

**CoVid-19:**

**Check-List for  
Senior Care Facilities**

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# PANDEMIC MANAGEMENT PROGRAM: Health & Safety

## Specific to Coronavirus disease (CoViD-19)

All care facilities must establish and maintain an infection prevention and control program designed to provide a safe, sanitary, and comfortable environment and to help prevent the development and transmission of communicable diseases and infections.

## Part 1: Educate

The most common respiratory viruses causing respiratory infection outbreaks are influenza A and B, entero/rhinovirus, **CORONAVIRUS**, RSV, parainfluenza, and metapneumovirus. Occasionally, not only one, but two or more infectious agents are identified in an outbreak.

Care Facility residents are already predisposed to Acute Respiratory Infections (ARIs) in part because they may be elderly, may have chronic illnesses which weaken their immune system, and may have chronic lung or neurological diseases which impair their ability to clear secretions from their lungs and airways. However, residents and personnel are also at risk because many viral and bacterial respiratory pathogens are easily transmitted in an institutional environment.

**EARLY DETECTION** together with the timely implementation of outbreak control measures that are carefully adhered to, can effectively minimize transmission of infection, thereby preventing an outbreak or more quickly bringing it under control.

### **SYMPTOMS:**

Signs and symptoms, specific to **CORONAVIRUS** include: respiratory symptoms and fever, cough, and shortness of breath. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, and sometimes death. Standard recommendations to prevent the spread of COVID-19 include frequent cleaning of hands using alcohol-based hand rub or soap and water; covering the nose and mouth with a flexed elbow or disposable tissue when coughing and sneezing; and avoiding close contact with anyone who has a fever and cough.

### **SPECIAL CIRCUMSTANCES:**

During an outbreak caused by **NEW**, emerging pathogens, any type of facility should follow recommendations developed specifically to that emerging pathogen.

This information will be available from many governmental oversight agencies, including the CDC (Center for Disease Control) and WHO (World Health Organization). During any type of potential pandemic, recommendations for management and control may be altered and all types of facilities must use guidance documents specific to pandemic outbreak management. This information will be available from any governing body that regulates your care facility.

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

WHO: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public>

## **Part 2: Elements to be Assessed**

### **Infection Prevention and Control Policies, and training for Healthcare Personnel (HCP):**

1. Facility leadership has reviewed their governing body's COVID-19 guidance or refer to CDC and WHO guidelines.
2. Facility provides education and job-specific training to HCP regarding COVID-19, including information and education on:
  - a. Signs and symptoms of infection posted at all public and private entrances to facility.
  - b. Correct infection control practices and personal protective equipment (PPE), and how to use them.
  - c. Triage procedures, including patient placement.
  - d. HCP sick leave policies and recommended actions for unprotected exposures (e.g., not using recommended PPE, an unrecognized infectious patient contact).
  - e. How and to whom COVID-19 cases should be reported.

### **Roles and Responsibilities of Personnel:**

1. Follow established occupational safety and health procedures, avoid exposing others to health and safety risks, and participate in employer-provided occupational safety and health training.
2. Use provided protocols to assess, triage, and treat patients.
3. Treat all residents/patients with respect, compassion, and dignity.
4. Maintain resident/patient confidentiality.
5. Swiftly follow established public health reporting procedures of suspected and confirmed cases.
6. Provide or reinforce accurate infection prevention and control, and public health information, including to concerned people who have neither symptoms nor risk.
7. Put on, use, take off, and dispose of personal protective equipment properly.
8. Self-monitor for signs of illness, and self-isolate or report illness to managers if it occurs.
9. Advise management if they are experiencing signs of undue stress or mental health challenges that require support interventions.
10. Report to their immediate supervisor any situation which they have reasonable justification to believe presents an imminent and serious danger to life or health.

