



Frequently Asked Questions

The topics of patient transfers and dedicated COVID-19 facilities are of vital importance in the public health emergency. Following are some Frequently Asked Questions (FAQ) that may be helpful to your work.

What kind of federal and state directives impact long-term care facilities and your work?

On April 2, 2020, the Centers for Medicare and Medicaid recommended long-term care facilities partner with state and local community leaders to identify and create COVID-19 dedicated facilities. Such facilities have opened, or plan to open, in Massachusetts and Connecticut. The focus of COVID-19 dedicated building is to help hospitals with surge management and facilitate the transfer of residents from other nursing homes with difficulty managing COVID-19 outbreaks on site.

In light of that federal guidance, on April 8, 2020, the Indiana State Department of Health (ISDH) issued state requirements and guidance for creating COVID-19 dedicated buildings and units, which long-term care facilities across the state will be utilizing as dedicated buildings and units are needed.

What are long-term care facilities and staff doing to ensure the safety of patients?

The number one priority of long-term care facilities during this public health emergency, and always, is the health and safety of patients, as well as staff. Indiana's long-term care facilities are operating in accordance with guidance and orders from the Centers for Disease Control and Prevention (CDC) and ISDH, as it is updated weekly and many times even daily. Accordingly, long term care facilities have updated their policies and operations to comply with guidelines and help mitigate the spread of the COVID-19, as follows:

- Implementing visitor restrictions at all facilities
- Implementing strict infection control practices and testing protocols, per the federal requirements of participation (RoP) for COVID-19-positive units
- Ensuring all staff with direct patient care are using appropriate PPE throughout the entirety of their shift, so long as PPE is available
- Creating separate staffing teams for COVID-19-positive residents to the best of their ability
- Complying with ISDH guidelines and actively collaborating with hospital systems and local partners to designate separate facilities or units within their facility to separate COVID-19 negative residents from COVID-19 positive residents.
- Ensuring rapid and thorough communication to keep residents and their families informed of limitations of their access to and ability to leave and re-enter the facility, as well as any

requirements and procedures for placement in alternative facilities for COVID-19-positive or unknown status.

Why are facilities moving their residents?

Long term care facilities are complying with the federal and state directives.

The goal to create COVID-19 wings/units within facilities and dedicated facilities is to separate COVID-19 negative residents from COVID-19 positive residents and individuals with unknown COVID-19 status. We are doing what is best for residents in accordance with government guidance and strive to communicate with families during the process.

The benefits to creating COVID-19 dedicated facilities include:

- The conservation of personal protective equipment.
- The ability to cohort COVID-19 positive patients from other residents in the facility.
- The creation of facility expertise.
- The ability to rapidly transition patients requiring skilled nursing out of hospitals when they no longer need acute care to create additional surge capacity.

What factors are being considered when making these decisions?

Long term care providers are closely monitoring all residents and staff's health and frequently testing them for COVID-19. Additionally, we are complying with ISDH's recently issued guidance that included qualification criteria for a nursing facility to be designated as a dedicated COVID-19 building.

How do LTC providers determine if a facility resident should be transferred to a COVID-19 facility or back to the original facility?

We all have one goal in mind – to protect our residents from the deadly virus. We will work with hospitals and local public health officials to determine the best course of action to keep infected individuals away from those who are not exhibiting signs of the virus.

Are the LTC and COVID-19 facilities concerned with lack of PPE and lack of testing? How will they handle?

PPE availability and testing issues are high on the list of our challenges. We must prioritize the availability of PPE and testing to nursing facilities to protect our frontline caregivers and older adults. Nursing facilities need your help in accomplishing this.

How are you ensuring that there are enough staff to care for your residents?

Long term care facilities are doing all they can to retain and hire new staff. In some cases, this will mean obtaining additional or emergency resources from partnering hospitals and local health departments. In addition, facilities are using available licensing flexibilities instituted by Governor Holcomb and the Indiana State Department of Health to obtain and train additional staff.

What kind of reporting is required for COVID-19 residents for long term care facilities?

Effective April 10, 2020, all long-term care facilities are required to report to the ISDH the following within 24 hours:

- Any resident who tests positive for COVID-19
- Any employee who tests positive for COVID-19
- Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of a resident
- Any confirmed positive COVID-19 related death OR suspected COVID-19 related death of an employee

Confirmed or suspected deaths should be reported regardless of where the death occurred and within 24 hours of the facilities' knowledge of the death.

How are long term care facilities submitting these reports to ISDH?

ISDH has created an online form for reporting and our facility is actively using ISDH's reporting tool.