

Healthcare Resilience Task Force

Concepts of Operation Guidance

Nursing Home Concepts of Operations for Infection Prevention and Control

Summary

Please refer to the CDC.gov [COVID-19 landing page for Healthcare Professionals](#) and the [CMS.gov main web page](#) for the latest guidance and recommendations.

Residents and staff of nursing homes are particularly vulnerable to the ongoing outbreak of COVID-19. This Concept of Operations (ConOps) document provides an overview of recommendations and resources for nursing homes that can help reduce the impact of COVID-19 on residents and staff. This ConOps document has four sections:

1. **Overview of COVID-19:** What the disease is and how it may impact nursing homes
 - 1.1. Description of COVID-19
 - 1.2. Rationale for proactive approach in nursing homes
2. **Prevention, detection and control:** Precautionary measures that can reduce the risk of COVID-19 infections in a nursing home and guidance for monitoring residents and staff for potential infections
 - 2.1. Prevention
 - 2.2. Detection
 - 2.3. Control
3. **Interface with hospitals and other healthcare facilities:** Guidance for interacting with other healthcare facilities that may also be facing impacts from COVID-19
4. **PPE inventory management:** Precautionary and response measures that nursing homes can take to secure and optimize the use of critical supplies

The following links provide up-to-date guidance from the CDC on how healthcare professionals at long-term care facilities and nursing homes can prepare themselves and their patients for COVID-19:

- [CDC landing page: COVID-19](#)
- [CDC: Coronavirus Disease \(COVID-19\): For Healthcare Professionals](#)
- [CDC: Preparing for COVID-19 at Long-term Care Facilities and Nursing Homes](#)

Additionally, the following documents from the CDC and the Centers for Medicare & Medicaid Services (CMS) offer summary guidance for operators of nursing homes and long-term care facilities:

- [CMS: Summary of guidance for long-term care facilities](#)
- [CMS: COVID-19 Update and Information for Long-term Care Facilities](#)
- [CMS: Information for Healthcare Facilities Concerning COVID-19: Memo: QSO-20-09-ALL](#)
- [CMS: Flexibilities for Long Term Care Facilities \(waivers of federal requirements\)](#)
- [CMS: Prioritization of Surveys and COVID-19 Infection Control Self-Assessment](#)
- [CDC: Long-term Care Facility Letter to Residents, Families, Friends and Volunteers](#)

1. Overview of COVID-19

1.1. Description of COVID-19

Coronavirus disease 2019 (COVID-19) is a respiratory disease that has been characterized as a pandemic by the World Health Organization (WHO). The virus primarily spreads from person to person through respiratory droplets, especially between people who are within six feet of one another. Symptoms of the disease include fever, cough, and shortness of breath, and range in severity from mild to deadly. The disease is currently believed to pose a high threat to adults aged 65 years and older, and to those who suffer from chronic medical conditions such as lung disease, asthma, or diabetes.

1.2. Rationale for proactive approach in nursing homes

Experience has demonstrated that residents of nursing homes have a high risk of infection and severe illness from COVID-19. Likewise, staff who come into close proximity with a great number of residents have a high risk for contracting and spreading the disease. The communal nature of living in nursing homes, combined with the advanced age and frequent underlying medical conditions of the residents, creates an imperative for nursing homes to prepare for cases of COVID-19 and to take aggressive steps to prevent transmission.

A number of resources are available to help nursing homes prepare for and respond to COVID-19. This document collects some of these tools and also highlights some of the flexibilities that have been put into place to help nursing homes combat COVID-19.

2. Prevention, detection, and control

COVID-19 management in nursing homes consists of three components:

- **Prevention:** Limiting the risk of COVID-19 entering a nursing home facility
- **Detection:** Watching for a potential COVID-19 infection, and discovering infections by testing residents and staff with appropriate methods at appropriate times
- **Control:** Implementing practices that can slow the spread of COVID-19

The following site summarizes the latest CDC guidance on how nursing homes and long-term care facilities can prepare for COVID-19: [Preparing for COVID-19: Long-term Care Facilities, Nursing Homes](#). The table below provides other resources that provide general information on how nursing homes can prepare for and respond to COVID-19.