## Part 3: Preventative Maintenance

PM	Due Diligence	Responsibility	Timing
<p>Pandemic Preparedness: Semi Annual Check</p>	<ul style="list-style-type: none"> <li>• Identification of specific hazards and additional protective measures that may be required</li> <li>• Identification and location of known hazards</li> <li>• Location or relocation of patients/clients/residents based on susceptibility to infection and definition of risks to each. Determined by using the risk assessment matrix to identify type of work being done and location within facility</li> <li>• Identification of the required preventive measures to protect adjacent areas and susceptible patients/clients/residents from airborne and waterborne contaminants</li> <li>• Interim provisions identified for heating, ventilating, air conditioning, and water supply systems</li> <li>• Patient/client/resident placement and relocation</li> </ul> <p><b>Other:</b>            The facility has specified a person (e.g., staff, consultant) who is responsible for coordinating the IC program.</p> <p>The person responsible for coordinating the infection prevention program has received training in IC.</p> <p>The facility has a process for reviewing infection surveillance data and infection prevention activities.</p> <p>Written infection control policies and procedures are available and established on evidence-based guidelines (e.g., CDC/HICPAC), regulations (F-441), or standards.</p>	<p>Leadership Team            Housekeeping/Environmental Services Lead            Maintenance Lead</p>	<ul style="list-style-type: none"> <li>• Semi-Annually</li> </ul>

	<p><b>Note:</b> Policies and procedures should be tailored to the facility and extend beyond bloodborne pathogen training or the governing body’s Operations Manual.</p> <p>Written infection control policies and procedures are reviewed at least annually or according to state or federal requirements, and updated if appropriate.</p> <p>The facility has a written plan for emergency preparedness (e.g., pandemic influenza or natural disaster).</p> <p>Impact of disruption to essential services to patients/clients/residents and employees could include water or ventilation shutdowns that may require the relocation of patients to other areas during the renovation.</p> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>		
Daily PPE Inventory Assessment	<p>Personal Protective Equipment (PPE) is used as temporary (until more effective hazard control techniques can be used) or last line of protection for workers against hazards. The PPE you use will depend on the work environment, the work conditions, and the process being performed.</p> <p>Ensure that proper inventory of all PPE supplies be monitored and re-supplies ordered in timely manner.</p> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>	Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead	<ul style="list-style-type: none"> <li>• Daily</li> </ul>
Daily Cleaning / Disposal Checklist	<ul style="list-style-type: none"> <li>• Facility has a plan to ensure proper cleaning and disinfection of environmental surfaces and equipment in the patient room.</li> <li>• Ensure all personnel received job-specific training and competency validation on proper use and disposal of PPE within the past 12 months.</li> </ul>	Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead	<ul style="list-style-type: none"> <li>• Daily</li> </ul>

	<ul style="list-style-type: none"> <li>• All Staff with cleaning responsibilities understand the contact time for selected products.</li> <li>• Facility has a process to ensure shared or non-dedicated equipment is cleaned and disinfected after use according to manufacturer’s recommendations.</li> <li>• Facility uses an EPA-registered hospital-grade disinfectant with EPA-approved emerging viral pathogens claims on hard non-porous surfaces.</li> </ul> <p>NOTE: If there are no available EPA-registered products that have an approved emerging viral pathogen claim for COVID-19, products with label claims against human coronaviruses should be used according to label instructions.</p> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>		
<p>Daily Resident / Visitor / Staff Screening Review</p>	<ul style="list-style-type: none"> <li>• Provide tissues and no-touch receptacles for sanitary disposal.</li> <li>• Ensure that signs are posted at entrances on how to dispose of tissues, and how to perform hand hygiene.</li> <li>• Ensure signs are posted that anyone having fever or showing signs of respiratory infection to please not enter facility and consult local health authority to be tested.</li> <li>• Ensure that facemasks are provided and are easily accessible to all visitors/staff/residents.</li> <li>• Ensure that alcohol based hand sanitizer for hand hygiene is available at each entrance and in all common areas.</li> <li>• Provide resources for performing hand hygiene near the entrance and in common areas.</li> </ul>	<p>Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead</p>	<ul style="list-style-type: none"> <li>• Daily</li> </ul>

