

# Preventing and managing COVID-19 across long-term care services

## Web annex

### Key objectives and actions to prevent and manage COVID-19 in long-term care facilities



Ensure that infection prevention and control (IPC) standards are implemented and adhered to in all long-term care facilities to prevent and safely manage COVID-19 cases



Prioritize testing, contact tracing and monitoring of the spread of COVID-19 among residents and staff of long-term care facilities



Include long-term care in all phases of the national response to the COVID-19 pandemic



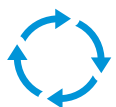
Mobilize adequate funding for long-term care facilities to respond to and recover from the COVID-19 pandemic



Ensure effective monitoring and evaluation of the impact of COVID-19 on long-term care facilities and ensure efficient information channelling between health and long-term care facilities



Secure staff and resources, including an adequate health workforce, to respond to the COVID-19 pandemic



Ensure the continuum and continuity of essential services for people in long-term care facilities



Prioritize the psychological well-being of people receiving and providing long-term care services & Provide support for family and voluntary caregivers



Ensure a smooth transition to the recovery phase

## Background

COVID-19 has disproportionately affected residents in long-term care facilities. Concerted action addressing the needs of staff and residents of long-term care facilities is needed to prevent and manage the impact of COVID-19 and is one of the key actions that governments must take to truly leave no one behind in the response to COVID-19.

This publication forms part of the WHO policy brief entitled Preventing and managing COVID-19 across long-term care services.<sup>1</sup> It presents a comprehensive set of actions for policy-makers, national and local decision-makers and other actors. These key objectives and key actions are slightly modified but linked to the policy objectives from the policy brief. Their prioritization will depend upon the local context and situation.

## **OBJECTIVE** Ensure that infection prevention and control (IPC) standards are implemented and adhered to in all long-term care facilities to prevent and safely manage COVID-19 cases



### Key actions

- Ensure that long-term care facilities have an IPC focal point to lead and coordinate IPC activities, ideally supported by an IPC team with delegated responsibilities and advised by a multidisciplinary committee.
- Establish a coordinating body to develop, adjust and update IPC guidance and protocols during the COVID-19 pandemic for long-term care facilities.
- Establish a mechanism to plan, prioritize support for, and monitor implementation of IPC measures to protect staff and residents from infection or spread of COVID-19.
- Ensure that long-term care facilities have access to the resources needed to implement IPC (such as personal protective equipment(PPE), hand sanitizers and disinfectant).
- Ensure that everyone (staff, residents and family caregivers) in long-term care facilities has access to IPC training (including use of PPE, hand hygiene, cleaning and disinfection of environments and waste management). This should be carried out regardless of their role, and especially for those having direct contact with older people with underlying health conditions. Ensure educational resources are provided alongside continuous training.
- Develop and circulate standard operating procedures that give direction on how and when to rapidly isolate people, using the most up-to-date WHO COVID-19 guidance.<sup>3</sup>
- Implement IPC precautions for people discharged from hospital, based ideally on an agreed protocol for testing, to determine individual needs for isolation and PPE required.
- Implement surveillance upon entrance to the long-term care facility for all staff and visitors, including screening for signs and symptoms.
- Ensure that the long-term care facility provides basic IPC education (hand hygiene, limiting surfaces touched, and use of PPE) for visitors (eg. folder, banner, interview).
- Ensure that staff in the facility have working conditions and arrangements that minimize their movement between settings (eg. community and home outreach programs, other health facilities), and that sick pay enables them to stay at home if they are unwell.

**OBJECTIVE** Prioritize testing, contact tracing and monitoring of the spread of COVID-19 among residents and staff of long-term care facilities



**Key actions**

- Ensure that the health of people receiving and providing long-term care is monitored so that the development of symptoms (including atypical symptoms) can be detected quickly.
- Do not rely on symptoms alone, particularly “typical” cough and fever symptoms, when screening for COVID-19, and ensure that staff are trained in identifying other atypical symptoms, especially in older persons.
- Ensure rigorous testing of both residents and staff in areas with ongoing or suspected community transmission and tracing of close contacts.
- A single suspect case with clinical symptoms compatible with COVID-19 should be isolated and tested as soon as possible.
- When a first case is confirmed in a resident and/or staff of a long-term care facility, comprehensive testing of all residents and staff should be implemented.
- Ensure contact tracing and isolation based on national guidance, with reference to WHO guidance on contact tracing in the context of COVID-19.

