

COVID-19 IN ADULT AND SENIOR CARE FACILITIES: CASE STUDIES



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ADULT AND SENIOR CARE PROGRAM

WEDNESDAY, SEPTEMBER 16, 2020 1PM-3PM

PANEL OF SPEAKERS



Pam Dickfoss, MPPA

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Purpose of this Informational Call

- The Health and Safety of residents at CCL-licensed facilities remains the priority of the Department.
- As such, the Health and Safety of staff who care for residents at CCL-licensed facilities is also a priority.
- The Health and Safety risks among and between both residents and staff is interlinked because there is a shared environment.
- By mid-September of 2020, nearly 5,100 residents and nearly 5,100 staff have tested Positive with Covid-19. The margin of difference is less than 1%.
- In order to help increase the Health and Safety of both residents and staff, we offer a look at a handful of case studies from facilities where Covid-19 positivity occurred over the past 6 months. While each facility is unique from another, there are some common factors that we would like to share and best practices that we have identified along the way.

Objectives

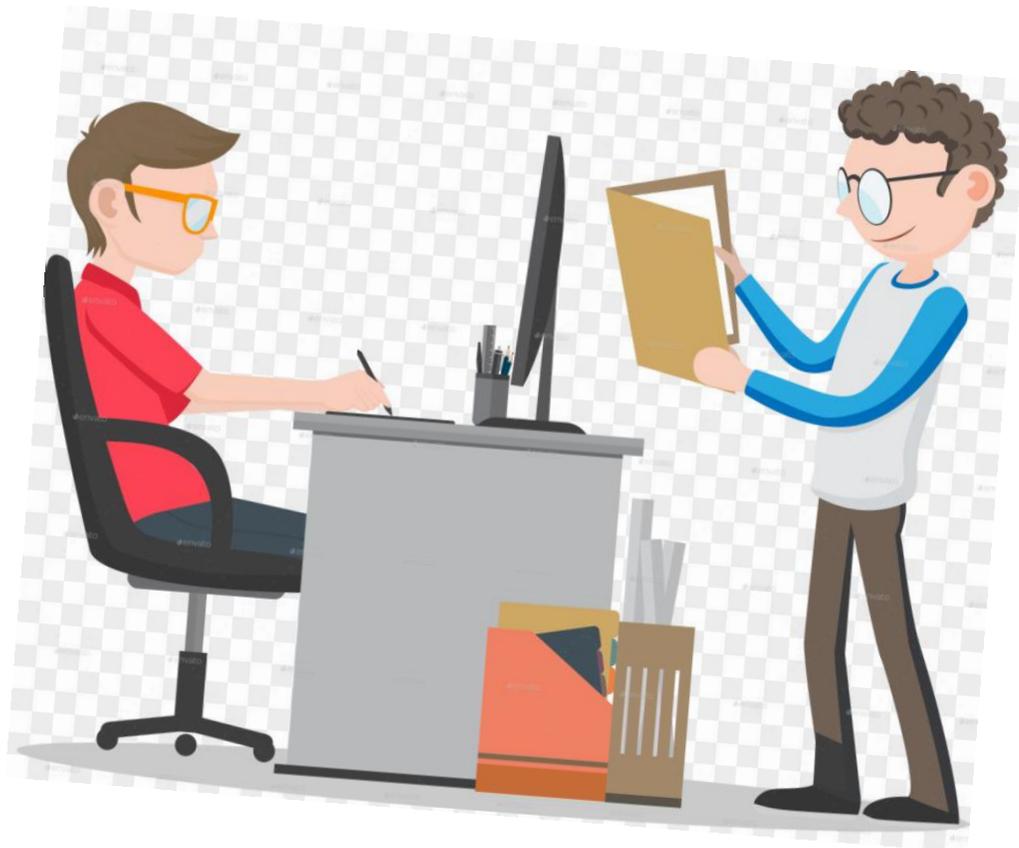
- **Describe** adult and senior care case scenarios and examine challenges faced by care providers during this pandemic.
- **Discuss** Covid-19 related issues/concerns in adult and senior care facilities.
- **Identify** best practices in addressing Covid-19 issues/concerns and to minimize the spread of infection.
- **Provide** current, helpful information and resources.

