

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY **DEPARTMENT OF SOCIAL SERVICES**

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October 1, 2020 PIN 20-35-ASC

TO: ADULT DAY PROGRAM LICENSEES

Original signed by Pamela Dickfoss

FROM: PAMELA DICKFOSS

Deputy Director

Community Care Licensing Division

SUBJECT: INFLUENZA OR "FLU", NOVEL CORONAVIRUS DISEASE 2019 (COVID-19),

AND PNEUMONIA IN ADULT DAY PROGRAMS

Provider Information Notice (PIN) Summary

PIN 20-35-ASC provides information for Adult Day Programs licensees related to the prevention, mitigation, and containment of the flu, COVID-19, and pneumonia based on the recommendations from the Centers for Disease Control and Prevention (CDC) and California Department of Public Health (CDPH) guidance.

Please post this PIN in the facility where clients can easily access it and distribute the following parts of this PIN to the clients and if applicable, their Authorized Representative:

Addendum F: Client Fact Sheet, and attach to it

Addendum A: Signs and Symptoms of Flu, COVID-19 and Pneumonia Addendum C: Prevention (Vaccinations), Testing and Treatment Measures

Influenza, often referred to as "the flu", is a contagious illness that can infect a person's respiratory system (nose, throat, and lungs). The flu can cause mild to severe illness, and at times can lead to death. While various flu viruses circulate year-round, most of the time flu activity peaks between December and February.

In 2020, we are also facing a worldwide COVID-19 pandemic. COVID-19 and the flu are both contagious respiratory illnesses, but they are caused by different viruses. The flu is caused by infection with influenza viruses and COVID-19 is caused by infection with SARS-CoV-2, which stands for severe acute respiratory syndrome (SARS) coronavirus 2. Pneumonia is an infection of the lungs that can be caused by a bacteria or virus.

The first and most important step in preventing the flu and severe complications of flu is for clients, staff, and volunteers to get a flu vaccine each year. The flu vaccine prevents millions of illnesses and thousands of deaths each year in the United States. Flu vaccination does not prevent COVID-19 or increase the risk of developing COVID-19.

This PIN provides information based on the CDC and CDPH guidance that is applicable to Adult Day Program (ADP) providers on issues related to the flu, COVID-19, and pneumonia. This PIN also provides information on relevant California Department of Social Services (CDSS) guidance, requirements, best practices and resources as follows:

- ADDENDUM A: Signs and Symptoms of Flu, COVID-19 and Pneumonia
- ADDENDUM B: Transmission, Incubation and Contagiousness
- ADDENDUM C: Prevention (Vaccinations), Testing and Treatment Measures
- ADDENDUM D: Reporting Requirements
- ADDENDUM E: Resources
- ADDENDUM F: Client Fact Sheet

ADP providers should continue to monitor the CDSS website for updates to this guidance as well as other guidance that may be released related to ADPs. All providers should continue to follow all applicable CDSS PINs guidance or instructions from health care providers, the CDC, COPH), COPH), COPH), COPH), COPH), CDPH), <

If you have any questions, please contact the applicable <u>Adult and Senior Care Regional</u> <u>Office</u>.

ADDENDUM A: SIGNS AND SYMPTOMS OF FLU, COVID-19 AND PNEUMONIA

Symptoms of the flu, COVID-19, and other respiratory viruses that can cause pneumonia are similar, so it is hard to tell the difference between them without testing. A person can also have infection with more than one respiratory virus at the same time.

The Flu and COVID-19

Both the flu and COVID-19 can have varying degrees of signs and symptoms, ranging from no symptoms (asymptomatic) to severe symptoms. COVID-19 symptoms are similar to the flu symptoms listed below, but COVID-19 can also include loss of taste or smell.

Common symptoms of COVID-19 and the flu include:

- Fever or feeling feverish (not everyone with flu or COVID-19 will have a fever)
- Chest discomfort
- Cough
- Shortness of breath or difficulty breathing
- Sore throat
- Runny or stuffy nose
- Muscle or body aches
- Headaches
- Extreme fatigue, weakness
- Vomiting and diarrhea, though this is more common in young children than in adults
- COVID-19 only: change or loss of taste or smell

People who have the flu or COVID-19 can have some or all of these signs and symptoms, which usually start suddenly, not gradually. In most people, flu symptoms start to clear up after a few days, but cough and fatigue can last more than two (2) weeks.

Some flu and COVID-19 symptoms in people who are 65 years of age and older can be less common and subtle, such as confusion, a change in mental status or a below normal temperature (hypothermia). In addition, many individuals may not be able to reliably report symptoms, especially those with dementia or cognitive impairment.

Additionally, other respiratory tract viruses circulate every year and may cause similar respiratory illness.

