Summary Guidance
COVID-19 Outbreak Control Recommendations
Long Term Care Facility Outbreak Team
May 2023

Alameda County Public Health Department (ACPHD) Residential Care Facility for the Elderly (RCFE) Adult Residential Facilities (ARF) should report Outbreaks to the Community Care Licensing and Certification Regional Office: (510) 286-4201 & CCLASCOaklandRO@dss.ca.gov and to the Alameda County Public Health Department (ACPHD) at (510) 268-2785 or email LTCFOutbreak@acgov.org Mon-Fri 8:30 am to 5:00 pm

Outbreak Definition:
• At least three suspected*, probable†, or confirmed‡ COVID-19 cases within a 14-day period among epidemiologically linked residents and/or staff
  o Epidemiologically linked cases include persons with close contact with a confirmed or probable case of COVID-19 disease, OR
  o A member of a risk cohort as defined by public health authorities during an outbreak.
  o A "risk cohort" includes persons with potential for shared exposure with the case(s) through a shared defined physical space resident and/or staff. (e.g. dining room, activity room, unit)

*Suspect case: Meets supportive laboratory evidence (e.g., over-the counter antigen test) with no prior history of being a confirmed or probable case
†Probable case: Meets clinical criteria AND epidemiologic link‡ with no confirmatory lab testing performed for SARS-CoV-2; OR meets presumptive laboratory evidence (detection of SARS-CoV-2 by antigen test by a CLIA-certified provider)
‡Confirmed case: Meets confirmatory laboratory evidence (e.g., PCR test).

Close Contact: close contact is defined as sharing the same indoor airspace for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) during a confirmed case's infectious period.

Outbreak Surveillance shall continue until there are one or no new COVID-19 cases detected in the exposed group for a 14-day period.
IMPORTANT:

- Residents or staff with signs or symptoms of COVID-19 should be isolated in a single room and tested immediately. **Do not delay testing of anyone (residents or staff) with symptoms.** If test is negative, continue isolation and repeat PCR or Antigen test in 1-2 days, and every 1-2 days until symptoms improve. It is important that COVID-19 positive residents are identified within the 5 day-window for starting treatment. If symptoms do not improve consult with a Healthcare provider.
  - **Symptoms:** fever, chills, rigors, myalgia, headache, sore throat, nausea or vomiting, diarrhea, fatigue, congestion or runny nose, cough, shortness of breath, difficulty breathing, olfactory disorder, taste disorder, confusion or change in status, persistent pain or pressure in the chest, pale, gray, or blue-colored skin, lips, or nail beds, inability to wake or stay awake, severe respiratory illness. This list does not include all possible symptoms.
  - Continue to observe residents for new or worsening symptoms of COVID-19.

- Once a resident or staff member tests positive for COVID-19:
  - No additional testing is needed for that individual for 30 days if they remain asymptomatic after recovering from their COVID-19 infection.
  - Reach out to the resident’s Health Care Provider for possible treatment.

- If a resident tests positive for COVID-19, they should be isolated for at least **5 days** in a single room and **10 days** if symptoms are not improving. If fever is present, isolation should continue until 24 hours after fever resolves (without the use of fever-reducing medicine). A well-fitting mask should be worn around others for a total of **10 Days**. [Guidance on Isolation and Quarantine of the General Public](https://www.cdph.ca.gov/Programs/AgingAndAdults/Documents/COVID_Seniors_WhatsNext.pdf)

- If staff tests positive for COVID-19, they should isolate themselves at home. They can return to work after day **5** if symptoms are improving and no fever is present for 24 hours (without the use of fever-reducing medicine). A well-fitting mask should be worn around others for **10 Days**. [Cal/OSHA COVID-19 Prevention Non-Emergency Regs](https://www.dir.ca.gov/dosh/OSHA/Covid19 самцы-кайдыр-гер-кайыктык-жарналыс-инструкциясы-ku-2020-04-24)

