

Long-Term Care Facility Playbook to Access Resources to Support COVID-19 Outbreak Responses

Background

This document is intended to serve as a playbook on how to access various staffing, supplies, infection control expertise, and other resources to support responses to COVID-19 cases and outbreaks in long-term care facilities (LTCFs) and in some circumstances, other residential facilities.

If your facility suspects or is experiencing an outbreak¹ of COVID-19, notify your [local health department](#) immediately.

In addition:

- Nursing homes: The VDH Office of Licensure and Certification (OLC) is requesting a [Facility Reported Incident \(FRI\) form](#) when either a resident or staff tests positive for COVID-19.
- Assisted Living Facilities: The Virginia Department of Social Services (DSS) requests that you notify your DSS inspector.
- Consider self-reporting to the [Virginia Healthcare Alerting & Status System](#) (VHASS).
- LTCFs certified to provide Medicare skilled nursing facility (SNF) services and/or Medicaid nursing facility (NF) services are required to report COVID-specific data to the CDC's National Health Safety Network (NHSN).
 - Per the Code of Virginia ([§32.1-35.1](#)), data required to be reported to NHSN to meet CMS requirements should be shared with VDH through the NHSN system. In order for VDH to view data from facilities reporting in NHSN, VDH is requesting that each facility join the VDH NHSN group. You can find instructions on how to do that [here](#).
 - Assisted Living Facilities may also report to the NHSN.
- [16 VAC 25-220-40.B.8.e](#) of the Emergency Temporary Standard (ETS) provides that "The employer shall notify the Virginia Department of Labor and Industry (DOLI) within 24 hours of the discovery of three (3) or more employees present at the place of employment within a 14-day period testing positive for SARS-CoV-2 virus during that 14-day time period." Access the portal [here](#).

The following list includes potential options for securing additional resources to support your facility's response to a COVID-19 outbreak.

Staffing

Engage with your local health system to explore what if any support they can provide in regards to infection control consultation or clinical guidance (either via telehealth or onsite).

Contact temporary staffing agencies.

The Virginia National Guard (VANG) can provide support with:

- Loading, transporting, and unloading PPE or testing supplies
- PPE training (e.g., donning and doffing)
- Fit-testing facility staff for N95 respirators
- Teaching and coaching contamination avoidance and respiratory protection
- Testing events

¹ At least two (2) lab-confirmed cases are required to classify an outbreak.

Requests for VANG deployment need to be coordinated with the local health department.

The Department of Behavioral Health and Developmental Services has published numerous resources for staff well-being, which can be found [here](#). In addition, an emotional support line can be accessed by calling 866-342-6892.

Testing and Reporting

[Public health testing](#) is available for persons with COVID-19 symptoms who work, reside, or are newly arriving to a congregate setting.

Commercial laboratories are available for testing and information is available on the VDH website under [“Testing and Laboratory”](#) on the Health Professionals webpage.

CDC has released guidance for [Testing for COVID-19 in Nursing Homes](#).

Requests for additional testing resources may be directed to your local health department.

Certified nursing homes are required by CMS to test residents and staff according to [OSO-20-38-NH](#). Facilities may refer to [CMS data](#) or [VDH data](#) to view county test positivity rate as a determinant of testing frequency.

On May 6, 2020, CMS released a memo outlining the [Interim Final Rule Updating Requirements for Notification of Confirmed and Suspected COVID-19 Cases Among Residents and Staff in Nursing Homes](#). Certified nursing homes are required to report COVID-19 facility data to the CDC and to residents, their representatives, and families of residents in facilities. Much of this information is accessible to the public on the CMS [website](#). Outbreaks reported from Virginia LTCFs can be viewed on the VDH COVID-19 [website](#).

On January 8, 2021, the U.S. Department of Health and Human Services (DHHS) updated their [Reporting Guidance](#) for the Coronavirus Aid, Relief, and Economic Security Act (CARES Act). Language in the document was modified to state that the NHSN Point of Care (POC) Test Reporting tool is the *preferred* (but not required) method for certified nursing homes to submit COVID-19 POC test results to state health departments and the U.S. DHHS. This information is also included in a [CMS memo](#) (page 14) released on January 8. Certified skilled nursing facilities may use NHSN OR the [VDH Portal](#) to report COVID-19 POC test results. [POC Testing Reporting Tool FAQs](#) and other resources can be found on the NHSN LTCF [website](#).

PPE

LTCFs are encouraged to continue working through private sector vendors, associations and corporate offices to ensure availability of personal protective equipment (PPE). When a facility cannot secure an adequate level of PPE through normal channels, the Commonwealth may be able to support critical resource requests:

- [Skilled nursing facilities](#) can contact their [Regional Healthcare Coalition](#).
- [Assisted living facilities can contact their regional VDSS licensing office.](#)
 - Additional guidance for assisted living facilities is available on the [Virginia Department of Social Services \(VDSS\) website](#).
- Facilities requesting PPE should be prepared to provide information on current PPE inventory, PPE conservation strategies in place currently, and burn rates.

