

Guidelines for Nursing Facility COVID-19 Unit

5-11-2020

1. **Dedicated Space** – The facility must have dedicated and separated space to care for residents with confirmed COVID-19. The space could be a dedicated floor, unit, or wing in the facility or a group of rooms at the end of a wing to be used to cohort residents with COVID-19. The space must have appropriate environmental controls to prevent accidental entry of visitors, residents without COVID-19, or residents with an unknown COVID-19 status.
2. **Hand Washing** – There must be appropriate hand washing/sanitizing stations for all persons entering and exiting the COVID-19 Unit.
3. **Dedicated Staff** – The facility must have dedicated Healthcare Personnel (HCP) that work only in the COVID-19 Unit.
4. **Dedicated Equipment** – Equipment used in the COVID-19 unit must not be shared with the rest of the facility.
5. **Dedicated Meals/Environmental Services** – The facility must have dedicated plan for providing the COVID-19 Unit with meals and environmental services, including staff, which are not shared with the main facility.
6. **Plan for new COVID-19 Infections** – The facility must have a written plan outlining the process for treating and handling facility residents who develop COVID-19 (e.g., transfer to single room, prioritize for testing, transfer to COVID-19 unit if positive).
7. **Monitoring Plan** – The facility must closely monitor roommates and other residents who may have been exposed to an individual with COVID-19. Unless there is no other viable choice, the facility should not place unexposed residents into shared spaces with residents who are being monitored.
8. **Admissions / Readmissions with Unknown COVID-19 Status** - The facility must create a plan for managing new admissions and readmissions of residents whose COVID-19 status is unknown. Options include placing the new or readmitted resident in a single-person room or in a separate observation area for 14 days of monitoring prior to transfer to the general population. Testing at the end of the monitoring period could be performed to increase certainty that the resident is not infected.
9. **Observation Area** - If possible, an observation area (e.g., dedicated room or area of the facility) should be created to monitor residents with direct COVID-19 exposures (e.g., a roommate with COVID-19 or transfer for another facility with COVID-19) for the development of symptoms.
10. **Required Personal Protective Equipment (PPE)** - All HCP must use PPE recommended by CDC/ISDH during care of residents with confirmed COVID-19 and residents under observation for potential COVID-19 infection. Required PPE includes an N95 or higher-level respirator (or facemask if a respirator is not available), eye protection (i.e., goggles or a disposable face shield that covers the front and sides of the face), gloves, and gown. ***Cloth face coverings are not considered PPE and should not be worn by HCP when PPE is indicated.***