

State-Supported Staff Retesting in Nursing Homes

Congregate Care Unified Response Team

August 3rd, 2020

The Webinar Will Begin at 10:30am

Responsible RestartOhio



Introduction: Nursing Home Testing Teams

Zone 1 Leadership

- Alice Kim, MD, Center for Connected Care, Cleveland Clinic
- Sean Cannone, DO, Medical Director for Population health, Cleveland Clinic

Zone 2 Leadership

- Kelsey Blackburn, Regional Care Coordinator, Regions 7 & 8
- Jodi Keller, Regional Care Coordinator, Region 4
- John Weigand, MD, Central Ohio Geriatrics & National Church Residences

Zone 3 Leadership

- Richard Shonk, MD, Chief Medical Officer, The Health Collaborative
- Dani Zander, MD, Chair of Pathology, UC Health
- Ben Goodstein, VP and Chief Ambulatory Officer, Dayton Children's Hospital

State & Ohio National Guard Team

- Wally Burden, Ohio Department of Health
- Quanta Brown, Director, Ohio Department of Health Lab
- Julie Evers, Ohio Department of Medicaid – **ZONE 3 TEAM LEADER**
- James Hodge, Ohio Department of Health – **ZONE 1 TEAM LEADER**
- Matthew Molinski & Albito Lopez, Lieutenant Colonels, Ohio National Guard
- Rebecca Sandholdt, Ohio Department of Health – **ZONE 2 TEAM LEADER**
- Marisa Weisel, Ohio Department of Medicaid

Director's Order for Testing Staff and Residents of Nursing Homes

- This action is being taken to protect residents and staff.
- The Order requires nursing homes to have employees and residents to be tested in accordance with ODH Guidelines.
- Nursing homes may be required to provide additional information.
- ODH has provided guidance to mitigate facility staffing shortages in the event staff who are positive are unable to work.
- This order takes into consideration and is intended to be consistent with resident rights.

State agency staff, the Ohio National Guard, and Hospital Zone Leadership are supporting nursing homes in meeting the requirements of the Order.

Director's Order Applicability

- Each nursing home licensed by the ODH or certified by the U.S. Department of Health and Human Services, the Centers for Medicare and Medicaid Services (CMS), or the Ohio Department of Medicaid (ODM) shall cooperate with the COVID-19 testing for staff and residents as required by ODH to prevent the spread of COVID-19.

Scope of Staff Testing is Based on Infection Control

- All staff must be tested for COVID-19 per the Order and Guidelines.
- NFs must follow the infection control requirements set forth in regulations. These include developing a system of identifying and controlling the spread of communicable diseases among:
 - Staff
 - Contract and agency staff (including hospice staff, attending physicians, etc.)
 - Volunteers
 - Private caregivers
 - Others who enter the building
- Per the Director's Fourth Amended Order to Limit Access to Ohio's Nursing Homes and Similar Facilities, with Exceptions dated July 2, 2020:
 - Individuals participating in end-of-life situations are permitted in-person visitation and should not be required to be tested first.
 - End of life situations are defined in the referenced Director's Order.

Closing Out Baseline Testing of Nursing Home Staff

- Facilities that **opted-out of the state supported/ONG testing**
 - **July 17, 2020:** Deadline to have staff tested (specimen collection date)
 - **July 31, 2020:** Deadline to submit signed letter on the facility's letterhead, including a summary of results, to verifying compliance with the Order. Submit to CCURT@odh.ohio.gov
- Facilities that **participated in state / ONG testing** must complete remaining staff testing (specimen collection date) within three weeks from the date of the ONG visit.
 - Once results are received: submit signed letter on the facility's letterhead, including a summary of results, to verifying compliance with the Order. Submit to CCURT@odh.ohio.gov

Meeting Requirements of the Order

- Facilities can meet requirements of the order to test by:
 - Participating in state-supported testing using the process described in this webinar, or
 - Conducting testing without state support
- Facilities should maintain a complete ongoing list of individual-level **resident and staff** COVID-19 test results for compliance purposes.
 - Upon ODH request, a compiled list of staff and resident individual-level data, de-identified, must be made immediately available spreadsheet format.

Beginning Retesting of Nursing Home Staff

- Effective **August 3, 2020** facilities will be required to have staff retested at least once every other week.
- **Facilities testing without state support** should start testing every other week beginning between August 1-14.
- **Facilities participating in the state-supported process** will also start testing every other week in August. Due to roll out of schedule, some facilities may begin after August 14.

Verification of Compliance with the Order

- Testing conducted **with state support** will be deemed to meet the requirements of the Order.
- Testing conducted **without state support** will meet the requirements if both of the following conditions are met:
 - The facility begins testing staff at least once every other week in August. First test date should be between August 1 and August 14.
 - Tests performed are diagnostic:
 - [RT-PCR](#) testing and
 - Antigen testing using FDA EUA [Rapid POC devices](#),.
- **All facilities must verify their ongoing compliance** with the Order by submitting summary-level testing results for all staff via an online survey.
 - This survey will take the place of the verification letter process that was used for baseline testing.

