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Letter to Editor

Infection Control for COVID-19 in a Nursing Home in Taiwan

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Dear Editor:

In US, an outbreak of COVID-19 in a long-term care skilled nursing facility, which involved a total of 167 confirmed cases and resulted in the 34 deaths among residents. Moreover, more and more long-term care facilities (LTCFs) in King County had identified patients infected with SARS-CoV-2 and some of them were even asymptomatic or presymptomatic as the general population.

According to Taiwan's Central Epidemic Command Center (CECC), one nurse working at a LTCF had tested positive for SARS-CoV 2 on March 22. She had an initial presentation of fever, dizziness and general weakness on March 12. She ever visited a nearby clinic on March 16 and another hospital on March 20. However, she kept work during this period. After she had identified COVID-19, CECC immediately moved all 53 residents to a nearby hospital and two quarantine locations. At the same time, 28 healthcare providers and 53 residents at the nursing home have been tested for SARS-CoV-2, and all of whom have tested negative. On March 29, the nurse had repeated test negative for SARS-CoV-2. Throughout the whole course, there was no other COVID-19 cases reported within LTCF, which could be due to the early implementation of infection control measure for COVID-19 in Taiwan's LTCF since early 2020, such as mask wearing, respiratory hygiene, and handwashing during the infected nurse worked. In addition, LTCFs were asked to follow the

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authority' recommendations, including limiting their visitors, measuring employees' and residents' temperatures at least once daily, and febrile employees of nursing homes were not allowed to back to work in the early stage. On March 25, CECC expanded the scope of its COVID-19 screening tests. Those who work in hospitals, healthcare institutes and LTCF who have developed fever or other respiratory symptoms were subject to coronavirus screening tests. National Health Insurance identification card incorporated medical and healthcare workers' occupation to allow physicians to access when they seek medical attention. Once they have been tested negative twice and no more fever for 24 hours, these medical professionals will be allowed to resume work.

In conclusion, Taiwan demonstrated a good example to prevent the introduction and spreading of SARS-CoV-2 in LTCFs.

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