

## **Prevention Advices for Covid-19 Disease for Nursing Homes by the Turkish Academic Geriatrics Society**

### **Covid-19 prevention advices for the Nursing Homes and what to do about positive cases/contact**

It is known that mortality rate due to Covid-19 is high in the elderly population. The recommendations of the Academic Geriatrics Society regarding the reduction of Covid-19 positivity in nursing homes, the path to be followed in positive cases and the precautions to be taken are given below.

- 1) Standard infection protection and infection control recommendations, contact and droplet isolation precautions in nursing homes should be done according to the Covid-19 guide prepared by the Republic of Turkish Ministry of Health, General Directorate of Public Health. Nursing home staff should follow this guide for updates on the related website every day and follow their suggestions.
- 2) Primarily; education about the ways of transmission of the virus, prevention methods and personal hygiene rules should be given to residents and caregivers. (in small groups and maintaining social distance or informative videos can be used)
- 3) All visits to nursing homes should be prohibited.
- 4) Fever of nursing home staff, healthcare staff or visitors should be measured at the door, question the respiratory tract symptoms, those with the slightest symptom and those with high fever should not be taken to the nursing home. Disinfection and isolation precautions (hand disinfectant and mask) should be applied to asymptomatic people who are allowed to enter.
- 5) Visitors who are obliged should be taken to an isolated room if possible, the visit should be kept short (5 minutes), the room should be disinfected according to the guide after leaving the visitors.
- 6) If the staff and visitors leaving the nursing home develop respiratory symptoms, they should isolate themselves in their homes for 14 days and inform the nursing home immediately. People who have been in contact with in the nursing home should also be isolated.
- 7) The number of staff in the nursing home should be reduced. The staff should only be that nursing home worker, and if there are any staff serving by going to different nursing homes, they should only be employed in a one nursing home. Considering the possibility that the personnel may become infected in the future, a personnel work plan should be established, and the personnel should be managed sparingly and rested by working as shifts. Existing staff can be operated with 2-week shifts.
- 8) All social activities, including having meals together in the nursing home, should be stopped. Residents should be given meals in their rooms. Hands should be disinfected before and after meals.
- 9) The residents of the nursing home should be reminded to keep a distance of 1 meter between them and to disinfect their hands frequently with hand disinfectant or 80 degrees of cologne during the day.
- 10) Considering the nursing home capacities, first of all those who are volunteers, especially those with residents above the existing capacity, should be sent to those who want to stay at home, and those who are close to those who do not want to stay in a nursing home should be given 3-month companion allowance. In this way, the capacity of nursing homes can be effectively used and the contact distances of the residents can be maintained and contact with each other can be reduced.

- 11) In order to detect and isolate Covid-19 cases, nursing home staff must follow the possible signs of infection every day. Those with respiratory symptoms and / or fever of 38°C and above must be tested at the nursing home. Preferably testing for all staff and residents of the nursing home, with or without symptoms, allows early detection of positive cases and prevention of spread.
- 12) Screening can be done with mobile screening teams due to the correct sample taking, cold chain protection, and the number of personal protection equipment (N95 masks, gloves, eye protection equipment) are limited. If the person taking the sample is not obliged to be a doctor, it can be appointed from public health.
- 13) In case of encountering the Covid-19 case, the measures to be taken should be done as stated in the same guidebook of the Turkish Ministry of Health.
- 14) The safety procedures specified in the guideline must be followed during the collection and sending of suspicious cases.
- 15) Personal protective equipment and N95 mask for healthcare personnel who will contact Covid-19 case closer than 1 meter are also mentioned in the same guideline and should be available at institutions. The personal protective equipment provided must be delivered in minutes and used before contact with patients who have a positive Covid-19 test.
- 16) A surgical mask should be worn to the residents of the nursing home, who are found to be Covid-19 positive, and if the symptoms are mild in the first place, it should be monitored in the nursing home, if possible in the isolated room, and not transferred to the hospital. Positive cases can be monitored in the same room.
- 17) Patients with more serious symptoms (those who may need oxygen or intubation) should be guided to designated reference hospitals under appropriate conditions. The referral should be done by contacting the reference hospital. If the oxygen saturation is 90% or more with the nasal cannula, it can be followed up in the nursing home.
- 18) Patients with respiratory symptoms that have not yet been tested should also be isolated and have their own toilet in the isolation room.