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To: Executive Directors and Resident Care Directors of All ALRs
Cc: Elissa Sherman, LeadingAge; Brian Doherty, MassALA
From: Secretary Elizabeth Chen
Subject: Recent COVID-19 Outbreaks in ALRs
Date: November 24, 2021

Over the past 10 days, 7 ALRs reported significant COVID-19 outbreaks affecting 25-50% of their residents. Reported data now shows over 100 active cases among residents and staff across all ALRs. Transmission is primarily from staff to residents, and then from residents to residents. These outbreaks have resulted in transferring residents to hospitals, and in some cases, COVID-19-related deaths.

In recent weeks, the Massachusetts Rapid Response Teams (RRT) consisting of nurses and nursing aides who have been trained in infection control, have been deployed to provide urgent assistance to several of these residences with outbreaks and have remained on-site for multiple days in every circumstance.

Several patterns contributing to these large clusters have been observed during the RRT deployments:

- A significant number of residents and staff had not yet received a COVID-19 vaccine booster.
- In many instances, requisite outbreak testing for all residents and staff did not occur immediately upon identification of a first positive case.
- Gaps in infection prevention and control practices contributed to rapid transmission among residents and staff.
- Processes for administration of monoclonal antibodies were not in place; and
- Residences were not able to provide timely sufficient staffing to ensure separate and dedicated staff for COVID-19 positive units and residents.

Based on recent observations and reported data, EOEА reminds residences to adhere to the following measures to mitigate against COVID-19 transmission among residents and staff:

If you have detected even one COVID-19 positive case in staff or residents using rapid point of care testing, do not wait for the results of PCR testing before taking the following steps:

1. Immediately test all residents and staff using rapid point of care testing, and establish separate, dedicated staffing teams by resident COVID-19 status.
2. Call the DPH epidemiology line (617-983-6800, *Option 3*), which is staffed 24/7 to discuss the nature of your outbreak, your ALR's physical and staffing configuration, and request advice on how to continue group dining and social engagement opportunities for residents.

Massachusetts Rapid Response Teams are deployed based on availability, urgent need, and upon recommendation by a DPH epidemiologist and EOEA's approval ("state approval"). A Charge Nurse will come on-site to the ALR to conduct an assessment and provide recommendations for improving infection control practices; they will also help determine if Rapid Response Team staffing, point of care testing, and infection control support is needed. Upon state approval, Rapid Response Team nurses and aides will be deployed to provide you with a short-term bridge until you can secure and implement sufficient staffing and infection control measures.

State approval for Rapid Response Staffing and Infection Control Support will be done with the expectation that, by the end of Day 4, the ALR will have put in place appropriate staffing, testing processes, and PPE to manage the outbreak without the need for continued on-site presence by the Rapid Response Team. **Please make sure you obtain from the Charge Nurse a list of issues that need to be resolved to enable an on-schedule exit by the Rapid Response Staffing Support Teams.**

Rapid Response Staffing Support Teams can remain on-site beyond Day 4, but this should occur only under exigent, non-preventable circumstances. The Commonwealth's recent need to deploy Rapid Response Staffing Support Teams to ALRs for multiple days' duration at each location is deeply concerning because the circumstances driving the rapid spread of infections were preventable.

Please remain vigilant to infection prevention protocols. Every time COVID-19 is transmitted is an opportunity for the virus to mutate, and an opportunity for all of us to lose the gains we have achieved together. All areas of Massachusetts continue to have high community transmission. It is critically important that the ALR industry redouble its institutional will to prevent infections, especially at the scale that we have observed in recent days.

EOEA is recommending and urging every ALR to:

1. Ensure residents and all staff receive a COVID-19 vaccine booster as soon as they become eligible.¹ **All ALRs must report the percentage of booster eligible residents and staff who have received their booster by December 15, 2021.**
2. Conduct an infection control audit and address gaps in infection prevention and control within the next two weeks. **Every ALR is required to report by December 15, 2021** whether they have conducted an on-site infection control audit using this tool [CDC Infection Control Audit Tool LTCE](#). Action items may include performing daily hand hygiene and PPE audits to ensure that staff are cleaning their hands between resident encounters and are wearing facemasks.
3. Develop a process for administering monoclonal antibodies to residents who test positive and as well as exposed residents that meet certain criteria; process steps include securing: resident

¹ 2 months after J&J Janssen, or 6 months after the second dose of the Pfizer or Moderna COVID-19 vaccines

consent, medical provider orders, and infusion or injection capability for outbreaks of different sizes.

4. Develop a staffing escalation plan for limited, moderate, and widespread infection at the ALR that ensures separate and dedicated staff for COVID-19 positive units and residents.
5. Develop strategic and targeted approaches for dining and activities during an outbreak to minimize disruption of routines for residents with minimal or no risk of infection.

Please report the status of COVID-19 vaccine boosters for residents and staff and infection control audits using the following link <https://app.keysurvey.com/f/41598195/47d3/> by December 15, 2021.

EOEA has asked the industry organizations representing you to provide assistance in achieving these objectives. If you have any questions about how to secure appropriate vendors to assist you, please direct them to Brian Doherty at MassALA or Elissa Sherman at LeadingAge. If your ALR is not a member of either organization, please reach out to EOEA for assistance at ALRHelp@mass.gov.