Overview of Nursing Home Staff Retesting with State Support

The state team and the Ohio National Guard are:

- Identifying the order and schedule for specimen collection/swabbing and supporting transportation of samples to a lab
- Communicating with facilities, the labs, local health departments (LHDs); hospital zone and local hospital partners, and regional health care coordinators.
- Providing training materials for specimen collection/swabbing.
- Assigning facilities to labs and providing and/or arranging training on the labs' processes.
- Providing technical assistance, support, and connection to resources for facilities as they obtain results from resident testing.



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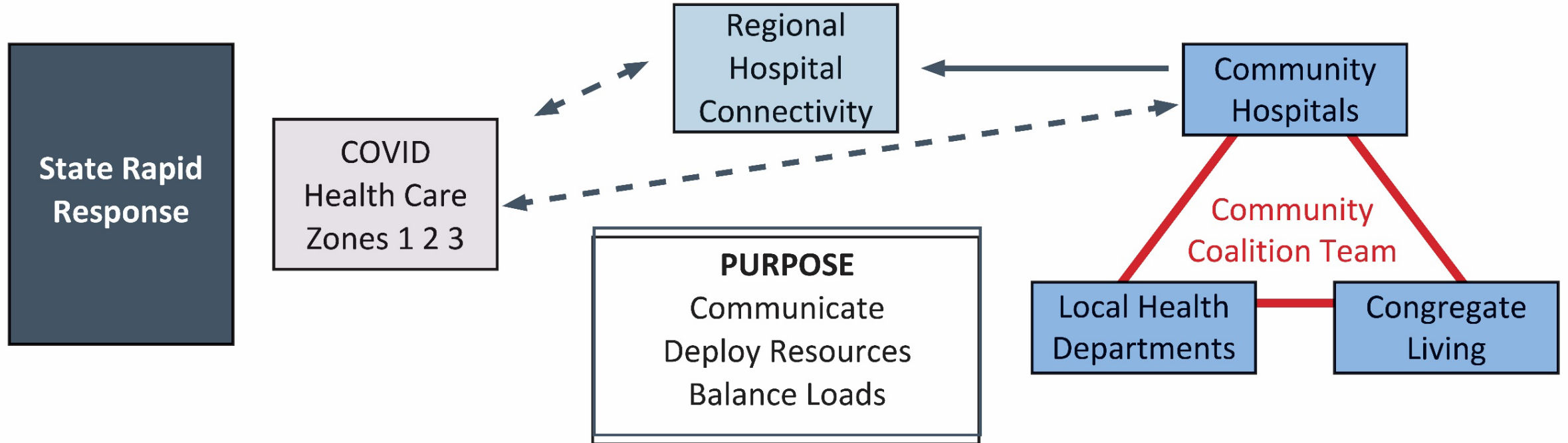
Ohio COVID-19 Region Map



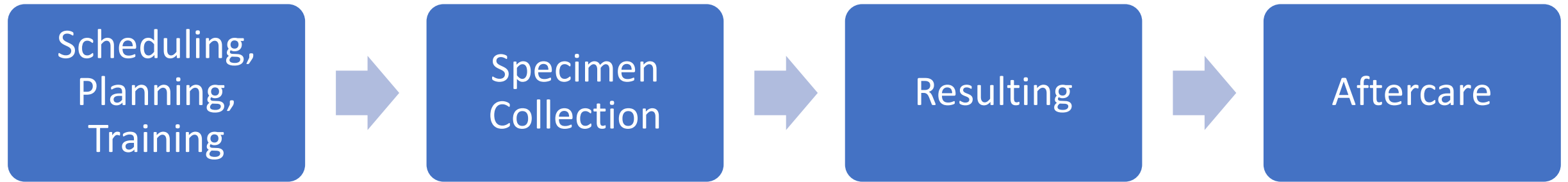
Zone 1 = Regions 1, 2, 5
Zone 2 = Regions 4, 7, 8
Zone 3 = Regions 3, 6

[Downloadable Map](#)

Local-Regional-Zone-State Connectivity



Staff Retesting Process Overview



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#IN THIS TOGETHER 
Ohio

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State-Supported Staff Retesting Process

- State team will set schedule and assign labs
- Facilities will perform specimen collection/swabbing of all staff within nursing homes.
 - Facilities that have an attached RCF that share staff with the RCF should include those RCF staff in the testing process.
- The facility must educate the staff on the testing process, when they will be tested, and the importance of testing.
- Medical staff must wear appropriate PPE to perform specimen collection.
- **Assigned labs for staff retesting may differ from the lab a facility used for baseline staff testing.**

Scheduling, Planning,
Training



Specimen Collection



Resulting



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Scheduling and Planning Overview

- All facilities completed a [new survey](#) (new link!) by **July 28, 2020** to inform the scheduling process by:
 - Providing the number of staff to be tested, or
 - An accurate number helps us plan to allocate our testing resources. Please do not overestimate.
 - Opting out of the state-supported process.
- CCURT is providing ordered lists of facilities for testing.
 - Dates will identify the specimen collection/swabbing date and the specimen pick-up date.
 - Dates will be released BY WEEK. If you opted in and your facility wasn't on the first list, it will be on a future list.
 - If you see the list and something looks wrong, please email CCURT@odh.ohio.gov.

