## Interim Guidance for Personal Care Homes, Assisted Living Residences and Private Intermediate Care Facilities During the COVID-19 Pandemic

Frequently Asked Questions and Resources for Reopening

The Department of Human Services (Department) is issuing this document to address questions from Personal Care Homes, Assisted Living Residences and private Intermediate Care Facilities regarding the reopening section of the Interim Guidance for Personal Care Homes, Assisted Living Residences and private Intermediate Care Facilities During COVID-19.

# Q: We are to have the capacity to administer COVID-19 diagnostic tests to all residents showing symptoms of COVID-19 and do so within 24 hours. Does this mean the results must be available within 24 hours? When does the 24 hours begin – after the first symptoms appear?

A: The test should be administered within 24 hours after the first symptoms are observed in a resident. The results should be available within a reasonable timeframe, depending on laboratory capacity.

### Q: We are to have completed universal testing before reopening. Does the universal testing have to be within the timelines of the Order for testing at long-term care facilities?

A: For the purposes of reopening, testing of all residents and staff does not need to be completed within the timelines of the Order directing testing between June 12<sup>th</sup> and August 31<sup>st</sup> in order to move to Step 1 If a facility completed testing of all residents and staff prior to June 12<sup>th</sup>, the facility can proceed with their re-opening plans. A facility can open in Step 1 once all prerequisites are met, and in Step 2 if, after having completed testing of all residents and staff, there has been no new facility onset of COVID-19 for 14 consecutive days prior to re-opening.

# Q: We are to have a plan to ensure and maintain a current cache of an adequate supply of personal protective equipment (PPE) for staff (based on the type of care expected to be provided). What does "type of care expected to be provided" mean?

A: The Department expects facilities to have adequate PPE to effectively care for COVID-positive patients to include swabbing for testing and managing their other activities of daily living.

### Q: We are to have a plan to ensure adequate staffing. Is that interpreted as meeting regulations at 55 Pa. Code §§ 2600.57, 2800.57, and 42 CFR § 483.430?

A: Yes, there should be no staffing shortages during reopening and the facility should not be under a contingency staffing plan. Therefore, the facility should meet or exceed the regulatory requirements.

### Q: Do we need to wait for the licensing program office to conduct an on-site or remote visit and approve our implementation plan prior to re-opening?

A: The licensing program office will notify you if they intend to conduct an on-site or remote visit or have concerns about your re-opening. Your implementation plan does not need to be approved by the licensing program office; however, it is required that the respective regional office be notified before proceeding with re-opening.

# Q: The guidance indicates that if at any point during Steps 1, 2, or 3 there is a new facility onset of COVID-19 cases, the facility must cease reopening. Does this mean the facility can have more than one case prior to ceasing reopening?

A: "New facility onset of COVID-19 cases" refers to COVID-19 cases that originated in the facility. This does not include cases where the facility admitted an individual from a hospital with a known COVID-19 positive status, or who became COVID-19 positive within 14 days after admission but had been safely

isolated. Reopening must cease with the first case of new facility onset of COVID-19, or when there is otherwise an "outbreak" (including a staff member who tests positive for COVID-19 and was present in the facility during the infectious period, either 48 hours prior to the onset of symptoms or 48 hours prior to a positive test result if the staff person is asymptomatic).

Q: What if a visitor, non-essential personnel, or volunteer refuses to be screened or adhere to universal masking or social distancing? Should they be prohibited from entering the facility?

A: Yes, the visitor may not enter the facility; however, alternative methods of communication should be provided.

Q: Does an "unexposed resident" include a resident that tested negative during universal testing? A: No. A resident unexposed to COVID-19 will have had no known recent exposure to the virus that causes COVID-19 regardless of prior negative test results.

#### Q: Do we need to report to anyone what phase our facility is in?

A: Yes, Personal Care Homes and Assisted Living Residences should notify their Office of Long Term Living Regional Director prior to moving from one step to another. Private Intermediate Care Facilities must notify the Office of Developmental Programs through RA-PWODPEMRGNCYSPRQ@PA.GOV.