Description	Source
30-minute summary on how nursing homes should prepare for COVID-19	Webinar: Preparing Nursing Homes and Assisted Living Facilities for COVID-19 (youtube)
Index of Clinician Outreach and Community Activity (COCA) Webinars, providing up-to-date information	COCA Calls / Webinars (CDC)

2.1. Prevention

This section provides resources for nursing homes to help reduce the risk of COVID-19 entering a facility. CDC and CMS recommend that healthcare facilities limit how the disease can enter the facility by restricting visitation to only include essential healthcare personnel, visitors of residents in rare circumstances and surveyors from CMS and state agencies. The table below provides resources and tools that can help nursing homes prevent COVID-19 from reaching its residents and staff.

Guidance	Source
<ul style="list-style-type: none"> ▪ Limit how germs can enter the facility. ▪ Isolate symptomatic patients as soon as possible. ▪ Protect healthcare personnel. 	Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings (CDC)
<ul style="list-style-type: none"> ▪ Restrict visitation of all visitors and non-essential health care personnel, except in certain compassionate care situations. ▪ Take other actions to limit person-to-person contact (e.g., cancel events). 	Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes: Memo QSO-20-14-NH Revised (CMS; 3/13/20)
Follow the attached table of recommendations for monitoring and work restrictions for healthcare personnel who may have been exposed to coronavirus.	Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19) (CDC)
Use attached worksheet to self-assess strengths and weaknesses of current preparedness efforts.	COVID-19 Preparedness Checklist for Nursing Homes and other Long-Term Care Settings (CDC)
Use attached worksheet to review regulatory requirements and best practices in infection prevention and control.	Long-Term Care Facility – Infection Control Self-Assessment Worksheet (CMS; 11/22/2019)
Use attached worksheet to monitor the spread of respiratory diseases through residents and staff.	Resources for performing respiratory infection surveillance in long-term care facilities (CDC)

Guidance	Source
Use attached handouts to inform staff and residents how to help prevent the spread of infectious diseases.	Link to download .zip file: Head to Toe Infection Prevention Toolkit (CMS; 2/14/2020)

Additional resources	Source
Answers to frequently asked questions (FAQs) by healthcare professionals about COVID-19	FAQs for Healthcare Professionals (CDC)
Answers to FAQs about COVID-19 infection prevention and control	FAQ: Healthcare Infection Prevention and Control (CDC)

Additionally, staff and residents of nursing homes are advised to take special care to follow best hygiene practices, especially regarding hand hygiene. Regular and effective hand washing and use of alcohol-based hand rubs can help limit the risk of transmitting the virus. Residents and staff are advised to wash hands with soap and water for at least 20 seconds when visibly soiled, before eating, and after using the restroom. Staff are advised either to wash hands or to use alcohol-based hand rubs before and after interactions with residents in a care environment.

Guidance	Source
<ul style="list-style-type: none"> ▪ Continue to use alcohol-based hand rubs (ABHRs) for hand hygiene ▪ Use ABHRs with >60% ethanol or >70% isopropanol ▪ Wash hands for 20 seconds with soap and water when soiled, before eating, and after using restroom 	FAQ: Hand Hygiene (CDC) CDC Statement for Healthcare Personnel on Hand Hygiene during the Response to the International Emergence of COVID-19
Use attached search tool to identify disinfectants best suited for use against the coronavirus.	Disinfectants for Use Against SARS-CoV-2 (EPA List N)

2.2. Evaluating and testing

Early identification of COVID-19 infection is essential to limit the spread throughout a healthcare facility. The following resources provide guidance on evaluating and testing residents and staff for COVID-19 infections so that appropriate measures to slow the spread of COVID-19 may be taken. If a COVID-19 infection is identified, a nursing home facility should immediately proceed to implement control and management measures to limit further infections. Staff in nursing homes should have a low threshold to test residents for COVID-19, as experience suggests that nursing home residents can have minimal, atypical, or even no symptoms.

Guidance	Source
Follow the attached strategy to prioritize testing of residents and staff.	Evaluating and Testing Persons for Coronavirus Disease 2019 (COVID-19) (CDC)
Description of a nursing home outbreak, including presenting symptoms among cases	Case study: King County, Washington (CDC)

2.3. Control

If cases of COVID-19 are detected in a nursing home, immediate action should be taken to limit transmission within the facility. Nursing homes should separate residents with suspected or confirmed COVID-19 from other residents and might do so efficiently by designating a location in the facility that can serve as the “COVID-19 area” for a cohort of confirmed cases (and this may help preserve PPE for staff attending to these patients with less need for changing PPE between patients). Because many nursing home residents with COVID-19 may have minimal or even no symptoms, broad testing can be useful to identify otherwise unrecognized cases and to guide control measures.

