



## **CITY OF SAN ANTONIO**

### **Dialysis and Long-Term Care COVID Guidance, Bexar County (Sept 2020)**

The following guidance is for dialysis facilities that serve people living in Long-Term Care facilities in Bexar County. These recommendations are made by the Local Health Authority for Bexar County.

***Dialysis patients are considered immunocompromised and at high risk for COVID severe infection.***

- ***People living in long term care are at higher risk for exposure to and transmission of COVID among other high-risk persons in a congregate setting.***
- ***For that reason, the following guidelines are presented as a way to mitigate risk for both the dialysis facility and the long-term care facility.***
- Guidance will be modified as the science advances and transmission rates change. All guidance should be adapted to fit the environment where dialysis is conducted.
- Consultation with the Metro Health COVID Response Team is encouraged via email to [COVID19CongregateSettings@sanantonio.gov](mailto:COVID19CongregateSettings@sanantonio.gov).
- ***Please refer to information on dialysis and COVID here from the Centers for Disease Control and Prevention (CDC): <https://www.cdc.gov/coronavirus/2019-ncov/hcp/dialysis.html>***

#### **Background:**

COVID-19 infection may present without symptoms (asymptomatic), mild illness or severe illness. There is no known preventive medication or immunization for COVID-19 as of September 2020. COVID-19 is primarily spread person to person through respiratory droplets. Risk can be reduced by social distancing, good ventilation, frequent and effective hand washing, and consistent and correct use of face coverings. It is possible that COVID may be transmitted from an infected person onto high touch items such as doorknobs, faucets and handrails, so these areas should be frequently cleaned. Please refer to the CDC website for more details on sanitization of dialysis stations and dialysis facilities.

#### **Definition of an Outbreak:**

- A dialysis facility is defined as having an outbreak if 2 or more *related* COVID cases occur in a facility within 14 days.
- Long term care facilities are defined as having an outbreak if a single case of COVID is found in the facility (patient or staffer). This is true regardless of whether transmission occurred in the facility or outside in the community.
- An outbreak is considered contained when no new cases are identified in 2 weeks, with serial testing every 3-7 days of previously negative patients and staff.

#### **Definition of "COVID-Recovered":**

- Most people are considered recovered and no longer infectious when it has been 10 days since symptom onset (or date of test collection, if no symptoms), symptoms have improved and there is no fever for at least 24 hours without the use of fever-reducing medication.
- Patients who are severely immunocompromised are considered recovered and no longer infectious when it has been 20 days since symptom onset (or date of test collection, if no symptoms), symptoms have improved and there is no fever for at least 24 hours without the use of fever reducing medication. CDC does not clearly define



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“severely immunocompromised,” but provides these examples: Being on chemotherapy for cancer, being within one year out from receiving a hematopoietic stem cell or solid organ transplant, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone >20mg/day for more than 14 days. Some people with end-stage renal disease may have a much lower degree of immunocompromise. CDC states that ultimately, the degree of immunocompromise for the patient is determined by the treating provider.

### **COVID Testing Frequency**

#### If no outbreak:

- Test all COVID-negative staff at least once a month. Routine testing of asymptomatic staff is the responsibility of the employer, not of the employee. Testing at the workplace during work hours is recommended.
- At least once a month, test COVID-negative staff who transport patients to and from dialysis, because vans are small enclosed spaces with limited airflow. The employer of the transportation staffer is responsible for testing, excluding positive staff from work for at least 10 days, and reporting to the health department.
- Staff who are at higher risk because of their workplace exposures (COVID unit, transportation) may be tested more often.
- Test COVID-negative dialysis patients weekly while incidence of COVID19 is high in the community (>5% positivity rate). At lower community prevalence rates, test at least monthly. Patients could receive testing at both the long term care facility and the dialysis facility in the same week, as long as testing is spaced out by 3-4 days.
- Provide written documentation of the result when the person is being transported, and share with the other facility upon arrival. Dialysis facilities may call the long term care facility for a result before accepting the patient for treatment.
- Do not retest anyone who was previously positive for at least 3 months.

#### During an outbreak:

- Test all previously negative staff, including transportation staff, every 3-7 days until there are no more new positives.
- Do not retest previously positive staff for at least 3 months.

#### General recommendations for both scenarios:

- Testing of volunteers, students and others who do not receive payment for services should be offered by the sponsoring facility. Contractors should be tested by the facility in which they work.

### **Patients or Staff with Known or Suspected COVID**

- COVID symptoms are: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea
- **Any patients or staff with these symptoms should be excluded from the dialysis environment and evaluated by a medical professional to rule out COVID.** If COVID is ruled out, then the person may return to the dialysis facility.



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- If a person with COVID needs dialysis, **perform dialysis in the home or long-term care facility until the patient has recovered**. If this is not feasible, then dialysis should be done in isolation at a facility with dedicated staff in full PPE until the patient recovers.

