DOH Guidance and Reopening ADHC

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Overview

- Webinar is scheduled to last two hours; we will have time for Q&A. The webinar is being recorded and a handout will be posted to our website following the presentation, www.adhcc.org.
- Use the chat feature at the bottom of your screen to ask questions.
- Some questions may not have a good answer. This is new for everyone.
- Thank you to Board of Directors for contributing to this presentation.
- Yes, this is going to be hard. Yes, you will need to do things differently Nursing home Administrators: staff may need your support.

Let's take a minute to pat ourselves on the back

- Over **50** media hits since Oct. 2020 – WOW!
  - Thank you to all of the programs that submitted storymining forms and coordinated with registrants to get them on air. Check out the stories on [ADHCC Facebook](#) page and post to your social media pages
- Terrific advocacy from families and ADHC staff
- Webinars and Tool Kits in 2020 helped members build successful telehealth and home delivered meal programs

DOH Guidance to Reopen ADHC Issued March 25, 2021

Phase #1 Off-site programs ONLY.

- Permitted to open beginning April 1. **FEW**, if any, programs will be able to meet this date
- NY Forward Safety Plan must be emailed to covidnursinghomeinfo@health.ny.gov prior to opening
- NY Forward Safety Plan template. "Other" will be where you include ADHC –specific P&Ps
- Will DOH *approve* the Safety Plan first?
- Weekly COVID testing of off-campus staff will not be required

Phase #2 Co-located with the nursing home (inside or on campus)

- Permitted to open beginning April 15 but only if **ALL** of these conditions are met:
  - NY Forward Safety Plan must be emailed to covidnursinghomeinfo@health.ny.gov prior to opening
  - No active COVID cases (both staff and residents) associated with the co-located nursing home. An "active COVID case" is a positive staff or resident within 14 days. Example: 12 days ago, a nursing home staff person tested positive for COVID and is recovering at home. This is considered an "active COVID case" until day 14
  - Nursing home meets the eligibility criteria for visitation as of April 15th (or the initial day you open)

What is the **eligibility** criteria for nursing home visitation?

- DOH updated the guidance for nursing home visitation on March 25, 2021 to align with CMS guidance
- Outdoor visitation is allowed regardless of outbreak status or county positivity rates.
- Indoor visitation allowed except under limited circumstances.
- Updated DOH guidance greatly expands visitation, so the real issue here is "no active COVID cases" (14 day window or look back) from the day you initially open

Initial Questions and Concerns

- What if my SNF has an outbreak (one case resident or staff) after my program reopens? Does that mean I need to close?
- What if my SNF continues to have positive cases? At this rate, I'll never reopen.
- It's going to take me a few weeks to get the NY Forward Plan together and P&Ps together. Do I have to reopen in April?
- My telehealth program has been successful. Can I continue to do telehealth and in-person services simultaneously? Can I just do telehealth for the remainder of the year?

NY Forward Safety Plan Must Contain the Following P&Ps

1. All program activities will adhere to the 6 ft social distancing requirements, unless otherwise required for safety or core function (i.e. nursing or PT)

▫ Tables and chairs will be arranged for allow for seating 6 ft. apart for meals and group activities

▫ Registrants will be socially distanced 6 ft apart and wear a face mask or face covering as medically tolerated

2. <u>Amend</u> dietary P&P to include: ADHC registrants will not engage in communal dining with nursing home residents. *Updated 3/25/21*

3. <u>Amend</u> activity P&P to include: ADHC registrants will not engage in activities with nursing home residents. *Updated 3/25/21*

4. <u>Amend</u> visitor P&P to include: Due to COVID-19 and per *Health Advisory: Reopening Guidance for Medical Model ADHC Programs*, dated March 25, 2021, page 2, bullet number 5, ADHC program will not allow visitors, including volunteers, until further notice. *Updated 3/25/21*

P&Ps needed for Reopening: Infection Control, Including Screening of Registrants, Staff and Visitors.