**OBJECTIVE** Include long-term care in all phases of the national response to the COVID-19 pandemic



**Key actions**

- Ensure a focal point to manage long-term care facilities in the overarching COVID-19 governing body.
- Establish a mechanism to support unregulated providers, focusing on cooperative support rather than punitive measures.
- If long-term care facilities are expanding their health care role during the pandemic, establish concrete steps to expand health service capacity through measures such as reallocating direct health care staff, supplies/materials to long-term care facilities.
- Establish COVID-19 emergency response plan for long-term care facilities that includes rapid readiness analysis of the facility and an incident management system team, that is activated and linked to both a local healthcare facility and national/local authorities involved in COVID-19 response.

**OBJECTIVE** Mobilize adequate funding for long-term care facilities to respond to and recover from the COVID-19 pandemic



**Key actions**

- Provide emergency funding for long-term care facilities to cover the additional costs linked to the pandemic (eg. additional staff costs, IPC training, and materials such as PPE and sanitizers).
- Provide flexibility in the use of emergency funds allocated to long-term care facilities as well as residents.
- Provide funding to long-term care facilities to compensate for lower occupancy rates and ensure provision of quality essential health and care services.

**OBJECTIVE** Ensure effective monitoring and evaluation of the impact of COVID-19 on long-term care facilities and ensure efficient information channelling between health and long-term care facilities



**Key actions**

- Establish a surveillance system that captures people who have COVID-19 (probable and confirmed) and deaths that occur in long-term care facilities (eg. disaggregated by age, gender, disability and existing health condition), and ensure that these are integrated with existing surveillance systems.
- Establish the necessary legal mechanisms to secure and transmit information relating to COVID-19 on a regular and frequent basis to and from long-term care facilities, health facilities, public health authorities and the public.
- Ensure testing data are shared with local and national public health agencies so that the pandemic is managed at both the individual and population level.
- Set up a mechanism to ensure that these data are analysed regularly and the findings used to refine government policy on the COVID-19 response.

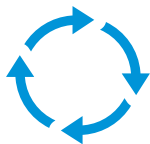
**OBJECTIVE** Secure staff and resources, including an adequate health workforce, to respond to the COVID-19 pandemic



**Key actions**

- Estimate surge capacity needed to support long-term care facilities in coordination with the focal point on long-term care in the national/local COVID-19 response bodies.
  - Recruit additional staff (for example, recruit retirees, students from health and long-term care training programmes, and volunteers) and develop rapid training programmes on IPC measures.
  - Address contractual and related issues and put in place policies and measures that keep staff safe but allow them to work in a flexible manner.
  - Establish rosters and secure staff from health-care facilities who can be reassigned if needed to support staff in long-term care facilities.
  - Provide financial payment for care staff to incentivize them to stay in their jobs during the epidemic and compensate them for additional workload and stress.
  - Implement measures to monitor staff working in multiple locations, with increased risk of transmission, and consider facilitating transport and accommodation of staff to minimize the risk of infection during local outbreaks.
  - Ensure adequate supply of PPE and hygiene products in long-term care facilities to protect care staff from infection and from transmitting infections.
  - Facilitate flexible arrangements whereby palliative care teams and other relevant health and care professionals work with staff in long-term care facilities.
  - Ensure adequate oversight by appropriately trained personnel to deliver essential services in long-term care facilities.
-

## **OBJECTIVE** Ensure the continuum and continuity of essential services for people in long-term care facilities



### Key actions

- Consider developing clear COVID-19 care pathways<sup>4</sup>, inclusive of long-term care facilities and home- and community-based care, for transfers to primary, secondary and tertiary care for people with COVID-19.
- Ensure there is no selection based on age or disease in protocols for care pathways, and that people's needs and preferences determine care decisions.
- Ensure that all long-term care facilities are supported by a primary care service or other health facility.
- Consider appropriate tele-health and virtual technologies for consultations, taking account of the views of older people, and provide any support necessary to use such technology effectively.
- Ensure that all advanced care planning, including palliative care, are up-to-date and applied through a person-centred approach.
- Establish rapid response teams, preferably with geriatric and palliative care training for long-term care facilities, to reduce avoidable hospitalizations and ensure optimal person-centred communication and decision-making.
- Ensure that staff are trained in providing palliative care and know how to communicate about death, dying and end-of-life decisions.

