Health Services: (207) 408-8189
- The Division Director will notify the Maine Centers for Disease Control at **1-800-821-5821**

Implement all infection control protocols detailed above for suspected COVID-cases.

Encourage all residents to remain in their rooms. Restrict residents (to the extent possible) to their rooms except for medically necessary purposes. If they leave their room, residents should wear a procedure mask if available, otherwise a cloth facemask, perform hand hygiene, limit

their movement in the facility, and perform social distancing (stay at least 6 feet away from others).

Three times a day, take the temperature of every resident and monitor for signs and symptoms of COVID-19, observed or reported by the resident, and document results in PCC (for AL) or Caretracker (for ID and MH).

These symptoms may appear 2-14 days after exposure:

- Temperature of 99.0° or above
- New shortness of breath or difficulty breathing
- New cough
- Headache
- Sore throat
- Chills
- Muscle or body aches
- New loss of taste or smell
- Fatigue
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Cohort residents with COVID-19 and dedicate staff to the COVID-19 residents.

- Move COVID-positive residents to dedicated rooms, groups of rooms, or identified sections of the facility.
- In cases where there are multiple COVID-19 positive residents in a facility, they can be placed in a shared room with other COVID-19 positive residents, if necessary. COVID-19 positive residents should not leave their room unless there is a medically essential purpose to do so.
- Follow guidance in “Limit and protect staff working with suspected or known COVID-19 residents” section on page 2.
- When caring for multiple residents with known COVID-19, staff do not need to change PPE between residents.

Dedicated medical equipment should be used when caring for residents with known COVID-19. Medical equipment should be designated as dedicated to residents with known COVID-19. Non-disposable medical equipment used for patient care should be cleaned and disinfected both before and after each use.

COVID-19 Standard Precautions

- All employees will follow PPE and activity guidance as outlined in *the Maine CDC Guidance for Congregate Facilities*, for their facility type. As this guidance changes to adapt to the evolving pandemic situation, supervisors will be notified about appropriate PPE and activity requirements.
- Refer to the [Exposure Control Plan](#) for appropriate PPE for personal care duties.
- Residents should wear cloth facemasks when in common areas.
- Employees and residents must practice social distancing (stay at least 6 feet away from others) whenever possible.

- Ensure residents and staff cough or sneeze into a tissue, or the inside of their elbow, then discard the tissue immediately.
- All facilities will implement the [COVID-19 Cleaning and Disinfecting Procedure](#).
- Staff must perform hand hygiene before and after all resident contact, contact with potentially infectious material, and before putting on and after removing PPE, including gloves. Hand hygiene after removing PPE is particularly important to remove any pathogens that might have been transferred to bare hands during the removal process. Perform hand hygiene by using hand sanitizer or washing hands with soap and water for at least 20 seconds. If hands are visibly soiled, use soap and water before returning to hand sanitizer.