ADHC providers will follow program-specific infection control polices and follow Executive Order and DOH guidance on staff testing, registrant screening, and visitor policy until further notice.

- **Note:** ADHC programs located on the campus of SNF, considered SNF staff for purposes of SNF staff testing. <u>Off-site</u> staff <u>are not required</u> to get tested twice/week
- *TIP: don't reinvent the wheel. Amend your SNF policies to be ADHC specific! DOH is looking for ADHC specific*
- *TIP: Set up a meeting with your infection control expert and ADHC staff to review guidance and discuss what DOH will look for next time they are in the building.*

To open, each ADHC program will ensure:

- Proper supply of PPE for staff and registrants onsite
- Program follows DOH and CDC guidance on cleaning and disinfection of all hard surfaces
- Returning registrants and new admits must have proof of negative COVID test within 3 days of returning to program. PCR/antigen tests OK. KEEP on file
- HOWEVER: registrants who tested positive and recovered with the three months before first session, are not required to test
- Prior to initiation of services, registrant must be assisted in obtaining vaccine and record of vaccination must be kept in chart. If refuse, document in chart

- Each registrant and staff person screened upon arrival to program in area separate from program space
- Staff follow DOH and CMS guidance on proper use of PPE
- Registrants free from communicable disease
- All staff wear a mask during operating hours
- Limit shared staff with SNF. Under no circumstances can ADHC utilize staff who care for COVID residents
- Disinfect between sessions
- Share infection protocols with registrants and caregivers
- Staff trained on infection control
- Review and update (if necessary) annual quality improvement plans

What if there is suspected COVID case? What if there is a positive COVID case?

- ADHC program reports suspected or positive case to local health department (LHD)
- Program may suspend operations if staff/registrant positive
- Must designate separate space to serve as a holding area for staff or registrants presenting with symptoms
- Policy to communicate with caregivers confirmed COVID case
- ADHC staff follow the same "return to work" guidance as SNF related to confirmed or suspected diagnosis or exposure

Transportation

- Mask for every person on the vehicle and seated 6 ft apart
- To the extent practicable, transport should be consistent with OPWDD guidance:
  - Individuals who reside together may travel together without vehicle capacity reduction
- Vendors must adhere to hygiene and sanitation requirements and maintain cleaning logs
- ADHC will keep on file vendor COVID NY Forward Safety Plan
- Program will investigate alternative sources of transportation:
  - Caregiver, STAR Bus/Access-A-Ride (para-transit), public transportation.
  - Method 2 is an option

Need to think differently in order to make this work

Regulations are NOT going to change (there are no waivers for ADHC)

- Need to find a way to get the UAS-NY, physician orders for treatment, care plan completed within a reasonable amount of time
  - Write your plan to accomplish this in your NY Forward Safety Plan and follow it
- Consider 5-hour Rule and review memo
  - *425.1 (e) Visit is defined as an individual episode of attendance by a registrant at an ADHC program during which the registrant receives ADHC services in accordance with his/her care plan. A registrant's individual visit may be fewer than five hours or longer than five hours depending on the assessed needs of the registrant.*
  - *425.1 (d) Each approved ADHC session must operate for a minimum of five hours duration, not including time spent in transportation ….*

- Set realistic expectations
- Consider opening a second session or weekend.
- Consider extending your operating hours from 8 am-1pm to 8 am-5pm in order to serve full capacity…in other words, not everyone has to arrive and depart at the same time
- How can your space be better utilized?
- Consider changing to Method 2
- Consider telehealth as a new business or offer to registrants who are reluctant to return
- Group your registrants in cohorts: i.e. Monday, Wednesday, Friday cohort

Wrap-up

- Use the checklist provided. One person can't do it all, so assign staff responsibilities.
- What are the expectations from your Admin? Some programs planning to stay closed in 2021.
- Programs will need to develop an emergency plan for if/when programs shut down again.
- Q&As
- Ahill@leadingageny.org or covidnursinghomeinfo@health.ny.gov
- medtrans@health.ny.gov