



Frequently Asked Questions (FAQs) for Residential Care Facilities for Adults and Seniors May 1, 2020

Intended Audience: Administrators of all California Department of Social Services/Community Care Licensing Division licensed facilities in San Francisco. This includes: Adult Residential Facilities (ARF), Residential Care Facilities for the Elderly (RCFE), Residential Care Facilities – Continuing Care, Social Rehabilitation Facilities, and Residential Care Facility for the Chronically Ill

Background: Residents and staff in adult and senior residential care facilities may be at especially high risk for COVID-19 infection and complications from it, especially those who come into close contact with persons from outside the facility, who are older, or who have chronic medical conditions. San Francisco Department of Public Health (SFDPH) staff responding to suspected or confirmed cases of COVID-19 in these facilities will work closely with the facility staff to ensure that the facilities take the steps to prevent and respond to COVID-19. Below are answers to some commonly asked questions.

What can I do to prevent the introduction of COVID-19 into my facility?

- Limit visitors by not allowing those with symptoms that could be COVID-19 into the facility. Post signs at entrances to remind visitors.
- Employees who are ill should not be at work. Ensure that sick leave policies allow employees to stay home if they are ill, and especially if they have symptoms that could be COVID-19.
- Screen employees for symptoms of COVID-19 BEFORE they start their shift and keep a log. If an employee has symptoms that could be COVID-19, that employee should not be allowed in the facility, and should be asked to contact their doctor to assess symptoms and testing options. If the employee does not have a doctor, they can call 3-1-1 to get a referral to be signed up for healthcare.

What symptoms of COVID-19 should we screen visitors and employees for?

- Fever – If using a thermometer, temperature of 100.0°F (37.8°C) or higher
- Cough, shortness of breath, chills, muscle pain, headache, sore throat, or new loss of taste or smell

What can I do to prevent the spread of COVID19 within my facility?

1. Implement social distancing to reduce the risk of transmission.

❖ *Sleeping areas:*

- Beds should be placed at least 3 feet apart, and ideally at least 6 feet apart.
- Create temporary physical barriers between beds using sheets or curtains.
- In rooms where more than one person is housed, arrange beds so that individuals lie head-to-toe relative to each other.

❖ *Common areas:*

- Stagger mealtimes to reduce crowding in shared dining areas and eliminate shared serving utensils when possible.
- Rearrange seating in shared dining areas so that there is 6 feet between individuals (e.g., remove every other chair and use only one side of the table).



- Stagger the schedule for use of common areas such as kitchens, living spaces, and recreation areas.
- Create a staggered bathing or shower schedule to reduce the number of people using the facilities at the same time.
- Reduce or eliminate group activities; if these activities are conducted, encourage residents and staff to remain at least 6 feet apart from one another.
- Encourage residents to wash hands with soap and water or sanitize hands with hand sanitizer containing at least 60% alcohol before entering and after leaving common areas.

2. Clean and disinfect the environment.

- Continue to use routine practices for handling waste and linen.
- Non-disposable dishes and silverware may be used and washed according to routine procedures.
- Clean and disinfect frequently touched surfaces in common areas, staff areas, and resident living and sleeping areas at least daily. Additional information on cleaning can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>
- Increase frequency of cleaning and disinfection for shared bathrooms.
- Use hospital-grade EPA-approved cleaning/disinfectant product effective against coronavirus ([CDC List N](#)) or with emerging viral pathogens claim.
- Follow wet contact time on the disinfectant label and other manufacturer instructions for use.

3. Screen residents for fever and respiratory symptoms.

- Implement a protocol for daily (or more frequent) monitoring of residents for acute respiratory illness. Screening should include temperature measurement and assessment for symptoms including fever (subjective fever or measured temperature of 100.0°F (37.8°C) or higher, cough, shortness of breath, sore throat, headache, chills, muscle pain, or new loss of taste or smell.
- Designate a limited number of staff members to conduct screening (including temperature measurement with a non-contact thermometer). Staff members conducting screening should wear a facemask, goggles/face shield, and gloves.
- In addition to regular screening, encourage residents who develop symptoms to report those symptoms to designated staff member(s).
- If temperature screening cannot be conducted, residents can be screened with a questionnaire that includes questions regarding the symptoms listed above.

4. Prepare and protect your staff.

- Educate staff regarding COVID-19 transmission and risk.



- Make sure leadership and staff know who their appropriate contact will be in case of an exposure. Ensure that phone numbers are accurate, and that staff can be reached quickly if necessary.
- Identify staff who are at [higher risk for COVID-19](#) due to age 60 years or older or medical conditions (moderate-or-severe asthma, chronic lung, heart, kidney, or liver disease, diabetes, severe obesity, high blood pressure or weakened immune system due to a medical condition such as cancer, organ transplant or HIV, or drugs that suppress the immune system). Consider alternate duties for these staff which will decrease their daily contact with patients and other staff, such as working off-peak hour shifts, or performing support functions that do not require direct patient contact.
- Make hand hygiene readily available, so that staff can frequently wash hands with soap and water or use a hand sanitizer containing at least 60% alcohol.
- Staff are not recommended to wear gloves but should perform hand hygiene frequently, and before and after contact with others.
- Communicate clearly to staff that they should not report to work if they are symptomatic with any of the symptoms of COVID-19 listed above.
- Perform daily temperature and symptom screening prior to start of shift and keep a log.
- Encourage staff to wear masks at all times and particularly when within 6 feet of other people (staff or residents) to limit the spread of germs.
- Additional guidance on mask usage:
 - Staff are encouraged to keep and reuse their masks so long as the masks do not become wet, soiled, or damaged. This will help maintain an already limited supply.
 - At this time, N95 respirators are only recommended for use by health care workers providing direct patient care.

