1. Personal Protective Equipment

Effective immediately

- All long-term care facility staff must wear a mask at work.
  - Based on new evidence that COVID-19 is spreading in long-term care facilities from asymptomatic or pre-symptomatic healthcare workers to patients.
- Mask patients with respiratory symptoms. Tell them to wear the mask during patient care and transport.

Conserving masks

- At this time, PPE use can be extended to conserve resources.
- Surgical and N95 masks can be re-used in between patient rooms not in droplet precautions.
  - Masks can be worn until visibly soiled, difficult to breathe in, or they do not provide a proper sealed fit (for N95 masks).
  - Healthcare workers must avoid touching their mask. If they touch or adjust their mask, they must immediately perform hand hygiene.
  - Do not remove masks in patient care areas.
- Masks can be re-used for patients in droplet precautions if handled, stored and labeled for the worker.
  - Reserve N95 masks for confirmed COVID-19 patients.
- Consolidate tasks to avoid putting on and taking off PPE. Limit going in and out of rooms as much as possible.
- Use patient-dedicated equipment or disposable equipment and leave it inside the room.
- Clean and disinfect shared equipment.

Storing personal protective equipment

- Surgical and N95 masks can be put in a breathable container (paper bag is recommended) and not wiped or laundered. Label the container with the staff member’s name.
- Masks can be used until visibly soiled or soggy.
- Goggles or eye shields can be disinfected with proper facility-used disinfectant. Recommended anti-fog applications can be used.
- Gowns should not be reused until after they are laundered on the hottest water setting (over 195°F) with proper detergent. Paper gowns must be properly disposed.
- Gloves cannot be reused.

2. Infection Prevention

No COVID-19 cases (preparation stage)

- All staff must wear a mask in the building.
- Screen patients and staff for fever and respiratory symptoms at least every 8 hours.
- Use proper handwashing and proper hand hygiene with soap and water, and hand sanitizer between washes.
- Consider using disposable plates and utensils for food service.
COVID-19 suspected

- Notify public health.
- All staff must wear a mask in the building.
- Place patients with respiratory symptoms or fever in droplet/contact precautions.
  - Wear mask and eye protection when entering room.
  - Wear mask, eye protection, gown and glove for all close contact patient care activities.
  - Close door.
  - Put patient in a private room when possible, or cohort patients on droplet/contact precautions.
- Tell patient to wear mask during patient care and transport.
- N95 mask and eye protection must be used during aerosolizing procedures, including respiratory sample collection.
- When collecting respiratory samples:
  - Wear gown, N95 mask, goggles or face shield and gloves. If N95 mask is not available, surgical mask is acceptable.
  - Use droplet/contact precautions until test results are returned
  - Take off PPE in the correct order—gloves, goggles, gown, then mask. Sanitize hands.
- Perform hand hygiene when entering and leaving room.
- Clean bathrooms and toilets between uses.
- Increase surveillance for other cases among staff or residents.
- Use disposable plates and utensils for food service for suspected cases awaiting test results. Consider using disposable items for food service building wide.

COVID-19 confirmed

- Notify public health.
- All staff must wear mask when inside the building.
- Maintain droplet/contact precautions for confirmed and suspect cases.
  - Wear mask and eye protection when entering room.
  - Wear mask, eye protection, gown and glove for all close contact patient care activities.
  - Close door.
  - Put patient in a private room when possible, or cohort patients on droplet/contact precautions.
- Confirmed positive COVID-19 patients may be cohorted to conserve PPE.
- Tell patient to wear mask during patient care and transport.
- N95 mask and eye protection must be used during aerosolizing procedures, including respiratory sample collection.
- Perform hand hygiene when entering and leaving room.
- Clean bathrooms and toilets between uses.
- Stop showers. Bed baths only during outbreak.
- Keep patient in precautions until at least 7 days after symptom onset and clinical status is improved and 72 hours after fever cessation—whichever is longest.
  - If patient is still coughing, precautions can be discontinued. However, patient should be restricted to their room and wear a mask during patient care and transport until all symptoms are completely resolved or until 14 days after symptom onset—whichever is longer.
- Increase surveillance for cases. Increase temperature and symptom screening to every 4 hours.
- Use disposable plates and utensils for food service for confirmed cases. Consider using disposable items for food service building wide.