Pneumonia

Some people will develop complications, such as pneumonia, as a result of the flu, COVID-19, other respiratory viruses and bacteria. Pneumonia is an infection of the lungs that can cause mild to severe illness.

Common signs and symptoms in people with pneumonia may include those that are similar to the flu, such as cough, fever and chills. They may also include chest pain and difficulty

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breathing.

For more information on signs and symptoms of flu, COVID-19 and pneumonia, visit the CDC website.

ADDENDUM B: TRANSMISSION, INCUBATION AND CONTAGIOUSNESS

Feature	FLU	COVID-19	Other respiratory viruses that can also cause Pneumonia
Transmission	Respiratory	Respiratory	Respiratory
	droplets are most	droplets and	droplets are most
	common way of	aerosols* are most	common way of
	spreading.	common way of spreading.	spreading.
	Contact with objects		Contact with objects
	is less common way	Contact with objects	is less common way
	of spreading.	is less common way	of spreading.
		of spreading.	
Incubation time,	1-4 days	Usually 5 days,	Range 2-14 days
time between		range 2-14 days	
exposure to virus and			
first symptoms	A .da b .da	O dava hafana	Danaga of days to
Period of contagiousness, when a person can infect other people	1 day <i>before</i> symptoms start until 7 days after becoming sick	2 days <i>before</i> symptoms start until 10 days after becoming sick	Range of days to weeks depending on the virus
		People with no	
		symptoms can also	
		be contagious: up to	
		40% of people	
		infected with COVID-	
		19 have <i>no</i>	
		symptoms (asymptomatic)	
		(asymptomatic).	

NOTE: COVID-19 is *more* contagious than flu. The virus that causes COVID-19 can quickly and easily spread from infected people who have no respiratory signs or symptoms (asymptomatic).

For more information on transmission, incubation and contagiousness, visit the <u>California</u> <u>Department of Public Health</u> or the <u>CDC</u> website.

^{*}Aerosol is a suspension of tiny particles or droplets in the air.

ADDENDUM C: PREVENTION (VACCINATION), TESTING AND TREATMENT MEASURES

The healthcare system may have challenges treating a high number of people with the flu, COVID-19, and other respiratory illnesses this fall and winter. To slow the spread of respiratory infections, licensees are advised to consider the following measures:

Prevention Measures

Annual Flu Vaccination

The first and most important step in preventing the flu is for clients, staff, and volunteers to get a flu vaccination each year. During the COVID-19 pandemic, getting a flu vaccine will be more important than ever. The flu vaccine prevents millions of illnesses and thousands of deaths each year in the United States. The CDC recommends that all people age 6 months and older get a yearly flu vaccine.

Offering flu vaccinations on-site to staff and clients is one of the best ways to increase flu vaccination rates. Flu vaccination can also be given by primary care offices, pharmacies, and local health departments. Contact the medical provider of the client or go to the CDC's flu vaccine finder website for more information on where to get a flu vaccine.

Flu vaccination does not prevent COVID-19 or increase the risk of developing COVID-19.

Pneumonia Vaccination

For individuals who are 65 years of age and older or have other high-risk conditions, getting the pneumococcal vaccine (also known as the pneumonia shot) will reduce the risk of bacterial pneumonia complicating a viral respiratory infection. For more information about pneumococcal vaccine, visit the <u>CDC</u>.

COVID-19 Vaccination

There is no approved vaccine for COVID-19 as of September 2020. For general information on vaccines, visit the <u>CDC</u>.

Additional Preventative Measures

Consider the following best practices to prevent the spread of the flu, COVID-19 and other viruses that can cause pneumonia:

<u>Face Coverings</u>: Facility staff should wear a facemask (e.g., surgical or procedure mask) at all times while they are in the facility. If facemasks are not readily available, cloth face coverings can be used by staff to prevent the spread of respiratory diseases but facemasks are preferred. Refer to <u>PIN 20-33-ASC</u> for the guidance on COVID-19 and the required use of face coverings and exceptions.

