

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH




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HEALTHCARE QUALITY AND SAFETY BRANCH

BLAST FAX 2020-61

TO: Nursing Homes

FROM: Commissioner Deidre S. Gifford, MD, MPH 

CC: Deputy Commissioner Heather Aaron, MPH, LNHA
Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
Donna Ortelle, Section Chief, Facility Licensing and Investigations Section

DATE: May 29, 2020

SUBJECT: Resident Room Doors

There have been many questions regarding whether the resident room doors in nursing homes need to be open or closed. There is NO policy that states that resident room doors must remain closed. Closing doors can pose a safety risk and be detrimental to the emotional and mental well-being of residents.

Residents who are cognitively impaired can feel isolated and may be at risk for falls and other hazards if the door is kept closed. Facility staff should assess the resident to determine if closing the door would place the resident at higher risk for social/emotional or physical injury and determine what is best for the resident. There is no risk to keeping doors open for residents with suspected or confirmed COVID-19, unless an aerosol-generating procedure (AGP) is being conducted.

For residents with suspected and confirmed COVID-19, doors are only required to be closed during AGPs. AGPs include but are not limited to intubation, chest compressions, nebulization, high flow oxygen, non-invasive positive pressure ventilation (e.g. CPAP, BIPAP), and sputum induction. See "which procedures are considered aerosol generating procedures in healthcare settings" here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-faq.html>



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If AGPs are performed, the following should occur:

- Health care personnel (HCP) in the room should wear an N95 or higher-level respirator such as disposable filtering facepiece respirators, PAPRs, and elastomeric respirators, eye protection, gloves, and a gown.
- The number of HCP present during the procedure should be limited to only those essential for patient care and procedure support. Visitors should not be present for the procedure.
- Clean and disinfect procedure room surfaces promptly using a product from EPA List N, and in accordance with the cleaning/disinfecting product's instructions.
- Doors should be closed during AGPs to prevent contaminated air from spreading into the facility.

If not performing an AGPs, the door to the resident room can remain open whether the resident is COVID positive, presumptive or negative.

Facilities should have established how long the door needs to be closed after an AGP. Infection Control personnel can help decide the facility's policy. For further information, see "How long does a room need to remain vacant after being occupied by a patient with COVID-19?" here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-faq.html>