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Acquiring Test Kits

- Quest: 1x kits will be shipped directly to your facility for each round of testing.
 - Note: this is subject to change
- All other labs: 3x kits will be shipped directly to your facility for 3 rounds of testing
 - Please note: you may receive nasopharyngeal (NP) swabs. These swabs can be used to collect an anterior nares (AN) specimen.
- Follow instructions for test kit storage (differs by type of kit)
 - Some may need to be refrigerated

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Ordering COVID-19 Tests

- COVID-19 tests for screening and diagnostic purposes must be ordered by a physician or other appropriate medical professional acting under their scope of practice.
- Physicians and other clinicians who order tests for residents and employees / staff will act within an appropriate standard of care.
- Testing can be ordered by the medical director at the facility, an advance practice nurse, or another appropriate clinician from a testing team, a hospital partnership, or other arrangement.
- The facility's medical director has responsibility for infection control and health surveillance, including for facility staff. The medical director can order testing for all staff in accordance with the Public Health Order and Ohio State Medical Board regulations. O.A.C. 3701-17-13(A)(1)(b)(5).
- See the [CDC's guidelines for ICD-10 coding](#) for information regarding diagnosis codes to include on COVID-19 test orders.

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Lab Requisition Processes

- Process & forms based on where your samples will be sent
- **Order forms must be completed electronically – ALL fields must be completed, including insurance**
 - **Must create new form for each round of tests, each person**
 - **Handwritten forms will no longer be accepted**
- Maintain records of medical orders
- Use staff HOME address, not the address of the NF. This is important for LHD follow up and contact tracing.

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Onboarding with Ohio Labs

- For facilities assigned to:
 - Ohio Department of Health Laboratory,
 - Ohio State University
 - Dayton Children's, or
 - University Hospitals
- Need to submit specimens with a form created through ODH's authenticated portal for specimen submission.
- Please contact odhlabportal@odh.ohio.gov if you have not already been onboarded into this authenticated portal.
- Instructions for portal use will be provided during the onboarding process.



Complete fields and click **GENERATE** at the bottom of the page to create a PDF to submit with specimen.

SARS-CoV-2 Specimen Submission Form

Approval required prior to submission to ODHL; Contact 614-995-5599
Fields marked with an asterisk (*) must be completed.

Patient Information

| | | | | |
|--------------|--|----------------------------|----------------------------|--|
| Patient Name | First* <input type="text"/> | MI <input type="text"/> | Last* <input type="text"/> | Date of Birth* <input type="text"/> |
| Address | <input type="text"/> | | | County <input type="text"/> |
| City | <input type="text"/> | State <input type="text"/> | Zip <input type="text"/> | Sex* <input type="checkbox"/> Female <input type="checkbox"/> Male |
| Race* | <input type="checkbox"/> White <input type="checkbox"/> Black/African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native | | | Ethnicity* <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic |
| | Other <input type="text"/> | | | Chart or Patient ID# <input type="text"/> |

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Onboarding with Quest

- Need to set up account number using ordering clinician NPI
- Will set up self-service access to Quest portal
- Quest is providing webinars at least weekly for Ohio Facilities
- Please contact CCURT@odh.ohio.gov if you are assigned to Quest and don't yet have an account.

New Lab Order

P Test Patient
111 North Rd, Apt 2, Norristown, PA 19401

Patient ID: 2233445 | DOB: 01/01/2010 | Sex: M | 1 Order Cart

Lab: TMP - Quest Diagnostics - North Florida | Client: TMP90210-Tampa 90210 (TMP90210)

Recent-Practice: BRC Advantage(R), Rearrangements 91600 | CBC (includes Differential and Platelets) 8399 | Dog Dander (e5) IgE 2605

Recent-Practice: Hairy leukoplakia K132 | Lobular carcinoma in situ of right breast D0501 | Neoplasm of uncertain behavior of pituitary gland D442

Tinea nigra 8361

SAVE AS DRAFT | SUBMIT ORDER

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Training Overview

- CCURT training materials for personnel who will conduct specimen collection
 - [Clinical checklist](#)
 - [Training video](#)
- Additional training and technical assistance regarding will be available through CCURT/Zone clinical leads regarding:
 - Infection control
 - Caring for residents with positive results

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Specimen Collection



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Specimen Collection/Swabbing Overview

- Use test kits supplied by Quest or state.
- Prior to specimen collection/swabbing, ensure all lab requisition forms are complete.
 - Label vials with 2 forms of ID – ex) name and DOB
 - Ensure information on lab form matches what you put on the vial
- Collect anterior nares specimen
 - You may need to use an NP swab to conduct this procedure
- Store specimens upright and according to instructions until pick-up
 - Quest – can stay at room temp
 - State labs – need to refrigerate

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Specimen Collection



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Specimen Collection

- Facility staff must be trained to swab/collect specimens.
- Specimen collection/swabbing should be completed in pairs.
- Consider using [clinical check list for Specimen Collection COVID-19 Tests](#)
- Facility will have 24-hours to complete all collections and prepare for pick-up.