- <u>Hand washing and gloves</u>: Actively promote adherence to <u>hand hygiene</u> among facility staff, clients, and visitors including the use of gloves as recommended by the <u>CDC</u> and discussed in <u>PIN 20-23-ASC</u>.
- <u>Respiratory Hygiene and Cough Etiquette</u>: During flu season, post visual reminders
 asking clients and staff to <u>practice respiratory hygiene and cough etiquette</u>, and report
 symptoms of respiratory illness to a designated person. Visitors should not come into
 the facility if they have symptoms or respiratory illness.
- <u>Visitor Precautions and Restrictions</u>: Post signs notifying visitors that if they have fever, respiratory symptoms or symptoms consistent with flu or COVID-19, they should immediately inform the facility. Refer to <u>PIN 20-33-ASC</u> for guidance on COVID-19 reopening and visitation policies and to <u>PIN 20-24-ASC</u> for information regarding the statewide waiver on visitations.
- <u>Cleanliness of Facility</u>: Perform routine cleaning and <u>disinfection</u> of frequently touched surfaces and equipment. Refer to <u>PIN 20-33-ASC</u> for guidance on COVID-19 prevention measures and the PowerPoint Presentation titled: <u>Infection Prevention: Fostering a</u> Robust Framework in Facilities.
- <u>Linens and Clothing</u>: Put linens soiled with respiratory secretions, contaminated tissues, vomit, or fecal matter in a plastic bag before taking them to the laundry room. Do not shake dirty laundry in order to avoid shaking virus droplets into the air. Encourage facility staff responsible for laundry to wear gloves, a mask, and a disposable gown (or to change their clothes) when physical contact with soiled linens is necessary. Also refer to <u>PIN 20-14-CCLD</u> on COVID-19 laundry sanitizing and the PowerPoint Presentation titled: Infection Prevention: Fostering a Robust Framework in Facilities.
- <u>Staff Leave and Screening</u>: Staff with a fever of 100°F or higher, respiratory symptoms, or symptoms consistent with flu or COVID-19 should not work and should immediately report to their supervisor. Refer to <u>PIN 20-23-ASC</u> for guidance on COVID-19 screening of staff.

Testing, Isolation and Treatment Measures

Testing

Clients and facility staff with a flu-like illness should be tested for both the flu and COVID-19 in order to confirm if they can participate or work-in in the day program safely. Flu-like illness is a fever plus a cough and/or a sore throat. Testing is especially important if there are two or more cases of flu-like illness within 72 hours. The <u>local health department</u> should also be contacted and can coordinate prompt testing for the flu and COVID-19. Since the flu and COVID-19 cause similar symptoms, the local health department can provide recommendations in addition to testing. If testing results are negative for both the flu and COVID-19, the local health department can also guide further steps, which could include repeat testing and/or testing for other respiratory viruses. Additionally, <u>PIN 20-33-ASC</u> provides updated guidance on testing

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for COVID-19 and PIN 20-23-ASC provides guidance on Finding a Testing Site.

Isolation

It is challenging to determine appropriate isolation when flu and COVID-19 are circulating together in the community. Symptoms of the two infections are similar, but procedures are different because COVID-19 is more infectious. Licensees should consult with their local Adult and Senior Care Regional Office and local health department when they are considering isolation for either flu or COVID-19.

Flu

Isolation keeps someone who is sick, or tested positive without symptoms, away from others to prevent spread of infection. Clients with flu-like illness who are waiting for test results should be in isolation. If a person with flu-like illness tests positive for influenza, then that person should continue isolation. If there is possible exposure to COVID-19, or someone displays symptoms of respiratory infection after entering the facility, then the staff, visitor or client should be isolated from others and limit contact as much as possible until they can safely leave the facility.

COVID-19

If a person with flu-like illness tests positive for COVID-19, then guidance for COVID-19 outbreaks should be followed. COVID-19 outbreaks require an even longer period of isolation for clients or staff who test positive for COVID-19. PIN 20-33-ASC provides updated guidance for the isolation of clients or staff who test positive for COVID-19.

Visit the CDC website for information on the Flu and COVID-19.

Treatment

Flu

The flu can be treated with antiviral drugs prescribed by a licensed medical professional. The CDC recommends taking flu antiviral drugs if prescribed. Antiviral drugs, such as Tamiflu, started as soon as possible for clients with suspected or confirmed flu can make the illness milder, shorten the time a client is sick, and may also prevent serious flu complications. For clients with risk factors for severe flu, treatment with antiviral drugs can mean the difference between having a milder case versus a serious case of the flu that could result in a hospital stay.

Studies show that antiviral drugs for the flu work best when they are started within two days of getting sick. Starting them later, however, can still be helpful, especially if a client has higher risk for complications or is seriously ill from the flu. People at higher risk for flu complications for whom antiviral treatment is recommended include individuals 65 years and older, people with chronic medical conditions such as heart and lung disease, and diabetes,

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and clients coming from nursing homes and other chronic care facilities. As always, licensees must follow instructions for taking antiviral drugs from a licensed medical professional.

When a flu outbreak has been confirmed in a facility, as a best practice and as circumstances permit, assist the client in accessing their medical provider to inquire about antiviral medication. In outbreaks, antiviral drugs to prevent the flu should be given regardless of flu vaccination history. Antivirals used for preventative reasons in an outbreak should be administered for a minimum of two weeks and continued for at least seven days after the last known case of the flu was identified.