- If a staff or resident tests positive for COVID-19, identify contacts during their infectious period (two days before symptom onset or two days before positive test result if no symptoms) to determine the exposure to residents and other staff. (COVID-19 testing must be available on a weekly basis to employees who have been exposed at no cost to the employee)
  - All residents and staff who have been identified as close contacts, regardless of vaccination status, should be tested promptly and, if negative, again at 3 - 5 days after the exposure. Rapid COVID 19 testing (e.g., antigen testing) is preferred.
  - If unable to identify close contacts, consider testing all the residents and staff twice a week for COVID-19. Testing should continue until no new cases are identified over a **14-day** period.
DURING AN OUTBREAK OF COVID 19:

- Facilities should screen staff for COVID-19 signs, symptoms, and exposure daily. Active screening preferred during outbreak.

- **At minimum, employees who had close contacts MUST wear face coverings when indoors or outdoors when less than 6 feet away from another person.** It is *recommended* that an N95 mask should be worn by ALL staff at work during an outbreak.
  - A tip sheet on how to perform a seal check on your N95 mask has been provided.
  - All employees have the right to request and receive a respirator (e.g. N95) for voluntary use.
  - Ensure that HCP who care for residents with COVID-19 are fit-tested for an N-95 respirator.
    - [Cal/OSHA enforces CCR, Title 8, Section 5144](https://www.dir.ca.gov/title8/5144.html) Respirators shall be provided by the employer when such equipment is necessary to protect the health of the employee. The employer shall provide respirators which are applicable and suitable for the purpose intended. The employer shall be responsible for the establishment and maintenance of a respiratory protection program which includes a requirement for an employer to develop and implement a written respiratory protection program with required worksite-specific procedures and elements for required respirator use, including, but not limited to, respirator Fit Testing.

- Staff should wear protective eyewear, N95 respirator, gown, and gloves when caring for, or exposed to, COVID 19 positive residents. Remove all protective eyewear, mask, gown and gloves before leaving room or caring for another resident. Staff should wash their hands before and after attending to any resident.

- Staff should use separate equipment for each resident receiving care, or equipment should be cleaned and disinfected prior to use. Staff should change all Personal Protective Equipment (PPE) after provision of care to a resident and prior to attending to another resident.

- All Residents who leave their room should perform hand hygiene (wash their hands) and wear a face mask before leaving the room and maintain social distancing.

- Discontinue communal activities and communal dining when one or more resident cases have tested positive.
• Facilities should consider cohorting groups of residents that consistently participate in communal dining or group activities together to minimize the number of people exposed if one or more of the residents is later identified as COVID-19 positive. “Cohorting” means a stable group that stays together for all activities.

• Place portable air cleaners (not fans) in the COVID-positive resident rooms and areas with poor air flow. Portable air cleaners are designed to take in “dirty air,” filter contaminants, and release fresh air back into the room.

• Check on the residents frequently -> Consider checking residents in Isolation every 4 hours, all others every 8 hours.
  o Record residents’ temperatures.
  o Monitor residents for COVID 19 symptoms, such as those identified above.
  o Residents who are sick may be eligible for COVID treatment (high risk with symptoms). **COVID treatments often have a short timeline to start (5 days for oral anti-viral and 7 days for IV treatments), so it is important to act fast** if a resident or staff member has COVID symptoms and a positive test. Reach out to your resident’s Health Care Provider (doctor or nurse practitioner)

NOTE: If you need any assistance with accessing COVID treatment, contact your assigned nurse from ACPHD. If not assigned, contact ltcfoutbreak@acgov.org

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**Know Your Treatment Options for COVID-19**

**Treatment must be started early, so don’t delay testing.**

If you test positive for COVID-19 and have symptoms, talk to your healthcare provider right away about treatment. The table below explains 3 different options for COVID-19 treatment. Treatments are not a substitute for vaccination. Vaccination remains the safest, most effective way to protect yourself from COVID-19.