Coronavirus Disease 2019

Ohio | Department of Health

Clinical Checklist for Specimen Collection of COVID-19 Test

The following checklist was developed to assist appropriate nursing home clinical staff in collecting specimens for a COVID-19 test. All nursing home testing will be utilizing anterior nares testing, a non-invasive form of COVID-19 testing. Testing staff and residents in Ohio's nursing facilities is one of many strategies being deployed in congregate care settings to help prevent the spread of COVID-19 and save lives.

A companion instructional video on this process is [available online](#) as an additional resource to prepare and educate staff on specimen collection/swabbing.

For more information on the Congregate Care Unified Response Team (CCURT) efforts to test all staff and residents in Ohio's nursing homes, please visit the [Ohio's Testing in Nursing Homes Webpage](#). Additional questions about COVID-19 testing in nursing homes can be sent to CCURT@odh.ohio.gov.

| STEP | PROCESS CHECK LIST |
|----------------------------------|---|
| Prepare your patients(s) | <ul style="list-style-type: none"><input type="checkbox"/> Briefly describe the test, the materials, process, and timing for results<ul style="list-style-type: none"><input type="checkbox"/> Inform the patient that the anterior nares test is not painful and can be accomplished in under 30 seconds.<input type="checkbox"/> Have the patient blow their nose, if possible.<ul style="list-style-type: none"><input type="checkbox"/> Remind the patient that he/she can stop the collection at any time.<input type="checkbox"/> Answer the patient's questions, hear concerns, and consider any special conditions or considerations. |
| Preparing the collection station | <ul style="list-style-type: none"><input type="checkbox"/> Confirm list of patients to be tested.<input type="checkbox"/> Verify lab requisition form has been completed electronically.<input type="checkbox"/> Preprint labels for each patient to be applied to the specimen vial, or gather supplies to write each patient's name, patient ID, and date of birth on the specimen vial.<input type="checkbox"/> Gather PPE:<ul style="list-style-type: none"><input type="checkbox"/> Face mask, ideally a N95 mask, if available<input type="checkbox"/> Eye protection |

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Specimen Storage & Preparation for Transport

Coronavirus Disease 2019

Ohio Department of Health

Checklist for COVID-19 Test Specimen Storage & Transport

The following checklist was developed to assist nursing home staff after collecting COVID-19 test specimens in properly storing and transporting test kits to the lab. For collected specimens/swabs to be accurately processed at the nursing facility's assigned testing lab, the following check list must be followed to preserve the integrity of the specimens.

Testing staff and residents in Ohio's nursing facilities is one of many strategies being deployed in congregate care settings to help prevent the spread of COVID-19 and save lives.

For more information on the Congregate Care Unified Response Team (CCURT) efforts to test all staff and residents in Ohio's nursing homes, please visit the [Ohio's Testing in Nursing Homes Webpage](#). Additional questions about COVID-19 testing in nursing homes can be sent to CCURT@odh.ohio.gov.

| STEP | PROCESS CHECK LIST |
|--------------------------------|---|
| Specimen storage | <input type="checkbox"/> Verify each test kit contains: <ul style="list-style-type: none"> <input type="checkbox"/> Specimen <input type="checkbox"/> Label on the specimen, filled out completely and accurately <input type="checkbox"/> Lab requisition form affixed to the sample <input type="checkbox"/> Package and bundle completed test kits into a large clear bag, utilizing a zip tie to shut and close the bag. <input type="checkbox"/> Clearly label packed test kit bundle with: <ul style="list-style-type: none"> <input type="checkbox"/> Nursing facility name <input type="checkbox"/> Number of tests included <input type="checkbox"/> Store all collected specimens and test kits in a refrigerator until the identified pick up time. |
| Specimen pick-up and transport | <input type="checkbox"/> Inform the nursing facility staff responsible for answering the phone that the Ohio National Guard (ONG) will be picking up the specimens that day. <input type="checkbox"/> Prepare packed specimens for transport by 8:00 a.m. on the identified pick up date. |

- Follow the [Checklist for Storage & Transport](#)
- Ensure vials are stored upright and are closed tightly, otherwise they will leak
 - If they leak, discard and collect a new specimen
- Keep specimens in a biohazard bag.
 - Do not package paperwork into the biohazard bag with the specimen.
 - Do not put any ice, ice pack, cool pack, or water in the biohazard bag with the specimen.
- Package all specimens for facility together in large zip bag(s) with facility identification information on outside of bag

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Specimen Collection



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Specimen Pick-Up

Specimens will be picked up and delivered to the lab using one of three possible methods:

1. The ONG will pick up the specimens
 - This is the plan for all facilities for at least the first two rounds of staff retesting
2. A commercial courier will pick-up the specimens
3. The facility will contact a shipping company to schedule specimen pick-up and transport

For ONG pick-up:

- Prepare staff for ONG to arrive any time on pick-up date
- ONG will call prior to or at arrival
- Deliver specimens directly to ONG vehicle
- Ensure specimens are placed upright in cooler with ice packs