What should I do if a member of the staff is suspected or confirmed to have COVID-19?

- Instruct staff who develop signs and symptoms of a respiratory infection or fever while at work to immediately stop work, put on a facemask, alert their supervisor, leave the facility, and self-isolate at home.
- Symptomatic staff should contact their usual healthcare provider or health plan for evaluation and to arrange testing. If they do not have a provider or health plan or if their provider or health plan does not offer testing, they can access CityTestSF which does not require a provider referral for COVID-19 testing. See <https://sf.gov/citytestsf>.
- Asymptomatic staff who have had exposure to a case of COVID-19 are defined in this document: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>. These staff should contact their usual healthcare provider or health plan to arrange testing. They should quarantine at home for 14 days and if they develop symptoms, follow guidance for when it is safe to leave home isolation and return to work.
- **Contact SFPDH at (415) 554-2830** for further guidance and response.



What should I do if a resident is suspected or confirmed to have COVID-19?

- **If a resident is identified with fever or respiratory symptoms, or with confirmed COVID-19 infection, they should be masked immediately and be moved to a private area.** Isolate patients to the greatest extent possible from other residents and staff (see below).
- Immediately contact the sick resident's health care provider to arrange for evaluation and testing. If they do not have a provider, the staff should contact (415) 554-2830 to discuss how best to arrange for evaluation and testing.
- **Contact SFPDH at (415) 554-2830** for further guidance and response.

How do I isolate a resident with suspected or confirmed COVID-19?

- Sick residents should wear surgical masks or facial coverings.
- Place sick residents in an individual room.
- If individual rooms for sick residents are not available, consider using a large, well-ventilated room with a door that can be closed to house sick residents.
- In areas where residents with respiratory illness are housed, keep beds at least 6 feet apart, use temporary barriers between beds (such as curtains), and arrange beds so that individuals lie head-to-toe relative to each other.
- If possible, designate a separate bathroom for sick residents.
- Instruct the resident to avoid sharing common items such as dishes, cups, eating utensils, towels, bedding, or other items with other people. After the resident uses these items, they should be washed thoroughly.
- Sick residents should take their meals in their rooms when possible, avoid common areas, and if they must enter common areas, they should wash hands before entering.

When should I notify someone about COVID-19 cases at my facility?

- **Contact SFPDH at (415) 554-2830** in the following instances:
 - You have a resident or staff member who is a confirmed or suspected case of COVID-19
 - Sick resident or staff member has no health care provider or access to testing
 - You suspect an outbreak of COVID-19 in your facility
 - After you initially notify SF Department of Public Health about a confirmed or suspected COVID-19 case, you should also contact SFPDH to report any new residents with symptoms of COVID-19 and any clusters of respiratory illness or fever in residents or staff.
- In addition, report all suspected or confirmed outbreaks of COVID-19 to Community Care Licensing Division of the California Department of Social Services. Call 1-650-266-8800 and ask for the desk duty person for Adults and Senior Care Programs.



What if I cannot isolate sick residents because of how my facility is set up?

- Contact SFDPH at (415) 554-2830 for additional guidance and to determine if residents can be moved to an alternate location.

My usual vendors for supplies and personal protective equipment do not have the items I need to take care of the residents. Can I request supplies from SFDPH?

- Yes, if your usual suppliers and vendors have been exhausted. Supplies are extremely limited, and requests may be delayed. To request personal protective equipment to protect staff and residents, email seniorsites@sfdph.org or call 628-217-6358 for instructions on how to submit a request.

My staff and/or residents are feeling anxious about the COVID-19 pandemic. Is there someone we can talk to?

- [Friendship Line](#) is both a crisis intervention hotline and a warmline for non-emergency emotional support calls. Trained volunteers specialize in offering a caring ear and having a friendly conversation with older adults experiencing depression and loneliness. **Friendship Line at 1-800-971-0016**. English, Spanish, Mandarin, and Cantonese languages available.
- The [California Peer-Run Warm Line](#) is a free, non-judgmental, non-emergency resource for anyone in California seeking emotional support (855) 845-7415
- [Community Living Campaign](#) has switched its in-person classes to online meetings and is hosting virtual hangouts, singalongs, and low-impact exercise classes over Zoom.

Where can I find signs and posters about hand hygiene and staying safe to print for my facility?

- Resources are posted at <http://www.sfdcp.org/covid19> under "[Printable Resources](#)".

Where can I go for more information and guidance?

- For more information such as guidance for home care providers, home isolation and returning to work, and more, visit <http://www.sfdcp.org/covid19>
- Can't find the answer to your answer? Call and leave a detailed message at the Senior Sites message line at 628-217-6358.

Links to Other Useful Guidance and Materials:

- [Face Coverings Guidance from CDPH](#) (4/1/2020)
- [CDPH's AFL to SNF- Interim Guidance for Transfer of Residents with Suspected or Confirmed COVID 19](#)
- [Preventing the Spread of COVID-19 in Retirement Communities and Independent Living Facilities \(Interim Guidance\)](#)
- [Interim Guidance for Businesses and Employers from CDC](#)
- [Stay Healthy for older Adults - Precautions and activities](#)
- [Get help for older adults and people with disabilities or call 415-355-6700 for its telephone helpline](#)
- [CDSS Letter to Facilities on COVID-19](#)