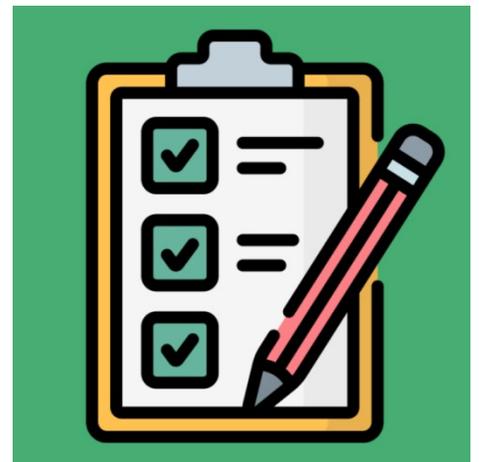# COVID-19
Prevention, Monitoring, and Management for Congregate Settings

The Tennessee Department of Health has created a COVID-19 resource booklet for congregate settings to use and adapt as needed in their response efforts.

Congregate settings include but are not limited to:
- Shelters
- Group care homes
- Homes for the mentally or intellectually disabled
- Residential treatment and recovery facilities
- Housing for migrant workers

TN Department of **Health**

September 8, 2020

Contents

Guidance may change as we learn more.

Please check http://www.tn.gov/health/cedep/ncov or https://www.cdc.gov/coronavirus/2019-ncov/index.html for the most up-to-date guidance about COVID-19.

General Infection Prevention and Control

Good Hygiene
- Wash your hands after using the bathroom, or after coughing or sneezing.
- Always wash your hands before eating.
- Use alcohol-based hand-rub if soap and water are not available.
- Cover coughs and sneezes with your elbow or a tissue.
  - Throw the tissue away after use.
  - Wash your hands after handling or using a tissue.
- Avoid sharing phones, computers, desks and other equipment.
- Avoid touching your face, nose, eyes, and mouth.

Protect Staff and Clients
- Practice social distancing and avoid gatherings of more than 10.
- Strictly limit visitation.
- Staff should stay home if they have fever or respiratory symptoms.
- Staff should be screened daily for fever or COVID-19 symptoms (see page 4) before beginning work.
- Any client with symptoms should wear a mask and be evaluated by their healthcare provider. Testing is available at every county health department, call for available times.
- Cloth face coverings should be worn whenever possible in situations where social distancing is difficult.

Personal Protective Equipment (PPE)
- Stock up on supplies of tissues and hand sanitizer.
- Have masks on hand for people with symptoms.
- Have cloth masks available for situations where social distancing is difficult.
- Provide plastic-lined wastebaskets in your facility for used tissues and masks.
- Keep a supply of gloves for staff to use when picking up used tissues or emptying wastebaskets.
- Health care workers or aids caring for a known or suspected case should follow CDC guidelines for PPE use.
  - https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html
- Staff that have close contact with clients, such as assisting with activities of daily living should wear surgical masks and gloves and adhere to extended use of PPE guidelines.
  - https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html

Cleaning and Disinfecting
- Ensure that all common areas within the facility follow good practices for environmental cleaning. Cleaning should be conducted in accordance with CDC recommendations.
- Frequently clean and disinfect high-touch surfaces with approved cleaners:
  - www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html
  - Pay particular attention to frequently touched surfaces like doorknobs, tabletops, handrails, pens, phones, and bathroom fixtures.

Monitor Your Clients for Symptoms

People with COVID-19 have had a wide range of symptoms reported ranging from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus**.

People with these symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell
- Nausea
- Diarrhea

If your client is over age 60 or has underlying medical problems like diabetes, heart disease or lung disease, or weakened immune symptom, they may be more vulnerable to COVID-19 and its complications.

Refer to Care if Necessary

If staff or clients need medical care, refer them to a healthcare provider. Notify the healthcare provider of symptoms before arriving at the office.

Public Health partners should be notified of a <u>suspected or confirmed</u> cluster (≥ 2 cases among staff or clients) of COVID-19 cases. The local/regional health department in which the facility is located should be notified (list can be accessed here). Alternatively, TDH Central Office can be contacted at 615-741-7247.

Contact Tracing

<u>Staff Members</u>

Ill staff should be interviewed to determine all close contacts***** that occurred from 24 hours before symptom onset through the time of symptom onset/testing. Having this information will allow for assessment of other staff members and clients who may require quarantine, and will also facilitate cohorting of ill clients.

<u>Clients</u>

If a client of a facility tests positive, the facility should identify if that person had a roommate, shared a bathroom, or had other close contact***** with other clients for at least 24 hours prior to symptom onset (or testing date if date of symptom onset not available). Any of these contacts warrant quarantine for 14 days after last exposure.

