



WASHINGTON LAWYERS' COMMITTEE
FOR CIVIL RIGHTS AND URBAN AFFAIRS

Via Email

March 11, 2020

Barbara Bazron, Director
DC Department of Behavioral Health
64 New York Avenue, NE
Washington, DC 20002

Re: COVID-19

Dear Director Bazron:

We write to request information about the DC Department of Behavioral Health (DC DBH) infection control plans in response to COVID-19 (coronavirus) at Saint Elizabeths Hospital, including plans to respond to and protect patients from an outbreak of coronavirus.

On March 7, 2020, the DC Department of Health announced the first positive confirmed case of coronavirus disease in the District.¹ The risk of community spread poses a significant risk to the vulnerable District residents at Saint Elizabeths. Saint Elizabeths Hospital residents include geriatric patients and immunocompromised individuals. In Washington State, nursing facilities with similar patient populations are the epicenter of the deadliest outbreak of COVID-19 in the United States.² It is just a matter of time before we see a spread of the coronavirus in District facilities.

Although Mayor Bowser issued an order regarding the District's preparations for the coronavirus³, it provides no information regarding the DC DBH's plan to prepare for and respond to an outbreak of coronavirus for this specialized population. Having an appropriate, evidence-based plan in place can help prevent an outbreak and minimize its impact if one does occur.

The plan should be developed collaboratively by your department, the Department of Health, and HSEMA. Some of the critical issues that must be addressed are:

- **Evaluate every patient for community placement.** The Medical Director should conduct an individualized assessment of each patient to determine whether

¹Government of the District of Columbia, Coronavirus (COVID-19), available at <https://coronavirus.dc.gov/>

² "How coronavirus quietly spread, a nondescript nursing home became the deadliest hot spot in the U.S." found at https://www.washingtonpost.com/national/as-coronavirus-quietly-spread-a-nondescript-nursing-home-became-the-deadliest-hot-spot-in-the-us/2020/03/06/5d788a26-5f47-11ea-9055-5fa12981bbbf_story.html. Last visited March 11, 2020.

³ *District Government Preparations for the Coronavirus (COVID-19)*, available at https://dchealth.dc.gov/sites/default/files/dc/sites/doh/page_content/attachments/2020-035-District-Government-Preparation-for-the-Coronavirus-COVID-19.pdf

other community-based placements with support are more appropriate in lieu of continued placement at St. Elizabeths.

- **Education of the people in your care:** Patients at Saint Elizabeths need to be informed about the virus and the measures they can take to minimize their risk of contracting or spreading the virus. They must be educated on the importance of proper handwashing, coughing into their elbows, and social distancing to the extent they can. Information about the spread of the virus, the risks associated with it, and prevention and treatment measures must be based on the best available science.
- **Education of the staff:** Administrative, behavioral, and medical staff all must be educated about the virus to protect themselves and their families, as well as the people in their care.
- **Staffing plans:** Regardless of how many staff stay home because they are sick, the hospital will have to continue functioning. There must be a plan for how necessary functions and services will continue if large numbers of staff are out with the virus.
- **Provision of hygiene supplies:** The most basic aspect of infection control is hygiene. There must be ready access to warm water and adequate hygiene and cleaning supplies, both for handwashing and for cleaning.
- **Screening and testing of the people in your care:** The plan must include guidance, based on the best science available, on how and when to screen and test people in Saint Elizabeths for the virus.
- **Housing of persons exposed to the virus:** The plan must describe how and where people in the facility will be housed if they are exposed to the virus, are at high risk of serious illness if they become infected, or become sick with it. This should not result in prolonged restrictions of patient movement or suspension of their mental health treatment. Any interruptions in regular activities, including access to the treatment mall, recreation, or visits and phone calls with families or attorneys, should be based solely on the best science available and should be as limited as possible in scope and duration.
- **Treatment:** Courses of treatment must be evidence-based, available immediately, and in compliance with scientifically-based public health protocols.
- **Vulnerable Populations:** The plan must provide for additional precautions for those who are at high risk of serious illness if they are infected, such as geriatric patients, people with chronic illnesses, and people with compromised immune systems.
- **Data collection:** The collection of data regarding COVID-19 will be part of the public health response. As with any contagious disease, data collection is critical to understanding and fighting the virus. Saint Elizabeths must be part of this process. The same information that is tracked in the community must be tracked in the facility.

March 9, 2020

Page 3

Accordingly, we request a response with the DC DBH's infection control plan by March 16, 2020. We appreciate your prompt and meaningful response to this matter.

Best,

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cc: Micah Bluming, DC Office of the Attorney General
Mark Chastang, Saint Elizabeths CEO