Coronavirus Disease 2019

Ohio | Department of Health

COVID-19 Testing in Ohio Nursing Facilities
Congregate Care Unified Response Team

Frequently Asked Questions

Nursing homes residents are among the most vulnerable for COVID-19 and comprise a high percentage of COVID-19 deaths in Ohio. To protect these residents and the staff who take care of them, the presence of COVID-19 in nursing home facilities must be identified so that measures can be put into place to isolate the virus and contain its spread.

Effective May 27, 2020, all licensed or certified nursing home facilities are subject to the Ohio Department of Health (ODH) Director's Order and Guidelines. The guidelines and documents referenced comprise Ohio's approach to conducting baseline testing for nursing home residents and staff.

This frequently asked questions (FAQ) document was created to help answer any questions nursing facility administrators, staff, residents, or families may have about the testing process. This document will be updated as testing strategies and processes evolve.

Any questions or concerns can be sent to the Congregate Care Unified Response Teams at CCURT@odh.ohio.gov or please visit coronavirus.ohio.gov for more information.

QUESTION	ANSWER
Public Health Order & General Operations	
1. What is the authority being used to implement nursing home facility (facility) testing?	Under ORC 3701.13 the Director of Health can create special public health orders. On May 27th, 2020 the Director of ODH signed a Public Health Order requiring nursing home facilities to comply with ODH guidelines for testing of nursing home residents and staff. The Guidelines are available at Ohio's Testing in Nursing Homes website.
2. Where can I find the Public Health Order (the Order)?	The Order was provided via EIDC on 5/28/2020 and can be found online.
3. Which nursing homes must participate in testing pursuant to the Order?	Per the Order, each nursing home licensed by ODH or certified by the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS), or by the Ohio Department of Medicaid shall cooperate with the COVID-19 testing for staff and residents as required by ODH. These facilities shall require their employees to be tested in accordance with ODH guidelines.

4.	What is the Congregate Care Unified Response Team (CCURT)?	The state's CCURT is coordinated with the state's Emergency Operations Center (EOC) under the authority of the ODH Director. The CCURT collaborates with facilities, labs, hospital zone leads, local hospital partners, and local health departments. The CCURT team is comprised of representatives from multiple state agencies. The CCURT can be emailed at CCURT@odh.ohio.gov.
5.	Who is conducting the specimen collection (swabbing)?	The Ohio National Guard (ONG) is being deployed to oversee logistical and operational support for Ohio's collaborative testing effort. ONG teams are comprised of licensed and credentialed medical and health care professionals. These teams will visit each facility to collect and transport specimens for COVID-19 testing.
6.	Have ONG members who are conducting specimen collection been tested for COVID-19?	Yes. All ONG members who are entering nursing facilities have been tested for COVID-19 in preparation for this mission.
7.	What kind of training have members of the ONG received in preparation for this mission?	ONG members, who are licensed and certified medical professionals, were given two types of training to prepare for this mission: (1) All testing personnel received training through The Ohio State University Wexner Medical Center to learn to conduct the swabbing procedure, including training to gather a clinically correct sample, and to use the least invasive procedure possible. (2) ONG members performing testing are all qualified medical personnel, have received extensive training through the military training process, and adhere to the strict values of the Ohio National Guard's code of ethics. Respect is a cornerstone of the ONG's training and military culture. Per protocol, the ONG will ask nursing home facility representatives to accompany National Guard members to identify any specific needs residents may have.
8.	Is the state supporting testing operations for nursing home staff, residents, or both?	The ONG is currently focused on collecting specimens to test nursing facility staff. Residents who need to or want to be tested when the ONG is onsite for staff testing can be swabbed. The ONG may also assist with strategic resident testing for widespread COVID-19 outbreaks and / or to test residents who have been exposed to staff who have tested positive for COVID-19. Prior to engagement with the CCURT, facilities that identify residents or staff who are symptomatic or who have known COVID-19 exposure should immediately contact their local health department for testing guidance.
9.	What should we do if we identify residents or staff who are symptomatic or have known	Facilities that identify staff or residents who are symptomatic or who have known COVID-19 exposure should immediately contact their local health department for testing guidance. Each facility should work with their local coalition and assigned partner hospital to conduct