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Specimen Collection



Resulting



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Resulting Overview

- While awaiting results
 - Asymptomatic staff can continue to work.
 - Continue COVID-19 infection control precautions.
 - Wear appropriate PPE.
 - Continue daily temperature and symptoms checks, mask-wearing and hand washing
 - Continue monitoring
 - Residents – if they become symptomatic, they will need to be isolated. Work with Zone leads to identify if COHORT testing needs done.
 - Staff – if they become symptomatic, they will ideally isolate at home.
- Receiving lab results
 - Lab will send individual-level positive and negative resident results back to facility
 - This may be by individual fax or through an online portal
 - Lab will report to ODH

Scheduling and Planning



Specimen Collection



Resulting



Aftercare

Reacting to Staff Testing Results

- If staff are negative:
 - Continue COVID-19 infection control and PPE precautions.
 - Continue daily temperature and symptoms monitoring, face mask wearing and hand washing.
- If staff are positive, implement ODH Contingency and Crisis Facility Staffing Guidance *THIS DOCUMENT IS BEING UPDATED BASED ON NEW CDC GUIDANCE RE: DURATION OF ISOLATION AND PRECAUTIONS*
 - Follow [ODH's Guidance for Discontinuing Transmission-Based Precautions.](#)

| Covid-19 Test Status | | Staff Symptoms | | Staff Exposure (by Contact Tracing) | | Infection Control Guidance | | Return to Work (RTW) Guidance | | Subject to Staff Mitigation Tier |
|----------------------|---|----------------|---|-------------------------------------|---|---|--|---|--|----------------------------------|
| Test | | Symptoms | | Exposed | | | | | | |
| + | | + | | N/A | | Isolation* x 10 days (10/3/3 rule) | | After 10 days from date of first symptoms (10/3/3 rule) | | 3 |
| + | | | - | N/A | | Isolation* x 10 days from date + test collected | | After 10 days from date + test collected | | 3 |
| | - | + | | + | | Begin quarantine* x 14 days from date of last known exposure. Self-monitor for symptoms. Arrange for medical evaluation for potential alternate diagnosis/symptom management. Consider a repeat test in 5 days, particularly if symptoms persist or are not explained by another diagnosis. | | After 14 days of quarantine (if no repeat testing done): • If test negative, may RTW when symptoms resolved per HR policies (as for non-COVID conditions). • If test positive, RTW 10 days from date of first symptoms (10/3/3 rule). • Mask for 14 days from first symptoms (during breaks, etc. to protect other employees). | | 3 |
| | - | | + | | - | Quarantine-like monitoring* x 10 days from date of first symptom; Self-monitor Arrange for medical evaluation for potential alternate diagnosis/symptom management. Consider a repeat test in 5 days, particularly if symptoms persist or are not explained by another diagnosis. | | If repeat testing done: • If test negative, may RTW when symptoms resolved per HR policies (as for non-COVID conditions). • If test positive, RTW 10 days from date of first symptoms (10/3/3 rule). • Mask for 14 days from first symptoms (during breaks, etc. to protect other employees). | | 3 |
| | - | | | | + | Quarantine x 14 days, but may work if remains asymptomatic | | Follow policies for universal employee screening and mask use and diligent handwashing Mask for 14 days after exposure event (during breaks, etc. to protect other employees) | | 2 |
| | - | | | | - | No quarantine required | | Follow policies for universal employee screening and mask use and diligent handwashing | | 1 |

Note: Asymptomatic personnel may work while awaiting test results. Repeat testing assesses if first test was a false negative or done during incubation period. This guidance is relevant for all Health Care Personnel and potentially exposed staff and individuals not directly involved in patient care e.g. (clerical, food & laundry service) as described by [cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html).

Please note: Potential exposures can occur when personnel come within 6 feet of an infected person for at least 15 minutes or during performance of an aerosol-generating procedure or from direct contact with infectious secretions while not wearing recommended PPE.

THIS DOCUMENT IS BEING UPDATED BASED ON NEW CDC GUIDANCE RE: DURATION OF ISOLATION AND PRECAUTIONS

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Specimen Collection



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Staff Positives → Resident Testing & Results

- If facility becomes aware of positive staff results, perform strategic resident testing
 - Contact Zone clinical leads, LHD, local hospital partners for clinical guidance
 - Contact CCURT@odh.ohio.gov for technical assistance and support