COVID-19

Visit the CDC website for more information on treatment for the Flu and COVID-19.

ADDENDUM D: REPORTING REQUIREMENTS

Reporting an Epidemic Outbreak

Early detection of a flu or COVID-19 outbreak is imperative in controlling its transmission. Per the <u>CDC</u>, an outbreak should be *suspected* when there are 2 or more clients with onset of flu-like illness within 72 hours of each other. Flu-like illness is a fever plus a cough and/or a sore throat. A flu outbreak is *confirmed* when there are 2 or more clients with onset of flu-like illness within 72 hours of each other and at least 1 client has laboratory-confirmed flu.

Please contact the local health department immediately if there is someone with a confirmed case of COVID-19 in the facility or suspect an outbreak of a respiratory illness in the facility.

In addition, ADP licensees are required to report a suspected or confirmed epidemic outbreak (including influenza epidemic outbreak) to the local <u>Adult and Senior Care Regional Office</u>, and the client's authorized representative, as required by applicable regulations (*California Code of Regulations*, <u>Title 22</u>, <u>section 82061(a)(1)(F)</u>)

ADDENDUM E: RESOURCES

The resources below provide additional information regarding the flu, COVID-19 and pneumonia.

- California Department of Public Health, <u>Influenza (Flu) and Other Respiratory</u> <u>Diseases</u>
- California Department of Public Health, <u>Recommendations for the Prevention and</u> Control of Influenza in California Skilled Nursing Facilities (SNF)
- California Department of Public Health, Local Health Services/Offices
- Centers for Disease Control and Prevention, Influenza (Flu) Viruses
- Centers for Disease Control and Prevention, Pneumonia, an infection of the lungs
- Centers of Disease Control and Prevention, <u>Considerations for Preventing Spread of COVID-19 in Assisted Living Facilities</u>
- Centers for Disease Control and Prevention, <u>Print Materials</u> and <u>Images and Infographics</u>

ADDENDUM F: CLIENT FACT SHEET

Client Fact Sheet for Provider Information Notice (PIN) 20-35-ASC, Influenza or "Flu", Novel Coronavirus Disease 2019 (COVID-19), and Pneumonia in Adult Day Programs.

The Community Care Licensing Division (CCLD) has prepared this **Client Fact Sheet** as a companion to **PIN 20-35-ASC** to inform you of guidance CCLD provided to your Adult Day Programs concerning your care.

Signs and Symptoms

Symptoms of the flu, COVID-19, and other respiratory viruses that can cause pneumonia are similar. A person can also be infected with more than one respiratory virus at the same time. Keep in mind that it can take up to 14 days to develop symptoms once you have been exposed to the flu, COVID-19, and other respiratory viruses. For detailed information on symptoms of flu, COVID-19 and pneumonia please refer to **Addendum A of PIN 20-35-ASC.** If you become ill, you should follow the treatment plan outlined by your medical provider as treatment varies.

Prevention and Mitigation Measures

To help slow the spread of respiratory infectious viruses, it is recommended that you take the following preventative actions:

- get an annual flu vaccination
- get a pneumococcal vaccine (pneumonia shot), if you are 65 years of age or older or have other high-risk conditions
- wear a face covering when in public or in close proximity to others
- practice hand hygiene and use gloves if appropriate
- practice respiratory hygiene and cough etiquette

During flu season, your Adult Day Program should:

- post visual reminders to practice respiratory hygiene and cough etiquette
- post signs notifying visitors if they have a fever, or other respiratory symptoms they should inform the facility
- perform routine cleaning and disinfection of frequently touched surfaces and equipment
- put linens soiled with respiratory secretions, contaminated tissues, and other bodily fluids in a plastic bag before taking them into the laundry room
- encourage facility staff responsible for touching items which may have come into contact with bodily fluids to wear gloves, a mask, and if available, a disposable gown
- contact the local health department if there are two or more cases of flu-like illness within 72 hours
- isolate any individuals who display symptoms of respiratory infection after entering the facility from others until they can safely leave the facility

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- follow isolation procedures outlined for each respiratory infection in Addendum C of PIN 20-35-ASC
- contact medical provider for appropriate treatment

Reporting Requirements

In addition, adult day program licensees are required to report a suspected or confirmed epidemic outbreak (including influenza epidemic outbreak) to the local <u>Adult and Senior Care Regional Office</u>, and the client's authorized representative, as required by applicable regulations (*California Code of Regulations*, <u>Title 22</u>, <u>section 82061(a)(1)(F)</u>)

If you have questions, please reach out to your health care provider, the licensee of your facility or a facility staff member, or the Ombudsman who are available to answer your questions.