

Long Term Care Provider Call
Wednesday, November 4, 2020
3:30 PM – 5:00 PM

1. Welcome

Beverly Clark

- 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)

Policy & Guidance

2. General Updates

Dr. LaTrina Frazier

- Mike Cook is no longer with OSDH – continue to contact LTC with concerns or questions
- Abbott BinaxNOW testing cards
 - Need to be added to your CLIA Certificate Waivers even if you already have a BD Veritor or a Quidel Sofia test system waiver
 - You will not receive a certificate by mail, the addition be will updated in the CLIA data base
 - BinaxNOW will be used for outbreak testing, add them now so you will have no delays in testing
 - Assisted Living (AL) facilities should apply for a CLIA Waiver
 - HHS sent notice this week that all ALs and NHs that have a CLIA certificate waiver will be provided some testing supplies (BinaxNOW cards are expected to be supplied) No timeline information at this moment
- Resident Case Investigations are now being handled by LTC Teams, they will be contacting the facility for investigation information and providing guidance
- Staff Case Investigation will continue to be primarily handled by County Investigators
- Please send any topics you would like to see addressed in these meetings to LTC@health.ok.gov

3. Infection Control Assessment and Response (ICAR) Update

Jeneene Kitz

- Form 283
 - Looking at streamlining the process due to the differences in the definition of a communicable disease outbreak (3 cases in 72 hours) and COVID-19 outbreak (1 case)
 - Be sure to update any prepopulated areas, such as dates, before sending
 - Include information if waiting on a PCR confirmatory test
- Still seeing confusion regarding isolation and quarantine
 - Isolation: 10 days (or 20 days if immunocompromised) of Transmission Based Precautions (TBP) for positive cases
 - Quarantine: Always 14 days for post exposure or unknowns (Think of the rhyme: Quarantine is 14!)
 - Some facilities are isolating positive staff for 14 days when only 10 days is required – don't lose your staff for longer than you have to.

- Some facilities are requiring a negative test to return to work for positive staff. CDC does not recommend testing again within the first 90 days following a positive test. Use the symptom based strategy, not the test based strategy
- Review your plan for releasing residents from the COVID units and for future alternative needs if you should require more isolation/quarantine rooms
- New CDC updates to optimizing PPE – updated use of gloves, eye protection and returning to conventional use of gowns and prioritizing the use of PPE- would be wise to review them – they can be found at [Summary for Healthcare Facilities: Strategies for Optimizing the Supply of PPE during Shortages](#)
- New CDC webpage related to Point of Care (POC) testing – includes guidance on how to safely perform and handle swab specimens and reporting requirements – Be sure you are collecting the proper swab test required- it can be located at [Guidance for SARS-CoV-2 Point-of-Care Testing](#)
- Epidemiology is not responding to every call or email when you are reporting test results. If you need a return call, please request this in your email. We will get back to you as soon as possible.

4. Civil Monetary Penalty Reinvestment Fund Update

Luvetta Abdullah

- QSO-20-39-NH: CMS is allowing facilities to utilize CMP funds to purchase visitation supplies such as tents and Plexiglas dividers. A budget of \$1,500 has been established per facility certified to participate in Title XVIII and XIX of the Social Security Act. Applications and information available at cmp.health.ok.gov
- Still accepting application for the technology devices for up to \$2000 at cmp.health.ok.gov
- Payments for technology: Give Luvetta a call at 405.651.8179 if you are still concerned about your payment
- The statewide accounting system will be down from November 6th through the 11th, so no payments will be processed during this time
- Contact us at cmp@health.ok.gov or call us at 405.271.5278; Contact Luvetta Abdullah at 405.651.8179

5. CMS QIN-QIO Telligen Update

Sherry Longacre

- Partnering with NHs on the CMS COVID-19 Targeted Referral Quality Improvement Initiative (QII) and the CMS Healthy Community Nursing Home Initiative
- We receive a Quality Improvement (QII) Referral list from CMS every Friday to assist NHs with Infection Prevention and Control Programs. These referrals are time sensitive and the QII Plan has to be submitted to CMS within 30 days. Please respond to our calls.
- Can provide tools such as root cause analysis forms, fillable Facility Assessment forms, auditing and feedback forms and PDSA forms to assist you
- Just posted a compendium of testing and reporting requirements for nursing homes and a Flu Resource Guide for patients and providers
- Provide assistance with NHSN and troubleshooting. Be sure you have more than person with access to reporting. We have been seeing penalties imposed due to untimely submission. You will be receiving an invite from NHSN to upgrade from Level 1 to Level 3 access. They will be providing training. Reach out to us if need help with the process.

- Weekly Root Cause Analysis class at 10:30am every Tuesday – log on at your convenience
- LTC Office Hours November 19th at 2:00PM – Guest Speaker Dr. Lea Watson will be speaking on *COVID-19 Fatigue Got You Down?*
- Join us to learn the principles of the Plan-Do-Study-Act (PDSA) cycle to be held every other Wednesday at 11:00AM - log on at your convenience
- Contact at slongacre@telligen.com or call office at 405.810.3224

Operations

6. Survey Deficiency Concerns

- Citations written in last 3 weeks from COVID Focused Surveys
 - Failure to screen residents for COVID signs and symptoms
 - Failure to cohort positive residents appropriately
 - Failure to wear appropriate PPE in COVID units or in quarantine
 - Failure to wear PPE appropriately including improper wearing of surgical masks
 - Failure to conduct outbreak testing when a positive resident or staff is identified
 - Failure to use proper hand hygiene
 - Failure to screen staff upon entry for COVID signs and symptoms

Paula Terrel

7. Survey and Certification Update (No updates provided)

- Survey Prioritization
- Reporting and Documentation
- OSDH Move

Dr. LaTrina Frazier

Questions and Answers

Next Meeting - Wednesday, November 18th