Frequently Asked Questions (FAQs) for Residential Care Facilities for Adults and Seniors
Updated September 6, 2020

The following FAQ was developed by the San Francisco Department of Public Health for use by local facilities and will be posted at www.sfcdcp.org/covid19. Information may change.

AUDIENCE: Administrators of all California Department of Social Services/Community Care Licensing Division licensed facilities in San Francisco. This includes: Adult Residential Facilities (ARF), Residential Care Facilities for the Elderly (RCFE), Residential Care Facilities – Continuing Care, Social Rehabilitation Facilities, and Residential Care Facility for the Chronically Ill.

Summary of Revisions since the 05/01/2020 Version

- Reference to guidance about:
  o How facility can accommodate outdoor or window [vehicle or facility] visits as permitted under amended Health Order No. C19-09b (see section on “Allowed Visits”).
  o Re-introduction of resident communal dining and group activities in small and stable groups

BACKGROUND: Residents and staff in adult and senior residential care facilities may be at especially high risk for COVID-19 infection and complications from it, especially those who come into close contact with persons from outside the facility, who are older, or who have chronic medical conditions. San Francisco Department of Public Health (SFDPH) staff responding to suspected or confirmed cases of COVID-19 in these facilities will work closely with the facility staff to ensure that the facilities take the steps to prevent and respond to COVID-19. Below are answers to some commonly asked questions.

General Prevention and Mitigation Measures

What can I do to prevent the introduction of COVID-19 into my facility? What can I do to prevent the spread of COVID19 within my facility?

Refer to the State of California Department of Social Services Provider Information Notice (PIN) Summary 20-23-ACS and AFL 20-22.3, both issued on June 26, 2020, for updated guidance on COVID-19. This guidance includes the critical role of testing, modification of visitation guidelines, need for infection prevention and control, and use of face coverings in adult and senior care facilities.

The documents listed above will guide facilitates on how to:

- Implement social distancing to reduce the risk of transmission.
- Clean and disinfect the environment.
- Screen residents for fever and respiratory symptoms.
- Prepare and protect your staff
Testing, Isolation & Quarantine and Notification

What symptoms of COVID-19 should we screen visitors and employees for?

- Fever – If using a thermometer, temperature of 100.0°F (37.8°C) or higher
- Cough, shortness of breath, chills, muscle pain, headache, sore throat, or new loss of taste or smell

What should a facility do if a resident, visitor or staff has confirmed COVID-19 infection?

- Contact the SFDPH Senior Hub for consultation and guidance at COVID-19 Senior Sites Phone Line: 628-217-6358, COVID-19 General Phone Line: 415-554-2830, or email: seniorsites@sfdph.org
- Stop all visits and group activities, including communal dining; reinstate full shelter in place.
- Communicate with residents, visitors and staff: Share that there is a case but not who is sick or has tested positive. Maintain the confidentiality of the affected person with COVID-19 as required by the Americans with Disabilities Act, the Family Education Rights and Privacy Act, and possibly HIPAA.
- Clean and disinfect the facility thoroughly, with special attention to anywhere that person was or might have been. Refer to the section titled “Cleaning and disinfecting your building or facility if someone is sick” at CDC’s Cleaning and Disinfection webpage, at www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html.
- Work with SFDPH to determine when the facility can re-open for visits. Determine when staff can return, and what additional steps are needed for children and youth to return.

How do I isolate a resident with suspected or confirmed COVID-19?

- Sick residents should wear surgical masks or facial coverings.
- Place sick residents in an individual room.
- If individual rooms for sick residents are not available, consider using a large, well-ventilated room with a door that can be closed to house sick residents.
- In areas where residents with respiratory illness are housed, keep beds at least 6 feet apart, use temporary barriers between beds (such as curtains), and arrange beds so that individuals lie head-to-toe relative to each other.
- If possible, designate a separate bathroom for sick residents.
- Instruct the resident to avoid sharing common items such as dishes, cups, eating utensils, towels, bedding, or other items with other people. After the resident uses these items, they should be washed thoroughly.
- Sick residents should take their meals in their rooms when possible, avoid common areas, and if they must enter common areas, they should wash hands before entering.
Communal Dining and Group Activities

Is there guidance on how to implement a safer communal dining experience and facilitate safer group interactions when resident’s engage in activities in our facility?

SFPDPH’s Guidance About In-person Visits, Communal Dining and Resident Activities – available at www.sfcdcp.org/covid19 – outlines recommendations and instructions.

Visits by Non-Essential Personnel

We have many families who haven’t seen their senior relatives in several months and they are worried. Are visitors or non-essential personnel allowed to visit their loved ones at the facility?

Yes, the City & County of San Francisco now permits outdoor or window [vehicle or at facility] visitation by non-essential visitors.

In-person routine visits carry risks. To reduce the risk of COVID-19 infection, facilities must implement prevention and mitigation measures – and educate and train staff, residents, and visitors to comply. Certain prerequisites must be met before re-introducing visitors into the facilities.

Facilities and visitors must comply with the policies outlined in the updated SFPDPH Guidance About In-person Visits, Communal Dining and Resident Activities issued on 9/6/2020 that outlines the following:

- Prerequisites facilities are required to meet before permitting visitors
- Specific parameters that facilities must comply by for: 1) outdoor visits; 2) at-facility open and closed window visits; 3) vehicle open and closed window visits
- What to do in the event of a new COVID-19 case at the facility

As an alternative option, facilities should also encourage and create ways for all residents to have frequent video and phone call visits with family members, friends, or other persons in care. To the extent possible, find ways to connect with loved ones virtually through FaceTime, Zoom, WhatsApp, etc (see www.sfcdcp.org/safersocial).

Resources

Stay informed. Information is changing rapidly. Useful resources can be found at:

- SFPDPH guidance for home care providers, home isolation and returning to work, and more: www.sfcdcp.org/covid19
- California Department of Public Health
  - Face Coverings Guidance from CDPH (6/29/2020)
  - All Facility Letters (AFLs)
- Centers for Disease Control and Prevention (CDC)
  - Interim Guidance for Businesses and Employers from CDC
  - Preventing the Spread of COVID-19 in Retirement Communities and Independent Living Facilities (Interim Guidance)
- SF Human Services Agency: Help for older adults & people with disabilities (or call 415-355-6700)