

**Long Term Care Provider Call**

Wednesday, July 20, 2022

1:00 PM – 2:00 PM - NF/SNF and ICF/IID Provider Call

## 1. Welcome

Beverly Clark

- Session is being recorded.
- All participants are muted, please keep phones muted during the call.
- Q&A session – All participants should submit questions to [LTC@health.ok.gov](mailto:LTC@health.ok.gov), we will answer as many questions as time allows on the call
  - Online participants may post questions in the Q&A box, and questions will be answered in the FAQ document
  - Only questions sent to the LTC email box will be answered during the call
- Phone number 405.426.8200
- Fax Incidents/Form 283 to 1-866-239-7553.
- To request emails from Gov.Delivery.com email Diane Henry at [DianeH@health.ok.gov](mailto:DianeH@health.ok.gov) or email [LTC@health.ok.gov](mailto:LTC@health.ok.gov)
- Please join via Team
- **Reminders:**
  - **Guidance for NF/SNF and ICF/IID** comes from CMS QSO Memos and CDC guidance as indicated in the QSO memos.
  - NF/SNF have two key memos that provide guidance on testing and visitation, QSO 20-38 revised 03/10/22 provides information on testing, and QSO 20-39 revised 03/10/22 provides information on visitation
  - ICF/IID should follow QSO 21-14 related visitation
  - **Guidance for Assisted Living/Adult Day Care/Residential Care** comes from CDC guidance and is considered the standard of care related to infection control for COVID-19.

## 2. Acute Disease Update

Jeneene Kitz/Rhonda McComas

- New HAI Mailbox – [HAI@health.ok.gov](mailto:HAI@health.ok.gov)
  - Submit the LMA Forms to this email
  - Indicate if your facility would like to have an onsite visit from the HAI team
- COVID-19 Numbers are increasing – (symptomatic – negative testing)
  - According to COVID Data Tracker--only 2 counties in the state not red at this time
  - Providers be cautious with symptomatic staff with negative results on rapid antigen tests.
    - Send staff home and retest in 24 to 48 hours per the instructions
    - Reduce the risk of lengthy exposures to other staff and residents
    - Antigen tests pick up the tiny proteins that make up the virus and sometimes there isn't enough present to trigger the testing threshold, but that doesn't mean they aren't contagious.
    - The PCR test is strong enough to pick up the virus
    - If symptomatic, and have a negative Antigen test, follow-up with a PCR test since more precise
- CDC – Enhanced Barrier Precautions—Updated PPE Guidance
  - Enhanced Barrier Precautions (EBP) is defined as nursing home staff using gowns and gloves during high contact care activities with residents at an increased risk of acquiring or spreading a Multi-Drug Resistant Organism (MDRO) to others.
  - Goal of EBP: To protect nursing home residents and staff from spreading MDROs, which can cause serious and hard to treat infections, while avoiding restrictions on resident activities or a need for private rooms, unlike Contact Precautions.

- Specific updates: Expanded to include any residents with an indwelling medical device or wound, as well as residents with known infection or colonization with an MDRO.
- Important reminder to follow conventional PPE strategies and change PPE between residents in a COVID cohort.
- Updates were due to increased risk of those caring for and around residents infected with an MDRO.
- Reporting Vaccination Data in NHSN
  - NHSN updated its surveillance definition of “up to date” for Quarter 3 reporting June 27, 2022 through September 2, 2022.
    - An Individual is considered up-to-date with COVID-19 vaccines when they have received all doses in the primary series, and all recommended booster doses, when eligible.
    - At this time, most individuals who are 50 years and older are not considered up to date if they have not received a second booster dose.
    - Report up-to-date vaccination status to NHSN accurately according to the updated definition.
    - CMS is urging facilities to communicate with their fully vaccinated staff members and residents about the importance of staying up to date with COVID-19 shots to protect the vulnerable nursing home population. Refer to: <https://www.cms.gov/newsroom/news-alert/cms-makes-nursing-home-covid-19-booster-vaccination-data-available-online-increasing-transparency>
  - For questions, contact [LTC@health.ok.gov](mailto:LTC@health.ok.gov)