#### Q: Where should I direct a question that is not covered in this document?

A: Questions may be directed to <u>ra-pwarlheadquarters@pa.gov</u> for Personal Care Homes and Assisted Living Residences and to <u>RA-PWODPEMRGNCYSPRQ@PA.GOV</u> for private Intermediate Care Facilities.

#### Q: Can a facility decide not to reopen?

A: The Governor, the Secretary of Health, and the Secretary of Human Services believe that facilities intend and are attempting to care for their residents appropriately. As such, facilities are to implement policies that align with residents' rights. Although many regulations have been suspended, as authorized by the Governor's Proclamation of Disaster Emergency, facilities should follow guidance for reopening and reopen when it meets the criteria and requirements for reopening. Adherence to the spirit of any regulation that impacts a resident's socialization and mental health should be a priority.

### Q: The criteria for advancing to and retreating from the steps are complex. Is there more explanation for this available?

A: Please see Attachment A to this document, which simplifies the criteria by showing them in a flow chart.

Q: Are activities permitted with residents who are considered exposed (meaning they have a known recent exposure to the virus that causes COVID-19 or have had a positive test result for the virus that causes COVID-19 in the past 14 days)?

A: No.

#### Q: Is there a limit to the number of visitors the facility can allow?

A: The facility is to determine the allowable number of visitors and convey that in their implementation plan. The number of visitors per resident or in the facility (or on facility grounds) at one time must not exceed a number than can safely adhere to the requirements in the guidance for social distancing.

#### Q: Our facility does not want to admit volunteers to the facility until Step 3. Is that okay?

A: The use of volunteers is allowed at Step 2 in a limited manner (per the guidance), but not required. The facility should describe their use and allowance of volunteers in their implementation plan.

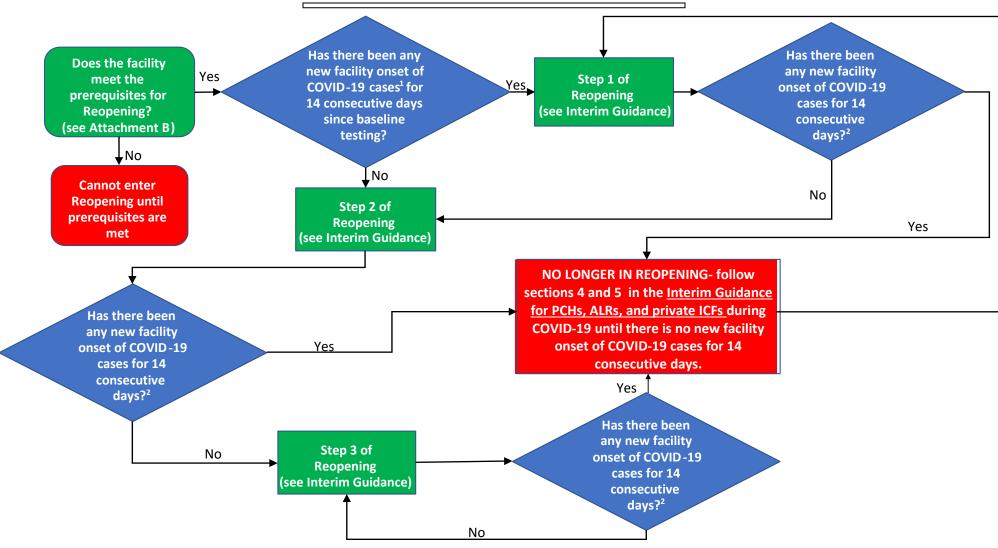
#### Q: May all residents receive visitors?

A: Exposed residents (meaning those residents with a known exposure to the virus that causes COVID-19 or who have had a positive test result for the virus that causes COVID-19 in the past 14 days) are not permitted to have visitors, to enable the facility to contain the virus. When an exposed resident has met the requirements in <u>PA-HAN-502</u> for discontinuation of Transmission-Based Precautions for patients with COVID-19, that resident may have visitors if the facility is in Step 2 or 3 of the reopening process.