Scenario A:

4-Bed Adult Residential Facility (ARF)

The Facility Profile

- ARF with 4 clients
- A client attends a part-time job
- Staff includes the live-in owner/Administrator and 4 caregivers



Case Scenario

The client's job site reports a positive case, client stopped attending work but did not get tested.

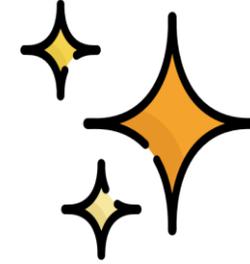
One week later, 1 caregiver reports feeling ill and tests positive for COVID-19.

Within a few days all caregivers and 2 clients test positive for COVID-19.

Infection Control Plan

- Isolation/Cohorting
- PPE requirements
- Staffing
- Testing
- Reporting

Key Points



- If known Covid-19 exposure, quarantine immediately.
- Develop a contingency plan to ensure sufficient staffing.
- Determine the facility's need to schedule for staff/resident testing.

Scenario B:

Residential Care Facility for Elderly (RCFE)
with a Dementia/Memory Care Unit

The Facility Profile

- 150 residents
- 75 non-ambulatory memory-care residents
- 25 residents live in a separate memory care building located on the same campus
- Separate buildings, but share kitchen, staff breakrooms, etc.

Case Scenario

The RCFE learned that a resident was positive for COVID-19 when he went to the hospital. He has not returned to the RCFE.

Since that time, the licensee has done a round of facility wide testing and learned that an additional 8 memory care residents and 4 staff members are positive.

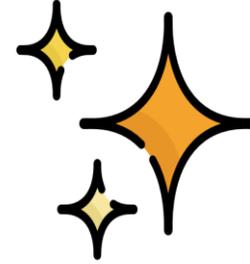
All Assisted Living residents and staff tested negative.



Infection Control Plan

- Isolation/Cohorting
- PPE requirements
- Staffing
- Testing
- Reporting

Key Points



- Maintain memory care separate from everything within other areas of the assisted living (staffing, break rooms, entry/exit when possible).
- Individuals in contact with residents with dementia in any residential care setting should be especially conscientious with physical distancing and wearing masks correctly when residents are not able to follow safety precautions.
- Follow The Center for Disease Control (CDC) guidelines for memory care PPE requirements.

Scenario C:

Residential Care Facility for Elderly (RCFE)
No Dementia/Memory Care Unit

The Facility Profile

- RCFE with 90 residents
- 65 residents in assisted living
- Completely separate memory care wing



Case Scenario

A staff person noted to be symptomatic mid-shift and sent home.

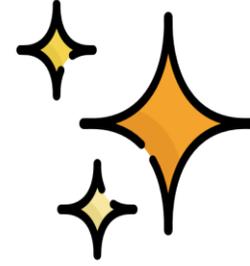
Upon further investigation this staff person had lost sense of taste four days prior.

Mass testing of residents and staff detected a 2nd positive staff member who lived with 17 other individuals many of whom are also caregivers.

Infection Control Plan

- Isolation/Cohorting
- PPE requirements
- Staffing
- Testing
- Reporting

Key Points



- Assume a positive test result is an accurate test result, and if positive then quarantine.
- Keep updated list of Covid-19 screening symptoms accessible to staff in English and all languages spoken by facility staff.
- Report Covid-19 outbreak to your Local Health Department immediately.

Best Practices

- Communicate with your Health Department – they are your ally in fighting COVID-19
- Develop contingency staffing plans in advance
- Evaluate cohorting options/plans in advance
- Don't overthink test results – positives are positive
- Educate and re-educate staff



Provide Support for Staff

1. Be a leader, role model, and cheerleader
2. Stay COVID-19 informed
3. Regularly educate staff/residents
4. Emphasize work/life balance
5. Hope for the best, and have a written plan for the worst



Covid-19 Resources

Community Care Licensing Division (CCLD) Home Page:

- Current information on COVID-19
- Current Adult and Senior Care Provider Informational Notices (PINs)
- To sign-up, visit [cclid.ca.gov](https://www.cdss.ca.gov) and click on “receive important updates.”

<https://www.cdss.ca.gov/inforesources/community-care-licensing>

CA Dept of Public Health (CDPH):

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>

The Local County Health Department (*in your local jurisdiction*)

Center for Disease Control (CDC):

<https://www.cdc.gov/>

Questions?