**COVID19 TTX Outbreak at LTCF Facilitator Guide**

Capability 3: Emergency Operations Coordination

Capability 13: Public Health Surveillance and Epidemiological Investigation

Consider: Capability 9 Medical Material management and Distribution.

Capability 6: Information Sharing

Capability 11: Nonpharmaceutical interventions

Possible goal:

Public Health (PH) and long term care facility (LTCF) staff identify gaps and opportunities related to outbreak investigation at a local LTCF.

Possible Players:

* PH Incident Management Team
* PHEP Coordinator
* Communicable Disease staff
* PH Manager
* LPHA Health Officer
* County Emergency Management
* REC Liaison
* LTCF Incident Management Team
* LTCF Nursing Director
* LTCF Manager/Admin.

Scenario (and some assumptions)

* Outbreak of COVID19 cases occurs at a medium sized LTCF.
* LPHA already has a good working relationship with the facility and is cooperating in the investigation. [*consider injects of facility not cooperating*]
* The facility has multiple buildings on a campus.
* Some staff also work at other locations.
* Specialty staff come onsite occasionally.
* Some cases are hospitalized.
* PPE is available upon request from the state.
* Specimen Collection supplies are available upon request from the state.

As you develop your plan to prepare for any type of outbreak, consider health equity among disproportionately impacted communities, linguistic and cultural barriers which may need to be addressed to serve the impacted population.

Also, as you identify gaps in your capacity and/or capabilities, identify possible partners who may be able to provide assistance or mutual aid. Developing both formal and informal agreements in advance may be useful.

Any resource requests to the State require that you have attempted to acquire supplies/assistance through normal supply chain and/or mutual aid, and that has been exhausted.

**TTX Discussion Topics**

The following is a menu of discussion topics that you may want to utilize, choose what is appropriate for your situation. It’s best to keep the discussion focused on fewer topics.

**Coordination**

* What is the role of LTCF [Nursing Manager] related to the outbreak?
* What is the role of local LTCF [Management] related to the outbreak?
* What is the role of LTCF [parent company] related to the outbreak?
* What is the role of LPHA in conducting an outbreak investigation?
* What is the role of OHA related to the outbreak?
* What is the role of EM related to supporting the response?
* What other organizations or agencies may need to be notified?

**Communication**

* How well are you able to communicate with each other?
* What is the role of other partners in the room?
* Do you have the right contacts?
* Is there the possibility for miscommunication?
* Are there barriers, who can help build rapport?
* How will staff, volunteers, residents and families be notified?

**Information Sharing**

* What information is okay to share with local officials or community leaders, and when?
* When and who should be notified of the potential outbreak?
	+ EMS, PSAP, local hospitals, local urgent care or healthcare providers, other care facility if staff are shared, specialty clinics/providers, medical transportation.
* Would notifications occur with presumptive, prior to results, since case, etc.?
* Are there other partner agencies that need to be notified?

**Staffing**

* What is the capacity of staff to respond to the outbreak (LPHA & LTCF]?
	+ Epi, CD, Specimen Collection, Contact Tracing, Data Analysis, PIO, etc.
* How can you increase staffing surge capacity?
	+ Consider MRC, SERV-OR
* What Mutual Aid agreements are in place?
* What other contracts might exist? *Consider agreements with at least ten resources for staffing, there are significant staffing shortages everywhere.*
* What is the process for screening staff before shift?
* What is the surge capacity for LTCF staff?
* Are there any organizations that need to be notified regarding staffing changes?

**Resources**

* What are current PPE guidelines at the LTCF, are these adequate?
	+ *All HCP wear PPE*
	+ *Universal use of facecoverings or N95, except by residents in their own room*.
* Who can identify how much PPE the LTCF currently has?
* Who can identify how much PPE the LTCF needs?
* Is the LTCF able to purchase needed PPE?
* What steps are involved in determining how much PPE to request from outside sources for the LTCF?
* Are the strategies for conservation of PPE appropriate?
* How is the request made to acquire more PPE for the LTCF?
* Are staff familiar with appropriate requesting forms?
* What Mutual Aid agreements are in place?
* What other contracts might exist?

**Case Investigation & Contact Tracing**

* How would LPHA begin to conduct case investigation?
* What roles will be involved?
* Do appropriate staff have access to ORPHEUS, ARIAS, etc.?
* Are (LPHA & LTCF) staff familiar with ARIAS and appropriate forms?
* What might be some limitations or barriers to conducting an investigation?
* Are there enough trained LPHA staff for contact tracing?
* Where else can you find additional contact tracers?
* Are there linguistic or cultural considerations for contact tracing?
* What strategies can be utilized if a facility is reluctant to cooperate?
* What strategies can be utilized if a case (staff, resident or other) is reluctant to cooperate?
* Are current infection control protocols appropriate?
	+ *Do any changes need to be made to resident screening?*
	+ *Residents restricted to their room.*
	+ *Any additional PPE considerations*?
	+ *Is there a desire for an IC consultation*?
* What does cleaning and disinfection look like?
* How will residents be cohorted, isolated or quarantined?
* Is there a need for isolation or quarantine resources for staff or residents?
* How will new staff or resident admissions be handled?
* What is the strategy for the facility to reopen?

**Specimen Collection**

* Who will take lead on specimen collection?
* What is the capacity (staff and stuff) for specimen collection?
* To which lab will specimens be sent?
* Where can you find more specimen collectors?
* What will specimen collection for staff look like?
* What will specimen collection for residents look like?
* How will family be notified that testing is occurring?
* How will family be notified of testing results?
* How will staff be notified of testing results?
* How will the facility be notified of testing results (staff, residents, other)?
* What might be some barriers or limitations to specimen collection (nasal canula, dementia, etc.)?
* Are there linguistic or cultural considerations?
* What considerations are needed?
* How will outbreak specimen collection impact routine specimen collection?

**Public Information**

* Under what circumstances would LPHA release the name of the facility?
* Who (LPHA or LTCF) will release info about the outbreak?
* What information is protected by HIPAA?
* Is there a call center plan?
* Are there linguistic or cultural concerns to address?

**Responder Health & Safety**

* Are staff properly trained in donning and doffing PPE?
* Does PPE appropriately sized for staff and residents?
* Is there any cross-over of staff between resident areas?
	+ *Consider break rooms, social activities and carpooling.*
* Are there resources to address staff mental health concerns?
* Are there any additional concerns for LTCF safety and health?

**Volunteer Management**

* What does volunteer management look like?
* What activities would volunteers be doing?
* What are the qualifications needed? (licensing level, language)
* How will volunteers be recruited and vetted?
* What are restrictions to consider for volunteers?
	+ *High risk volunteers are not eligible for tasks with direct interaction for example.*
* How will PPE be provided and fit-tested?
* How will volunteers receive appropriate training?
* What additional waivers or paperwork is required?
	+ *Update confidentiality forms, emergency contact, etc.*
* Do volunteers have appropriate identification?
	+ *ID badge, identifying shirt or vest, position-specific vest, etc.*
* Will meals or transportation be provided?

Fatality Management

Related Resources:

<https://www.cdc.gov/cpr/readiness/capabilities.htm>

Healthcare Partner Resource Page <https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Pages/COVID-19.aspx>

<https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/COMMUNICABLEDISEASE/REPORTINGCOMMUNICABLEDISEASE/REPORTINGGUIDELINES/Documents/Novel-Coronavirus-2019.pdf>

<https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Emerging%20Respitory%20Infections/LTCF-COVID-19-Response-Toolkit.pdf>

<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>