# Q: The guidance indicates that facilities should have a plan to reopen within 38 days of the county transitioning to the green phase. How should we address if our facility will not be ready to reopen within the 38 days?

A: A facility should describe how they will meet all of the prerequisites in their implementation plan, including target dates for each milestone. Some facilities may not be able to meet all of the prerequites within 38 days, but the Department expects that a facility will make efforts to meet the prerequisites as soon as possible to allow for reopening safely. Failure or inability to reach target dates should be documented, with explanation, and the documentation should be maintained by the facility.

### ATTACHMENT A FLOWCHART FOR REOPENING STEPS



<sup>&</sup>lt;sup>1</sup>"New facility onset of COVID-19 cases" refers to COVID-19 cases that originated in the facility. This does not include cases where the facility admitted an individual from a hospital with a known COVID-19 positive status, or who became COVID-19 positive within 14 days after admission but had been safely isolated. In other words, if the number of COVID-19 cases increases because a facility is admitting residents from the hospital AND they are practicing effective Transmission-Based Precautions to prevent the transmission of COVID-19 to other residents, that facility may still advance through the steps of reopening. However, if a resident contracts COVID-19 within the facility without a prior hospitalization within the last 14 days, the facility has new facility onset of COVID-19.

<sup>&</sup>lt;sup>2</sup>If at any point during the 14 consecutive days there is any new facility onset of COVID-19 cases, the facility is NO LONGER IN REOPENING.

### ATTACHMENT B CHECKLIST FOR PREREQUISITES TO REOPENING

In accordance with the Interim Guidance for Personal Care Homes, Assisted Living Residences and private Intermediate Care Facilities During COVID-19, all prerequisites must be met before a facility enters Step 1, advances to each new Step, or remains in each Step. Those prerequisites, at a minimum, should be detailed in the facility's Implementation Plan. This checklist is intended to assist facilities in ensuring inclusion of all prerequisites. Facilities may also use the Department's Template for an Implementation Plan to create their plan, if desired.

A testing plan that, at minimum:
<ul> <li>□ Identifies when baseline testing of all residents and staff has been or will be completed;</li> <li>□ Describes the ability to have COVID-19 diagnostic tests administered to all residents showing symptoms of COVID-19 and do so within 24 hours;</li> <li>□ Describes the capacity to administer COVID-19 diagnostic tests to all residents and staff if the facility experiences an outbreak;</li> <li>□ Describes the capacity to administer COVID-19 diagnostic tests to all staff, including asymptomatic staff;</li> <li>□ Describes a procedure for addressing needed testing of non-essential staff and volunteers; and</li> <li>□ Describes a procedure for addressing residents or staff that decline or are unable to be tested.</li> </ul>
A plan to cohort or isolate residents diagnosed with COVID-19 in accordance with <u>PA-HAN-509</u> pursuant to Section 1 of the <u>Interim Guidance for Skilled Nursing Facilities During COVID-19</u> .
A written protocol for screening all staff at the beginning of each shift, each resident daily, and all persons (visitors, volunteers, non-essential personnel, and essential personnel) entering the facility or facility grounds.
A plan to ensure and maintain a current cache of an adequate supply of personal protective equipment for staff (based on the type of care expected to be provided).
A plan for adequate staffing that ensures no staffing shortages and that the facility is not under a contingency staffing plan.
A plan to allow for communal dining and activities to resume pursuant to the guidance provided in Section 6d of the Interim Guidance for Personal Care Homes, Assisted Living Residences and Intermediate Care Facilities During COVID-19.
A plan to allow for visitation pursuant to the guidance provided in Section 6e of the Interim Guidance for Personal Care Homes, Assisted Living Residences and Intermediate Care Facilitiess During COVID-19.
A plan to halt all reopening facilities if the county in which the facility is located is reverted to the <u>Red Phase of the Governor's Reopening Plan</u> .
Confirmation that the facility is in a county that is in the Yellow or Green phase of the Governor's Reopening Plan.
Post the Implementation Plan on the facility's website, if the facility has an existing website, or make it available to all residents, families, advocates such as the Ombudsman, and the Department upon request.