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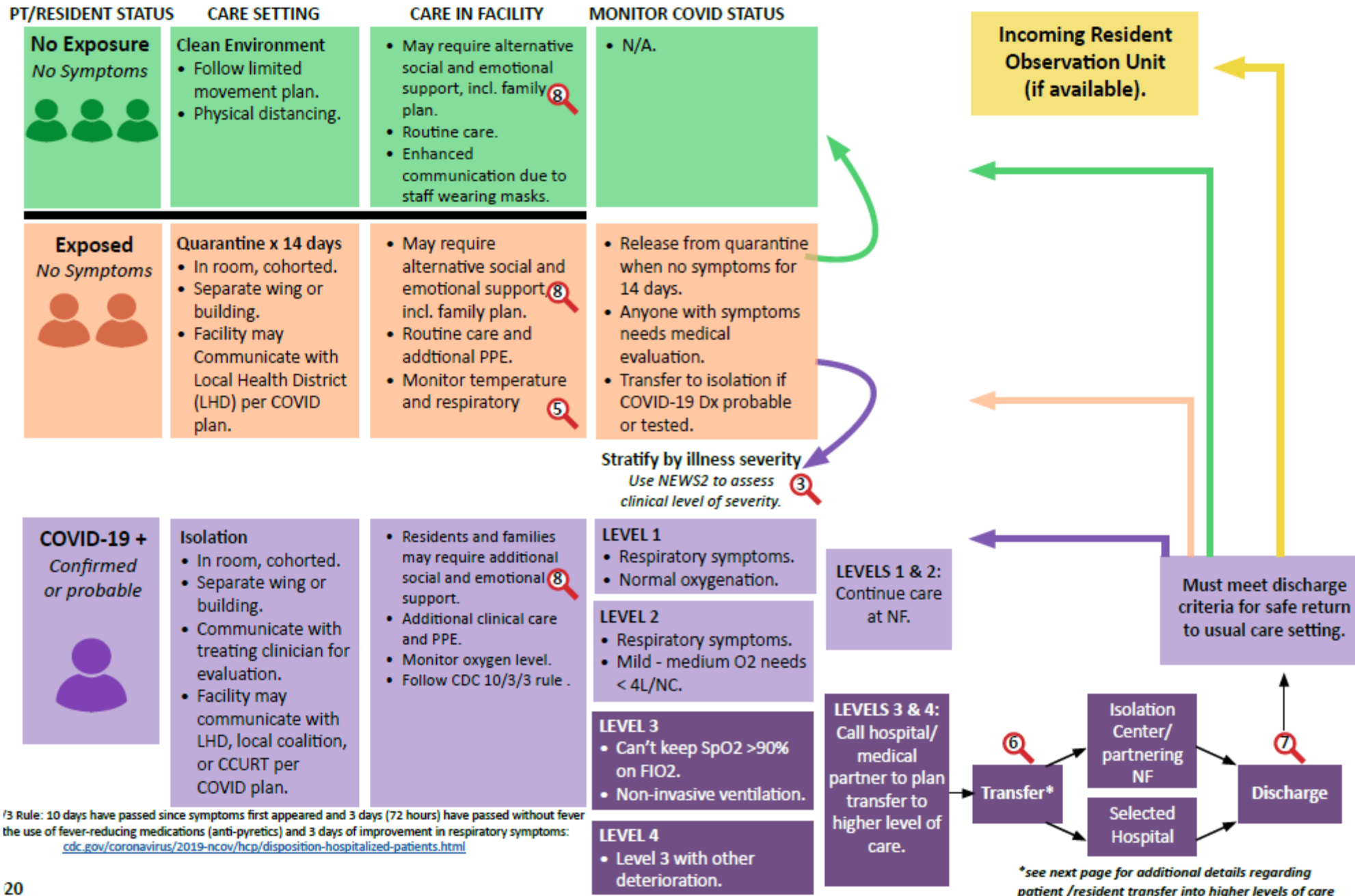


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Caring for Residents with Positive Results

- Detailed guidance regarding caring for individuals with COVID-19 within congregate care settings can be found in the [LTSS Toolkit](#). **THIS DOCUMENT IS BEING UPDATED BASED ON NEW CDC GUIDANCE**
- Facilities should have a plan in place for cohorting infected residents. (e.g., before they test they need to know how they will deal with test results).
 - Infected
 - Exposed/quarantined, and
 - Unexposed/unaffected residents.
- For those with COVID-19 infections:
 - Asymptomatic or mild symptoms = continue to receive care in place when clinically appropriate.
 - Follow ODH's [Criteria for COVID-19 Positive Skilled Nursing Facility Patient Transfer and Admission to Acute Hospital](#) if a higher level of care is needed.
 - If a hospital level of care is not required and the facility determines it cannot meet the resident's needs at the location, the facility may also consider transferring residents who need to be isolated to a Health Care Isolation Center (HCIC).
- If possible, staff should also be cohorted (i.e., staff only work with one of the 3 groups of residents).
 - If this is not possible, staff should perform work from unaffected to exposed/quarantined to infected groups of residents (least to most impacted by COVID-19).
- Follow [ODH's Guidance for Discontinuing Transmission-Based Precautions](#).

THE TOOLKIT WILL BE UPDATED W/NEW CDC GUIDANCE RE: DURATION OF ISOLATION AND PRECAUTIONS



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Bridge Team Resources

- CCURT [Bridge Team Guidance Document](#) – request assistance with:
 - Staffing shortages
 - Evacuation
 - Supplies, outside of a normal request to the Local Emergency Management Agency (EMA) when lack of a specific supply would endanger the safe operation of the home
- Tiers of staffing support:
 1. Resource listing, various types of expertise
 2. Pool of staff, includes some pre-vetting
 3. Enhanced staff availability for critical situations

Tiers 1 & 2 will be paid for by the NF, similar to normal staffing

Scheduling and Planning



Specimen Collection



Resulting



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Reporting Results

- All facilities will be required to report a summary of each round of testing results to the state through an online survey.
 - Required for both “opt-in” and “opt-out” facilities
 - No additional verification letter will be required

FAQs & Reminders

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FAQ

- **Testing and end of life care**

- Hospice providers and family members are permitted in a facility in end of life situations without a COVID-19 test. This is pursuant to the Director's [Fourth Amended Order to Limit Access to Ohio's Nursing Homes and Similar Facilities, with Exceptions](#) dated July 2, 2020.
- End of life situations are defined in the Director's Order.

