# COVID19 Frequently Asked Questions Assisted Living Facilities

Date: April 17, 2020

All of us at the Department for Aging and Independent Living want to thank the Kentucky Department for Public Health, Leading Age of Kentucky, Kentucky Center for Assisted Living and Kentucky Senior Living Association for providing some of this guidance and resources within this FAQ. Thank you for your partnership and collaboration.

DAIL FAQ Information: These questions have been asked or discussed before or after our recent town hall webinar. We hope this provides clarity. If you have any additional questions, please contact Buddy Hoskinson, Division Director, at <a href="mailto:Buddy.Hoskinson@ky.gov">Buddy.Hoskinson@ky.gov</a>

#### 1. Question:

What is defined as a congregate activity?

#### Response:

Congregate means to come or bring together into a group, mass, or unit.

#### 2. Question:

• Can residents sit in their doorway to the hall for activities?

#### Response:

No congregate activities is the safest strategy to avoid spread; the 6 feet pertains to essential activities like grocery shopping. Again you are to limit exposure for all.

#### 3. Question:

What about if they are outside in controlled courtyard?

#### Response:

No congregate activity. No group gatherings. You can provide ONE AT A TIME exercise in the facility or in an outside setting.

#### 4. Question:

• Can you provide exercise or time outside?

#### Response:

You can provide ONE AT A TIME exercise in the facility or outside. NO CONGREGATE Activity. No group gatherings. They can be assisted by staff as needed.

What if residents leave the facility and want to come back?

# Response:

Quarantine 14 days and you have the right to deny reentry if it is the best measure in keeping your facility safe at this time. Please refer to your preparedness plan.

# 6. Question:

• Can we move new folks into our facility

# Response:

DAIL at this time will tell you make the best decision possible for all of your residents. The new residents would need to be quarantined for 14 days. Please refer to your preparedness plan.

#### 7. Question:

• Great concern about those with dementia or Alzheimer's while this is going on. They cannot stay in their rooms 24/7

# Response:

You can provide ONE AT A TIME exercise in the facility or in an outside setting. NO CONGREGATE Activity. No group gatherings. They can be assisted by staff as needed. We agree that it can be difficult to explain this pandemic to those individuals. It is critical to communicate with all (Resident, family of residents and staff). We agree that residents are very much use to patterns and routines. Work with them to establish new routines. Seek resources. Attached is a link to an article that may assist you.

https://parade.com/1015499/carolyncrist/dementia-alzheimers-coronavirus/ Also at the end of the article you will see other good resources. Please take a moment to read.

#### 8. Question:

• Can we hire employees at this time? Especially if we get to the point we are down staff. Several are stating staff are not wanting to work.

# Response:

You should come up with back up plans for staffing. Do what is needed for staffing. Please refer to your preparedness plan.

#### 9. Question:

• Can families still visit through windows and doors? The glass doors has been the question.

#### Response:

Yes through <u>CLOSED</u> windows and doors. You may want to establish a designated area. That way you can communicate that with families and create a safe area for consistency.

• DAIL's thoughts on PPE? One even asked for gloves as they use them anyway and now can't get them. One facility is making the masks for residents, but some have asked how they can get some masks even for staff.

# Response:

We recommend you take time to train staff on the proper usage of PPE when using them. We are finding that some staff are not using the PPE properly which can spread infection. We have attached a link on donning and doffing PPE. Also see the PPE Request Fact Sheet attached to this FAQ.

#### 11. Question:

• Do staff need to be prepared to stay all night at the facility?

# Response:

Administrators, Owners and staff should review emergency (Preparedness Plans) plans or most recent updated plans regarding your center, staffing and procedures. You need to have back up plans in place if staff are unable to work.

#### 12. Question:

• Can families bring food items (home cooked and store bought) and supplies to the front for residents?

# Response:

We do not recommend non-essential items be brought in at this time.

#### 13. Question:

Should we have a voluntary staff lockdown?

# Response:

Voluntary staff lockdowns are not being recommended by the CDC. This usually occurs with weather disasters.

# 14. Question:

 A DAIL surveyor communicated even 'hallway BINGO' was inappropriate because it was considered a 'congregate activity'. Is that accurate? Even if they are in their doorway? Aren't they technically still in their apartment? Same question for just casual conversation with neighbors. Can they sit in their doorway with the door open and talk across the hall?

