

Long Term Care Provider Call
Wednesday, June 3rd, 2020
Agenda with Key Guidance

1. Welcome

- ◆ All calls are muted, session is being recorded
- ◆ Hold questions for Q&A session
- ◆ 405.271.6868, LTC@health.ok.gov
- ◆ Website – <https://ltc.health.ok.gov> (LTC COVID-19 Resources)

Mike Cook

Policy & Guidance

2. All facility staff must wear a mask when on site

James Joslin

From CDC's [*Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 \(COVID-19\) Pandemic*](#)

HCP should wear a facemask at all times while they are in the healthcare facility, **including in breakrooms or other spaces where they might encounter co-workers.**

- When available, facemasks are preferred over cloth face coverings for HCP as facemasks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others.
- HCP should remove their respirator or facemask, perform hand hygiene, and put on their cloth face covering when leaving the facility at the end of their shift.

Facemask: Facemasks are PPE and are often referred to as surgical masks or procedure masks. Use facemasks according to product labeling and local, state, and federal requirements. FDA-cleared surgical masks are designed to protect against splashes and sprays and are prioritized for use when such exposures are anticipated, including surgical procedures. Facemasks that are not regulated by FDA, such as some procedure masks, which are typically used for isolation purposes, may not provide protection against splashes and sprays.

3. Governor's [Executive Order](#): What continues and what has been suspended

James Joslin

- ◆ Effective May 30, 2020 and expires on or about the 30th of June, 2020
- ◆ Suspension of facility license expiration lifted
- ◆ Suspension of occupational license expiration continues
- ◆ Nurse Aide Trainee Waiver continues
- ◆ Visitation remains prohibited
- ◆ CMS 1135 Waivers continue but the waiver of any conflicting state law or rule was removed
- ◆ Shelter at Home for those over 65 years of age or who have a chronic health condition changed to should from shall

4. Infection Preventionist (IP) Facility Risk Assessment Requirements/Recommendation.....James Joslin

- ◆ The CDC recommends for [nursing homes](#) that, “**Facilities should assign at least one individual with training in IPC [infection prevention and control] to provide on-site management of their COVID-19 prevention and response activities** because of the breadth of activities for which an IPC program is responsible, including developing IPC policies and procedures, performing infection surveillance, providing competency-based training of Health Care Personnel (HCP), and auditing adherence to recommended IPC practices.” The CDC refers **all health care providers and shared or congregate housing providers** to their [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#), which describes those IPC standards to be addressed by the infection preventionist.
- ◆ Federal regulations for NFs and SNFs at [42 CFR 483.80](#), require the designation of an IP within the Infection Prevention Control (IPC) plan, while ICF/IIDs rules at [42 CFR 483.470\(l\)\(1\)](#) require that facilities maintain an ongoing surveillance program of communicable disease control and investigation of infections and an active training program.
- ◆ The OSDH is encouraging all facilities to have a licensed health care professional designated as their infection preventionist and have them prepare a current risk assessment and IPC plan for their facility.
- ◆ See the CDC's [Nursing Home Infection Preventionist Training Course](#). This is a required training course for the IP in nursing and skilled nursing homes but the material is applicable across all facility types, with limited exceptions.
- ◆ The risk assessment should focus on:
 - infection surveillance
 - competency-based training of Health Care Personnel (HCP)
 - adherence to recommended Infection Prevention and Control (IPC) practices
 - adherence to recommended personal protective equipment (PPE) practices
 - Visitation policies (for when lifted)
 - Outings and excursion policies.

5. Outings and Excursions.....

James Joslin

- ◆ Guidance remains pending
- ◆ Facilities will be asked to assess for safety
- ◆ Facilities will be asked to consider a tiered approach including community, supervision, compliance with policies
- ◆ Quarantine does not mean a 24/7 restriction to the resident's room Jeneene Kitz
 - Dependent upon facility type and setting
 - CDC recommends putting controls in place based on a tiered approach and assessment of immediate surroundings in facility and community
 - Assess the resident’s ability to follow infection control guidelines
 - Consider the activities the resident will engage in when going outside the facility
 - Ensure Infection Control protocols are followed
 - Environmental cleaning
 - Cloth face coverings or face masks and appropriate hand hygiene when going on excursions outside of facility
 - Staff should utilize appropriate PPE when in close contact or performing wet activities (bathing, toileting, showering)

