



State of Connecticut  
Department of Developmental Services

DDS

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Governor

Jordan A. Scheff  
Commissioner

Peter Mason  
Deputy Commissioner

To: DDS Public Programs, Qualified Providers and Day Programs

From: Dr. Valencia Baby-Young, Director of Health and Clinical Services

CC: Jordan Scheff, Commissioner; Peter Mason, Deputy Commissioner; Katie Rock-Burns, Chief of Staff; Regional Directors; Regional Health Services Directors

Date: May 24, 2021

**Re: Aerosol Generating Procedures in Day Program Settings**

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As day programs reopen, individuals may be required to receive necessary aerosol generating (AGP) procedures during program hours. This memo is intended to provide guidance for aerosol generating procedures at day program settings. This guidance is the same as the current guidance for AGPs in residential settings.

AGPs are important for the health of the individual to whom they are prescribed, therefore, shall be administered as medically indicated. It is understood that AGPs carry the risk of spreading aerosols and even with COVID-19 vaccinations there is still the potential for infection and transmission. The registered nurses shall communicate with the licensed prescriber to ascertain an alternative such as a metered-dose inhaler is appropriate or if the prescribed AGP can be rescheduled to avoid treatment administration while the person is at the day program. However, if this is not possible, the delegating nurse assigned to the day program or another designated registered nurse shall develop an individual-specific plan and procedure for administration of the AGP. Ideally, the nurse shall provide the AGP; however, if the AGP meets criteria for a delegated task the nurse shall provide training to medication administration certified staff regarding procedures to follow during and after the administration of AGPs.

Aerosol generating procedures include any medical treatment that causes the production of uncontrolled respiratory secretions or aerosol from an individual's airway to be spread into the environment during or following the procedure. According to the Centers for Disease Prevention and Control (CDC) and the Connecticut Department of Public Health (DPH), common AGPs include the following, nebulizer treatments, continuous positive airway pressure (CPAP), bilevel positive airway pressure (BiPAP), and open suctioning of the airway.

Location for Performing Aerosol Generating Procedures:

Aerosol generating procedures shall be performed in a private area where the door can be closed and proper ventilation can be ensured. Proper ventilation refers to clean air introduced to the space during the aerosol

generation procedure. This can be done by opening a window and placing an exhaust fan in the window to remove air from the room in which the AGP is performed. Proper ventilation may also be achieved by performing AGPs outdoors or proximal to an exit door. Treatments shall occur in a space where there no one is passing by the open window or door.

The following procedures shall be in place during the administration of an AGP:

1. The employee shall perform proper hand hygiene.
2. The employee administering the AGP is to don appropriate personal protective equipment (PPE) which consists of a fit tested N95 respirator, face shield or wrap around eye goggles, gown and gloves. If there is a shortage of PPE, refer to DDS COVID-19 Optimizing PPE guidance.  
<https://portal.ct.gov/DDS/General/COVID19/COVID-19-Updates-for-DDS-Providers>
3. For routine AGPs, separate the individual in a private room with the door closed throughout the procedure. If appropriate, the individual may be separated in a nearby outside area away from others. If there is an emergency need for an AGP, such as immediate suctioning of the airway by a nurse, this AGP shall be performed even if it is not feasible to immediately move the individual to another area.
4. Ensure proper ventilation during the procedure by opening a window and positioning the person in close proximity to the open window or an open exit door (during appropriate seasonal and weather conditions). The AGP may also be performed outdoors if appropriate and privacy can be ensured.
5. Following completion of the AGP, the supplies and area shall be disinfected. The use of an EPA (Environmental Protection Agency) approved solution shall be used to wipe down the surfaces surrounding the individual and the equipment. The goal of disinfecting is to reduce the number of microbes (i.e., fungi, bacteria, and viruses) on a surface and thereby reducing the risk of transmission.
6. Once AGP and disinfecting are completed, the private room utilized shall remain closed and empty for a period of 1-hr.

The administration of rescue breaths for cardiopulmonary resuscitation (CPR) is an AGP and shall be performed using bag-valve-mask (BVM) while donned in full PPE including N95 respirator. In the event that CPR is necessary during the COVID-19 pandemic, if appropriate PPE is not available or BVM is not an option, then, Compressions Only CPR is an acceptable alternative until emergency medical services (EMS) arrive.