#### Response:

Correct, even hallway bingo is not considered social distancing. Social distancing refers only to when you are performing essential activities like grocery shopping or walking outside. DPH's concern with hallway bingo or similar activities may increase the exposure of COVID19 due to the limited air circulation in hallways and stationary placement of individuals.

• Still confused on if people can be in large areas together in situations where they would be spread out. Small groups to socialize outside their apartments? No Answer

#### Response:

No congregate activities is the safest strategy to avoid spread; the 6 feet pertains to essential activities like grocery shopping.

#### 16. Question:

• To clarify, are activities such as hallway bingo or hallway music therapy allowable if residents stay in their doorways at least six feet apart?

# Response:

No congregate activities is the safest strategy to avoid spread; the 6 feet pertains to essential activities like grocery shopping. Churches cannot hold services with congregants 6 feet apart; schools/colleges cannot hold classes with students 6 feet apart. Please treat your communities the same.

#### 17. Question:

• Can we get clarification on things such as Hallway Activities if there are no positive cases inside a community please?

# Response:

Hallway activities should be discontinued, as you can be positive for COVID-19 for 3-4 days with NO symptoms.

#### 18. Question:

• I'm interested in hearing DPH's take on whether there is any realistic risk of transmission if residents remain within their apartments, but with doors open with staff in hallway to lead singing, or bingo on that hallway. Staff would keep residents inside their apartments. Obviously HVAC transfers air whether or not doors are closed.

# Response:

Singing has actually been proven to spread COVID-19, so we would discourage this.

#### 19. Question:

• Couldn't the residents and staff wear masks during hallway activities with people of 5 or fewer?

#### Response:

No congregate activities, even with masks. Seniors are most at risk for COVID-19, so we need to protect them no more than ever. Children cannot even have birthday parties with friends with masks on at this time. #HealthyAtHome

Regarding PPE, many of us do not have enough resources on hand to properly wear
masks (the way they are intended) and only a very limited supply of gowns and N95
masks, if any. Vendor resources are backordered through June. What's the
recommended practice at the moment and are there any resources available to help us
through the shortage.

# Response:

Many facilities are struggling with PPE; the first line of defense is to minimize contact with residents or have just a few staff deliver supplies/meals so that the PPE usage remains low; we are working at the state to procure some N-95 sterilization options. Also see the PPE Request Fact Sheet attached to this FAQ.

#### 21. Question:

• What is the recommended practice when/if we have a resident that presents with symptoms, since we can't properly arm our staff with the appropriate PPE.

# Response:

If a resident has symptoms, they are to self-quarantine. The facility should call the local health department for guidance on getting testing AND have the resident or the resident's primary caregiver call their primary care provider. Also see the PPE Request Fact Sheet attached to this FAQ.

#### 22. Question:

• What if a resident is COVID-19 positive? What if we are currently providing services for a resident? Meaning, doing checks, showers, dressing, etc. Do we continue providing services for them, or will they need self-quarantine, and we remove additional services?

#### Response:

Be in close contact with your local health department. The KDPH is setting up/has set-up alternate care sites for COVID-19 positive persons in ILF's and LTCF.

#### 23. Question:

With no congregate activities, more activities must be done one on one, which is
difficult to keep the social distancing in apartments. We were doing small groups (5 or
less) with residents in their doorways for chair activities and trivia. (staff and residents
wearing cloth masks) We do not have the ability to do virtual or have an
intercom. Suggestions? Is the resident Activity calendar still required?

#### Response:

No congregate activities is the safest strategy to avoid the spread of the virus; the 6 feet pertains to essential activities like grocery shopping. Churches cannot hold services with congregants 6 feet apart; schools/colleges cannot hold classes with students 6 feet apart. Please treat your communities no differently. We recommend that you contact other ALCs to

learn about all of the creative one on one activities occurring within their facilities. At this time DAIL will not require an activity calendar but know that it will resume in the future. Please see the following link on how to engage your residents during the pandemic: <a href="https://www.ahcancal.org/facility\_operations/disaster\_planning/Documents/Keeping-Residents-Engaged.pdf">https://www.ahcancal.org/facility\_operations/disaster\_planning/Documents/Keeping-Residents-Engaged.pdf</a>

#### 24. Question:

 Can we have specific clarification on whether or not our residents must remain in their rooms - we feel as though we are getting conflicting reports - is it okay if they leave rooms as long as social distancing is being practiced? Or is it just one at a time? Clarify please.