### 3. CMP – Air Improvement Quality Grant Updates

Alexandria Hart-Smith

- Applicable for Medicare/Medicaid certified facilities
- CMS approved CMP funds to be used to purchase:
  - Portable Fans and/or Portable Air Cleaners with High-efficiency Particulate Air Filters
  - Applications must be on the *COVID-19 In-Person Visitation Aid Application Template*
  - Do not include requests for items identified as prohibited (Personal Protective Equipment, COVID-19 testing machines or supplies, etc.)
  - Facilities may be reimbursed up to \$2,500 for their air quality purchases.
  - Submit zero balance receipts to process your reimbursement.
  - Deadline for the \$2,500 Air Improvement Quality grant funding is April 1, 2023.
  - Applications may be located at: [Oklahoma.gov/health/CMP](https://oklahoma.gov/health/CMP)
- Submit questions and applications to: [CMP@health.ok.gov](mailto:CMP@health.ok.gov)

### 4. Updates from LTC Service Director

Janene Stewart

- Overview of LTC Reportable Incidents
  - If abuse, neglect, or misappropriation is suspected, the incident would also need to be reported to Adult Protective Services.
  - For questions related to what is reportable, who to report the incidents to, and/or the timeframe to report, contact [LTC@health.ok.gov](mailto:LTC@health.ok.gov) or call: 405-426-8200.
- Nurse Aide Registry Updates
  - New Manager: Lindsey Jeffries
    - Contact info:
    - **Phone:** 405.426.8150
    - **Fax\*:** 405.900.7572
    - **Email\*:** [NAR@health.ok.gov](mailto:NAR@health.ok.gov)
  - Training and Certification for Nurse Aides

- The training waiver expires 60 days from April 7, 2022. If the individual is already in training, they need to have their training completed and have been tested within the 120 days following the 60 days, which would be October 6, 2022.
  - The above timeline does not apply to newly hired employees.
- Reminders on State Reportables
  - Incident Report Form 283
    - In process of making form an electronic fillable form
    - Follow regulatory guidance for individual facility types
      - NF/SNF and ICF/IID: 310:675-7-5.1
      - Assisted Living: 310:663-19-1
      - Residential Care: 310:680-3-6(c) and (d)
      - Adult Day Care: 310:605-15-7 (fire reporting)
- Protocol for Testing Requirements
  - Only applies to SNF/NF facilities
  - No specific testing requirements for non-nursing facility types
  - Utilize QSO 20-38-NH (Revised 03/10/2022)

**Table 1: Testing Summary**

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff, <i>regardless of vaccination status</i> , with signs or symptoms must be tested.	Residents, <i>regardless of vaccination status</i> , with signs or symptoms must be tested.
Newly identified COVID-19 positive staff or resident in a facility that can identify close contacts	Test all staff, <i>regardless of vaccination status</i> , that had a higher-risk exposure with a COVID-19 positive individual.	Test all residents, <i>regardless of vaccination status</i> , that had close contact with a COVID-19 positive individual.
Newly identified COVID-19 positive staff or resident in a facility that is unable to identify close contacts	Test all staff, <i>regardless of vaccination status</i> , facility-wide or at a group level if staff are assigned to a specific location where the new case occurred (e.g., unit, floor, or other specific area(s) of the facility).	Test all residents, <i>regardless of vaccination status</i> , facility-wide or at a group level (e.g., unit, floor, or other specific area(s) of the facility).
Routine testing	According to Table 2 below	Not generally recommended

**Table 2: Routine Testing Intervals by County COVID-19 Level of Community Transmission**

Level of COVID-19 Community Transmission	Minimum Testing Frequency of Staff <i>who are not up-to-date</i> <sup>+</sup>
Low (blue)	Not recommended
Moderate (yellow)	Once a week*
Substantial (orange)	Twice a week*
High (red)	Twice a week*

<sup>+</sup>Staff *who are up-to-date* do not need to be routinely tested.

\*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

- COVID-19 Transmission Levels as of 07/19/22
  - [National transmission level map](#)
  - [State map by county transmission levels](#)
  - [Community transmission level map](#)
  - Transmission rates may increase per county if individuals test in a different county than where they reside.

- U.S. Department of Health and Human Services link for monoclonal antibodies
  - <https://combatcovid.hhs.gov/possible-treatment-options-covid-19>
- OSDH LTC Preventative Medical Consultant District Map
  - Shayla Spriggs, Survey Manager
    - Ed Roth: Districts 1 through 4 and Tulsa
    - Zach Collins: Districts 5 through 9 and OKC
- LTC Website
  - Working with external entity to resolve issues with reports not currently available

**Questions and Answers**

**Next call to be announced**