The following memo was distributed to the leadership teams at all Asbury communities on April 3 by V.P. of Clinical Excellence, Skip Margot.

Dear Colleagues,

First, thank you for your on-going commitment to keeping our residents safe while providing the highest level of safety to our associates as well.

There has been a lot of change and adjustment with the application and science around using PPE and masks in particular as we hear that the CDC, CMS and State Departments of Health exhort healthcare workers to don protective masks in the workplace.

Here are a couple of important points to review:

- Associates (Non-Clinical) who do not routinely come in contact with residents should wear a cloth (home-made) mask as a means of reverse protection or reverse isolation. This provides some measure of protection from outside air and particles but is primarily a barrier for protecting others from the person who is wearing it.
- All Clinical Associates should don a surgical mask while working with residents in Skilled Nursing, Assisted Living, Personal Care and Independent Living including Home Health.
- The advisory coming forth from the health governing bodies mentioned above recommend all associates wear some version of an appropriate mask at all times while in the buildings at work.
- We must be mindful of the inventory of supplies and the extraordinary challenge of preserving our most important PPE including masks during this pandemic.
- As noted in our previous communication; surgical masks and N-95 masks may be re-used for extended periods of time unless contaminated with body fluids or soiled in any other way. Once soiled or wet they should be discarded along with medical waste properly.
- Residents returning from a hospital to our skilled nursing facility, Assisted Living, Personal Care and Independent Living should routinely be monitored and quarantined for 14 days as this is consistent with the incubation phase of COVID-19. During this time if the resident is afebrile and presents no respiratory illness symptoms clinical care-providers should don and doff a surgical mask, gloves and practice hand hygiene as usual when caring for the resident.
- If a newly admitted quarantined resident presents symptoms of a respiratory illness than the clinical care-giver should don additional PPE: gown, gloves, face shield (if shedding droplets) and a surgical or N-95 mask. This would be considered full respiratory precautions.
- If a newly admitted resident presents no symptoms of respiratory illness; hand hygiene, a surgical mask and gloves are appropriate PPE while remaining on quarantine.