# Response:

Residents should stay #HealthyAtHome as much as possible. If they want to walk, outdoors would be best one at a time with supervision as needed. No group gatherings.

#### 25. Question:

• What's your thoughts on admitting new residents coming in from SNF's that have had positive CCOVID19 cases?

# Response:

If the new resident had an exposure, then they would have to self-quarantine for 14 days, and this may have to happen at an alternate care site/facility or hotel. Contact your local health department for guidance. It has been proven to spread COVID-19, so we would discourage this.

# 26. Question: 4/24/20

 We know many residents have relied on families and or podiatrist to provide foot care. We are concerned about those that are diabetic in particular, are having a hard time walking because their feet hurt. We are learning that these are classified as nonessential. However we do know this is could part of one's health care in ALC. What guidance can you give us?

# Response:

In the circumstance that you are describing, we would not classify them as non-essential. We know that for diabetics, foot care is critical and this could be the only assessment of an individual's condition of their feet. We would have the provider wear a mask for source control and obviously they would be wearing gloves.

#### 27. Question:

 Question #5 in the Frequently Asked Questions that you sent out 4/17 asks "what if residents leave the facility and want to come back?" Does this apply to <u>necessary</u> <u>medical appointments</u> as well like eye injections for Macular Degeneration that must be given in a specific time frame and cannot be missed?

**Response:** It would be best if your staff can provide the transportation for the resident. The facility has better knowledge of who they (the staff) have had contact with as you are asking them and screening them daily. We do understand that not all medical procedures can come to your facility/resident. Use the information you gather from screening the resident over a number of days to determine if you feel it is safe for all. If not then yes 14 days is needed.

#### 28. Question:

• When will restrictions be lifted?

# Response:

On 4/17/20 the Governor discussed benchmarks the commonwealth <u>MUST</u> meet in order to start reopening the state's economy while keeping Kentuckians safe from COVID19. The steps reflect federal guidance by the Whitehouse. Review and read the link from the Governor's news page (<a href="https://kentucky.gov/Pages/Activity-stream.aspx?n=GovernorBeshear&prId=132">https://kentucky.gov/Pages/Activity-stream.aspx?n=GovernorBeshear&prId=132</a>). Additionally, please go to the kycovid19 website and submit your ideas of how you plan to reopen your community to visitors while keeping residents and staff safe by clicking on the "Healthy at Work" link.

# 29. Question:

• Can families visit from the parking lot if they scheduled the visit while resident is more than 10ft away talking on a phone to their family sitting in the car or on the tailgate of a truck?

# Response:

Let us all be honest. Each facility is different and unique. All floor plans are not the same. So we need to think of best practices. If residents have a private patio and not coming through the facility then follow: 1.) A family member can stay 10' away from their loved one. 2.) ALL wear a PPE mask (The homemade mask are good). 3. No hugging or touching of any kind. We cannot be creating a honey bee or buckshot approach of any kind. Another best practice would be to schedule times (No more than one visitation at a time.) on a common front porch or patio area and create the same approach as described in the private patio approach. You as the administrators/staff must be able to assure the safety of your staff and residents. #HealthyAtHome.

#### 30. Question:

 How do facilities enforce the no visitation for family members that refuse to stop coming to the facility.

# Response:

The facility has every right to enforce policies of your own facility. Remember to COMMUNICATE those policies with all families and residents. Good strong communication is

key. Work to establish controlled visitation. If it cannot be like the one described in Question #29, try a common window location. Use phones so they can hear one another.

#### 31. Question:

• A question that has come up is the debate of whether they should have all the residents tested?

# Response:

We would want to make sure before testing or arranging test that you have procedures in place like the ones in the preparedness plan questions we sent out a week ago. Some ALCs are starting to test or are thinking about providing those test. Make sure a proper clinician is preforming or assisting in accordance with your local health department and CDC guidelines.

#### 32. Question:

Where can we send our workers to be tested if there is a concern?

# Response:

More testing locations are becoming available daily. The Governor spoke about expanded testing and allowing for more individual to test on the 4/22/20 update. Refer to the <a href="https://govstatus.egov.com/kycovid19">https://govstatus.egov.com/kycovid19</a> and the KrogerHealth website.

# 33. Question: 5/6/20

• When the salons open up will they be able to allow their beauticians back in with limited days and only serving residents?

