

COVID-19 Protocols*
Developed for Fairfax Behavioral Health Hospital, Kirkland, WA
March 7, 2020

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INTRODUCTION

Our recommendations below are for all three Fairfax Behavioral Health sites in Kirkland, Everett, and Monroe and all three Northwest School of Innovative Learning sites in Redmond, Tacoma, and Everett.

As health care professionals, we have a responsibility to provide support to the community we serve, including our patients, students, and business partners. As the Coronavirus infection spreads, we anticipate that our patient census will increase as emergency departments utilize their beds for medical needs. It is a crucial time for our staff to work together to continue providing our best patient care. This is an emerging, historic event; Washington is ground zero for the rest of the country. We have the opportunity to demonstrate how well we perform and showcase the great patient care we provide.

The common flu has a fatality rate of .1%. Covid-19 has a fatality rate of 2%, but that number is likely lower due to the large number of asymptomatic and mild cases that have not been diagnosed. The likelihood is that most of us will be exposed at some point, and it is also likely that most of us will be fine. However; you may know people who die. This being the case, Fairfax Behavioral Health has developed this fluid plan to attempt to interrupt the cycle of contamination in ways specific to a behavioral health facility in order to help protect the health and wellness of its patients, staff, and families.

These protocols and recommendations were developed using Center for Disease Control (CDC) and Department of Health (DOH) guidelines. We will use Washington State Hospital Association (WSHA) guidelines for health care professionals only (meaning, patient care related) and only when staffing needs require it.

LEADERSHIP EFFORTS

Senior Fairfax leadership and key clinical staff are in communication with the Department of Health (DOH) to monitor the situation statewide. The Center for Disease Control (CDC), which is on site in King County, and DOH are collaborating.

Senior Fairfax leadership and key clinical staff are meeting daily to review current state and determine any necessary protocol changes. We will continue to communicate with staff accordingly.

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INFECTION ASSESSMENT

PATIENTS

All potential patients being assessed for Intake will be screened using the COVID-19 Screener. All outpatient patients will be assessed daily upon arrival using the COVID-19 Screener.

VISITORS

All visitors will be screened using the COVID-19 Screener and will be asked to wash hands/use hand sanitizer prior to visitation.

EMPLOYEES

Symptoms and Precautions

If you are experiencing Coronavirus symptoms (fever above 100.4 degrees F, coughing, and shortness of breath), please contact your primary care physician immediately and inform them of your symptoms. Your PCP will need to determine next steps and provide documentation as to their recommendations, including your ability to return to work.

If you are calling out, please let your manager know immediately. Floor staff, please be sure to call the House Charge line directly.

Exposure and Risk Assessment

The CDC has updated travel recommendations. If you have recently traveled to any country listed as L2 or L3, please inform Human Resources or your manager as soon as possible and, if possible, before you return to work.

Any employees, or employees with immediate family members in recent direct contact, who (1) are diagnosed with the Coronavirus; (2) are returning from a Level 3 country in the previous 14 days; or (3) have direct contact with a person known to have the Coronavirus will be subject to 14 days of mandatory self-quarantine to ensure they do not pose a public health risk.

Additionally, if you or a member of your household are quarantined due to Coronavirus concerns or potential exposure (for example, employment at another healthcare facility), the quarantine would also extend to your employment with Fairfax.

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Employees who meet the above criteria will NOT be allowed to return to work until the 14 day symptom-free quarantine has expired.

PATIENT CARE

In addition to our other integrated patient care recommendations, we also want to highlight specific interventions for our older adult unit; our nursing staff will check vital signs twice per day to increase monitoring as this is a higher risk population.

SOCIAL DISTANCING

In an effort to minimize exposure, we have taken the following actions:

- Patient Visitation:
 - Given the high risk population, temporarily suspended visitation in our older adult unit and enabled monitored virtual visitation with patient phones
 - Reduced visitation at all other sites from 7 days per week to 2 days per week, with preparation to suspend all visitation in the event of a suspected or confirmed COVID-19 case
 - For our largest site with six units, visitation occurred in our largest rooms (cafeteria for adults and gym for adolescents) at staggering times by unit to support social distancing and to limit surface exposure, which helped our cleaning crew focus on two rooms with hard surfaces two times per week rather than all rooms in all units multiple times per day every day
- Temporarily suspended adjunctive outside therapies
- Implemented proper hand washing and social distancing training in our “Adult Daily Learning” patient community sessions; while the need is currently urgent and should be frequent, the goal long term is that this remains as a regular training not only to support patient hygiene but also to help with infection control year-round
- Provided single occupancy transportation (cabs, Uber, etc.) for patients traveling within King and Snohomish Counties (no public or shared transportation); standard transportation options remain for anyone traveling outside those two counties
- Evaluated what positions within the hospital are able to work remotely, lessen their onsite presence, or otherwise support increased social distancing in order to do as much as we can to diminish exposure to protect the majority of our staff who have to be on-site and our patients

When possible keep three feet apart in common areas when passing and six feet for static interactions, when possible (groups, one to one therapy, MD visits, family meetings, etc.). If the location does not

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allow these recommendations, adjust to allow the maximum distance, given the environment, or move interactions to an area that allows for this.

