

As announced by Governor Jim Justice, beginning on June 17, 2020, visitation at nursing homes may resume at facilities that have had no cases of COVID-19 for the 14 consecutive day period immediately preceding June 17, 2020 (i.e., since June 3, 2020), provided that the general framework outlined below is followed by such qualifying facilities. For facilities that will not qualify to open on June 17, 2020, such facilities may resume visitation upon achieving fourteen consecutive days with no COVID-19 cases at such facilities, provided, again, that the general framework outlined below is followed.

Background for Nursing Home COVID-19 Reopening Plan

On March 12, 2020, visitation at nursing homes in West Virginia was prohibited, recognizing the particularly vulnerable congregate populations at such facilities. On April 17, 2020, Governor Justice issued an Executive Order to test all residents and staff at every nursing home throughout the state. West Virginia was the first state to take this critical step to protect nursing home residents, and it has since been recommended by the Centers for Disease Control and Prevention (CDC) that all states follow suit and test these vulnerable populations. Under the leadership of Governor Justice, West Virginia has led the nation with an effective and proactive response to COVID-19, especially for the vulnerable nursing home population.

On May 18, 2020, the Centers for Medicare and Medicaid Services (CMS) issued a guidance memo to assist states in developing nursing home reopening plans. In response to this memo, the Office of Health Facility Licensure and Certification assembled a work group to develop a plan for the state. The West Virginia Nursing Home Advisory Council formed the basis for this group. This Work Group convened on May 26, 2020 to review the CMS guidelines for reopening nursing homes and to provide input to the Office of Health Facility Licensure and Certification who, in turn, developed this reopening framework.

The framework below suggests a general framework that nursing homes should utilize in determining how to facilitate safe visitation at their facilities. Each facility is unique in its layout, geography, resident population, and needs. Therefore, the recommended phases outlined below include recommendations designed to provide for the safety of residents, staff, and visitors alike, while allowing facilities the flexibility to determine the best implementation strategy for their specific operations.

Additionally, many aspects of the virus and its properties remain unknown. This framework is based on current knowledge and may be revisited from time to time as knowledge of the virus changes.

Nursing Home COVID-19 Reopening Plan

Phase Red is the most restrictive phase for the mitigation of COVID-19 transmission regardless of community transmission. The Re-Opening Plan uses three phases to define reopening activities. These three phases are Phase Blue, Phase Yellow, and Phase Green.

Phase Red: Active Covid-19 positive residents or positive residents within last 14 days are in Phase Red.	
Screening	<ul style="list-style-type: none"> • Screen 100% of all persons entering the facility • Screen 100% of residents at least daily
Visitation	<ul style="list-style-type: none"> • Compassionate care only
Non-essential personnel	<ul style="list-style-type: none"> • No non-essential personnel
Trips outside the facility	<ul style="list-style-type: none"> • Only medically necessary trips outside the facility
Communal dining	<ul style="list-style-type: none"> • No communal dining
Group activities	<ul style="list-style-type: none"> • No group activities

Phase Yellow: Facilities with no COVID-19 positives, and/or no substantial community spread for the immediately preceding 14 days, beginning no sooner than June 17, 2020, will enter Phase Yellow.

Screening	<ul style="list-style-type: none"> Remains the same as Phase Red
Limited Visitation	<ul style="list-style-type: none"> No more than two visitors, per resident, allowed at the same time, by appointment only Visits must take place in a facility-designated location Time limitations may be imposed at facility's discretion No visitors under 12 years old Visitors must wear face covering at a minimum, maintain 6 ft. social distancing, and use proper hand hygiene
Non-essential personnel	<ul style="list-style-type: none"> Non-essential healthcare and other personnel and contractors allowed as determined necessary by the facility Must maintain 6 ft. social distancing, use proper hand hygiene and wear face covering
Trips outside the facility	<ul style="list-style-type: none"> Only medically necessary trips outside the facility
Communal dining	<ul style="list-style-type: none"> Communal dining allowed if 6 ft. social distancing can be maintained Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the dining area
Group activities & therapy	<ul style="list-style-type: none"> Group activities and therapy allowed if 6 ft. social distancing can be maintained No more than 10:1 ratio, resident to staff Group activities and therapy must take place in a facility-designated location Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the activity or therapy
Salon services	<ul style="list-style-type: none"> Beauticians and manicurist can provide services to residents if the safety guidelines required by hair salons, nail salons and barber shops, as applicable, can be maintained.

Phase Green: Facility progressed 14 days under Phase Yellow with no COVID-19 positives and no substantial community spread

Screening	<ul style="list-style-type: none"> Remains the same as Phase Red
Visitation	<ul style="list-style-type: none"> Number and age of visitors allowed to be determined by facility Visitation by appointment only Visits must take place in a facility-designated location Time limitations may be imposed at facility's discretion Visitors must wear face covering at minimum, maintain 6 feet social distancing, and use appropriate hand hygiene
Non-essential personnel	<ul style="list-style-type: none"> Non-essential personnel and contractors allowed in the facility Must maintain 6 ft. social distancing, use proper hand hygiene and wear face covering Private companions or sitters are permitted to return
Trips outside the facility	<ul style="list-style-type: none"> Only medically necessary trips outside the facility
Communal dining	<ul style="list-style-type: none"> Communal dining allowed if 6 ft. social distancing can be maintained Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the dining area
Group activities	<ul style="list-style-type: none"> Group activities allowed if 6 ft. social distancing can be maintained Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the activity or therapy
Salon services	<ul style="list-style-type: none"> Beauticians and manicurist can provide services to residents if the safety guidelines required by hair salons, nail salons and barber shops, as applicable, can be maintained.

Phase Blue: At any time during Phase Yellow or Phase Green, if two or more residents test positive, or if it is determined that there is substantial community spread as defined by the Bureau for Public Health, the facility will enter Phase Blue.	
Screening	<ul style="list-style-type: none"> Remains the same as Phase Red
Visitation	<ul style="list-style-type: none"> Compassionate care only
Non-essential personnel	<ul style="list-style-type: none"> Non-essential healthcare personnel, including medical providers, allowed in the facility Facilities may allow other non-essential personnel if they will not be entering any direct care areas
Trips outside the facility	<ul style="list-style-type: none"> Only medically necessary trips outside the facility
Limited communal dining	<ul style="list-style-type: none"> Limited communal dining based on medical necessity Must maintain 6 ft. social distancing Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the dining area
Limited group activities & therapy	<ul style="list-style-type: none"> Limited group activities and therapy allowed if 6 ft. social distancing can be maintained Group activities and therapy must take place in a facility-designated location Proper hand hygiene must be used by residents Residents must wear face covering, as tolerated, to and from the activity or therapy
Limited salon services	<ul style="list-style-type: none"> Beauticians and manicurist can provide services to residents on a limited basis if the safety guidelines required by hair salons, nail salons and barber shops, as applicable, can be maintained.

Assisted Living Residences

Assisted Living Residences will follow the recommended CDC and CMS guidelines for nursing home reopening.

Community Status

Facilities will follow guidance provided by the Bureau for Public Health on the community status and substantial community spread criteria. Once this guidance is released it will be located at: <https://dhhr.wv.gov/COVID-19/Pages/default.aspx>.

Facility-Designated Locations

Facility-designated locations are places within or outside the facility where safe visitation can occur. For example, facility-designated areas include, but are not limited to, outside patios and gazebos, resident rooms, foyer sitting area, conference rooms, empty offices or empty resident rooms.

The facility can define the locations that best meet the specific needs of each individual resident to have meaningful, private, and safe visitation. A facility may need to designate more than one area in order to meet the needs of all of its residents, including those residents who are unable to leave their rooms.

Family and Friends Bringing Items into the Facility for Residents

Currently, the CDC or CMS does not recommend any restrictions for food or personal items being brought into a facility. Facilities should allow residents to receive food or personal items. Any restrictions should be based on clinical or public health information. For example, it may be necessary to restrict residents from eating during in-person visits because it is not possible to eat while wearing a face-covering. The facility shall inform residents of any restriction and the reasons for it.

Facility Self-Certification of Phases

A facility shall notify OHFLAC and the State Long Term Care (LTC) Ombudsman via email as it enters each phase. The OHFLAC nursing home and assisted living programs will provide facilities with direction on whom to send email notifications. Permission from OHFLAC is not required to initiate the process or transition to a new phase.

Quarantine or Isolation

Quarantine is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus without feeling symptoms.

Isolation is used to separate people infected with COVID-19, including those with no symptoms from people who are not infected.

Quarantine or isolation are not generally required after a resident has a visitor, goes out for an appointment or goes out for a community outing trip. The exception would be if there was contact with someone who is or is suspected of having an infectious or communicable disease.

Quarantine/isolation should only be used when clinically necessary when a resident has or is suspected to have an infectious or communicable disease. A physician order should also be a part of a resident's medical record when isolation is in place.

New Admissions or Re-Admissions

Facilities must follow CDC guidelines for new admission and re-admission of residents who are COVID-19 positive, COVID-19 negative, and COVID-19 status unknown. This information can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html>.

New facility admissions and readmissions **may not** be eligible for visitation, communal dining, group activities or salon services for at least 14 days based on CMS and CDC guidance.

Testing

Facilities will follow the testing plan developed by the West Virginia Bureau for Public Health. This information can be found at: <https://dhhr.wv.gov/COVID-19/Pages/default.aspx>.

Personal Protective Equipment

Proper use of PPE, as determined or recommended by CDC and CMS guidelines, must be maintained throughout all phases. Visitors must provide their own face covering, and cloth face coverings are acceptable for visitors.

Residents Receiving Dialysis, Chemotherapy, or Frequent Out-of-Facility Treatments

For residents who leave the facility on a regular basis for medical reasons (e.g., dialysis, chemotherapy), the facility should consider the following as it determines which precautions may be necessary:

- The level of community transmission of COVID-19;
- The COVID-19 occurrence rate at the nursing home and the treatment location;
- Precautions in place at the nursing home and the treatment location.
- Resident-specific considerations, which may include, but is not limited to, the following: the resident's condition, whether the resident resides in a private room or is with a roommate, and adherence to precautions.

In addition, there should be ongoing communication and collaboration for the development and implementation of the care plan by nursing home and treatment staff (e.g., related to the resident's COVID status). See, for example, F698 in Appendix PP of the State Operations Manual, related to dialysis.

While those residents who go off-site for dialysis or other treatments do have some level of increased risk of exposure to COVID-19, the potential benefit of placing residents into quarantine or observation to reduce the risk for COVID-19 introduction into the facility must be weighed against the consequences from extended isolation and removal from the residents' usual living arrangements.

Facilities that place residents receiving off-site dialysis or other treatments in an observation area must make sure that they're not being housed with other individuals who may have had exposures which could actually put those individuals receiving dialysis or other treatments at higher risk of exposure to COVID-19.

Potential Resident Tours

Facilities may resume tours of the facility to potential residents and their family member under Phase Green.

Alterations to the Reopening Plan

OHFLAC will collaborate with the Work Group to address any revisions to the reopening plan as may become necessary based on ever-increasing knowledge of the virus. As facilities work through the reopening phases, if changes are identified to better meet the needs of residents, the Work Group will meet to recommend revisions as needed.

Waiver or Variance

Facilities may request a variance to move more quickly through the phases and/or to expand on visitation and services. Facilities would need to submit a waiver request to OHFLAC for such a variance. OHFLAC will issue guidance for what facilities should include in any such requests. OHFLAC may also consult with the Bureau for Public Health on such requests.