<u>Staff Members Who Were Not Wearing Appropriate PPE</u>

It is equally important to determine if the client had contact with staff members who were not wearing appropriate PPE. Staff members who are identified should be instructed to stay home for 14 days after their last exposure with the case. If the staff member is critical to the functioning of the facility and no back-up is available, the staff member may be allowed to work as long as they are asymptomatic and wear a mask at all times while in the facility.

<u>Close Contacts</u>

Develop a comprehensive list of all close contacts***** of positive staff or clients and determine if any of the contacts have COVID symptoms. All contacts on this list require quarantine for 14 days since last exposure to the case.

See more information in the [Guidelines for Isolation and Quarantine](#).

*Close contact includes:

- Being within 6 feet of a sick person with COVID-19 for about 15 minutes or longer
- Being in direct contact with secretions from a sick person with COVID-19 (e.g., being coughed on, kissing, sharing utensils, etc.)
- Living in the same household as a sick person with COVID-19
- Caring for a sick person with COVID-19

Procedures for Quarantine-in-Place

Isolation of Cases

<u>Identify an Isolation Area</u>

An isolation area should be separate from other people and only those with suspected or confirmed COVID-19 should be allowed in the area. Clients on isolation should not use the same dining area, sleeping area, or bathrooms as well persons.

<u>Clients with Symptoms</u>

If a client is showing COVID-19 symptoms, a mask should be placed on them and they should be transferred to the area designated for isolation. They should be tested as soon as possible.

<u>Meals and Common Areas</u>

Clients under isolation shall have meals delivered to the isolation area and will not eat with the general population. They should have access to a separate bathroom for toileting and showering purposes and should not use the common guest bathrooms. Staff should wear PPE and deliver food without contact.

<u>Clients Who Test Positive</u>

Any client who tests positive for COVID-19 will remain in isolation and/or be moved to a medical care facility if indicated. Any client under isolation who tests negative for COVID-19 will remain in isolation until feeling well for a minimum of 72 hours before being released. Clients should be referred to their primary care provider for any follow-up medical care.

<u>Clients Who Refuse to Comply</u>

In the event that a client refuses to remain in isolation and/or to comply with infectious disease control procedures, and the client is either diagnosed with or symptomatic for COVID-19, staff should immediately notify their leadership for guidance to protect facility clients and staff.

Quarantine of Contacts

Identify a Quarantine Area

A quarantine area should be separate from other people and only those who are also in quarantine should be allowed in the area. Clients in quarantine should not use the same dining area, sleeping area, or bathrooms as well persons.

Meals and Common Areas

Contacts of confirmed COVID-19 cases should be quarantined in a separate area from the cases and from other well persons. Ideally, they should have access to a separate bathroom for toileting and showering purposes and shall not use the common guest bathrooms. Staff should wear PPE and deliver food without contact.

Release From Quarantine

Contacts should remain quarantined for 14 days from the date of last contact with the case while the case was ill. If the case is asymptomatic, contacts must quarantine for 14 days after the case's specimen collection date.

Clients Who Develop Symptoms

If a contact develops illness, they become a case. A mask should be placed on them and they should be transferred to the area designated for isolation. They should consider getting tested.

Clients Who Refuse to Comply

In the event that a client refuses to quarantine and/or to comply with infectious disease control procedures, staff should immediately notify their leadership for guidance to protect facility clients and staff.

Resources

Tennessee Department of Health

- [What to Expect After Being Diagnosed](#)
  - [¿Qué Hacer Después de ser Diagnosticado con el COVID-19?](#)
- [What to Expect If You Were Possibly Exposed](#)
  - [¿Qué Hacer Si Es Posible Que Usted Haya Estado Expuesto a la COVID-19?](#)
- [What to Expect After Being Tested](#)
  - [¿Qué Hacer Después de Hacerse la Prueba de la COVID-19?](#)
- [What To Do If You Test Negative](#)
  - [¿Qué Hacer Si Obtiene Un Resultado Negativo en la Prueba de la COVID-19?](#)
- [Use of Personal Protective Equipment by Non-Medical Personnel](#)

Office of the Governor

- [Tennessee Pledge](#): A plan to help Tennesseans return to work in a safe environment, restore their livelihoods and reboot our state's economy.

Centers for Disease Control and Prevention

- [Guidance for Shared or Congregate Housing](#)
- [Retirement Communities and Independent Living Facilities](#)
- [Reopening Guidance for Cleaning and Disinfecting Public Spaces, Workplaces, Businesses, Schools, and Homes](#)
- [Talking with children about Coronavirus Disease 2019](#)