6. Resident Outings for **Essential Health Care Services**

Jeneene Kitz

- ◆ Quarantine on resident return may not be required where
 - Supervised by qualified health care staff
 - Appropriate face covering, hand hygiene, and distancing in place
 - Appropriate infection control practices and screening used at medical provider and limited time of exposure
 - Destination facility is following IFC protocols
 - Some unsupervised may meet criteria, call Long Term Care 405-271-6868
- ◆ Quarantine does not mean a 24/7 restriction to the resident's room
- ◆ See also CDC's [Framework for Healthcare Systems Providing Non-COVID-19 Clinical Care During the COVID-19 Pandemic](#)

7. Visitation

James Joslin

- ◆ Currently no guidance
- ◆ Development of guidance document is underway
- ◆ No opinion that allows outdoor visitation until guidance obtained

8. Adult Day Care

James Joslin

- ◆ OSDH has issued no restrictions on the operation of adult day care centers (ADC)
- ◆ Obtain Infection Preventionist and develop Infection Control policies and procedures
- ◆ Ensure adherence to recommended Infection Prevention and Control (IPC) practices
 - Educate families to screen resident prior to arrival at ADC which includes temperature checks
 - Screen resident on arrival at facility
 - Educate staff, resident and family on how to minimize touching surface and face and ensure appropriate hand hygiene is followed
 - Adhere to face cloth coverings and/or facemasks while in facility
 - Maintain social distancing and limit group activities

9. CMS QIN-QIO Telligen

James Joslin

New directive from CMS of the QIN-QIO contract. CMS will direct Telligen, the QIN-QIO for Oklahoma, regarding the nursing facilities they are to contact and provide infection control technical assistance for. If contacted, be sure to speak with Telligen and/or return their call.

Operations

10. CMS Memo [QSO 20-31-All](#)

Mike Cook

- ◆ COVID-19 Focused Surveys
 - Phase I: Late March on-site infection control consults conducted
 - Phase II: Facilities received the COVID Focused Survey CMS released in April
 - All nursing homes to receive a focused survey by July 31, 2020
 - Nursing homes that have received a previous focused survey in Phase I or Phase 2 may receive another focused survey in the future.

- National average for completion of Focused Surveys is 54.1%, Oklahoma is 55%
- ◆ New Standard
 - Survey all nursing homes with outbreaks by June 29, 2020;
 - CDC definition of outbreak: 10% of facility's beds to residents have positive cases; Or
 - 20% suspected cases plus positive cases in a ratio to beds; Or
 - Facility has 10 deaths
 - Survey all nursing homes with 3 or more new cases within 3 to 5 days
 - Beginning FY 2021 conduct COVID Focused survey on 20 percent of nursing homes; Oklahoma 60 homes
- ◆ Expanded Survey Activities beginning with Phase 3 of Nursing Homes Re-opening based on [QSO 20-30-NH Memo](#)
 - Immediate Jeopardy, Focused Infection Control, Initial Certification Surveys
 - Complaint Investigations triaged as Non Immediate Jeopardy High
 - Revisit surveys with removed Immediate Jeopardy
 - Special Focus Facility and Special Focus Facility Candidate Recertification surveys
 - Nursing Home and ICF/IID Recertification surveys greater than 15 months.
- ◆ Enforcement for Infection Control Deficiencies—Effective June 1, 2020
 - CMS is expanding enforcement to improve accountability and sustained compliance
 - Level D & E – Directed Plan of Correction (DPOC)
 - Level F – DPOC, DPNA 45 days
 - If cited for infection control and an additional infection control citation:
 - 1 in last year – Level D & E – DPOC, DPNA 45 days, CMP \$5,000
 - 1 in last year – Level F – DPOC, DPNA 45 days, CMP \$10,000
 - 2 in last year – Level D & E – DPOC, DPNA 30 days, CMP \$15,000
 - 2 in last year – Level F – DPOC, DPNA 30 days, CMP \$20,000
 - Level G, H, I (Actual Harm) – DPOC, DPNA 30 days, CMP using analytical tool
 - Level J, K, L (Immediate Jeopardy) – Temporary Manager or Termination of Provider Agreement, or DPOC, DPNA 15 days, CMP using analytical tool

10. COVID-19 Focused Surveys (State and Federal)

Mike Cook

- ◆ Federal and State Focused Surveys continuing

11. Infection Control Consults

Mike Cook

- ◆ Contact LTC Survey Department at 405-271-6868 to ask infection control related questions and/or discuss concerns and issues
- ◆ Encouraged to contact and discuss prior to moving into enforcement

12. Reporting Requirements

Mike Cook

- ◆ Report within 24 hours of any suspected or positive COVID-19 cases to Acute Disease and LTC Department

Questions and Answers

Next Session June 10th, 2020 1:00 PM-2:30 PM