### **Personal Protective Equipment (PPE) during COVID:**

- All staff with patient contact at all dialysis and long-term care facilities in Bexar County should wear fit-tested N95 masks plus face shields or goggles while the community transmission rate remains elevated (>5% positivity rate by local health department reports).
- A fresh N95 should be provided each shift. Cloth face coverings are not adequate protection.
- N95 fit testing is an [OSHA requirement](#), and lack of fit testing could become a liability if an employee contracts COVID-19. Some just-in-time solutions are described [here](#), and a CDC checklist is [here](#).
- Face shields may be sanitized at work and reused by the same person.
- Perform hand hygiene and change gloves between each patient.
- During patient contact, staff should also wear impermeable gowns.
- Create dedicated PPE doffing and donning areas. Train staff to use a buddy system to don and doff in the correct [sequence](#), with hand hygiene before and afterward.
- If the local positivity rate falls below 5%, all staff NOT working directly with COVID positive persons may wear a new surgical mask daily, and eye protection only if there is splash or spray risk. There are no changes in the requirements for working with *COVID-positive* persons based on positivity rate.

### **Patient PPE**

- Persons obtaining dialysis and living in a long term care facility should wear a new surgical mask daily. The mask may be provided by either the dialysis facility or long term care facility.
- The mask should cover the mouth and nose at all times.
- Face shields are not recommended; if used, they should not be re-used by a different person (label the face shield with the patient's name).
- Cloth face coverings are not adequate protection.

### **“In Home” Dialysis When a Patient Lives in a Long Term Care Facility**

- “In home” dialysis at the long term care facility on an emergent basis is highly recommended for all COVID-positive patients until recovery. Preventing the COVID-positive person from being transported reduces the risk of transmission to others.
- Dialysis facilities and long-term care facilities in Bexar County should work to develop an operational plan in anticipation of using “in home” dialysis during the pandemic.
- The plan should include offering dialysis to more than one person per facility at a time.



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### **If “In-Home” Dialysis Is Not Possible: Reduce Transportation Risks**

- Increase ventilation by opening windows. Vehicle HVAC is less effective and if used, should be set to bring in outside air. Do NOT use “recirculate” mode.
- Drivers should wear a fitted N95 mask and eye protection. Passengers should wear masks and be socially distanced. Provide a fresh mask to each person daily.
- Follow CDC guidance for cleaning and disinfecting vehicles [here](#). At a minimum, clean and disinfect commonly touched surfaces in the vehicle at the beginning and end of each shift and between transporting passengers who are visibly sick.

### **COVID Units at Dialysis Facility**

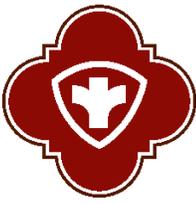
- All dialysis facilities should treat persons from long term care facilities as “unknown” status due to their frequent exposures at multiple facilities.
- Therefore, dialysis facilities which offer services to Long Term Care facilities should be considered “warm” or “observation” level care. Even people with a recent negative test should be considered to potentially be incubating an infection (since exposure could have occurred after last test date).
- Maintain 6-foot spacing between patients in “cold” and “warm” facilities and 3-foot spacing in “hot” facilities.
- All staff should wear fitted N95 masks and eye protection (face shields and goggles), with ongoing monitoring of consistent and correct use. All patients should wear a surgical face mask.
- Any facilities that choose to provide dialysis to known COVID positive persons before recovery should be considered “hot” facilities.
- No other patients should be in the “hot” facility when COVID positive persons arrive or during the duration of treatment.
- Staff should wear full PPE for hot units. **Use dedicated staff who do not work on non-COVID units.**
- The facility should be cleaned and disinfected after treatments are completed.
- Positive patients should not receive another COVID test for at least 3 months after symptom onset (or the date the test was collected, if asymptomatic).

### **COVID Recovered Patients**

- COVID recovered persons may receive care in a “cold” or “warm” unit in the first 3 months after symptom onset. After 3 months, place in “cold” unit.
- Like other patients, they are not considered contagious but should always wear a surgical face mask.

### **Cohorting Staff**

- Under the San Antonio Mayor’s [Declaration of Public Health Emergency](#), staff at long-term care facilities remain prohibited from working in or visiting more than one facility, unless otherwise excepted by guidance from HHSC or another relevant state authority.



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- This requirement applies to all health care personnel (including physicians) and support staff including contractors, volunteers and others.
- New hires should be encouraged to self-quarantine for 14 days before starting at a new facility and be tested for COVID, if previously negative or unknown status (prior positives should not be retested within 3 months).
- Staff working in a COVID unit should only work in that unit and not interact with non-COVID patients or staff.

### **Notifications:**

- **Dialysis and Long-Term Care facilities that share patients are expected to provide each other with notice of COVID exposures, positive cases among patients who obtain dialysis, and outbreaks.** This notice should be provided within 24 hours and prior to transport.
- COVID-19 is a Notifiable Condition under Texas law. If a patient tests positive, notify the San Antonio Metropolitan Health District (Metro Health) at [COVID19CongregateSettings@sanantonio.gov](mailto:COVID19CongregateSettings@sanantonio.gov) within 24 hours. *Do not send HIPAA-protected information by email—we will reach out to you for those details.*
- In the event of an outbreak or high-risk exposures, the Metro Health Congregate Settings team will provide technical support, which may include site visits and testing resources.