USAGE OF PERSONAL PROTECTIVE EQUIPMENT (PPE)

- All staff members and patients who are experiencing flu or head cold symptoms must wear masks.
- Staff members and patients who are not experiencing those symptoms should not wear masks. Per the Surgeon General and CDC, unnecessary usage of these masks contributes to the spread rather than prevention of infection. The masks should be used to diminish risk of transmitting the infection from those infected, not as prevention for those who are not infected.
- Any employees who did not get their flu shot must continue wearing masks as part of our infection prevention measures. If you want to obtain your flu shot, please contact Infection Control.

It is important to note that cleaning supplies and PPEs are on a nationwide shortage, even for healthcare facilities. We are working with vendors and looking for alternative solutions to obtain more supplies. In the meantime, we are rationing current supplies to ensure each unit is covered. Please use responsibly and only when necessary.

INFECTION PREVENTION STANDARDS

Per the CDC, please continue to:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue; then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Wash your hands often with soap and water for at least 20 seconds (or humming the Happy Birthday song twice), especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.

Floor staff: please implement regular hand washing protocols, as described above, for all patients. Please teach patients appropriate hand washing measures and monitor accordingly to ensure compliance.

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CLEANING

Our Environmental Services team will be deep cleaning patient rooms and all general hard surfaces daily per CDC recommendations. Please keep in mind this does not include computers, keyboards, mice, telephones, and personal desk space, so please clean those yourself regularly.

STRATEGIC EFFORTS IN THE EVENT OF INFECTION

In the event we have a suspected case within our Kirkland facility and need a temporary holding quarantine area until the patient can go to the ED, we have created a quarantine unit. We have limited entry to one door to prevent contamination across units. We are also disabling key badge access for doors to that unit. We have installed a vapor barrier on the interior of the entrance door to create a clean room for the donning and doffing of PPE. This unit will remain closed for all other purposes.

We are actively pursuing teletherapy options, training, technology, and anything else we may require in the event we need to close our partial hospital program, intensive outpatient program or provide support to our other facilities. Licensed behavioral health providers still need to work within their scope of practice and should seek additional training and supervision in this area if they do not have the experience or expertise. Please consult an expert and work under their supervision, if needed.

STAFFING

- When possible and necessary, we will limit per diem staff to specific locations.
- We are evaluating what positions are able to work remotely, lessen their onsite presence, stagger schedules, or otherwise support increased social distancing in order to do as much as we can to diminish exposure to protect the majority of our staff who have to be on-site and our patients.
- Our contingency plan, should anyone from leadership be effected, is to have that person call in to meetings if the member is well enough. Additionally, we recommend assigning a backup senior staffer who should be briefed daily so they are up to speed.
- We will limit any high-risk individuals, including pregnancy and exposure to suspected or confirmed COVID-19 cases.
- We are exploring options for Clinical Therapists for teletherapy/tele-social work (paired with on site staff who can coordinate putting documents in charts and video meetings).
- If we close our building for outpatient services (converting to teletherapy), close our Redmond school, and local school closures result in a significant number of staff call outs, we will use our outpatient building as a tutoring facility for elementary and middle school children of current employees who are unable to attend school due to school closures. We are not equipped to take

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infants or children younger than school age. Our expectation is that high school kids would be able to stay home alone, but we will evaluate these on an individual basis. We will staff the tutoring facility with teachers from our own schools based on closures.

- To minimize stress and burnout to staff, we are actively recruiting, including using area agencies to help fill any gaps and to alleviate as much stress as possible.

EMPLOYEE SUPPORT

In order to continue providing our best patient care, it is important that our staff remain healthy. As such, we want to remind you to ensure your own self-care. Please be sure you are eating, drinking plenty of water, getting a full night's sleep, and using your personal time for activities you enjoy. Please work with your fellow colleagues to help ensure regular breaks. Our Employee Assistance Program is also available for those needing support.

NORTHWEST SCHOOL OF INNOVATIVE LEARNING

School closures will be determined by the district within which the school resides. If a district closes, our school will, as well. If we close the schools, staff will be reassigned to the hospital.

MEDIA INQUIRIES

During our region's heightened media presence, we want to remind everyone of our media policy. If you are contacted by the media, please courteously collect their name, affiliation, phone number and email. Do not comment, promise an interview, or answer any questions (even if you are aware of the matter in question). Immediately notify our Business Development department of said media inquiry.

ADDITIONAL RESOURCES

We recommend monitoring the DOH and CDC websites for real time updates.

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

DOH: <https://www.doh.wa.gov/emergencies/coronavirus>

*Recommendations subject to change based on re-evaluation of data and information.