

NYSNA Recommendations and Resources for Reopening during COVID-19

Nursing Home and Long-Term Care Settings: Phases 1, 2, and 3, NYSNAs Nursing Education & Practice and Health & Safety Guidelines



Status	Criteria for Implementation	Visitation and Service Considerations	Surveys that will be performed at each phase
<p>Significant Mitigation and Phase 1 of Reopening nursing homes</p>	<ul style="list-style-type: none"> • Most facilities are in a posture that can be described as their highest level of vigilance, regardless of transmission within their communities. 	<ul style="list-style-type: none"> • Visitation generally prohibited, except for compassionate care situations. In those limited situations, visitors are screened and additional precautions are taken, including social distancing, and hand hygiene (e.g., use alcohol-based hand rub upon entry). All visitors must wear a surgical mask for the duration of their visit. • Restricted entry of non-essential healthcare personnel. • Communal dining limited (for COVID-19 negative or asymptomatic residents only), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet). • Non-medically necessary trips outside the building should be avoided. • Restrict group activities, but some activities may be conducted (for COVID-19 negative or asymptomatic residents only) with social distancing, hand hygiene, and use of a surgical mask. • For medically necessary trips away from of the facility: <ul style="list-style-type: none"> ○ The resident must wear a surgical mask; and ○ The facility must share the resident’s COVID-19 status with the transportation service and entity with whom the resident has the appointment. • 100% screening of all persons entering the facility and all staff at the beginning of each shift: <ul style="list-style-type: none"> ○ Temperature checks ○ Ensure all outside persons entering building 	<ul style="list-style-type: none"> • Investigation of complaints alleging there is an immediate serious threat to the residents health and safety (known as Immediate Jeopardy) • Revisit surveys to confirm the facility has removed any Immediate Jeopardy findings • Focused infection control surveys • Initial survey to certify that the provider has met the required conditions to participate in the Medicare Program (initial certification surveys) • Any State-based priorities (e.g., localized “hot spots,” “strike” teams, etc.)

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		<ul style="list-style-type: none"> ○ have a surgical mask. ○ Questionnaire about symptoms and potential exposure ○ Observation of any signs or symptoms ● 100% screening for all residents: <ul style="list-style-type: none"> ○ Temperature checks ○ Questions about and observation for other signs or symptoms of COVID-19 (at least daily) ● Universal source control for everyone in the facility. Residents and visitors entering for compassionate care wear a surgical mask (no cloth coverings allowed). ● All staff wear appropriate PPE when they are interacting with residents. Staff wear a N95 or higher level of protection. At minimum, staff not interacting with residents wear a surgical face mask. ● Test all staff weekly. Test all residents regularly and upon one of the following conditions: when the resident is exhibiting symptoms of COVID-19, if any staff member has tested positive, and if any resident has tested positive. Continue weekly testing of staff and regular testing of residents when all individuals test negative. Individuals are able to shed the virus while asymptomatic. ● Dedicated space in facility for cohorting and managing care for residents with COVID-19 has enhanced ventilation/engineering controls; plan to manage new/readmissions with an unknown COVID-19 status and residents who develop symptoms. 	
Significant Mitigation and Phase 2 of Reopening nursing	<ul style="list-style-type: none"> ● Case status in community has met the criteria for entry into phase 2 (no rebound in 	<ul style="list-style-type: none"> ● Visitation generally prohibited, except for compassionate care situations. In those limited situations, visitors are screened and additional 	<ul style="list-style-type: none"> ● Investigation of complaints alleging either Immediate Jeopardy or actual harm to residents