exposure to COVID-19 who may need to be tested?	additional testing that will lead to cohorting of individuals within facilities. Testing of symptomatic residents or staff should not be delayed until the ONG is onsite.
10. Does the Order apply to assisted living or intermediate care facilities?	The Public Health Order applies only to nursing home facilities.
11. Is Ohio following the White House and CMS guidance for reopening nursing facilities?	The Order takes into consideration and is consistent with President Trump's May 11, 2020 statement urging testing of nursing home residents and staff, the White House's Opening Up America Again guidelines, and the CMS Nursing Home Reopening Recommendations for State and Local Officials issued on May 18, 2020.
12. How is testing pursuant to the Order being funded?	For purposes of baseline testing completed to comply with the Order, screening and diagnostic tests for COVID-19 must be billed to Medicare, Medicaid, and commercial insurance carriers. Additional guidance regarding reimbursement, including for those without insurance coverage will be forthcoming.
13. What role will the Long-Term Care Ombudsman play as nursing homes work to comply with the Order?	The Long-Term Care Ombudsman's role in assuring protection of resident rights and responding to concerns remains unchanged. The Ombudsman will be available to educate residents and families who have questions and concerns about their rights, care, and communication.
General Testing, Lab, and Supply Questions	
14. What kind of tests are considered compliant for the purposes of the Order?	All baseline testing completed to comply with the Order must be conducted using RT-PCR.
15. Can antibody testing be used to comply with the Order? Can the ONG collect specimens for antibody testing while they are onsite at nursing facilities?	No, only RT-PCR testing can be used to comply with the Public Health Order. The ONG will only collect specimens for RT-PCR testing while onsite.
16. What kind of swabbing procedure will be used for specimen collection?	Anterior nares (AN) or nasopharyngeal (NP) swabbing will be conducted for staff testing. Only AN swabbing will be conducted for resident testing. Please note: AN swabbing may be completed using AN and NP swabs.
17. Who is responsible for supplying materials used for specimen collection (test kits, personal protective equipment (PPE), etc.)?	The state of Ohio is supplying all specimen collection materials for this mission. The ONG will bring PPE to each facility. Test kits may be sent ahead to a facility, or they may be brought to the facility by the ONG.
18. Do COVID-19 tests need to be ordered by a medical professional?	COVID-19 tests for screening and diagnostic purposes must be ordered by a physician or other appropriate medical professional acting under their scope of practice.

| | Physicians and other clinicians who order tests for residents and employees / staff will act within an appropriate standard of care.

Testing can be ordered by the medical director at the facility, an advance practice nurse, or another appropriate clinician from a testing team, a hospital partnership, or other arrangement. |
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| 19. Who is responsible for ordering staff tests? | The facility's medical director has responsibility for infection control and health surveillance, including for facility staff. The medical director can order testing for all staff in accordance with the Public Health Order and Ohio State Medical Board regulations. O.A.C. 3701-17-13(A)(1)(b)(5). |
| 20. Can a standing order be used to order resident and/or staff tests? | The medical director can issue an order for the testing of residents and staff. |
| 21. How will orders and patient information be transmitted to the lab? | All specimens collected by the ONG must be accompanied by the SARS-Cov-2 Specimen Submission Form (universal lab requisition form). The data in this form is important for LHD follow-up and contact tracing. The form must be filled out electronically, and handwritten forms will not be accepted.

When a facility completes the form and selects "generate form" at the bottom of the page, a PDF document will be generated. Facilities should print two copies of this form: one to accompany the specimen to the lab, and one for the ONG. |
| 22. Is documentation of resident or staff consent required for testing? Should the facility obtain parental/guardian consent before conducting testing for staff under age 18? | Nursing facilities should follow their standard consent procedures for both residents and staff as they work to comply with the Order. |
| **Staff Testing Considerations** | |
| 23. Which nursing home employees need to be tested? Do contract and agency staff need to be tested? Do volunteers and other types of caregivers need to be tested? | The Order applies to individuals who are employees of the nursing home. Each facility in Ohio shall require its employees to be tested.

