Memo: Coronavirus (COVID-19) in Nursing Homes and Assisted Living Facilities

Our medical leadership team is diligently monitoring the global pandemic of Coronavirus. We have connected with the CDC Health Alert Network as well as the Texas Department of Health and Human Services, the local health departments, and CMS. We are receiving regular and direct communication from these agencies including updates with regard to level of risk which is rapidly rising throughout parts of the country, including in Texas. As a result, we are implementing new levels of precaution for all Nursing homes and Assisted Living Facilities that include:

- Restricting visitors
- Restricting all non-essential health care providers (marketers, volunteers, trainees)
- Mandatory screening (via questionnaire that CMS has proposed) of every single person that comes into the building (staff, visitors, vendors, physicians, practitioners, state surveyor or health dept. personnel, etc.)
- Restricting access to the building to one front entrance where screening is done
- Families of the residents are/in the process of being contacted regarding all these measures
- Restricting/postponing all outside appointments to clinics, consultants, imaging centers, etc.

Specific requests of physicians/practitioners:

- **Please be thoughtful about all outside medical appointments that your patients are scheduled for in March or April. Any and all appointments that are not essential should be rescheduled until this pandemic has passed. Doctors ‘offices, imaging centers, etc. are at a MUCH HIGHER RISK of having other patients with COVID and thus exposing our resident. If you can call the consultant and get orders/instructions that way; send a photo; perhaps even use facetime – this is the time to do any/all that you can to keep our residents away from outside people, especially outside sick people. Only you – with your level of license and training – will be able to say it is okay to reschedule the appointment – PLEASE DO THIS**
**Please do NOT come into the facility if you have traveled to an area with known Coronavirus or have had contact with someone for at least 14 days. There is significant and ongoing concern that asymptomatic individuals can and do spread the virus. Please work with the administrator and DON who can help assist with telephonic or telehealth (where available) or even FaceTime etc. to make sure your patients are cared for. Similarly, please consider postponing your routine, regulatory visits as able and consolidating your staff (i.e. only one practitioner as opposed to a rotation of several, etc.)**

**Call health department for any suspected case, no matter how probable or improbable** – You can certainly delegate this to the facility DON or administrator, but encourage them to do it ASAP. With other disease outbreaks, the tendency has been to “get a plan in place” first, then call the local health dept. DO NOT DO THAT – CALL FIRST

**No medical students, no NP students, no residents, or other students**

Use DROPLET precautions: Mask, gown, splash guard if possible secretions sprayed to the face (very unlikely); Hospitals are using airborne precautions out of an abundance of caution, but CMS and CDC have instructed nursing homes without negative pressure rooms (i.e. all the ones in Texas) to use DROPLET precautions

Do NOT call 911 or send patients to the hospital unless they are critically ill and require hospitalization due to inability to care for them in NH; If you do send them out – you MUST alert the EMT, ER staff, etc. BEFORE that the patient is coming with suspected COVID19

**This disease KILLS our patients – 19 patients in LTC facility in Washington State have died of COVID19 with an additional 35 testing positive on Monday and more deaths expected for a mortality rate of at least 25%.

Sincerely,

Liam Fry, MD, CMD, FACP