Ensure staff training and education on appropriate use of PPE:

- If possible, develop a plan to have all staff fit-tested for N95 respirators. Some local health departments have the capacity to offer fit testing and PPE training. Other options include

coordinating with the Virginia National Guard (VANG), local fire department or EMS agency for this service.

- To procure fit test kits, facilities can check with their regional healthcare coalition.
- CDC videos on donning and doffing are available [here](#).

The VHHA has entered into a new partnership with [PPE Exchange](#), a Seattle-based firm that operates a global, online portal to connect health care providers and other organizations with vetted suppliers of personal protective equipment. This new arrangement assists health care providers, businesses, and other Virginia organizations in obtaining the PPE needed to protect staff, patients, students, customers, and others during the pandemic.

Please see [Considerations for Personal Protective Equipment \(PPE\) and Cohorting during COVID-19 Response in Long-Term Care](#) for more information.

Infection Control

Facilities should follow infection control guidelines from CDC and CMS. VDH has compiled guidance and posted it [here](#). VDH continually updates guidance and training resources on the [Virginia COVID-19 LTC Task Force website](#), including, but not limited to Guidance includes:

- [Considerations for PPE and Cohorting during COVID-19 Response in LTC](#)
- [Infection Prevention & Control FAQs for Nursing Homes](#)
- [COVID-19 Response Toolkit for Assisted Living Facilities](#)

Before or early in an outbreak, an onsite infection control assessment is valuable and often reinforces confidence among LTCF staff.

- Facilities can assess their own infection control readiness using a self-assessment tool. Information and a LTCF infection prevention assessment CDC tool can be found [here](#).
- Many local health departments have capacity to provide onsite infection control consultations in the beginning of an outbreak, or can coordinate with MRC volunteers. Please contact your [local health department](#) prior to an outbreak to determine if this is the case in your area.
- Some health systems may offer infection control consultative services, and/or may offer access to the hospital's infection prevention and control educational resources.

Teleconsultations are available with VDH infection control experts and may be available via federal partners. Facilities may request VDH consultation through their [local health department](#).

To prevent the spread of infection, it is encouraged that staff work at only one facility. If that is not possible, please take extra precautions for those staff that work at multiple facilities.

It is recommended that facilities dedicate space for COVID-19 positive residents prior to an outbreak.

Care Transitions

A LTCF can accept a resident diagnosed with COVID-19 if the facility can follow [CDC guidance for Transmission-Based Precautions](#). CDC has released [Interim Guidance for Discontinuing Transmission-Based Precautions](#) for persons with laboratory-confirmed COVID-19. CDC has also released [Responding to COVID-19 in Nursing Homes](#), which includes considerations for new admissions or readmissions to a facility.

In addition, [VDH has published Recommendations for Hospitalized Patients Being Discharged to a Long-Term Care Facility During the COVID-19 Pandemic](#) and [Closing a Healthcare Facility to New Admissions or Readmission during the COVID-19 Pandemic](#).

Vaccinations

VDH is participating in the federal [CDC-pharmacy-LTCF partnership](#). The majority of LTCFs in Virginia will receive vaccinations from CVS and Walgreens onsite via this partnership, ensuring vaccination of both LTCF staff and residents equitably across the entire state.

- VDH activated Part A for Nursing Homes/Skilled Nursing Facilities on December 7, and vaccine clinics began the week of December 28 to administer first doses.
- VDH activated Part B for Assisted Living Facilities and other LTCFs on December 31, and vaccine clinics began in mid-January to administer first doses.

VDH is coordinating future prioritization based on federal guidance and will ensure that the second doses of vaccine provided to individuals follows CDC ACIP guidelines; the current guidance is that vaccines from different manufacturers are not interchangeable. For example, if an individual receives one dose of the Pfizer vaccine, the second dose administered would also be the Pfizer vaccine.

Following completion of the program, facilities should work with their local health department or a pharmacy partner to vaccinate LTCF staff and residents.

Additional vaccine resources for LTCFs can be found [here](#).

Adverse events experienced from the vaccine administration can be reported in the [Vaccine Adverse Event Reporting System \(VAERS\)](#).

Visitation

In September, the Centers for Medicare & Medicaid Services released [updated visitation requirements](#) for certified nursing homes to help mitigate the spread of COVID-19 within and into facilities. These guidelines are based on community test positivity rates, which can be determined by [CMS data](#) or [VDH data](#).

Additionally, in November 2020, CMS released [Holiday Season COVID Guidance](#).

COVID-19 and Influenza

Influenza season occurs in Virginia every year between October and May. Because LTCF residents are at increased risk for complications from influenza and to prevent outbreaks, LTCFs should be aware of when influenza-like illness has increased in their region of the state and be on the lookout for any change in acute respiratory illness that might indicate the arrival of influenza in the facility.

VDH has published [Guidelines for the Prevention and Control of Influenza and COVID-19 in Nursing Homes and Long-Term Care Facilities](#) and the CDC has published [Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Illness Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating](#).