

Infection Preventionist Facility Checklist for COVID-19 Outbreaks



Cohorting: Facilities should follow the Centers for Disease Control and Prevention (CDC) guidelines for: [Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes \(CDC 9.10.21\)](#)

- Red Zone: Place all positive/ symptomatic residents in RED Zone
- Yellow Zone: Move symptomatic residents to the YELLOW Zone when they have an asymptomatic room mate
 - Shelter in place asymptomatic residents with positive point-of-care (POC) test. Initiate transmission-based precautions (TBP) and await PCR confirmation. Move to the Red Zone if positive.
 - Place roommates in TBP, complete POC testing and shelter in place. Move to Red Zone if positive. See [CDC Considerations for Interpretation of Antigen Tests in LTC Facilities 1.15.21](#)
- Green Zone: Residents in this zone should be asymptomatic for COVID-19 unless exposed by symptomatic roommate
 - Positive residents move to Red Zone
 - Symptomatic residents move to Yellow Zone
 - Exposed roommate may shelter in place, test and await results before moving
- Cohort healthcare personnel (HCP) and equipment for COVID-19 residents to minimize transmission in the building.

Equipment Cohorting to Resident Rooms:

- Isolation carts or bins should be outside each individual room or just inside the contained COVID-19 red zone for donning and doffing.
- Trash cans should be near the resident's door or exit of the COVID-19 zone for doffing. An isolation cart and trash can may exist in the hallway in the contained COVID-19 zone, otherwise trash cans should be used inside each individual resident room that is in TBP.
- Cohort supplies; do not share room to room.
- Use disposable or single B/P cuff and stethoscopes/ no mobile units.
- Use pitchers for each resident and disposable cup. Do not use ice coolers to take inside the resident's room for filling cups.
- Single use B/P, O2 Sat per resident as much as possible, and proper disinfection for any reuse.
- Single use bedpans and/or bathroom supplies for all residents.

PPE by Zone: Place a sign on the resident's door "Contact-Droplet Transmission-Based Precautions (TBP)" should include proper PPE. IDOH stop signs may be used per zone indicating proper PPE [Stop Signs IDOH](#).

Infection Control Basics	Green Zone	Yellow Zone	Red Zone
Precautions	Standard precautions	Add Contact-Droplet	Add Contact-Droplet
Mask	*Medical procedure (loop mask) or KN95	N95 Mask (NIOSH-approved N95 respirators)	N95 Mask (NIOSH-approved N95 respirators)
Eye Protection	**All HCP: Eye Protection for resident care when community transmission is substantial or high.	*** All HCP: Eye protection for resident care and TBP	***ALL HCP: Eye protection for resident care TBP
Gown	Standard precautions	°Gown	°Gown
Gloves	Standard precautions	Gloves	Gloves
Signage	Not required	Post signage on residents' doors	Post signage on resident's door

* HCP should not wear cloth masks

****Preservation of protective eyewear/goggles or face shield:** Do not touch eye or face protection during use. Hand Hygiene must be performed after any touching. Eye protection should be close to face with no gaps at top, bottom or sides of eyes. Hand hygiene must be performed before and after donning and doffing eye or face protection.

+All HCP must keep on eye protection for any symptomatic or positive COVID-19 resident in TBP.

° **Extended Wear Gowns:** Conventional use of a single gown for each resident encounter is preferred. For crisis capacity, the same gown can be used in the COVID-19 positive units for droplet-contact precautions for all positive COVID residents, one gown per HCP, until soiled or wet. See [Strategies for Optimizing the Supply of Isolation Gowns \(CDC 1.21.21\)](#).

RED ZONE: Facility gown reuse is different by zone. COVID-19 RED unit uses gowns for extended wear with residents that are positive in the red zone. Gowns must be doffed to enter a break room, nurse's station, when leaving a unit, or stepping outside. A clean gown must be donned upon returning to the redzone.

YELLOW ZONE: Facility gown reuse for the YELLOW zone or any other resident in TBP outside the COVID-19 unit. Gown reuse observed must be "one gown per HCP, per one resident." For dual occupancy rooms, separate gown is used for each resident. Gowns may hang on the back of the resident's room entrance door.

Add outbreak controls by auditing daily, per shift if possible:

- Masks: Universal use of source control facemasks** should continue for all HCP, residents and visitors that come into the facility.



PPE

- o Refill PPE in isolation carts
- o Increase PPE donning and doffing observations by rounding
- o Post job aides for proper donning and doffing PPE (PPE Sequencing Job Aides- CDC. See [Using PPE- job aides \(CDC 6.9.20\)](#).

Hand hygiene

- o Use alcohol-based hand rub (ABHR) inside/outside residents, nursing stations, common areas
 - o ABHR is preferred in most clinical situations unless hands are visibly soiled
 - o Soap and water for *c. diff* and diarrhea
- o Increase observations by rounding

Glove Hygiene

Perform hand hygiene before use of non-sterile gloves upon entry into the resident room for direct care area.

