

Q & A Following GHCA's April 3 All Member COVID-19 Updates Webinar

Q: Should facilities allow contractors to enter the building to perform required fire system inspections?

A: This would be a service deemed essential to safety. Stringent screening should be conducted. If there is any leeway on timing, you may ask that they defer until a later date. However, bear in mind that compliance with this requirement would be important should a fire safety issue arise.

Q: When making decisions about accepting hospital discharges, some providers have experienced issues in getting these patients tested for COVID-19 before admitting them into the center. What can GHCA share about the possibility of increased access to testing for patients being discharged to centers from hospitals?

A: We are advocating for broad based testing for any patient referred to a long term health care setting due to the high-risk population served. We believe the emergence of an increasing number of positive results in asymptomatic patients heightens the necessity of a test-based strategy.

Q: Should masks be worn at all times in the center?

A: Excerpt from CMS Guidance:

Long-term care facilities should ensure all staff are using appropriate PPE when they are interacting with patients and residents, to the extent PPE is available and per CDC guidance on conservation of PPE.

- For the duration of the state of emergency in their State, all long-term care facility personnel should wear a facemask while they are in the facility.
- Full PPE should be worn per CDC guidelines for the care of any resident with known or suspected COVID-19 per CDC guidance on conservation of PPE.
- If COVID-19 transmission occurs in the facility, healthcare personnel should wear full PPE for the care of all residents irrespective of COVID-19 diagnosis or symptoms.
- Patients and residents who must regularly leave the facility for care (e.g., hemodialysis patients) should wear facemasks when outside of their rooms.
- When possible, all long-term care facility residents, whether they have COVID-19 symptoms or not, should cover their noses and mouths when staff are in their room. Residents can use tissues for this. They could also use cloth, non-medical masks when those are available. Residents should not use medical facemasks unless they are COVID-19-positive or assumed to be COVID-19-positive.

Update guidance can be found on the CMS website: <https://www.cms.gov/files/document/4220-covid-19-long-term-care-facility-guidance.pdf>

Q: Governor Brian Kemp has indicated his office will begin publishing the names of centers with confirmed cases. Do we know when that's being published (if not already) and where that's being published?

A: The Governor's office has indicated they will receive a report from DPH on Wednesdays outlining the names of centers with confirmed cases along with the number of cases in those centers. This listing will be released to the public on Fridays.

Q: When a person is tested just prior (within an hour or two) before transfer from a hospital to a LTC facility, can we feel certain that the person is not infected with the virus?

A: Due to COVID-19 being a novel virus with new information emerging in real time, there are very few certainties. However, our position is that rapid testing just prior to discharge would assist with informed decision making. The 2-14 day incubation must be considered.

Q: Is it appropriate for staff to wear their own cloth mask in the facility?

A: PPE adequacy/conservation is an ongoing challenge for all providers. While we recognize medical grade PPE is optimal, other strategies may have to be used in common or non-COVID+ settings to comply with the universal mask concept.

Q: Has there been any consideration for use of CMP monies to help centers in the fight against COVID-19?

A: This is certainly a worthy effort to direct CMP funds to. However, as of this time, we have not received notice that anything has changed in the criteria or application process.

Q: Does CDC and CMS guidance related to PPE utilization and virus mitigation strategies also apply to the assisted living setting?

A: Preventive guidance is applicable in assisted living and personal care settings.

Q: Please provide guidance as to where assisted living providers can discharge COVID+ residents for a higher level of care.

A: Some skilled nursing centers are admitting COVID+ residents and the waiver of the 3-day inpatient hospital stay requirement may help to facilitate transfer for skilled care at a SNF.

Q: Where can you find information on HFRD's Infection Control Desk Audit Survey Process for skilled nursing centers as well as assisted living communities?

A: Please see HFRD's Infection Control Desk Audit Process for skilled nursing centers and assisted living communities below.

- Skilled Nursing Centers:
 - [Click here for the SNF Infection Control Desk Audit Tool](#). **Note:** This information is only required to be submitted once.
 - Following the initial provision of the information included on the desk audit tool, centers should be prepared to submit the following information to the Department *on a daily basis*:
 - Current Facility Census
 - Total Number of Residents Tested

- Total Positive COVID-19 Cases
 - Number of Residents in Quarantine at the Facility
 - Number of Residents Discharged to the Hospital related to COVID-19
- Centers should submit their information to their District HFRD Contact:
 - [Click here for a HFRD District Contact List](#)
 - [Click here for a District Map](#)
- Assisted Living Communities/Personal Care Homes.
 - [Click here for the ALF/PCH Infection Control Desk Audit Tool](#). **Note:** This information is only required to be submitted once.
- Following the initial provision of the information included on the desk audit tool, centers should be prepared to submit the following information to the Department *on a daily basis*:
 - Current Facility Census
 - Total Number of Residents Tested
 - Total Positive COVID-19 Cases
 - Number of Residents in Quarantine at the Facility
 - Number of Residents Discharged to the Hospital related to COVID-19
- ALFs & PCHs can submit their information to any of the following contacts:
 - Shirley Rodrigues, Program Director, serodrigues@dch.ga.gov
 - Karen Brown, Regional Director, Klbrown1@dch.ga.gov
 - Irene Hubbard, Regional Director, ihubbard@dch.ga.gov
 - Sammy Foster, Regional Director, sammy.foster@dch.ga.gov
 - Cora Cranford, Enforcement Specialist, cvcranfo@dch.ga.gov
 - There is also a general mailbox: HFRD.pch@dch.ga.gov

The above overview and any updates to this process will be posted to the GHCA website here: <https://www.ghca.info/infection-control-resources>

Q: Will CNAs be allowed to pass medicine or will centers be able to utilize Certified Medication Aides?

A: There has not been a waiver of requirements to allow a CNA to pass medications.

Q: If an individual has taken a CNA program at their high school or other school but has not tested, will they still need to do the online course and test prior to working in the center?

A: If an employee has completed all of the pre-requisites to be eligible to take the CNA state certification test but was unable to do so due to closure of the Pearson Vue test sites and you have appropriate documentation of training and skills check-off on file, the period to complete testing has been extended.