GREATER NEW YORK HEALTH CARE FACILITIES ASSOCIATION

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POLICY: The facility will test all staff and residents for COVID-19 in accordance with both state and federal regulations and as indicated to prevent the spread of infection and to ensure appropriate clinical treatment and management (here I'm thinking cohorting and TBPs). The facility will utilize both point of care (POC) and polymerase chain reaction (PCR) testing to promote expedited results as needed. Testing requirements will be adjusted as per State and Federal regulations based on community transmission and potential outbreaks.

An outbreak is defined as a new COVID-19 infection in a staff member or any **nursing home onset** COVID-19 infection in a resident.

Centers for Disease Control and Prevention (CDC) defines a Nursing home-onset of SARS-CoV-2 infection specifically as an infection that underlined originated in the nursing home. It does not refer to the following:

- Residents who were known to have COVID-19 on admission to the facility and were placed into appropriate Transmission-Based Precautions to prevent transmission to others in the facility
- Residents who were placed on Transmission-Based Precautions (TBPs) on admission and developed SARS-CoV-2 infection within 14 days after admission.

In addition, the Centers for Medicare and Medicaid Services (CMS) and CDC recommend testing practices should aim for rapid turnaround times (24-48 hours) in order to facilitate effective interventions. If the 48-hour turn-around time cannot be met due to community testing supply shortages, limited access or inability of laboratories to process tests within 48 hours, the facility will document all efforts to obtain quick turnaround test results with the identified laboratory or laboratories and contact with the local and state health departments.

PROCEDURE:
1) The facility will contract with a certified lab to provide testing as available and in accordance with New York State Department of Health (NYSDOH) and Food and Drug Administration (FDA)-approved testing to provide test results for all tests in a timely manner.
2) At present, the facility will utilize POC testing for these indications: (**FACILITY INSERT: how they use point of care testing: routine, outbreaks, residents, staff and/or visitors *)**
3) For any symptomatic residents who have a negative antigen test, a PCR test as well as testing for other respiratory infections, including influenza, will be done. The resident will be placed on transmission-based precautions pending test results. If negative via PCR testing, isolation precautions can be discontinued.
4) At present, the facility will utilize PCR testing with contracted lab(s) for testing in accordance with CDC recommendations for follow up PCR test as needed to ensure appropriate diagnosis, treatment and cohorting (SEE attached NYSDOH algorithm).
5) At present, under Executive order 202.60 staff testing is required weekly for all staff, including Agency staff and consultants.

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6) Any asymptomatic staff member with a positive POC Antigen test will be excluded from work pending a follow up PCR test.
    - If staff member had previously tested positive, and most recent POC positive test is within 90-days of the first positive, 14-day furlough not required; requires confirmatory negative test by PCR to return to work.
    - If staff member had previously tested positive, and most recent POC positive test is >90 days of first positive, 14-day furlough is required.
7) In accordance with CMS testing requirements (see table below) the facility will test all residents and staff in the event of a new positive COVID-19 infection in the facility. All staff and residents that are negative will be tested every 3-7days until there are no new cases identified for 14 days since the first positive result.
    - Weekly staff testing mandated by NYSDOH satisfies this requirement

Testing Trigger	Staff	Residents
Symptomatic individual identified	Staff with signs and symptoms must be tested	Residents with signs and symptoms must be tested
Outbreak (Any new cases that arise in facility)	Testing all staff that previously tested negative until no new cases are identified*	Test all residents that previously tested negative until no new cases are identified*
Routine testing	According to Table 2 below	Not recommended, unless the resident leaves the facility routinely.

8) Residents and Resident Representatives can exercise their right to refuse testing in accordance with 42CFR&483.10(c)(6). Staff will discuss the importance of testing and document any refusals. Any resident refusing testing will be placed on Transmission based Precautions (TBPs) until the criteria for discontinuing TBPs (symptom-based strategy) have been met.
9) The Facility will ensure that testing, not provided by the facility, is reasonably accessible for its personnel. A list of easily accessible testing sites will be made available to staff upon request. Personnel who opt to get tested at an outside facility are required to submit proof of test.

    - Any offsite testing must be submitted by staff on the day the test was completed, and results of the test must be submitted by 4:00pm of the day results received.
    - Facility will offer testing to their personnel through the contracted lab.
    - Staff may utilize a local drive-through or walk-in testing site.
    - Facility shall accept documentation of testing conducted by an individual's healthcare provider.

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- Staff with previous positive COVID-19 within the previous 90 days and were furloughed for 14 days do not require an additional 14-day furlough but do require a negative COVID test via PCR to return to work as per NYS.

- All employees, contract staff, medical staff, operators, and administrators that refuse testing shall not be permitted to enter or work at the facility until such test is performed. This list shall be maintained at the security desk. As per the Governor's Executive order, A*ny personnel of a nursing home who refuses to be tested for COVID-19 shall be considered to have outdated or incomplete health assessments and shall therefore be prohibited from providing services to such nursing home until such testing is performed.*

NYS Emergency Testing Regulations:

Section 405.11 of 10 NYCRR is amended by adding a new subdivision (h) to read as follows:

415.33 COVID-19 and Influenza Confirmatory Testing

(1) Any resident who is known to have been exposed to COVID-19 or influenza or has symptoms consistent with COVID-19 or influenza shall be tested for both such diseases.

(2) Whenever a person expires while in a nursing home, where in the professional judgment of the nursing home clinician there is a clinical suspicion that COVID-19 or influenza was a cause of death, but no such tests were performed in the 14 days before death, the nursing home shall administer both a COVID-19 and influenza test within 48 hours after death, in accordance with guidance published by the Department. Such tests shall be performed using rapid testing methodologies to the extent available. The facility shall report the death to the Department immediately after and only upon receipt of both such test results through the Health Emergency Response Data System (HERDS). Notwithstanding the foregoing, no test shall be administered if the next of kin objects to such testing. Should the nursing home lack the ability to perform such testing expeditiously, the nursing home should request assistance from the State Department of Health.

Documentation of Testing:

The facility will document all COVID-19 testing for staff and residents.

A. A spreadsheet will be utilized to track the testing of all personnel, including all employees, contract staff, medical staff, operators, and administrators, for COVID-19.

B. For any outbreak, the facility IP/Designee will document the date case was identified, the dates and results of all testing.

C. Point of Care Antigen testing performed at the facility will be reported to NYS ECLRS (Electronic Clinical Laboratory Reporting System) and NHSN (National Healthcare Safety Network).

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D. All staff/residents testing positive shall be documented on the log and the number will be reported on all required submissions to NYSDOH HERDS daily and NHSN at least weekly.

E. Any personnel who are ordered or directed to remain isolated because of a positive test result are entitled to certain benefits, including paid sick leave, pursuant to Chapter 25 of the laws of 2020.

F. All staff will receive Inservice Education on the NH COVID-19 Testing policies/procedures, including all updates in accordance with NYSDOH and Federal guidance.

*Note: As guidance is updated from Federal and State entities these items/timeframes may change.
REVISED 10 28 20

RESOURCES:

CDC (10/16/2020). Testing Guidelines for Nursing Homes: Interim SARS-CoV-2 Testinng Guidelines for Nursinng Home Residents and Healthcare Personnel. Retrieved from https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html

CMS (8/26/2020). Ref: QSO-20-38-NH. Interim Final Rule, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long Term Care Facility Testing Requirements and Revised COVID-19 Focused Survey Tool. Retrieved from https://www.cms.gov/files/document/qso-20-38-nh.pdf