Guidance	Source
Infection control guidance for preventing the spread of COVID-19 in healthcare facilities	Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings (CDC)

3. Workforce resilience

The resilience of the healthcare system, including nursing homes and their ability to serve their patients, and particularly their ability to prevent, detect, and control infection, depends on the workforce’s ability to report for duty and maintain mental health. Prepare and take actions, such as those listed in the resource referenced below.

Guidance	Source
Guidance and tips, from the FEMA/HHS Healthcare Resilience Task Force, for maintenance of healthcare workers’ psychological health and well-being, including ability to report for duty and work effectively.	Mitigate Absenteeism by Protecting Healthcare Workers’ Psychological Health and Well-being during the COVID-19 Pandemic (ASPR TRACIE)

4. Interface with hospitals and other healthcare facilities

Hospitals and other healthcare facilities may also be impacted by COVID-19, and nursing homes may need to adapt their usual interfaces with these facilities. In particular, the CDC has issued guidance on when patients should be referred or transported to a hospital for treatment and when patients can be safely discharged.

Guidance	Source
Patients with COVID-19 can be discharged from a healthcare facility whenever clinically indicated.	Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance) (CDC)

5. PPE Inventory management

Many healthcare facilities are facing or will face shortages of critical supplies used to protect the wearer from becoming infected. These supplies include examination gloves, respirator masks, eyewear and gowns. This section contains recommendations on how nursing homes can plan for a potential COVID-19 outbreak by beginning to preserve essential PPE and optimizing the usage of current inventory.

Guidance	Source
<p>Clinician Outreach and Community Activity (COCA) webinar on optimizing PPE inventory</p>	<p>COVID-19 Update: Optimization Strategies for Healthcare Personal Protective Equipment (PPE) (CDC)</p>
<ul style="list-style-type: none"> ▪ Begin using PPE contingency strategies now. ▪ Begin planning for crisis capacity strategies. ▪ Resume standard practice when PPE becomes available again. <p>Specific contingency and crisis capacity strategies for each type of PPE are included</p>	<p>Strategies to Optimize the Supply of PPE and Equipment (CDC)</p> <ul style="list-style-type: none"> • Eye Protection • Isolation Gowns • Facemasks • N95 Respirators • Decontamination and Reuse of Filtering Facepiece Respirators Using Contingency and Crisis Capacity Strategies • Ventilators
<ul style="list-style-type: none"> ▪ Some facemasks are acceptable replacements when N-95 respirators are unavailable. ▪ When N-95 respirators are in short supply, they should be reserved for procedures that may generate respiratory aerosols. 	<p>Guidance for Use of Certain Industrial Respirators by Health Care Personnel: Memo QSO-20-17-ALL (CMS; 3/10/20)</p>
<p>Use attached spreadsheet to track how long PPE inventory will last at different usage rates.</p>	<p>Personal Protective Equipment (PPE) Burn Rate Calculator (CDC)</p>
<p>Use attached checklist to begin preserving N95 respirators.</p>	<p>Checklist for Optimizing the Supply of N95 Respirators (CDC)</p>
Additional resources	Source
<p>Answers to Frequently Asked Questions (FAQs) about PPE in the context of COVID-19</p>	<p>FAQ: Personal Protective Equipment (CDC)</p>

Appendix I: CMS waivers and flexibilities to support COVID-19 response at nursing homes

CMS has granted waivers and flexibilities to allow nursing homes to respond rapidly and effectively to COVID-19 outbreaks.

Waivers	Source
Homepage with CMS waivers for COVID-19	COVID-19 CMS Waiver website
CMS blanket waivers for healthcare providers that last for the duration of the emergency declaration	COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers (CMS; 3/30/20)
CMS waivers and flexibilities for long-term care facilities	Long Term Care Facilities (Skilled Nursing Facilities and/or Nursing Facilities): CMS Flexibilities to Fight COVID-19
CMS information and FAQs to clarify certain actions related to visitation, surveys, waivers, and other guidance	Nursing Home Five Star Quality Rating System updates, Nursing Home Staff Counts, and Frequently Asked Questions (CMS; 4/24/20)