<table>
<thead>
<tr>
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<th>Paxlovid</th>
<th>Remdesivir</th>
<th>Molnupiravir</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Who is eligible?</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ages 12+</td>
<td>Adults and children over 28 days of age and over 3 kg (7 lbs.)</td>
<td>Ages 18+</td>
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<tr>
<td>Persons with even mild symptoms who are not hospitalized but are at risk for serious illness.</td>
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<tr>
<td>When must it be started?</td>
<td>Within 5 days from start of symptoms</td>
<td>Within 7 days from start of symptoms</td>
<td>Within 5 days from start of symptoms</td>
</tr>
<tr>
<td>How is it given?</td>
<td>Pills taken orally for 5 days</td>
<td>Once daily Intravenous Infusion (IV) for 3 days</td>
<td>Pills taken orally for 5 days</td>
</tr>
<tr>
<td>Where can it be given?</td>
<td>Home</td>
<td>Healthcare facility/infusion center</td>
<td>Home</td>
</tr>
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For more information, visit: [https://www.fda.gov/consumers/consumer-updates/know-your-treatment-options-covid-19](https://www.fda.gov/consumers/consumer-updates/know-your-treatment-options-covid-19)
OTHER OUTBREAK CONTROL MEASURES

New or returning Residents:
• If possible, all new and returning residents should be tested for COVID-19 prior to arriving at the facility.

Visitors:
• During a COVID-19 outbreak at your facility:
  o All visitors should be made aware of the potential risk of visiting during an outbreak investigation.
  o All visitors should be screened for COVID symptoms and/or exposure to another person with COVID within the prior 14 days.
  o Ideally, designate a facility staff member to conduct initial screening; if a visitor has COVID-19 symptoms in the last 24 hours or has been in close contact with a confirmed positive case or someone with symptoms, they should reschedule their visit, regardless of their vaccination status.
  o All visitors should wear a well-fitting face mask with good filtration (N95, KF94, KN95, or surgical masks are preferred over cloth face coverings) and perform hand hygiene upon entry and visits should ideally occur in the resident’s room.
  o When visiting a resident in COVID-19 isolation personal protective equipment (PPE) must be worn. PPE must be worn and removed according to instruction by Health care personnel.

Vaccinations:

Encourage all facility staff and residents to stay up-to-date with COVID-19 vaccinations and boosters as this remains the most important strategy to prevent serious illness and death from COVID-19.

Up to Date:

You are up to date with your COVID-19 vaccines when you have completed a COVID-19 vaccine primary series and got the most recent booster dose recommended for you by CDC.

CDC COVID-19 Timing

For assistance with Vaccinations:
https://app.smartsheet.com/b/form/b95acad6ed24f7cb7a15118659d1514
NOTE:
- Follow this guidance and the instructions from your ACPHD assigned nurse.
- It is very important that you stay in touch with your ACPHD assigned nurse. We are here to assist and guide you through your outbreak.
- Report any new information (e.g., positive test results, hospitalizations, deaths) to your assigned nurse as soon as possible.
- Call your assigned nurse with questions or concerns.
- If after hours, please call our afterhours number (925) 422-7595 for urgent questions and concerns that require ACPHD guidance and cannot wait until business hours.

CDPH MASKING RECOMMENDATIONS:

Regardless of the COVID-19 Community Level, CDPH recommends:

- Wear a mask around others if you have respiratory symptoms (e.g., cough, runny nose, and/or sore throat),
- Consider wearing a mask in indoor areas of public transportation (such as in airplanes, trains, buses, ferries) and transportation hubs (such as airports, stations, and seaports). This is increasingly important as the risk for transmission increases in the community.
- When choosing to wear a mask, ensure your mask provides the best fit and filtration (respirators like N95, KN95 and KF94 are best).
- If you’ve had a significant exposure to someone who has tested positive for COVID-19, wear a mask for 10 days.

Resources:
https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/guidance-for-face-coverings.aspx
https://www.dir.ca.gov/title8/5144.html
https://www.dir.ca.gov/title8/3205.html