

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?"](#)

Strategies for Cohorting

- ▶ 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

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

CMS Reopening Guidance

SUBJECT: Nursing Home Reopening Recommendations for State and Local Officials

Memorandum Summary

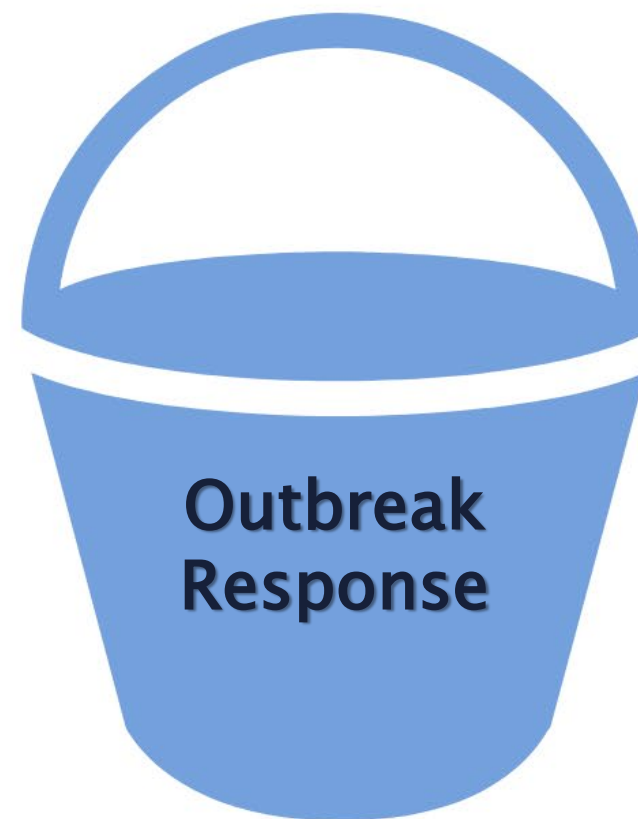
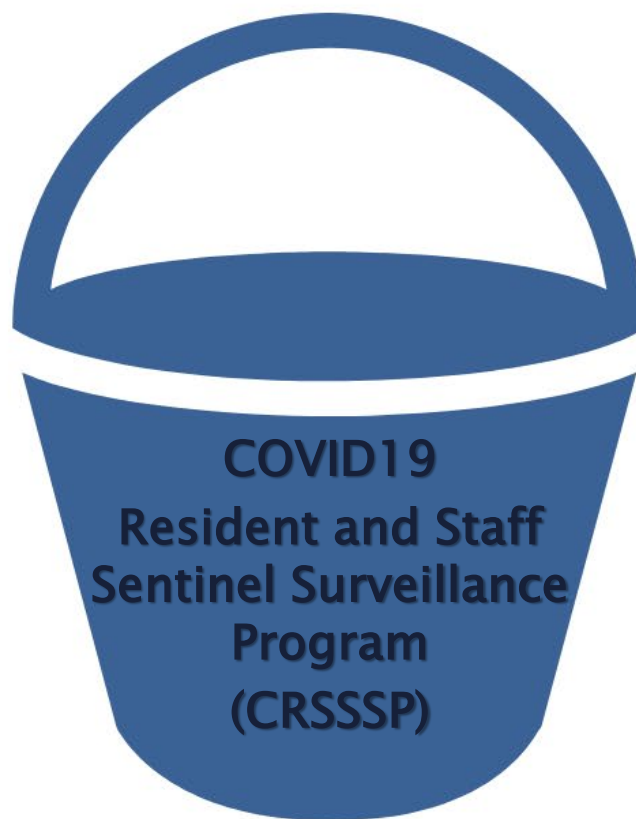
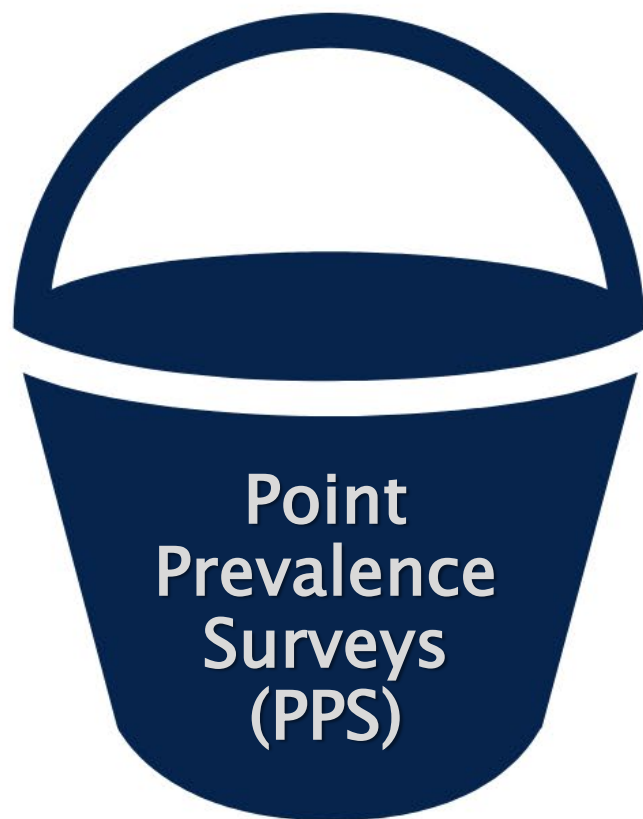
- CMS is committed to taking critical steps to ensure America's nursing homes are prepared to respond to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE).
- **Recommendations for State and Local Officials:** CMS is providing recommendations to help determine the level of mitigation 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



Q&A