FAQs for Long Term Care and Assisted Living Facilities

May 20, 2020
Today’s Overview

- Updates
- Strategies for Cohorting
- CMS Reopening Guidance
- (Testing Initiatives)
- Audience Q&A
How to stay updated:

- CMS Current Emergencies Dashboard
- NH Health Alert Network (To sign up email health.alert@nh.gov)
- CDC’s “What’s New?”
Cohort residents into 3 separate units/areas

- **Positive**: residents confirmed to have COVID-19 due to a positive PCR test
- “**Negative**”: asymptomatic residents with no known exposures who test negative for COVID-19
- “**Exposed**”:
  - Roommates of COVID-positive residents undergoing 14-day quarantine OR
  - Symptomatic resident with high clinical suspicion for COVID-19 awaiting test results

Each cohort should ideally have dedicated staff and equipment, minimizing movement across cohorts

- When movement across cohorts is necessary, staff and equipment should move from “Negative” to “Exposed” to “Positive” where possible

Source: Connecticut Dept. of Health
Potential Complications for Cohorting

- Room sharing priorities if single-occupancy rooms are not available:
  - Prioritize private rooms for “Exposed” cohort, where residents could potentially be positive or negative
  - COVID-positive residents can share a room with other COVID-positive residents
  - COVID-negative residents can share a room with other COVID-negative residents

- Refusal/declination of testing:
  - If a resident refuses testing AND has a COVID-19 positive roommate OR direct contact with a COVID-positive staff member, consider placing the resident in the “Exposed” cohort
  - If a resident refuses testing AND has no known exposure AND is asymptomatic, consider placing the resident in the “Negative” cohort
Cohorting and Preserving PPE

- In the Positive cohort:
  - Due to current gown shortages, when laundered cloth gowns are unavailable, consider extended use of single use gowns
    - Keeping gown on when moving directly between care for COVID-positive residents
  - Extended use of facemask/respirator and eye protection should also be considered for the Positive cohort
  - Change gloves and perform hand hygiene between residents

- In the “Exposed” cohort:
  - Gown and gloves must be changed between residents, extended use of facemask/respirator and eye protection is acceptable

- In the “Negative” cohort:
  - Use only facemask and other transmission-based precautions indicated by patient condition
SUBJECT: Nursing Home Reopening Recommendations for State and Local Officials

Memorandum Summary

- CMS is committed to taking critical steps to ensure America’s nursing homes are prepared to respond to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE).
- **Recommendations for State and Local Officials:** CMS is providing recommendations to help determine the level of mitigation needed to prevent the transmission of COVID-19 in nursing homes. The recommendations cover the following items:
  - **Criteria for relaxing certain restrictions and mitigating the risk of resurgence:** Factors to inform decisions for relaxing nursing home restrictions through a phased approach.
  - **Visitation and Service Considerations:** Considerations allowing visitation and services in each phase.
  - **Restoration of Survey Activities:** Recommendations for restarting certain surveys in each phase.

See also [CMS Reopening FAQs](#).
CMS Reopening Guidance in New Hampshire

- We are not there yet!
- This guidance is being worked into reopening plans by the State of NH
- Facilities should still adhere to current recommendations and restrictions
  - Visitor restrictions still apply
  - Communal dining and group activities still canceled
  - Screening for residents and non-residents still applies
  - Universal source control still implemented
Testing Programs for LTCFs/ALFs

- Point Prevalence Surveys (PPS)
- COVID19 Resident and Staff Sentinel Surveillance Program (CRSSSP)
- Outbreak Response
Q&A