



6 Steps to COVID Control in Senior Living

As quickly as COVID spread around the globe, another outbreak could be looming – of COVID or another virus. And when there is infection in the broader area, it will inevitably make its way into a senior living community. How can communities be proactive to keep infections out and, when infections do hit, best manage infected residents to contain the spread?

Barbara Bierstedt, AALNA board member and VP Clinical Operations, Retirement Center Management, and Deb Choma, Director of Member Services at AALNA, share six strategies to help communities enhance resident health, safety, and recruitment.

- **1. It starts with preadmission.** According to Bierstedt, it's essential to tighten up a community's policies and procedures, starting even before an incoming resident arrives. "The pre-admission screening has become an increasingly important tool to evaluate potential resident risks," says Bierstedt. "For example, we ask about a prospective resident's vaccination status, whether they've had COVID-19 previously, and their physical health history." All of these factors can be taken into consideration in admissions decisions.
- **2. Educate, educate, educate.** For Choma, another key component of infection prevention is education of staff, residents, and responsible parties. "Even though we've been living with COVID-19 since 2020, it's still important to continue broad training on the virus, proper steps to protection like handwashing, and how to watch for symptoms of the virus for rapid identification."
- **3. Involve all departments.** Bierstedt and Choma recommend a community should take a cross-functional approach to infection prevention and involve every department. Whether that's simply following procedures or reinforcing education among their own staff, everyone needs to be on board. Choma adds that this should include residents. "Many communities have a resident representative, and that individual can be a critical conduit to spread the word about infection prevention."
- **4. Ensure adequate PPE.** One of the biggest lessons from the pandemic is the importance of having sufficient supplies on hand. "We were caught off guard before," explains Bierstedt. "Now, whether it's regulated like in Texas or not, we

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have a minimum of a two-weeks' supply of everything we need." That includes gloves, gowns, and other items. – none of which a community has to worry about going bad or to waste. She stresses that communities should constantly monitor their supply levels because, as the industry now knows, an outbreak could happen at any time.

- **5. Maintain surveillance and testing.** In addition to monitoring state and local outbreaks, communities should continue surveillance within their own organizations. "We are still screening staff and residents with symptoms and immediately do a rapid test when there is a potential infection per change of condition policies," says Bierstedt. "The sooner we can isolate that individual, the better chance we have at minimizing the impact on the broader community."
- **6. Rely on partners.** With already-burdened staff, making infection prevention as streamlined and simple as possible is key. Choma says leveraging strategic relationships such as with a community's pharmacy partner can be invaluable. "One thing that helps is having the consultant pharmacist add a piece to their observation on infection prevention," she suggests. "They can review handwashing, cleaning practices for the med rooms, and any other components of infection prevention and make those part of their reporting. That way, staff knows immediately where to focus their efforts."

While all these steps may seem daunting, they're essential to keeping a community safe. And Bierstedt and Choma both know that's a big selling point today.

"When we're interviewing a prospective resident, COVID-19 is one of the first things they'll ask about," says Choma. "They want to know how many cases you've had, the protocols in place, cleaning schedule, and more. The best way to comfort them is by educating them about what we're doing to protect staff and residents."

Bierstedt adds, "It's now just part of the dialogue."

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