

ECHO C.A.N. Session 2 Q&A

Q: Our surveyor said we had to treat all of our trash as a biohazard when she did our COVID focused survey. Who do I follow?

A: Trash should be **disposed in the regular trash and not in Biohazard bags** unless it meets the biohazard definition by OSHA. These definitions can be found in the State Operations Manual under the F880. Per Jeneene Kitz, OSDH HAI Coordinator

A: ECHO participant shared: And during the OSDH bi-weekly meetings, they have said the same about PPE--regular trash unless "visibly soiled."

Q: If we are doing outbreak testing on our residents and they are in quarantine as a new resident or readmitted. If they come back negative can they come out of quarantine since we would know their covid status at that point?

A: Testing residents upon admission could identify those who are infected but otherwise without symptoms and might help direct placement of asymptomatic SARS-CoV-2-infected residents into the COVID-19 care unit. However, a single negative test upon admission does not mean that the resident was not exposed or will not become infected in the future. Newly admitted or readmitted residents should still be monitored for evidence of COVID-19 for 14 days after admission and cared for using all recommended COVID-19 PPE. **Testing should not be required prior to transfer of a resident from an acute-care facility to a nursing home.**

A: New residents could be transferred out of the observation area or from a single to a multiresident room if they remain afebrile and without symptoms for 14 days after their last exposure (e.g., date of admission). Testing at the end of this period could be considered to increase certainty.

https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html

Q: Where do we report all of the COVID-19 testing results?

A: Attached below is the document outlining the COVID-19 laboratory reporting requirements for Long Term Care (Long Term Care COVID-19 Testing Reporting Requirements.pdf)

Q: When reporting do we use the county positivity rate that the state is providing?

A: https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg ---Scroll down and look under COVID-19 Testing-Testing is released every two weeks by CMS with county positivity rate. The testing is based upon this positivity rate not by rate that is released by the state.

A: QSO Memo with testing guidance-

file:///C:/Users/Slongacre/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/DF9 UI4LN/QSO-20-38-NH%20(007).pdf

A: Attached below is the document outlining the COVID-19 laboratory reporting requirements for Long Term Care (COVID 19 Testing Data Cheat Sheet.pdf)

Q: What are the new CMS guidelines defining compassionate care visits?

A: FAQ's on Nursing Home Visitation - https://www.cms.gov/files/document/covid-visitation-nursing-home-residents.pdf

Q: What auditing tools are available?

A: PPE - https://www.telligenqinqio.com/wp-content/uploads/2020/06/PPE-Audit-Tool_FNL.pdf

A: The CDC's Infection Prevention and Control Assessment Tool (link below), has auditing tools after page 10.

https://www.cdc.gov/infectioncontrol/pdf/icar/ltcf.pdf

A: Apps to utilize such as IScrub Light for the iPhone and Speedy Audit for Android/iPhone users for hand hygiene and PPE auditing with feedback (you can also add on environmental cleaning).

Q: What is the process of upgrading from Level 1 to Level 3 NHSN access?

A: https://www.telligenqinqio.com/affinity_resource/nursing-home-quality/nursing-home-quality-resources/sams-access-security-upgrade/

Q: The contact information for OSDH Long Term Care Offices has changed since they moved offices-do you have the new contact information?

- OSDH Long Term Care Offices 405-426-8200
- Email LTC@health.ok.gov
- Website www.ltc.health.ok.gov

Q: How do I get access to the weekly OSDH Long Term Care calls and newsletters with updates?

A. Reach out to Diane Henry at DianeH@health.ok.gov to gain access to the weekly calls and newsletters

Long Term Care

COVID-19 Testing Reporting Requirements

Below is a list of the COVID-19 Testing reporting requirements for Long Term Care. The list includes both state and federal requirements.

Long Term Care Requirement:

All positive COVID-19 tests, both residents and staff, are to be reported within 24-hours to Long Term Care and Acute Disease.

1. Long Term Care Incident Report

 $ODH~283-Incident~Report~Form~\frac{https://www.ok.gov/health2/documents/OSDH%20Form%20283.pdf}{Fax:~405.271.4172~or~1-866.239.7553}$

also call

Acute Disease at 405.271.9444 ext 57920 (for positive COVID-19 only)

CMS/CDC Requirement:

CDC's National Healthcare Safety Network (NHSN) - All COVID-19 tests should be reported per §483.80(g)(1)-(2) which include suspected and confirmed infections, and deaths, for both residents and staff. The information is to be reported at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. (QSO-20-29-NH)

NHSN - https://www.cdc.gov/nhsn/covid19/index.html

Lab Requirement:

CLIA - All CLIA-certified laboratories that perform or analyze any test that is intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19 (e.g., molecular, antigen, antibody) are required to report, regardless of the type of laboratory (type of CLIA certificate [including waivers]) performing the testing. All negative <u>and</u> positive SARS-CoV-2 results must be reported irrespective of the method (e.g., molecular, lateral flow) used. (QSO-20-37-CLIA, NH). **Follow the instructions for reporting to Acute Disease using the PHIDDO system and this will meet the CLIA reporting requirement.** For information contact:

OSDH CLIA Department Phone: 405.271.6576

Email: medicalfacilties@health.ok.gov

3. **OSDH Acute Disease** – All **negative** <u>and</u> **positive** COVID-19 tests, both residents and staff, are to be reported within 24-hours to Acute Disease using the PHIDDO system Acute Disease/PHIDDO System – For information contact:

Tony McCord, Acute Disease 405.271.4060 tonywm@health.ok.gov

4. **Qualtrics** - Per the Governor's Fourth Amended Executive Order 2020-20, all facilities performing COVID-19 testing are required to report their data to OSDH daily by 10:00 am using the following Qualtrics survey link: https://osdhphs.co1.qualtrics.com/jfe/form/SV OeLFfFyfLEEbsW1

Qualtrics Survey Questionnaire – For information contact:

William Huffman

williambh@health.ok.gov

COVID -19 Testing Cheat Sheet

COVID – 19 Nursing Home Data: https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/

COVID -19 Testing

- Requirements and Guidelines: QSO Memo: QSO-20-38-NH: Here
- These guidelines include testing staff on a certain frequency based on the COVID-19 positivity rate for the county the nursing home resides in. Rates of county positivity are posted here. (Archive is here.)
- New data is uploaded every 2 weeks
- Follow the color code that follows the county positivity rate-This is risk adjusted for the population.
 - Green Test staff 1x per month
 - Yellow Test staff 1x per week
 - Red Test staff 2x per week

Positive Test Results

Positive test result of any staff member or resident immediately use Outbreak Testing.

Outbreak Testing

Discontinue routine staff testing and continue below guidance for both staff and resident testing.

Outbreak Testing: Test all staff and residents immediately for rapid identification. Persons admitted with COVID are not considered part of an outbreak. Outbreak testing continues every 3-7 days until there have been no new cases for 14 days

Information about the testing instruments:

- please view the recorded <u>webinar</u>.
- view <u>toolkit</u> for nursing homes using point of care devices for SARS-CoV-2 testing as a quick reference guide to important information about testing.

^{**}Facilities should monitor these rates every other week and adjust staff testing according**