



Cowlitz County Health and Human Services

PHONE: 360-414-5599 FAX: 360-425-7531

WEBSITE: www.co.cowlitz.wa.us/hhs

Main Campus: 1952 9th Avenue, Longview, WA 98632 askcowlitzhealth@cowlitzwa.gov
Environmental Health Unit: 207 4th Avenue North Kelso, WA 98626 OMSeptic@cowlitzwa.gov

COVID-19 Outbreak/Exposure in Assisted Living Facilities and Adult Family Homes

This document outlines actions your facility is recommended to take following recent COVID-19 exposure within your facility. Recommendations are broken down by category. This document also provides additional resources that may be useful in your COVID-19 response. Please contact Cowlitz County Health & Human Services Communicable Disease Team if you need further consultation or have questions. Thank you for your continued partnership!

COVID-19 Quick Reference

COVID-19 Symptoms	Fever or chills, cough, shortness of breath, sore throat, headache, new muscle aches, and loss of sense of taste or smell. Other symptoms might include new or worsening malaise, new dizziness, or diarrhea.
Incubation Period	Average 3 - 4 days (range 2 - 14 days)
Period of Communicability	Individuals are likely contagious 2 days before and up to 10 days after symptom onset (or test date if asymptomatic), 20 days if immunocompromised.
Threshold for Reporting to Public Health	Residents: ≥1 probable or confirmed COVID-19 case in a resident or ≥3 cases of acute illness compatible with COVID-19 in residents with onset within a 72 hour period HCP: ≥1 probable or confirmed COVID-19 case in HCP
Outbreak Definition (For Long-Term Care Facilities)	Resident: ≥1 facility-acquired* COVID-19 case in a resident HCP: ≥3 suspect, probable or confirmed COVID-19 case in HCP with epi-linkage AND no other more likely sources of exposure for at least 1 of the cases

* Facility-acquired COVID-19 infection in a long-term care resident refers to SARS-CoV-2 infections that originated in the nursing home. It does not refer to the following:

- Residents who were known to have SARS-CoV-2 infection on admission to the facility and were placed into appropriate Transmission-Based Precautions to prevent transmission to others in the facility.
- Residents who were placed into Transmission-Based Precautions (quarantine) on admission and developed SARS-CoV-2 infection while in quarantine.

COVID-19 Definitions

- **Standard Precautions:** Used for all patient care. Guidelines that outline the minimum set of interventions that are required for preventing the transmission of microorganisms. They provide a foundation for infection prevention measures that are to be used for all patients in every healthcare setting.
- **Transmission Based Precautions (TBP):** Second tier of basic infection control practices and implemented in addition to Standard Precautions for residents who may be infected or colonized with certain infectious agents for which additional precautions are needed to prevent infection transmission.

- **Isolation:** The Transmission Based Precaution initiated to keep someone who has confirmed COVID-19, away from others to prevent transmission to others.
- **Quarantine:** transmission-based precautions (TBP) used to keep someone who might have been exposed to COVID-19 away from others to prevent potential transmission of COVID-19 ([What to do if you were potentially exposed to someone with COVID-19](#)).
- **Close contact:** within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated.

How to Report to Cowlitz County Health & Human Services

All laboratory-confirmed COVID-19 positive residents or staff should be reported to Cowlitz County Health and Human Services (CCHHS).

- To report to CCHHS, facilities can upload a line list securely [online](#) OR fax a line list to our secure fax line at (360) 425-7531. If facilities have questions or aren't sure about next steps, CCHHS can be reached via phone at (360) 414-5599 extension 6431.

Conduct Surveillance

- Facilities are encouraged to consistently monitor for illnesses or increased absences, in order to identify and respond to a potential outbreak quickly and effectively.
- It is helpful to identify new infections in both staff and residents early to reduce the risk of further spread within the facility. For 14 days following your facility's last exposure, it is recommended to conduct active surveillance daily among staff and residents. It is recommended to continue to screen all staff and residents at least daily for fever and COVID-like symptoms. Anyone who develops COVID-like symptoms should isolate.

Personal Protective Equipment (PPE)

- Healthcare Professionals (HCP) are still required to wear PPE while caring for residents with suspect or confirmed COVID-19.
- Universal eye protection is no longer required regardless of transmission levels unless you are caring for an individual with confirmed/suspected COVID-19. In that case, the facility should follow healthcare guidance for standard/transmission-based precautions.
- Fit Testing Guidance and Resources
 - [WA DOH Respiratory Protection Program](#) has resources for free fit testing
- It is recommended to review and ensure all staff members can safely demonstrate procedures for donning and doffing PPE ([Using Personal Protective Equipment](#)).

