Ventilation Strategies to Control **COVID-19 Transmission in Skilled Nursing Facilities – Part 2**

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Introduction

- Options for isolation to prevent disease transmission to residents and staff
- Cases of COVID-19 will continue to occur in SNFs
- Emergency preparedness goal: SNFs are ready to quickly isolate suspect or known cases of any infectious respiratory disease that is transmitted via inhalation

Guidance for Isolation using Ventilation for Residential Healthcare

ASHRAE (also ASHE, NIOSH)

- Improve level of filtration
- Increase dilution by increasing outside air
- Utilize/create relative air pressure differences to direct airflow
- Local source control techniques



is an engineering control

Cigarette Smoke Analogy – Containing the smoke



I. Isolation/Separation of the "smoker" from others

- II. Exhaust/Remove the smoke from the indoor space
- III. Dilute the smoke with outdoor air, opening the windows, etc.
- IV. Filter out the smoke particles in the air with air filter/HEPA filter



Pressured Rooms



- Air Flow: Hallway → Room
- Cause: Increased Exhaust

- Air Flow: Room → Hallway
- Cause: Increased Supply

Regulatory Requirements for Isolation Room (AIIR) Use

- Airborne Infectious Disease (AirID) cases or suspected cases "shall be placed in an AII room or area" or transferred. 5199 (e)(5)(B)
 AirID includes novel pathogens such as COVID-19
- Required for aerosol-generating procedures ("high hazard procedures") on AirID

Positive pressure ventilation (BiPAP and CPAP)

Nebulizer treatment

 Cal/OSHA Aerosol Transmissible Diseases regulation: <u>https://www.dir.ca.gov/title8/5199.html</u> (e)(5)(C)

Cal/OSHA Exception to AllR

"Where it is not feasible to provide All rooms or areas to individuals suspected or confirmed to be infected with or carriers of novel or unknown ATPs, the employer shall provide <u>other effective control</u> <u>measures</u> to reduce the risk of transmission to employees, which shall include the use of respiratory protection in accordance with subsection (g) and Section 5144, Respiratory Protection of these orders."

Airborne Isolation/Negative Pressure Techniques

Most effective

- Airborne Infection Isolation Rooms (gold standard but absent in SNFs)
- Temporary Isolation with negative air machines
- Door closed with portable air cleaner

Important Strategies - that SNFs should be prepared to employ

Door closed

Least effective

Portable Air Cleaners vs Negative Air Machine

• **Portable Air Cleaners** filter the air in the room

 Negative Air Machines/Air Scrubbers take in air, filter it, and exhaust it to another location

Scrubbers with HEPA filters

Portable Air Cleaner With HEPA filters





Airborne Infection Isolation Room (AIIR)



Temporary Isolation: Easiest

- Single resident or patient room with dedicated bathroom
- Closed door creates barrier to hallway
- Increase filtration using portable HEPA-filtered air cleaner in room



Temporary Isolation: Intermediate

- Single resident or patient room with dedicated bathroom
- Place HEPA-filtered scrubber in room
 - Exhausts filtered air out window creating negative pressure room
 - Creates air curtain barrier to hallway
 - Increases dilution in room





Image Credit: Minnesota Department of Public Health

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AIR EXHAUSTED THROUGH WINDOW VIA DUCTWORK FIT THROUGH PLYWOOD

NEGATIVE PRESSURE MACHINE

Pressure Measurement Tools



Differential Pressure Monitor

Simple Negative Pressure Tests





Image Credits: Elon Ullman, CDPH OHB (left); Southeastern National TB Center (right)

Source Control Options

For patient with aerosol transmissible disease:

- Local exhaust source control at head
- Especially for AGPs: such as CPAP, Bipap, or Nebulizer treatment

Local Exhaust with HEPA Filter



One Source Control Option: Ventilated Headboards

Captures aerosols at the source (patient's head)

Used with **HEPA filtered negative air machine**, can be exhausted to the room

Ventilation and Barriers

"Red Zone" Room in SNF



What are the benefits to barriers?

- Serves as visual "stop" sign and "PPE only" zone
- Can help isolate contaminated air if no other ventilation available
- Can help reinforce negative pressure conditions

Ventilation and Barriers

"Red Zone" Room in SNF



How do barriers affect ventilation systems?

- Positive pressure
 - Room -> Hallway
- Negative pressure
 - Hallway -> Room
- Hallway Barriers
 - Does it cut off air supply or exhaust?

When installing plastic walls, consider ventilation supply



Airborne Infectious Diseases under HICPAC* and Cal/OSHA ATD regulation

- Chickenpox (Varicella)
- Avian influenza
- Herpes zoster (varicella-zoster, <u>disseminated disease</u>, per CDC)
- Measles (rubeola)
- Monkeypox

- SARS (Severe Acute Respiratory Syndrome)
- Smallpox
- Tuberculosis
- Novel or Unknown pathogen (COVID-19)

Or

Any other disease for which public health guidelines recommend airborne infection isolation

Importance of Emergency Preparedness

- Pandemic shows situation can change quickly
- Emergency preparedness is crucial
- Procuring supplies and carrying out training to prepare to set up isolation conditions will be crucial in the industry for future pandemics
 - Preparing door frames for plastic barriers (Velcro)
 - Purchasing negative air machines and PACs
 - Purchasing and pre-cutting plywood to exhaust air through windows

Summary and Conclusions

- There are a range of options to better protect residents, health care professionals, and staff
- Engineering controls are effective for controlling spread of infectious diseases transmitted through the air
- Facilities should establish multi-disciplinary team to identify solutions and ensure that the existing HVAC system, or temporary auxiliary ventilation, can be implemented if isolation becomes necessary

References and Resources

- American Society for Health Care Engineering (ASHE), "Current/Updated Health Care Facilities Ventilation Controls and Guidelines for Management of Patients with Suspected or Confirmed SARS-CoV-2 (COVID-19)", (February 4, 2021): https://www.ashe.org/covid-19-ventilation-guidance-efforts
- ASHRAE/ASHE Standard 170-2017
- Minnesota Dept of Health: HVAC for Long-term Care during COVID (May 2021): https://www.health.state.mn.us/diseases/coronavirus/hcp/ltc.html

References and Resources

- Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings: <u>http://www.cdc.gov/ncidod/dhqp/pdf/isolation2007.pdf</u>
- NIOSH, Engineering Controls To Reduce Airborne, Droplet and Contact Exposures During Epidemic/Pandemic Response: Ventilated Headboard: <u>https://www.cdc.gov/niosh/topics/healthcare/engcontrolsolutions/ventilated-headboard.html</u>
- National Emerging Special Pathogen Training and Education Center (NETEC), "Engineering Controls for Long-term Care," NETEC Resource Library, accessed June 11,

2021, <u>https://repository.netecweb.org/items/show/1274</u>.

References and Resources

 CDC/NIOSH, Engineering Controls to Reduce Airborne, Droplet and Contact Exposures During Epidemic/Pandemic Response, Expedient Patient Isolation

Rooms: <u>https://www.cdc.gov/niosh/topics/healthcare/engcontrolsolu</u> <u>tions/expedient-patient-isolation.html</u>

- ASHRAE Epidemic Task Force, Building Guides, Residential Healthcare (2021): <u>https://www.ashrae.org/technical-</u> <u>resources/residential-healthcare</u>
- CAHF Virtual Classroom: Airborne Infection Isolation Rooms (2021): <u>https://www.youtube.com/watch?v=QeopCD98Ksw</u>

Thanks for your participation!

QUESTIONS?