

March 23, 2020

Dear Long-Term Care Facility Director:

The Indiana State Department of Health (ISDH) is working to protect Hoosiers during the COVID-19 pandemic. To help protect vulnerable seniors, ISDH recommends masks be worn by direct care providers in nursing homes.

Direct Care providers should wear masks while in facility: There is emerging evidence that many persons with COVID-19 may only have mild symptoms or no symptoms at all. These persons, however, can still be infectious. To prevent the spread of COVID-19 in your facilities among providers with no or mild symptoms, we recommend the following:

- Only essential providers should come in direct contact with patients.
- Those essential providers should wear a surgical mask for the duration of their shifts. Masks should be conserved and only a single mask should be worn by staff each shift.
- Limit patient access to only those providing direct medical care (e.g., Nurses, QNA, QMAs, Hospice, EMS)
- Those staff who do not provide direct care (e.g., housekeeping, meal delivery, maintenance) should not, if possible enter patients' rooms.
- Cohort confirmed or presumed COVID-19 positive patients.
- Cohort, if possible, direct care providers caring for confirmed or presumed COVID-19 patients into one area of the building
- Other strategies to decrease spread can be found here: https://www.cdc.gov/coronavirus/2019-ncov/downloads/novel-coronavirus-2019-Nursing-Homes-Preparedness-Checklist_3_13.pdf

Why are we making this recommendation: While the most common symptoms reported in persons with coronavirus are fever and cough, there is emerging evidence that many persons can have the infection with few if any symptoms. Despite having a mild clinical course, these persons can still be infectious. In addition, persons may be infectious days before their symptoms begin. This is why social distancing works in the community. Decreasing the number of mildly ill, or asymptomatic, infectious persons that come in contact with the elderly and vulnerable populations can be done by keeping everyone in their home and 6 feet apart. Obviously, that cannot happen in a skilled nursing facility. Persons need to come into contact with the residents for their care and wellbeing. This is why we recommend that all direct care providers in skilled nursing and rehab facilitated wear a mask.

Limit resident contact to only direct care providers: We recognize that no definition can adequately capture all those who might need to come into direct contact with a resident. A suggested list, however, includes the following:

- Nurses
- Certified Nurse Assistants (CNAs)
- Qualified Medical Assistants (QMAs)
- Paramedics
- Hospice staff

Although we are continually working on increasing access to PPE, it is currently limited. Because of this, facilities should decrease the number of staff who come into direct contact with residents. This may require, for instance, limiting administrative, housekeeping, meal delivery, and other, staff from going into patients' rooms. We recommend facilities develop processes that allow them to continue their operations, but restrict direct patient contact to only those involved in medical care.

Conserving PPE: Unfortunately supplies of PPE are currently limited. This is why many cities in the US, and around the world, are taking unprecedented steps to reduce PPE usage. As we stated above, the best way to reduce transmission within a facility is to decrease provider to patient transmission. An important step in doing this is preventing residents from coming into contact with respiratory droplets from providers. The easiest way to accomplish this is for providers to wear a mask. This does not mean providers need to wear an N95 mask.

While these should be worn, if possible, if doing procedures that generate respiratory aerosols (e.g., nebulizer treatments) they are not needed for routine medical care. For this a standard hospital/surgical mask is adequate. If supplies are limited, we recommend that each employee that provides direct care to patients wear a mask for the duration of their shift. This may require wearing a single mask each day. Should supplies become critically low, this may mean wearing a single mask on multiple days. While goggles and face shields can be cleaned and sterilized, we are not aware, at this time, of any methods that can clean and sterilize surgical masks. Continue to check the CDC website for additional strategies to conserve PPE: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

EMResource: In the next several days we will be working to add all the statewide skilled nursing facilities to our EMResource database. Once added, each facility will provide a daily upload of their current PPE stores. This will allow us, and local health departments, to better know where resources need to be sent during local outbreaks.

Widespread Testing: Many of you have asked about testing. We are working closely with hospitals, Lilly, and commercial laboratories to increase the number of daily tests. This is why in the last couple of days you have seen dramatic increases in both the number of confirmed cases and number of tests. Despite this, we still do not have enough testing capacity to do widespread community surveillance. Because of this, we are focusing testing on vulnerable populations, such those in skilled nursing facilities, and those who provide for them. To facilitate this ISDH has developed teams that can go to facilities with residents, and providers, who are suspected to have COVID-19 and do testing. These strikeforce teams, will also have with them nurse surveyors. They are not there in their typical regulatory role. Rather, they are partnered with our teams to help staff and facilities to mitigate the spread of infections within their facilities. They will be training staff, if needed, on appropriate PPE and infection control.

We know these times are unprecedented and stressful. We also know that information around this pandemic is changing daily. We ask that you continue to provide outstanding care for those in your facilities and work with local health departments if you have questions or concerns about COVID-19. In addition we recommend regularly checking the CDC and ISDH websites regarding long-term care.

Sincerely,



Kristina M. Box, MD, FACOG
State Health Commissioner