COVID-19 Testing

- ***I would like to test residents, what should I do?***
 - If you are utilizing a traditional lab specimen collection process for COVID-19 testing, you will need:
 - To contract with a lab to accept your specimens.
 - Your facility will need to have an ordering physician. CCHHS is unable to assist with this requirement.
 - If utilizing over-the-counter (OTC) point-of-care (POC) test kits you will need:
 - To apply for a CLIA waiver
 - [Guidance for Waiver](#)
 - [Application](#)

- You will need to order testing supplies. Testing supply resources are available on the [WA DOH COVID-19 Testing Supply Request Portal](#).
- **Who is Authorized to Collect Nasal Swabs for COVID-19 Testing?**
 - Washington State Department of Health has provided the [following chart that outlines which licensed healthcare providers can administer COVID-19 tests](#).

Assisted Living Facility COVID-19 Response Checklist

This section outlines what to do if you identify a COVID-19 case in your *Assisted Living Facility*. This is a companion document to the [WA DOH LTCF Setting Specific Guidance](#) expanded to encompass management of COVID-19 in Assisted Living Facilities and is designed to provide a framework for responding to COVID-19 in an Assisted Living Facility. Consult with CCHHS when managing outbreaks.

- **Contain and Prepare**
 - *COVID-19 positive resident*: Place in aerosol contact precautions and post precautions sign on door. Engage healthcare provider regarding treatment options.
 - *COVID-19 positive HCP*: Exclude from work (see [CDC Return to Work Criteria](#)).
 - Source control should be worn by all individuals being tested for COVID-19.
 - When possible, consider cohorting COVID-19 positive residents and if possible, dedicate separate staff to care for COVID-19 positive residents.
 - Refer to CDC guidance for mitigating staffing shortages and PPE optimizing strategies if needed.
 - Ensure adequate specimen collection supplies for point-of-care or laboratory NAAT/PCR tests. Identify where you can get additional supplies.
 - Notify all HCP, residents, and families of the outbreak. Reinforce basic infection control practices.
- **Identify Potential Exposures**
 - Identify HCP, residents, and visitors who may have been exposed to COVID-19. Ensure any resident identified as potentially exposed wears a well fitted high quality mask.
 - HCP with higher-risk exposures who are asymptomatic generally do not need to be restricted from work following their exposure unless they meet criteria described in CDC guidance.
- **Identify Additional Cases**
 - Prepare to conduct testing of identified exposed individuals.
 - Identify staff who can assist with specimen collection.
 - Designate a point person to receive and track results.
 - Begin testing that includes all residents and staff identified as having an exposure to the confirmed case present in the facility two days prior to onset of the identified case.
 - All laboratory-confirmed COVID-19 positive residents or staff should be reported to Cowlitz County Health and Human Services (CCHHS). To report to CCHHS, facilities can upload a line list securely [online](#) OR fax a line list to our secure fax line at (360) 425-7531. If facilities have questions or aren't sure about next steps, CCHHS can be reached via phone at (360) 414-5599 extension 6431.
- **Managing Additional Cases**
 - Place all residents who test positive for COVID-19 in aerosol contact precautions and post precautions sign on door. If possible, provide care with dedicated staff using aerosol contact precautions.
 - Exclude all staff from work who test positive according to CDC guidance.
 - Maintain adherence to cohorting guidelines, testing frequency, and proper PPE use to minimize your outbreak.
 - Use the Isolation and Quarantine criteria for exposed residents outlined on page 13 of the [WA DOH SARS CoV2 Infection Prevention and Control Healthcare Settings Toolkit](#).
- **Managing Symptomatic COVID Positive Residents in Isolation**

