NYSNA Recommendations and Resources for Reopening during COVID-19

Stepdown Settings: NYSNAs Nursing Education & Practice and Health & Safety



Unit	Pre-Screening	Criteria for Testing	Unit Modifications	PPE	Cleaning	Visitor Access	RN to Patient Ratio
Stepdown	Evaluate necessity of care on a Stepdown unit based on clinical needs. Prioritize services that if deferred are most likely to result in patient harm. Establish designated zones where patients can be screened for COVID – 19.	PUI's should be prioritized for testing. If patient presents with any of the following they should be tested: Cough Sore throat Chills Repeated shaking with chills Muscle pain Headache Loss of taste or smell Contact with someone known to have COVID-19 Fever of 100 F Shortness of breath For patients undergoing a procedure or operation, a viral test should be performed 24 hours prior to the procedure. If testing is not available, patient should self-quarantine for 14 days prior to the procedure.	Stepdown units should be designated as Non-COVID –vs- PUI/COVID units. Maintenance of 6 feet of more distancing between patients. Air handling systems with appropriate directionality, filtration, and exchange rate should be installed and maintained. AIRR should have a minimum of 6 air exchanges per hour and air from these rooms should be exhausted directly to the outside or through a HEPA filter before recirculation. All doors should remain closed except when entering or leaving. Concurrently: 1. Conduct air flow inspections to determine what improvements can be made. 2. Begin investigating	All patient care staff should be wearing N95 or better equipment with eye protection (personal glasses or contacts not adequate). Gloves, isolation gown for nurses on COVID units. For Non-COVID units surgical mask, gown, gloves, as per usually and ordinary standards of practice. For the patient: Surgical masks Departments should start to incorporate elastomeric equipment to build greater resiliency during the crisis.	Hand hygiene by using ABHR with 60-95% alcohol or washing hands with soap and water for at least 20 seconds. Use EPA approved emerging viral pathogen cleansers. Clean and disinfect all surfaces before and after all treatments. Sanitize all high touch surfaces. Disposable medical supplies should be discarded not reused.	Refuse visitors who have symptoms or test positive on screening. Visitors should be made aware of visitor policy and requirements including wearing surgical masks, handwashing and any limitations on visitation. Limit visiting hours and use of visitor rooms.	RN's should not float between COVID and non-COVID units. Staff should be continuously and routinely screened for symptoms of COVID. Stepdown 1:3-4



NYSNA Recommendations and Resources for Reopening during COVID-19

Stepdown Settings: NYSNAs Nursing Education & Practice and Health & Safety



	the use of dedicated
	downward flow
	ventilation directly
	over each patient
	area.
	3. Air changes should be
	boosted above 6 per
	hour, incorporating
	more outdoor air.
	4. Conduct air flow
	inspections to
	determine problems
	and arrive at
	recommendations for
	moving contaminated
	air quickly away from
	patients and staff.
Resources:	

https://www.cms.gov/files/document/covid-recommendations-reopening-facilities-provide-non-emergent-care.pdf https://psnet.ahrq.gov/web-mm/nurse-staffing-ratios-crucible-money-policy-research-and-patient-care nursingeducation.lww.com/blog.entry.html/2016/11/10/the_importance_ofth-GCAE.html

