

## **Recommendations for handling COVID-19 in persons with intellectual disability**

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### **What is COVID-19?**

Currently, the highly infectious coronavirus SARS-CoV-2 (Acute Severe Acute Respiratory Syndrome-Corona Virus-2) is spreading worldwide. The disease caused by SARS-CoV-2 was named "COVID-19", where "CO" stands for crown, "VI" for virus, "D" for disease and "19" for the year of appearance.

The transmission probably occurs mainly as a droplet infection. Typical symptoms include fever and dry cough, possibly progressing to shortness of breath. Headache and aching limbs, general weakness and sore throat may also occur. Rarely, nausea and vomiting, diarrhoea and a stuffy nose arise. The disease is therefore comparable to a common cold or flu-like illness, but in contrast to other common colds, symptoms like congested nose/sinusitis are rather rare. In most cases, COVID-19 shows a mild development. An increased risk of a disease progression is seen in middle-aged and older people (from about 50-60 years of age), in people with pre-existing cardiovascular diseases, diabetes, diseases of the respiratory tract, liver, kidney and in people under immunosuppression (AIDS, acute cancer, transplants, intake of immunosuppressive drugs such as cortisone). Persons with intellectual disabilities or autism spectrum disorder do not seem to have an inherently increased risk, although specific epidemiological data are not yet available. Previous research on respiratory viral infections (e.g. H1N1 and RSV) suggests that e.g. persons with Down syndrome are more at risk to develop complications and require hospitalisation than the general population.

### **What rules are useful for COVID-19-prevention in assisted living?**

- Employees with acute respiratory diseases and/or returning home from COVID-19 risk areas should stay at home.
- For both residents and employees, the following applies: adherence to coughing and sneezing rules, good hand hygiene and distance between people (2 metres), no handshakes. Hand disinfectants should be provided. Residents should be trained, and information material should be displayed, e.g. at wash basins or public places.
- The teams should remain in one area, if possible (area care). Changing staff between different areas should be avoided. Daily lists should be kept showing who is assigned to which resident.
- After use, disposable tissues should be disposed of in a closed waste bin.
- At present, the number of social contacts should be minimized, larger groups in closed rooms should be avoided, the distance between people should be 2

meters/6 feet. Fresh air reduces the risk of transmission; therefore, meetings or activities should be moved outside if possible.

- Residents should eat in their rooms or on their own in a shared room, keeping the distance to other residents.
- Staff should be trained on general hygiene measures and on how to proceed in case of justified suspicion or confirmed COVID-19 cases.
- People with cold symptoms should not visit.
- Evaluation of both temperature and respiratory symptoms should be performed daily (active health monitoring)
- The state of health of newly admitted residents should be assessed. In case of cold symptoms or fever, proceed as recommended below.
- Daily surface disinfection of shared items (tables, chairs, light switches, door handles, toilet flushes, etc.) should be performed.
- Inform staff, residents and their visitors of the efforts being made to protect residents and staff.

### **What is to be especially considered for people with intellectual disability?**

- The new rules can be irritating and difficult to understand for persons with intellectual disabilities.
- Discuss rule changes patiently, calmly and in simple language, even if you are concerned yourself. If necessary, use pictogram-based explanations.
- Support the practice of new rules with instructions or assistance and repeat them regularly.
- Practice rules of conduct hands-on: washing your hands properly, sneezing and coughing in the crook of your arm...
- Design the environment preventively (e.g. only 2 chairs at the table, push tables apart).
- Restrict personal items/ material for current activities if necessary and select according to disinfectability.
- Go out into the fresh air a lot (walking, sports, activities), especially if residents are prone to crises. Also pay attention to the distance of 2 metres between people.
- The previous daily structure should be retained as far as possible, even if structural changes occur (e.g. closure of the workplace, change of staff, quarantine regulations).
- In the preparatory phase, pneumococcal and flu vaccinations of asymptomatic residents and flu vaccination of staff are useful.

### **What should be done if residents become ill?**

If respiratory diseases or flu-like illnesses occur, testing of COVID-19 should be considered. For this purpose, the leading staff of the institution should be informed immediately and the family doctor or the responsible public health department should be called (Berlin Corona Hotline (030) 9028-2828). In case of life-threatening health condition, the emergency medical services must be called (Tel. 112).

### **The following measures should be implemented immediately in case of cold symptoms or fever:**

- Sick residents with respiratory or flu-like illnesses should be isolated in their own room, preferably with their own bathroom.
- Visits must be restricted.
- If those affected leave their living area, they should wear a mouth and nose protector (if tolerated).
- Protective equipment (protective gowns, disposable gloves and directly attached multi-layer mouth and nose protectors) and instructions for their use should be placed directly in front of the room, if possible.
- Trash cans for disposable items and laundry bags should be placed indoors next to the door.
- If the patient is transferred to another facility, prior information should be provided regarding respiratory disease or COVID-19 suspected disease.
- The state of health of the staff should be observed. If fever or cough develops, the responsible public health department should be contacted.

### **The following measures should be implemented in case of a justified COVID-19 suspicion (fever, cough and contact with COVID-19 diseased person) or confirmed COVID-19 case in an institution:**

- Isolation in a single room, preferably with an anteroom, with its own bathroom. Visits should be suspended.
- Trained staff equipped with personal protective gear before entering the room consisting of a protective gown, disposable gloves, a close-fitting respiratory mask (FFP2) and safety goggles should be deployed. When leaving the room, the protective gear should be left there or in the anteroom.
- Disinfect hands with a disinfectant with proven, at least limited virucidal effectiveness after taking off the gloves and before leaving the room.
- Active observation of the state of health of the personnel deployed. In case of development of fever or cough, contact the responsible public health department.

- Daily wipe disinfection of patient-related (hand contact) surfaces (e.g. bedside table, wet area, door handles) and used objects with a surface disinfectant with proven, at least limited virucidal effectiveness (see above).
- Dishes can be transported to the dishwasher in a closed container and cleaned as usual.
- Laundry/textiles can be fed into a laundry disinfection process according to the legal requirement (Germany: RKI; USA: CDC). Disposable tissues should be used as handkerchiefs.
- For beds and mattresses, wipe disinfectable covers are recommended.
- Waste that is contaminated with secretions or excrements should be disposed of according to the country guidelines.
- The measures can be lifted 48 hours after the end of symptoms AND 2 negative nasopharyngeal swabs.
- Final hygiene of the contaminated room must be performed.

### **Where can reliable information be obtained?**

Special recommendations and orders of the authorities are currently being continuously adapted. In Germany, daily updated information can be obtained from

- the Senate Department for Health, Care and Equality  
(<https://www.berlin.de/sen/gpg>)
- Federal Ministry of Health  
(<https://www.bundesgesundheitsministerium.de/coronavirus.html>)
- Robert Koch Institute  
([https://www.rki.de/DE/Content/InfAZ/N/Neuartiges\\_Coronavirus/nCoV\\_node.html](https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/nCoV_node.html))
- Federal Centre for Health Education  
(<https://www.infektionsschutz.de/coronavirus-sars-cov-2.html>)

**And last but not least: Stay healthy and get well through these times!**