

MDS Alert

Infection Control: Follow These CMS, CDC, OCR Tips for COVID-19 Outbreak

Put your infection control protocol to the test with your preparations for the most recent coronavirus.

Although the updates change daily, COVID-19, the disease caused by the emerging virus SAR-CoV-2, could deal people in the United States a severe blow. Available information suggests that elderly people are hit hardest by COVID-19.

At the time of publication, an outbreak in a Kirkland, Washington, nursing facility has resulted in several residents' deaths and some sick staff members as well. Experts believe that the disease had been spreading within the facility undetected.

"No deaths occurred in the group aged 9 years and younger, but cases in those aged 70 to 79 years had an 8.0% [case-fatality rate] CFR and cases in those aged 80 years and older had a 14.8% CFR," say **Zunyou Wu, MD, PhD,** and **Jennifer M. McGoogan, PhD,** researchers at the **Chinese Center for Disease Control and Prevention** in Beijing, China, in a late-February JAMA article.

"We expect we will see community spread ... It's not a question of if this will happen anymore but rather a question of exactly when this will happen and how many people in this country will have severe illness," said **Nancy Messonnier**, **MD**, director of the **National Center for Immunization and Respiratory Diseases** in Atlanta, in a Feb. 28 CDC telebriefing.

Keep Calm, but Prepare

The U.S. government is trying to prepare Americans for the emergence of COVID-19 by reminding people to wash their hands, avoid touching their faces, and stay home if sick. Officials are also enacting governmental mechanisms that will allow a faster and more agile response as the epidemic grows.

The Centers for Disease Control and Prevention (CDC) has offered long-term care facility-specific advice, including posting warnings at facility entrances encouraging any visitors experiencing symptoms to leave; ensuring that sick policies empower workers showing symptoms to stay home; and keeping staff, residents, and the community informed.

Background: Alex Azar, HHS Secretary, declared a public health emergency (PHE) on Jan. 31 for the entire United States in response to the spread and threat of the novel coronavirus. The agency's announcement followed the World Health Organization (WHO) international PHE rollout on Jan. 30.

King County, where the outbreak in Washington state is occurring, has declared a state of emergency.

The virus originated in Wuhan City, Hubei Province, China, and is spreading quickly across the world. Tens of thousands are infected with the virus worldwide, and reports suggest that more than 3,000 have died from the disease. There is currently no vaccine for the virus nor specific treatment.

"While this virus poses a serious public health threat, the risk to the American public remains low at this time, and we are working to keep this risk low," Azar said in a release. "We are committed to protecting the health and safety of all Americans, and this public health emergency declaration is the latest in the series of steps the Trump Administration has taken to protect our country."

However, with the virus infection rates changing every day, it's important to stay updated on the latest available information



Symptoms: According to the CDC, COVID-19 "causes respiratory illness in people and can spread from person to person." Providers can see more CDC advice on identifying symptoms, lab tests, flowcharts, alerts, and treatment options at www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html.

Bolster Infection Control Programs

The CDC is reminding facilities that they offer a free infection prevention and control education course and instructing workers to brush up on protocols surrounding contagious disease.

"To ensure health and safety, CMS also expects healthcare staff and surveyors (contractors, Federal, State, and Local) to comply with basic infection control practices. For 2019 novel coronavirus, CDC is currently advising adherence to Standard, Contact, and Airborne Precautions, including the use of eye protection," says **David Wright,** director of quality safety and oversight group at **Centers for Medicare & Medicaid Services (CMS)** in Baltimore in a February memo.

Wright recommends facilities reevaluate their personal protective equipment (PPE) use and availability, including gloves, gowns, eye protection, and respirators.

The CDC recommends posting signs outside resident rooms that specify the type of precautions necessary as well as what PPE is required, keeping PPE available where it's needed, and keeping a trash can available to promote easy disposal of used PPE.

"CMS regularly observes these infection control practices as part of the normal survey process and notes that applying the basic principles of hand hygiene and using appropriate PPE protects lives. Medicare participating healthcare facilities should also have PPE measures and protocols within their emergency plans, especially in the event of potential surge situations," Wright says.

If your facility suspects that a resident, visitor, or employee may have COVID-19, the CDC recommends contacting your local and state health departments immediately.

See "Protect Resident Privacy in Case of Infection" on page 15 for more information on your facility's responsibilities surrounding resident privacy during a public health emergency such as widespread COVID-19 disease infection.

Access the CDC's free infection prevention control education at www.cdc.gov/longtermcare/training.html.