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homes	<p>cases after 14 days in phase 1).</p> <ul style="list-style-type: none"> • There have been no new, nursing home onset COVID cases in the nursing home for 14 days. • The nursing home is not experiencing staff shortages. • The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection supplies to care for residents. • The nursing home has adequate access to testing for COVID-19. • Referral hospital(s) have bed capacity on wards and intensive care units. 	<p>precautions are taken, including social distancing, and hand hygiene (e.g., use alcohol-based hand rub upon entry). All visitors must wear a surgical mask for the duration of their visit.</p> <ul style="list-style-type: none"> • Allow entry of limited numbers of non-essential healthcare personnel/contractors as determined necessary by the facility, with screening and additional precautions including social distancing, hand hygiene, and a surgical mask. • Communal dining limited (for COVID-19 negative or asymptomatic residents only), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet). • Group activities, including outings, limited (for asymptomatic or COVID-19 negative residents only) with no more than 10 people and social distancing among residents, appropriate hand hygiene, and use of a surgical mask. Any staff assisting in outings must use N95 or higher level of protection. • For medically necessary trips outside of the facility: <ul style="list-style-type: none"> ○ The resident must wear a surgical mask; and ○ The facility must share the resident’s COVID-19 status with the transportation service and entity with whom the resident has the appointment. ○ Transportation staff must wear a N95. • 100% screening of all persons entering the facility and all staff at the beginning of each shift: <ul style="list-style-type: none"> ○ Temperature checks ○ Ensure all outside persons entering building have a surgical mask. 	<ul style="list-style-type: none"> • Revisit surveys to confirm the facility has removed any Immediate Jeopardy findings • Focused infection control surveys • Initial certification surveys • State-based priorities (e.g., localized “hot spots,” “strike” teams, etc.)
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NYSNA Recommendations and Resources for Reopening during COVID-19

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		<ul style="list-style-type: none"> ○ Questionnaire about symptoms and potential exposure ○ Observation of any signs or symptoms ● 100% screening (at least daily) for all residents <ul style="list-style-type: none"> ○ Temperature checks ○ Questions about and observation for other signs or symptoms of COVID-19 ● Universal source control for everyone in the facility. Residents and visitors entering for compassionate care wear a surgical mask. ● All staff wear appropriate PPE when they are interacting with residents, to the extent PPE is available and consistent with CDC guidance on optimization of PPE. Staff wear a N95 or higher level of protection. At minimum, staff not interacting with residents wear a surgical face mask. ● Test all staff weekly. Test all residents regularly and upon one of the following conditions: when the resident is exhibiting symptoms of COVID-19, if any staff member has tested positive, and if any resident has tested positive. Continue weekly testing of staff and regular testing of residents when all individuals test negative. Individuals are able to shed the virus while asymptomatic. ● Dedicated space in facility for cohorting and managing care for residents with COVID-19 has enhanced ventilation/engineering controls; plan to manage new/readmissions with an unknown COVID-19 status and residents who develop symptoms. 	
<p>Significant Mitigation and Phase 3 of Reopening nursing</p>	<ul style="list-style-type: none"> ● Community case status meets criteria for entry to phase 3 (no rebound in 	<ul style="list-style-type: none"> ● Visitation allowed with screening and additional precautions including ensuring social distancing and hand hygiene (e.g., use alcohol-based hand 	<ul style="list-style-type: none"> ● Normal Survey operations ● All complaint and revisit surveys required to identify and resolve any

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homes	<p>cases during phase 2).</p> <ul style="list-style-type: none"> • There have been no new, nursing home onset COVID cases in the nursing home for 28 days (through phases 1 and 2). • The nursing home is not experiencing staff shortages. • The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection supplies to care for residents. • The nursing home has adequate access to testing for COVID-19. 	<p>rub upon entry). All visitors must wear a surgical mask for the duration of their visit.</p> <ul style="list-style-type: none"> • Allow entry of non-essential healthcare personnel/contractors as determined necessary by the facility, with screening and additional precautions including social distancing, hand hygiene, and a surgical mask. • Communal dining limited (for COVID-19 negative or asymptomatic residents only), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet). • Group activities, including outings, allowed (for asymptomatic or COVID-19 negative residents only) with no more than the number of people where social distancing among residents can be maintained, appropriate hand hygiene, and use of a surgical mask. Allow entry of volunteers, with screening and additional precautions including social distancing, hand hygiene, and a surgical mask. Any staff assisting in outings must use N95 or higher level of protection. • For medically necessary trips outside of the facility: <ul style="list-style-type: none"> ○ The resident must wear a surgical mask; and ○ The facility must share the resident’s COVID-19 status with the transportation service and entity with whom the resident has the appointment. ○ Transportation staff must wear a N95. • 100% screening of all persons entering the facility and all staff at the beginning of each shift: <ul style="list-style-type: none"> ○ Temperature checks. ○ Ensure all outside persons entering building 	<p>non-compliance with health and safety requirements</p> <ul style="list-style-type: none"> • Standard (recertification) surveys and revisits • Focused infection control surveys • State-based priorities (e.g., localized “hot spots,” “strike” teams, etc.
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Resources:

- NYSNA's organizational plan and recommendations for nurses during COVID crisis

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- [CDC/DEPARTMENT OF HEALTH & HUMAN SERVICES/Centers for Medicare & Medicaid Services website](#)