#### Response:

LTCF's are the last for reopening at this time as noted in the Governor's phase three. We are not authorizing for salons to re-open at this time. If we get additional information from the Governor's office we will share and communicate that new guidance.

#### 34. Question:

• Would it be reasonable and "approved" for a staff member to take a resident for a drive in our bus after disinfecting it and both wearing masks to prevent the stir crazy?

# Response:

Until the Governor suggests limited non-essential interactions outside the household are acceptable, DAIL does not believe a drive is appropriate at this time.

## 35. Question:

I am concerned with the transitions that are taking place in the Governor's plan and
possible public confusion on behalf of our residents and their families. I support the
telehealth doctor visits. For those residents and or families should they be scheduling
doctor appointments that are non-essential at this time as the physician offices are
opening. Our previous guidance was for staff to transport instead of the family. Now

that the new plan is for elimination of the waiting room, as referred to in the Governors April 27, 2020 memo and remaining in their vehicle until called. Please provide us with your interpretation of residents scheduling their visits and guidance on staff transporting given the new directions to the providers.

# Response:

Review the guidance given above with question 27. Only go to doctor's appointments that are essential and cannot be done through tele-health. We urge Tele-health should continue whenever possible. Until LTCFs are opened up to visitors, DAIL would recommend that staff continue to transport residents to their necessary visits.

#### 36. Question:

What about fire drills during this time?

# Response:

During this time we are suspending the required fired drills for the residents. However what is expected, is that an augmented drill will take place with your staff. The following information should be on your fire drill log sheet: (Follow your schedule for the drills.)

- 1. Who attended the augmented drill
- 2. Dates of the augmented drill
- 3. Time the augmented drill
- 4. The purpose of the augmented drill (Note: The purpose of the change for not including the residents at this time is to not expose them to the possibility of COVID19.)

The more detailed information the better on the log sheet. Please know that DAIL has consulted with the State Fire Marshal's office on this matter. DAIL will review this matter again when we are actively in phase 3 of the Governor's reopening plan. Remember good documentation is key.

# **Good Links to Visit:**

Official Kentucky COVID19 Information

www.kycovid19.ky.gov

Daily News from Kentucky's Governor

https://governors.ky.gov/news

**Alzheimer's Association-Tips for Dementia Caregivers** 

https://alz.org/help-support/caregiving/coronavirus-(covid-19)-tips-for-dementia-care

# Positive Approach to Care with Teepa Snow

https://teepasnow.com/

# Removing (Donning and Doffing) a Disposable Gown and Gloves with Rationale

https://www.bing.com/videos/search?q=CDC+videos+on+proper+usage+of+PPE&&view=detail&mid=9E2B10EEE908938 EDD1F9E2B10EEE908938EDD1F&&FORM=VRDGAR&ru=%2Fvideos%2Fsearch%3Fq%3DCDC%2Bvideos%2Bon%2Bproper%2Busage%2Bof%2BPPE%26qpvt%3DCDC%2Bvideos%2Bon%2Bproper%2Busage%2Bof%2BPPE%26FORM%3DVDRE

# **Managing Stress and Anxiety**

https://www.nimh.nih.gov/about/director/messages/2020/coping-with-coronavirus-managing-stress-fear-and-anxiety.shtml

# "Music Moments"

https://alz.org/news/2020/alzheimer-s-association-unveils-compilation-album

# **AFA-Alzheimer's Foundation of America**

https://alzfdn.org/

# Timeslips.org

https://www.timeslips.org/

# The National Center for Assisted Living (NCAL)

https://www.ahcancal.org/ncal/Pages/index.aspx

# CDC – Preparing Nursing Homes and Assisted Living Facilities for COVID19

https://www.youtube.com/watch?v=p1FiVFx5O78

# Webinar-Thursday, April 9, 2020

Topic: COVID19 Assisted Living Guidance Town Hall Date: Apr 9, 2020 01:42 PM Eastern Time (US and Canada)

#### Meeting Recording:

https://zoom.us/rec/share/2uNuKZr59VFOH9aT00znAbYvP6rieaa8hCIX-vUIyRt1d dZVV2DXUGuQOgTvbXB

Access Password: DAIL20

#### Remember:

# Team Kentucky hashtags for social media

#TeamKentucky #TogetherKY #Patriot #HealthyAtHome