Each licensed and/or certified facility must follow the infection control requirements set forth in regulations. These include developing a system of identifying and controlling the spread of communicable diseases among residents and employees, as well as all others who enter the building, including but not limited to: contract and agency staff (including hospice staff, attending physicians, etc.), volunteers, and private caregivers. As part of its infection control activities, the facility may encourage or require these types of individuals who are not employees to participate in the facility's testing plan or verify their testing status. |

	While onsite for baseline testing, the ONG will collect specimens for any individuals who fall into the non-employee categories listed above. Please discuss planning for non-employee tests with your CCURT Contact Administrator, to be sure the ONG plans for an adequate number of tests.
24. If an assisted living facility is connected to the Nursing Facility, will assisted living residents and staff also be required to be tested?	The order only applies to Nursing Facility employees and residents. All employees that enter areas or buildings where nursing facility residents live or congregate should be tested. Facilities should reach out to their CA to discuss the possibility of testing all employees who work on the campus of a nursing facility while the ONG is onsite, including employees on the campus who work in assisted living and/or other units.
25. Will nursing homes that have already conducted staff testing be required to retest employees to comply with the Order?	Facilities may meet the requirements of the order by participating in state-supported, ONG testing, and/or by conducting testing without state support. Nursing facilities that have conducted or plan to conduct employee testing without state support can meet the requirements of the Order if each employee's test for COVID-19 is: (1) conducted on or after May 6, 2020, and (2) performed as a RT-PCR diagnostic test. Facilities that conduct employee testing without state/ONG support must verify that they have met the requirements of the Order by sending a signed letter on the facility's letterhead to CCURT@odh.ohio.gov. The letter must provide summary-level testing results for all facility employees. The facility should maintain a complete ongoing individual-level resident and staff COVID-19 test results for compliance purposes. Upon ODH request, a compiled list of individual-level staff and resident testing results must be made immediately available in a spreadsheet format.
26. If staff work at multiple facilities, are they required to be tested at each facility?	No. The nursing facility is required to ensure all staff have been tested per the guidelines and should obtain and retain test records for all employees to demonstrate compliance with the Order.
27. Should staff who have previously tested positive for COVID-19 or had COVID-19 infections be retested to comply with the Order?	All staff with documented positive COVID-19 RT-PCR tests or who have been diagnosed with a COVID-19 infection by a medical professional do not need to be retested. The nursing facility should maintain documentation about positive staff testing for purposes of compliance with the Order.
28. What if staff refuse to be tested?	The Order states nursing facilities shall require its employees to be tested in accordance with ODH Guidelines.

	Each licensed and/or certified nursing facility must follow the infection control requirements set forth in regulations. These include developing a system of identifying and controlling the spread of communicable diseases among staff, residents and volunteers and prohibiting staff with transmissible communicable diseases from being able to pass it to residents. The facility's medical director is responsible for engaging in the health surveillance of the staff. These regulations may be enforced through the survey process. We encourage Administrative leadership to educate and inform staff of the requirements and value of testing before arrival of the ONG.
29. If staff are on leave or are unavailable when the ONG is on site, are they still required to be tested?	Yes. Nursing facilities will be required to verify staff have been tested if they were unavailable during baseline testing. Within three weeks of the ONG visit to the site, all staff who were not present should be tested, and facilities should verify that they have met the requirements of the Order by sending a signed letter on the facility's letterhead to CCURT@odh.ohio.gov. The letter must provide summary testing results for employees who were not present when the ONG was onsite. The facility should maintain individual-level staff testing data for compliance purposes. If the lab tests performed were not RT-PCR diagnostic tests, the facility must have their employees retested to comply with the Order. