

COVID 19 Phased Reopening for the Supportive Living Program

Department of Healthcare & Family Services

Bureau of Long Term Care



Thank You!!!

OVERVIEW

Overview of phased reopening requirements
Phase progression process
Phase regression criteria and process
Regional tiered mitigation
Phased reopening guidance summaries
Building access

Phased Reopening Requirements

Supportive Living Program (SLP) providers will follow the Illinois Department of Public Health's **Updated Interim Guidance for Nursing Homes and Other Long-Term Care Facilities and Programs: Phased Re-opening (Guidance)** (issued August 12, 2020).

<http://dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus/long-term-care-guidance>

Requirements

Phased Reopening Requirements

**ALL must be
met to move
to the next
reopening
phase**

- Case status in the community
- Case status in the building
- Staffing level
- PPE supply & usage & essential cleaning and disinfection supplies
- Universal screening
- Universal source control and hand hygiene
- Testing plan and response strategy

(Guidance p.2-5)

Phased Reopening Requirements

--Case status
in the
community

The COVID 19 Region where the SLP provider is located cannot be experiencing a resurgence as indicated by test positivity rate and composite metric of COVID 19 hospital admissions and hospital resource capacity, as determined by IDPH.

NOTE: COVID 19 Regions are not the same as HFS Bureau of Long Term Care regions.

- <http://dph.illinois.gov/regionmetrics>

Phased Reopening Requirements

--Case status
in the SLP
building

SLP providers must spend a minimum of 14 days in a given CMS phase, with no new facility-onset COVID 19 cases, before advancing to the next CMS phase.

NOTE: Currently all SLP providers are in Phase 1. You may provide attestation for Phase 2 at any time you meet all of the required criteria. An attestation must be provided for each Phase. Providers cannot progress from Phase 1 directly to Phase 3.

Phased Reopening Requirements

--Staffing level

Must have sufficient staffing that is not operating with a contingency or crisis strategy, as defined by CDC.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html>

Phased Reopening Requirements

--PPE supply
& usage &
essential
cleaning &
disinfectant

Sufficient PPE that is not operating at crisis capacity, as defined by CDC. The SLP provider may operate at contingency PPE capacity. All staff must wear appropriate PPE when indicated.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

Phased Reopening Requirements

--Universal screening

- Written policy that states where, when, how and by whom screening will be performed and recorded.
- Must use a checklist-based screening protocol, administered verbally and recorded in written or electronic format, for each person entering the building, including all staff, visitors and other persons.

Phased Reopening Requirements

--Universal screening

- Screening MUST include:
 - Measured body temperature of 100.0 degrees or more
 - Symptoms of COVID 19, as listed by CDC*
 - Diagnosis of COVID 19 before completing the appropriate period of isolation**
 - Or prolonged close contact with a person with COVID 19 while not using appropriate PPE during the prior 14 days***

* <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>

** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

*** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

Phased Reopening Requirements

--Universal
source control
and hand
hygiene

- All staff are trained in proper hand hygiene.
- Everyone entering the building must perform hand hygiene upon entry.
- Everyone entering the building must wear facemasks or respirator, as appropriate, and additional PPE, as appropriate, except during breaks in designated break areas.
- All residents must wear a cloth face covering or facemask when outside of their apartments and when staff enter their apartments.
- Follow IDPH/CMS/CDC guidance for infection control.

Phased Reopening Requirements

--Universal
source control
and hand
hygiene

- If, due to a medical condition or a disability, a resident cannot tolerate or would be unable to remove a cloth face covering or facemask, then a face shield may be substituted.
- If, due to a medical condition or a disability, a staff member cannot tolerate a facemask, and the staff member requests a reasonable accommodation under the Americans with Disabilities Act or the Illinois Human rights Act, then the employer will determine whether such an accommodation can be provided while fully protecting the health & safety of that employee, other staff members, and residents of the facility, and without causing an undue hardship to the employee.

Phased Reopening Requirements

--Testing plan and response strategy

- A written COVID 19 testing plan and response strategy is in place, based on contingencies informed by the CDC.
- For LTC facilities other than nursing homes, including **SLP providers**, the testing plan includes:
 - In response to an outbreak or a single facility-onset COVID 19 in a resident or a single new case of COVID 19 infection in a staff member; testing of all previously negative residents and staff occur. Repeated testing continues, generally every 3-7 days until the testing identifies no new cases of COVID 19 infection among residents and staff for a period of at least 14 days.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html>med

Phased Reopening Requirements

--Testing plan
and response
strategy

- Continued...For LTC facilities other than nursing homes, including **SLP providers**, the testing plan includes:
 - Optionally, if a building has had no new cases within the past 28 days, then initial testing of all residents and staff followed optionally by repeated staff testing as for nursing homes.
- **NOTE: All SLP residents and staff should receive baseline testing.**

Phase Movement

Process for Progression to Next Reopening Phase

Steps to Achieve	
Community Status	Building's COVID 19 Region cannot be in Tiered Mitigation. http://dph.illinois.gov/regionmetrics
Building Status	No residents with community onset COVID 19 for the past 14 days.
Assessment of Criteria	Review of all required criteria outlined in the Guidance to determine if ALL are met.
Attestation of Requirements	Submission of HFS Attestation form to HFS Regional Supervisor. HFS will review and confirm. NOTE: IDPH Redcap link is not utilized

Regression to Previous Reopening Phase

Required Criteria Not Met

- Daily assessments of the required Guidance criteria must be completed.
- If at any time one or more criteria is not met, the SLP provider must regress to the previous phase.

Regression to
Previous
Reopening
Phase

New COVID 19 Case

Resident with facility onset COVID 19
requires provider to regress to **Phase 1**.

What is a Facility – Onset Case??

Facility Onset-Case—A COVID 19 case that originated in the building, and not a case where the SLP provider admitted an individual from a hospital (or nursing home) with a known COVID 19 positive status, or unknown COVID 19 status that became COVID 19 positive within 14 days after admission.

Process for Reporting Regression

- SLP staff must complete the HFS Attestation form indicating the phase regression and email it to the Regional Supervisor.
- All positive COVID 19 test results must be reported daily to HFS on the required form and faxed to 217/557-5061. Positive results must also be reported to the local health department.

**Progression
Process
AFTER
Regressing
due to Criteria
Not met**

- Daily review of required criteria outlined in the Guidance to determine if ALL are met.
- Once it is determined all required criteria have been met, email the HFS Attestation form to the Regional Supervisor.

Progression Process AFTER Regressing due to Facility Onset Case

- Monitor results of required staff and resident testing.
- After 14 continuous days of no new facility onset cases AND all required criteria are met, email the HFS Attestation form to the Regional Supervisor.

Tiered Mitigation

Tiered Mitigation

- In addition to an individual SLP provider's phased reopening status, the COVID 19 region where it is located may also be assigned tiered mitigation in response to community metrics indicating a resurgence of COVID 19.
- IDPH monitors key indicators to identify early but significant increases of COVID-19 transmission potentially signifying resurgence. IDPH will monitor if these indicators show an increase in COVID-19 disease burden with a simultaneous decrease in hospital capacity **OR** if there are three consecutive days greater than or equal to 8% test positivity rate (7 day rolling). These indicators can be used to determine whether additional community mitigation interventions are needed for a region to control the further spread of COVID-19.

Tiered Mitigation

- Indicators are calculated daily for each region based on the most current, complete data. Each indicator is compared to a pre-established threshold value to evaluate the COVID-19 disease burden and hospital resource capacity. By applying the same metrics to each region, IDPH uses a standardized approach to monitor the state as a whole while also monitoring regional trends.
- Once a region meets resurgence criteria, mitigation measures will be implemented. If sustained increases in health metrics continue unabated, more stringent mitigation measures will be implemented.

What Does Tiered Mitigation Mean??

- When IDPH implements tiered mitigation in a COVID 19 region, the SLP provider must follow the requirements for the tier (Guidance p. 6).
- The SLP provider maintains its current reopening phase status, however, it must follow the mitigation requirements. Guidelines for its current reopening phase resume 14 days after the tiered mitigation is lifted.
- The SLP provider cannot progress to the next reopening phase level for 14 days after the tiered mitigation is lifted.
- SLP providers do not need to notify HFS Regional Supervisors of tiered mitigation.
- <http://dph.illinois.gov/regionmetrics>

Reopening Phase Summaries

Phase I Snapshot

Phase 1 (Guidance page 6-8)

Visitation	Compassionate care visitation.
Communal Dining	Not recommended, but may be considered on a limited and modified basis (see Phase 2).
Group Activities	Engagement through technology is encouraged. In-person group activities not recommended, but may be considered on a limited basis (see Phase 2)
Medical Trips	Use telemedicine to the extent practicable. Avoid trips that are not medically necessary.

Phase 2 Snapshot

Phase 2 (Guidance page 8-11)

Visitation	Indoor compassionate care visitation. Outdoor visitation.
Communal Dining	May be considered on a limited basis with a maximum of 10 diners per seating or 25% of seating capacity, whichever is more.
Group Activities	Small group activities may be considered for activities that improve the quality of life for residents. Maximum of 10 residents.
Medical Trips	Use telemedicine to the extent practicable. Avoid trips that are not medically necessary.

Phase 3 Snapshot

Phase 3 (Guidance page 11-14)

Visitation	Outdoor OR indoor visitation.
Communal Dining	See Phase 2. Number of diners may exceed limits set forth in Phase 2 as long as diners can maintain a 6 foot distance.
Group Activities	<ul style="list-style-type: none">-Maintain social distancing, hand hygiene & masks/facial coverings.-For indoor activities, set a maximum number based on social distancing requirements.-Group outings may be considered.
Medical Trips	<p>See Phases 1 & 2 for medically necessary.</p> <ul style="list-style-type: none">-Collaborate with resident, family and MD for not medically necessary trips.

Building Access

State Authorized Personnel

State authorized personnel must be allowed access to residents regardless of reopening phase.

“Individuals who have a legal duty to provide specified services to residents of long-term care facilities. They include, but are not limited to, representatives of the Office of the State Long-Term Care Ombudsman Program, the Office of State Guardian, the Legal Advocacy Service, and community-service providers or third parties serving as agents of the State for purpose of providing telemedicine, transitional services to community-based living and any other supports related to consent decrees and court-mandated actions....”

HFS Onsite Reviews

ONSITE REVIEWS

Phase 1	Reviews involving possible immediate jeopardy.
Phase 2	Reviews involving possible harm to residents.
Phase 3	Normal review procedure resume. --Annual certification --Resident Level of Care Determinations --Complaint investigations --Follow up reviews

Questions?

Please submit all questions to the Supportive Living Program's email:

HFS.SLF@Illinois.gov

A FAQ document is being developed and will be distributed to SLP providers.