

COVID-19 Care Area

Dedicated space in the facility to care for residents with Confirmed COVID-19. This could be a dedicated floor, unit, or wing in the facility or group of rooms at the end of a unit.

Recommendations for COVID Area/Unit

Facility layout for staff access:

- Designate separate entrance and exit doors (optimal)
- Staff break area separated from patient care area with bathroom for staff use only
- Provide an area for staff to put on and remove personal protective equipment (PPE) when entering/exiting the unit
- Ensure patient care area or rooms have access to bathrooms/showers
- Designate area on unit where staff can perform documentation responsibilities while monitoring residents
- Clean supply area/linen supply in protected area with easy access
- Medication storage/preparation area with refrigerator
- Soiled utility area for waste and used equipment for reprocessing

Personal Protection Equipment:

- N95 or higher-level respirator (or facemask if respirator not available)
- Eye Protection (i.e., goggles or disposable face shield that covers the front and sides of the face)
- Gloves
- Gowns

Depending on the availability of PPE, items such as gowns and respirators may need to prioritized. See Strategies for Optimizing PPE Supply for additional guidance.

Resident rooms

- · Limit number of residents in each room where possible
- Private rooms with separate bathrooms <u>or at least 6 feet between beds</u> with cubicle curtain in closed position
- Consider positioning beds in head-to-toe configuration if possible
- Remove unnecessary furniture/equipment
- Avoid porous surfaces (upholstered furniture, carpet) if possible

Medical supplies for unit

- Alcohol-based hand sanitizer
- Soap and paper towels
- Incontinent products
- Bedside commodes
- Urinals
- Personal hygiene supplies
- Vital sign equipment including thermometers
- Wheelchairs, Etc.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.



Food services

- Catering with disposable plates/utensils; carry out containers
- Separate staff space to eat without wearing PPE
 - Designated break room
 - Maintain social distancing, monitor

Environmental

- Trained staff provided with necessary PPE
- EPA- registered disinfectants from List N
- Daily and terminal cleaning of room, floors and bathrooms
- Immediate cleanup of spills
- Regular disinfection of high-rough surfaces

Diagnostic equipment

- Individual glucometers
- Individual pulse oximetry equipment or disinfection plan per manufacturer's recommendations
- Anticoagulation monitoring equipment with manufacturer's recommendations for disinfecting

Recommended Staffing

- Infection prevention training for staff prior to being assigned to the unit
- Infection prevention coordinator; oversight of unit including surveillance
- RN charge nurse on site each shift (if possible)

https://www.cdc.gov/coronavirus/2019-ncov/hcp/alternative-care-sites.html