- **Testing PRN staff**

- PRN staff do not need to be included in staff retesting if they are not scheduled to work, however once they are scheduled to work, they must have a test specimen collected/swabbed to begin working.
- PRN staff can begin work while awaiting results if they do not display symptoms.
- The facility must ensure PRN staff who begin to work prior to receiving negative test results are treated as if they have been exposed to COVID-19 and must properly wear face masks at all times, including during breaks, to avoid exposing other personnel.

- **Testing new hires**

- New employees should be tested before beginning work at the facility.
- New staff can begin work while awaiting results if they do not display symptoms.
- The facility must ensure new staff who begin to work prior to receiving negative test results are treated as if they have been exposed to COVID-19 and must properly wear face masks at all times, including during breaks, to avoid exposing other personnel.

FAQ

- **Testing of contract, agency staff**

- The Order only applies to nursing home employees.
- While not subject to the Order, CCURT strongly encourages nursing home non-employees (e.g. contract and agency staff, volunteers, and private caregivers.) who come and go from the facility to be tested every other week.
- As of the date of this document's publication, facilities are permitted to include these types of non-employees in their state-supported testing plan by counting them in the number of requested test kits.
- CCURT is carefully monitoring supplies and lab capacity; future shortages of resources may preclude non-employees from being included in future rounds of state-supported testing.

- **Connected / On-Campus Assisted Living**

- AL employees who work in NF buildings must be tested
- Connected AL employees can participate in either NF or AL testing (saliva)

FAQ

- **Staff testing refusals**

- Please educate and inform staff of the requirements and value of ongoing testing.
- The Order states nursing facilities shall require its employees to be tested in accordance with ODH Guidelines. Staff compliance will be reviewed through ODH's survey and certification process.
- Each licensed and/or certified nursing facility must follow the infection control requirements set forth in regulations. These include developing a system of identifying and controlling the spread of communicable diseases among staff, residents and volunteers and prohibiting staff with transmissible communicable diseases from being able to pass it to residents.
- The facility's medical director is responsible for engaging in the health surveillance of the staff. These regulations may be enforced through the survey process.

- **Staff who miss testing day**

- All nursing home employees need to be tested at least once every two weeks.
- Staff who are unavailable for the facility's testing date must have a specimen collected and sent to a lab (or be tested using a POC device) before they can work again. The nursing facility is responsible for making sure this occurs.
- Results for employees tested elsewhere should be tracked by the facility and should be included in the facility's ongoing responses to the Testing in Nursing Homes Results Survey (link forthcoming.)

FAQ

- **Staff who previously tested positive**

- Staff who tested positive for COVID-19 and are now asymptomatic do not need to be retested for up to 12 weeks after the initial positive test result. Staff should begin retesting 12 weeks from the date of onset of the prior infection.
- Staff with a with a prior positive test result for COVID-19 who become symptomatic after recovering from the initial illness should be evaluated and may need to be retested if an alternate illness cannot be identified.

- **Who can collect anterior nares (AN) specimens?**

- Anyone sufficiently trained to do so.
- Ideally staff with clinical experience.