	<ul style="list-style-type: none"> <li>All personnel receive education on the importance of infection prevention measures to contain respiratory secretions to prevent the spread of respiratory pathogens.</li> </ul> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>		
Re-Assessment of Air handling and Ventilation requirements	<ul style="list-style-type: none"> <li>Identification of required preventive measures to protect adjacent areas and susceptible patients/clients/residents from airborne and waterborne contaminants.</li> <li>Interim provisions identified for heating, ventilating, air conditioning, and water supply systems.</li> <li>Numbers, location, and types of airborne isolation rooms (AIR) and protective environment (PER) rooms</li> <li>Location of special ventilation and filtration by HVAC systems (e.g., in operating rooms; emergency department triage, waiting, and intake areas).</li> <li>Impact of disruption to essential services to patients/clients/residents and employees could include water or ventilation shutdowns that may require the relocation of patients to other areas during the renovation.</li> </ul> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>	Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead	<ul style="list-style-type: none"> <li>Semi-Annual</li> </ul>
Re-Assessment of Waste/Hazardous Materials Management and Disposal	<ul style="list-style-type: none"> <li>Reassessing the management and disposal of hazardous waste disposal, including, but not limited to: <ul style="list-style-type: none"> <li>Infectious waste</li> <li>Pathological waste</li> <li>Sharps waste</li> <li>Chemical waste</li> </ul> </li> </ul>	Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead	<ul style="list-style-type: none"> <li>Semi-Annual</li> </ul>

	<ul style="list-style-type: none"> <li>○ Pharmaceutical waste</li> </ul> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>		
Weekly Review of Hand-Hygiene Stations/Eye Wash Stations	<p>While individual owners' manuals of specific equipment should be checked for additional guidelines, standard protocol requires devices to be inspected, tested, and the results recorded weekly. Eyewash manufacturers will provide an inspection tag with each unit.</p> <p>All issues that arise from re-assessments, reviews, or inspections must be documented issues must be actioned per standard protocols and procedures.</p>	<p>Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead</p>	<ul style="list-style-type: none"> <li>• Weekly</li> </ul>
Weekly Review of Soiled Utilities Rooms/Areas	<p>Soiled Utility Rooms:</p> <ul style="list-style-type: none"> <li>• Routinely cleaned with hospital grade cleaners.</li> <li>• Have closed cupboard storage to keep clean items free from splash contamination (i.e. cleaning supplies, personal protective equipment (PPE), bedpans, urinals, basins, incontinence supplies, and specimen containers (or arrange the room to provide spatial separation of approximately 2 meters between clean and dirty sides).</li> <li>• Be secure with restricted access to clinical and support services staff only, with doors kept closed.</li> <li>• Only be used for temporary storage of soiled medical equipment that will be removed once cleaned.</li> <li>• Should contain a human waste management system designed to contain any splash and the controls located so as not to expose staff to contaminants.</li> <li>• Provide adequate space to: <ul style="list-style-type: none"> <li>○ separate waste into health care facility approved covered, leak proof containers (i.e. soiled linen, general waste, biohazardous waste, etc.);</li> </ul> </li> </ul>	<p>Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead</p>	<ul style="list-style-type: none"> <li>• Weekly</li> </ul>



	<ul style="list-style-type: none"> <li>○ hold soiled linen and medical equipment/devices for return to the medical device reprocessing department (MDRD);</li> <li>○ clean soiled patient equipment i.e. IV poles, commodes etc.;</li> <li>○ store carts that are used to move soiled material from the room.</li> </ul> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>		
<p>Daily inspection of equipment requiring specialized ventilation (reprocessing areas that hold CPAP, etc.)</p>	<p><b>After Use:</b></p> <ul style="list-style-type: none"> <li>● Remove chamber from humidifier carefully so water doesn't enter machine.</li> <li>● Open chamber and wash with warm, soapy water.</li> <li>● Rinse well with water and allow to dry on a clean cloth or paper towel out of direct sunlight.</li> <li>● Fill with distilled or sterile water. <b>Do not use tap water</b> as it may contain minerals and chemicals that can damage components of the machine. It is also not recommended to use filtered water (i.e. through a Brita filter) for the same reasons.</li> </ul> <p><b>Weekly:</b></p> <ul style="list-style-type: none"> <li>● Once a week, the humidifier chamber should be soaked in a solution of 1 part white vinegar 3 parts water for approximately 15-20 minutes before rinsing thoroughly with distilled water.</li> <li>● Some humidifier chambers are dishwasher safe, but make sure to check your machine's manual before cleaning in a dishwasher.</li> <li>● Humidifier chambers should be replaced every 6 months or as needed.</li> </ul> <p>All issues that arise from re-assessments, reviews, or inspections must be documented, and issues must be actioned per standard protocols and procedures.</p>	<p>Leadership Team Housekeeping/Environmental Services Lead Maintenance Lead</p>	