- **Day 0:** Is the day of symptom onset, regardless of when resident tested positive.
 - Isolate resident and place in aerosol contact precautions and post precautions sign on door. HCP staff should wear appropriate PPE for the entire 10 days when entering the residents room.
- **Day 1:** The first full day after the day symptoms started.
- **Day 6:** Evaluate for symptom improvement.
 - *Symptoms are improving and resident is able to wear a well-fitting mask:* resident can leave room for short periods of time (indoors 10 minutes or less, outdoors no time restriction). Residents should do the following through day 10: wear a high-quality mask at all times when outside of their room while indoors, not participate in communal activities or dining, and limit visitation with other residents to short periods of time (5 minutes or less) while wearing a mask.
 - *Moderate symptoms or symptoms are not improving:* the resident should continue to isolate through day 10.
 - *Severe illness (hospitalized) or has a weakened immune system:* the resident should continue to isolate through day 10. Consider consulting with the resident's healthcare provider before ending isolation. Immunocompromised patients may need a prolonged recovery time.
- **Managing Asymptomatic COVID-19 Positive Residents in Isolation**
 - **Day 0:** Is the day the resident was tested (not the date of the result).
 - Isolate resident and place in aerosol contact precautions and post precautions sign on door. HCP staff should wear appropriate PPE for the entire 10 days when entering the residents room.
 - **Day 1:** The first full day following the day the resident was tested.
 - **Day 6:** Evaluate the resident for symptoms.
 - *No symptoms and resident is able to wear a well-fitting mask:* resident can leave room for short periods of time (indoors 10 minutes or less, outdoors no time restriction). Residents should do the following through day 10: wear a high-quality mask at all times when outside of their room while indoors, not participate in communal activities or dining, and limit visitation with other residents to short periods of time (5 minutes or less) while wearing a mask.
 - If the resident develops any symptoms within 10 days of when they were tested, the clock restarts at day 0 on the day of symptom onset and resident should follow the guidance for symptomatic positive residents.
- **Managing Asymptomatic Exposed Residents**
 - **Day 0:** Is the last date of exposure.
 - Initiate source control and continue to monitor for symptoms.
 - If the resident meets one of the outlined criteria prompting quarantine, initiate TBP outlined on page 13 of the [WA DOH SARS CoV2 Infection Prevention and Control Healthcare Settings Toolkit](#) and continue to monitor for symptoms.
 - If resident develops symptoms, it is recommended to test the resident for COVID-19. If the resident tests positive, follow the guidance above for symptomatic positive residents.
 - **Day 6:** Evaluation the resident for symptoms and perform a test for COVID-19.
 - *If the antigen test is negative, the resident has no symptoms, and resident is able to wear a well-fitting mask:* resident can leave room for short periods of time (indoors 10 minutes or less, outdoors no time restriction). Residents should do the following through day 10: wear a high-quality mask at all times when outside of their room while indoors, not participate in communal activities or dining, and limit visitation with other residents to short periods of time (5 minutes or less) while wearing a mask.
 - If symptoms develop, the resident should be placed in isolation and tested. If the resident tests positive, follow the guidance above for symptomatic positive residents.

CDC Criteria for the Test-Based Strategy to Remove Your Mask

For individuals that meet criteria to end isolation after day 5, there is an option to remove their mask with two sequential negative tests 48 hours apart. Guidance on this option can be found here [CDC: Isolation and Precautions for People with COVID-19](#).

Returning to Normal Operations

Follow the CDC's time and symptom-based strategy for addressing confirmed and exposed residents. Note that immunocompromised residents may require a prolonged recovery time. Outbreaks can be declared over when 14 days have passed and there has been no new cases of COVID-19 within the facility.

Additional Resources

- [Cowlitz County Health & Human Services](#)
- Washington State Department of Health
 - [SARS CoV-2 Infection Prevention and Control in Healthcare Settings Toolkit](#)
 - [Outbreak Definition for Healthcare Settings](#)
 - Precautions Signage:
 - [Aerosol Precautions](#)
 - [Quarantine Precautions](#)
- Washington State Department of Social and Health Services (DSHS)
 - DSHS latest guidance regarding COVID-19. This is the link to provider letters and additional resources: [Information for Nursing Home Professionals](#).
- CDC Guidance
 - [COVID-19 Community Level Recommendations](#)
 - [CDC: COVID-19 Plan](#)
 - [Additional Information for Community Congregate Living Settings](#)
 - [Communal Setting Guidance: How to Protect Yourself and Others](#)
 - [CDC: What to Do If You Were Exposed to COVID-19](#)
 - [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic](#)
- Environmental Protection Agency (EPA)
 - [List N: Products with Emerging Viral Pathogens AND Human Coronavirus claims for use against SARS-CoV-2](#)