FAQ

• **Billing to Health Insurers and Other Sources**

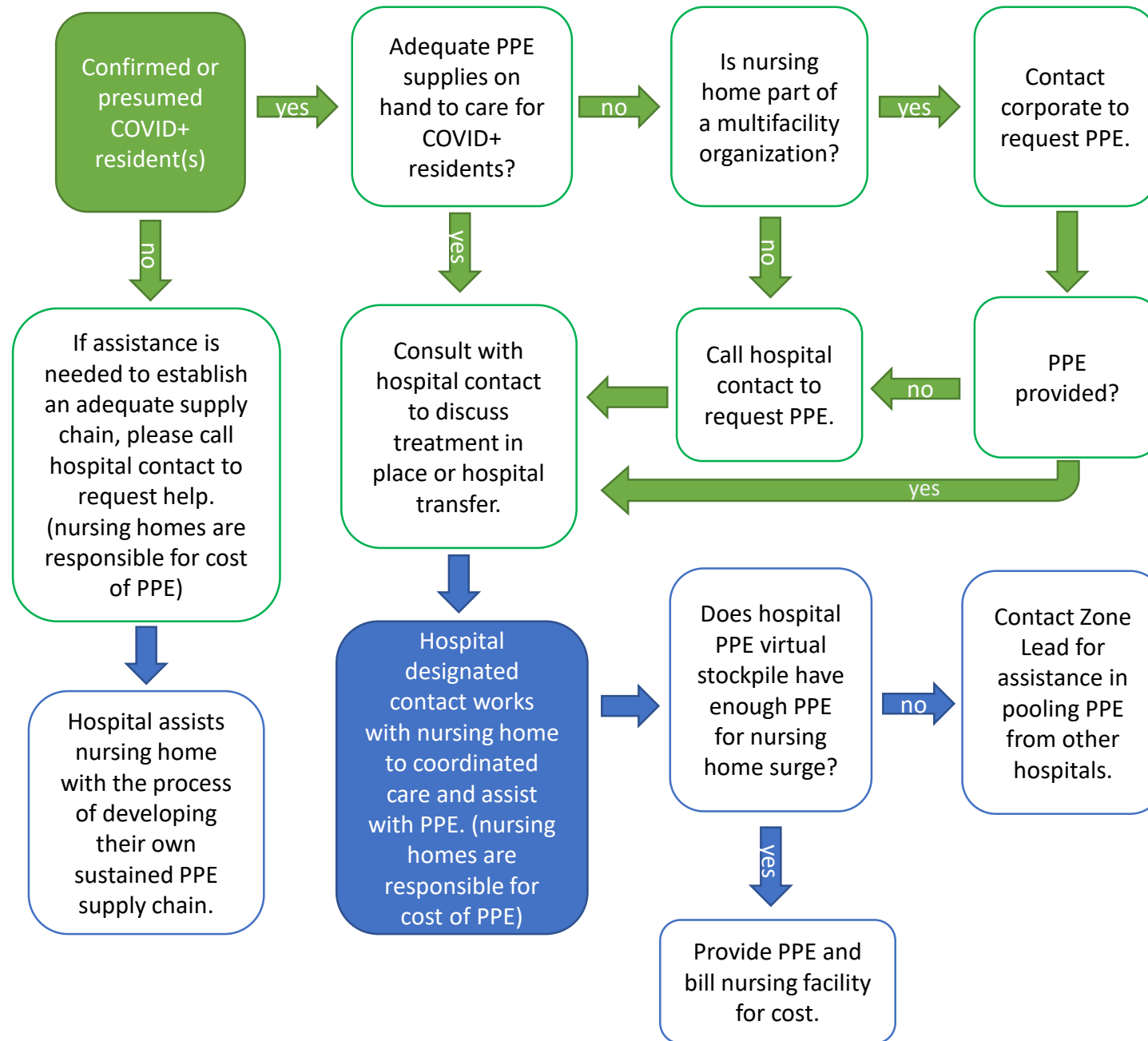
- Employees' health insurance will be billed for all tests conducted using the state-supported testing process, and the State of Ohio will be the "payer of last resort" for costs not covered by other sources.
 - All nursing home employees participating in the state-supported process for retesting nursing home staff must include complete and accurate health insurance information on their lab requisition forms.
 - Employees with insurance must always include insurance information, even if the primary insurance carrier is a family member (e.g. employee has insurance through a spouse or parent) or other source.
 - "Uninsured" should only be marked when individuals have no source of health insurance. The HRSA Cares Act program for individuals without insurance may be billed by the state and its affiliated/contracted labs.
 - Per CARES Act regulations, individuals with insurance should not be subject to cost sharing (deductible/co-payment) for COVID-19 tests.
 - Tests for employees who do not include complete and accurate information will be billed directly to their nursing home employer.
- The State is developing a process to financially support employee testing for nursing homes that are self-insured. Additional information about this process is forthcoming.

REMINDER: HHS Distribution of POC Instruments

- HHS distribution of diagnostic instruments to nursing homes- Certificate of CLIA Waiver is required to receive one of these tests.
 - CMS116 CLIA Application can be found at the link below: (Scroll to the bottom of the page, under downloads, and click on CMS 116 [pdf])
 - [https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/How to Apply for a CLIA Certificate International Laboratories](https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/How%20to%20Apply%20for%20a%20CLIA%20Certificate%20International%20Laboratories)
 - Email application to: clia@odh.ohio.gov
 - Fax application to: 614-564-2478
 - ODH Bureau of Survey and Certification, CLIA staff, will process and obtain a CLIA number
 - The facility can begin testing; these tests can be used to fulfill the staff testing requirement

REMINDER: Statewide PPE Stockpile

- ODH, in partnership with Ohio's hospitals and other providers, will establish a virtual stockpile of PPE for use with COVID-19 patients and health care workers.
- Will ensure a reliable PPE supply in the event of a surge of COVID-19 patients.
- The virtual stockpile is not intended to replace each provider's responsibility to procure PPE and other supplies for their organizations for non-urgent diagnostic services or procedures.
- All providers are urged to take all reasonable efforts to both conserve and responsibly procure and manage their PPE supplies for all (COVID and non-COVID) patients.
- Providers in specialties or practice settings that may not experience COVID-19 patient surges will must be situationally aware of statewide PPE, supplies, equipment, and medicine needs and be prepared to contribute as necessary.



Resources

- [Ohio's Testing in Nursing Homes Website](#)
- CCURT@ODH.OHIO.GOV
- www.coronavirus.ohio.gov



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