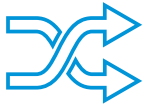
## **OBJECTIVE** Prioritize the psychological well-being of people receiving and providing long-term care services & Provide support for family and voluntary caregivers



### Key actions

- Establish clear visiting policies that provide balance between IPC measures and the need for people to maintain their psychological well-being (enable residents to have visitors while minimizing the risk of COVID-19 entering long-term care facilities).
- Facilitate residents' contact with family and friends by phone, the Internet or written messages if access is restricted.
- Increase recruitment of volunteers to help with providing social interaction for isolated residents.
- Enable family caregivers who provide psychological and practical support for people living in long-term care facilities to continue such roles through supportive measures that ensure the safety of the caregivers.

## **OBJECTIVE** Ensure a smooth transition to the recovery phase



### Key actions

- Make available surveillance mechanisms to monitor the quality of care within long-term care facilities during implementation of public health and social measures.
  - Make available guidance on thresholds as to when and how to phase in or out isolation of residents and loosen restrictions on visitors.
  - Establish clear criteria on when and how people living in long-term care facilities can move to and from hospitals to protect both staff and other residents.
  - Ensure that the needs of long-term care residents are considered in providing acute, primary and community health services, and that pre-COVID-19 levels of support from primary care and community nursing are reinstated as early as possible.
-

# References and further information

1. WHO, Preventing and managing COVID-19 across long-term care services : policy brief. Geneva: World Health Organization; 2020. ([https://www.who.int/publications/i/item/WHO-2019-nCoV-Policy\\_Brief-Long-term\\_Care-2020.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Policy_Brief-Long-term_Care-2020.1))
2. WHO, Infection prevention and control guidance for long-term care facilities in the context of COVID-19: interim guidance. Geneva: World Health Organization; 2020 ([https://www.who.int/publications/i/item/WHO-2019-nCoV-Comm\\_health\\_care-2020.1](https://www.who.int/publications/i/item/WHO-2019-nCoV-Comm_health_care-2020.1), accessed 22 June 2020)
3. WHO, Clinical management of COVID-19: interim guidance. Geneva: World Health Organization; 2020. (<https://www.who.int/publications/i/item/clinical-management-of-covid-19>, accessed 4 August 2020)
4. WHO, Public health surveillance for COVID-19: interim guidance. Geneva: World Health Organization; 2020. (<https://www.who.int/publications/i/item/who-2019-nCoV-surveillanceguidance-2020.7>, accessed 7 August 2020)
5. WHO, Considerations in the investigation of cases and clusters of COVID-19. Geneva: World Health Organization; 2020. (<https://www.who.int/publications/i/item/considerations-in-the-investigation-of-cases-and-clusters-of-covid-19>, accessed 16 August 2020)
6. European Centre for Disease Prevention and Control. Surveillance of COVID-19 at long-term care facilities in the EU/EEA. (<https://www.ecdc.europa.eu/sites/default/files/documents/covid-19-long-term-care-facilities-surveillance-guidance.pdf>, accessed 19, May 2020)
7. WHO, Contact tracing in the context of COVID-19. Geneva : World Health Organization; 2020. (<https://www.who.int/publications/i/item/contact-tracing-in-the-context-of-covid-19>, accessed 29 July 2020 )
8. WHO. Rapid hospital readiness checklist : interim guidance, Geneva: World Health Organization; 2020. (<https://www.who.int/publications/i/item/WHO-2019-nCoV-hospital-readiness-checklist-2020.1>, accessed 25 June 2020)
9. WHO, Global Surveillance for human infection with coronavirus disease(COVID-19). Geneva: World Health Organization; 2020 ([https://www.who.int/publications/i/item/global-surveillance-for-human-infection-with-novel-coronavirus-\(2019-ncov\)](https://www.who.int/publications/i/item/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)), accessed 23 July)