- o Change gloves if they become torn or heavily contaminated.
- o Remove and discard gloves when leaving the resident room or care area
- o Immediately perform hand hygiene after removal of gloves.

EVS/Laundry Service

Disinfectants

- o Available at point of use
- o Labeled appropriately
- o Use approved cleaning agents from List N: [List N: Disinfectants for Coronavirus \(COVID-19\)](#), EPA
- o Disinfecting shared equipment, shared showers/bathrooms-place in easy access areas for staff to access (away from residents)

Contact Time: Ensure EVS and care staff know wet to dry times for proper disinfection

Increase environmental cleaning on all high touch surfaces in residents' rooms and communal areas

Disinfect soiled laundry containers, ensure clean laundry is separate from dirty

Review EVS personnel with proper PPE for cleaning COVID-19 rooms (gown, gloves, mask, eye protection) [Cleaning and Disinfection your Home- everyday when someone is sick \(CDC 06.17.21\)](#)

Review appropriate PPE use with laundry staff for soiled linen: (gown, gloves, mask, eye protection)

Facility Entrance/Common Areas: [COVID-19-Control-Measures-under-410-IAC-1.pdf \(in.gov\)](#)

- Masks available in common areas for easy access
- Monitor Screening areas to assure compliance



- Check IDOH LTC website for tools for visitor and HCP screening
- Post COVID-19 signs and symptoms
- Post IDOH visitor's signs
- Post respiratory cough etiquette signs

Resident Infection Prevention

Universal masking

- Residents must wear masks when HCP are delivering direct care.
- Cloth masks are still acceptable for residents for general social distancing.
- Cloth masks should be laundered on a schedule to assure that they remain a clean barrier for prevention of COVID-19 transmission.
- A clean medical procedure mask should be used for residents
 - o When in the salon
 - o When a COVID-19 person under investigation or positive resident is transferred to a new room or facility
- Review how COVID-19 spreads with residents: [How Coronavirus Spreads | CDC](#)

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Mobility

- Limit movement throughout facility during TBP
 - o Minimize resident's movement around the building, encouraging all residents in TBP to stay in their room or as in memory care consider placement in single room with dedicated HCP to care for this resident.
- Essential movement (therapy, showers, restroom, etc.)
 - o Mask always when out of room
 - o Perform hand hygiene before leaving and upon returning to room
 - o Social distance

Hand Hygiene

- o Educate residents on importance of hand hygiene
- o Provide hand hygiene products in residents' rooms

Routine Testing

- o Consider postponing non-urgent testing for routine labs, chest X-rays, across your facility during an outbreak.
- o Consider changing aerosolizing treatments moving to metered dose inhalers during this outbreak, especially when N95 is not available.

HCP Infection Prevention:

- Mask and follow appropriate eye protection per Zone
- Do not allow HCP to work when ill, especially COVID-19 symptoms
 - o Remove from duty immediately, mask and test
- Report close contacts to facility leadership for contact tracing



- HCP scrubs including jackets and lab coats should be changed prior to leaving facility each day.
- HCP should perform hand washing upon entry to the building before work and prior to exit after changing into street clothes.
- Use appropriate **Standard Precautions** at all times with levels of PPE, mask, eye protection, gown and gloves when splashes and sprays are anticipated. See [Standard Precautions for All Patient Care \(CDC 1.26.16\)](#).
- Use **Enhanced Barrier precautions (EBP)** for residents with **novel MDROs or emerging pathogens** when high-contact resident care activities occur that provide opportunities for transfer of pathogens to the hands and clothing of HCP. See [Implementation of Personal Protective Equipment \(PPE\) in Nursing Homes to Prevent Spread of Novel or Targeted Multidrug-resistant Organisms \(MDROs\), \(CDC 7.29.19\)](#).

Important Resources:

- [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During COVID-19 Pandemic 9.10.21](#)
- [Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 \(CDC 9.10.21\)](#)
- [Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes \(CDC 9.10.21\)](#)
- [Strategies to Mitigate Healthcare Personnel Staffing Shortages | CDC](#)
- [CDC COVID Data Tracker](#)
- [CDC Transmission Based Precautions - room signs](#)
- [Type and Duration of Precautions Recommended for Selected Infections and Conditions CDC Sept 2007](#)
- [Implementation of Personal Protective Equipment \(PPE\) in Nursing Homes to Prevent Spread of Novel or Targeted Multidrug-resistant Organisms \(MDROs\), \(CDC 7.29.19\)](#)
- [Fit Testing During Emerging Infectious Disease Outbreaks \(OSHA 4.1.20\)](#)
- [EPA List N: Disinfectants for Coronavirus \(COVID-19\)](#)

