GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION

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Memo 20-41

To: Administrator, DNS, Medical Director, Infection Preventionist and QA Committee

From: The GNYHCFA Team

Date: October 30, 2020

Re: COVID-19 Updates

To assist members with the most recent information regarding COVID-19 we are outlining some reminders and key updates below.

FEDERAL FUNDING

- HHS announced that eligible nursing homes across the country will receive a total of \$333 million in federal aid after meeting infection control improvement benchmarks between August and September. Information released by HHS as of now indicates 443 New York facilities will receive a portion of 7 million dollars this month, facilities are eligible to receive additional funds if COVID-19 infections, at less than the community percentage and mortality rates, as reported in NHSN in November and December.
- Providers can apply for Phase 3 funds between October 5 November 6, 2020
- On Oct 1, 2020, the Department of Health and Human Services (HHS) announced an additional \$20 billion in funding for healthcare providers to assist with losses and changes in operating expenses caused by the COVID-19 pandemic.
- Who can apply?
 - 1. Providers who have already received Provider Relief Fund payments.
 - 2. Previously ineligible providers.
 - 3. Providers who previously received Provider Relief Funds equating to approximately 2% of annual revenue from patient care.
- How to apply:
 - 1. Submit your TIN for validation via the Provider Relief Fund Application and Attestation Portal.
 - 2. Review the HHS application instructions and sample application form and gather the necessary information and documentation.
 - 3. Apply in the Provider Relief Fund Application and Attestation Portal by November 6, 2020 at 11:59 pm ET.

TESTING

- CMS regulation requires COVID-19 test results to be available within 48 hours. This has been a survey issue.
- GNYHCFA has updated a sample COVID-19 Testing P/P to include recent updates from the NYSDOH (see website).
- For facilities without access to Point of Care (POC) Antigen testing capabilities, review with contracted laboratory.
- For facilities with access to POC antigen testing capabilities (report results to ECLRS and NHSN).
- Refer to NYSDOH Testing Algorithm.

*ECLRS: Electronic Clinical Laboratory Reporting System *NHSN: National Healthcare Safety Network

COVID-19 VACCINE DISTRIBUTION PROGRAM

- Facilities in NYC: enroll in the federal program via NHSN (deadline 11/6/2020)
- Facilities outside of NYC: option to enroll in both NYS via HCS (deadline 11/3/2020) and Federal program via NHSN (deadline 11/6/2020).
- Two vaccines pending approval under Emergency Use Authorization (EUA). Both vaccines have specific frozen shipping concerns that will need planning for distribution.
 - 1. Pfizer mRNA Vaccine
 - 2. Moderna mRNA Vaccine

GNYHCFA will keep facilities updated with vaccination planning information from Federal and State programs.

PERSONAL PROTECTIVE EQUIPMENT

- PPEs: includes isolation gown, mask (procedure, N95), eye protection (goggles or face shields), and gloves
- Use for all residents on 14-day observation stay
- Use for individuals who are suspected and/or confirmed to have COVID-19 infections
- Recommendation by epidemiology to use full PPEs (gown, N95 or higher-level respirator, eye protection and gloves) when responding to CPR Code situations
- Eye Protection
 - In neighborhoods where there is moderate to substantial community transmission of SARS-CoV-2 virus, universal eye protection (e.g. goggles or face shields), in addition to face masks, is *strongly* recommended to prevent the spread of COVID-19 infection.
 - Eye protection should also be used when performing aerosol generating procedures (AGPs).
 - Sample P/P on GNYHCFA website.

<u>N95 Respirators</u>

- Recommended for use with individuals who are suspected and/or confirmed to have COVID-19 infections.
- Recommended for use during aerosol generating procedures.
- <u>Strong</u> recommendation for respiratory protection program to properly fit-test users for use of N95 respirators.

COHORTING STAFF

- As much as possible, cohort and provide consistent staffing assignments
- Do not limit only to nursing; extend to rehab, EVS, and consultants as well
 - Example: Specific therapists to work only on observation units
 - Example: Dedicated housekeeper to work on each area/wing/unit
- The idea is to prevent as much movement of staff as possible to minimize the risks for potential spread of COVID-19 infection.

INFECTION CONTROL REMINDERS

- Always remind staff to wear procedure masks, except when eating or drinking.
- Remind staff to maintain social distancing to include when in locker and break rooms.
- Remind staff to stay home when sick.
- Encourage residents to wears masks as tolerated.
- Ensure appropriate social distancing of residents in common areas and keep group activities to 10 residents.
- o Limit movement of residents between dedicated areas/wings/units.
- Ensure frequent and competent Environmental cleaning and disinfection. <u>EPA expects</u> all products on List N to kill the coronavirus SARS-CoV-2 (COVID-19) when used according to the label directions.
- To find a product, locate the EPA Reg. No. on the product label, then enter the first two sets of numbers into <u>the tool</u>. For example, if EPA Reg. No. 12345-12 is on List N, you can buy EPA Reg. No. 12345-12-2567 and know you are getting an equivalent product. These products are for use on surfaces, not humans.
- Conduct Infection Control Rounds to observe staff with hand hygiene, proper use of PPE, cleaning/disinfection of surfaces and to connect with Direct Care staff on any issues/needs.

HCW FURLOUGH

• Nursing home employees who test positive for COVID-19, but remain asymptomatic, are not eligible to return to work for 14 days from first positive test date in any situation. Symptomatic nursing home employees may not return to work until 14 days after the onset of symptoms, provided at least 3 days (72 hours) have passed since resolution of fever without the use of fever-reducing medications and respiratory symptoms are improving. All HCWs must have a negative COVID-19 test prior to returning to work.

RESOURCES:

- CDC (7/15/2020). Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic. Retrieved from <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-</u> recommendations.html
- CDC (3/27/2020). Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Facepiece Respirators in Healthcare Settings. Retrieved from https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html
- NYSDOH (10/19/2020). Interim Recommendations for Use of SARS-CoV-2 Molecular Tests During COVID-19 Public Health Emergency. Retrieved from <u>https://commerce.health.state.ny.us/hpn/ctrldocs/alrtview/postings/Abbott_ID_Now_Assay_1603381342055_0.pdf</u>

https://www.mcknights.com/wp-content/uploads/sites/5/2020/10/FAQ-Pharmacy-Partnership-for-LTC-Program_Revised_10232020-rev.pdf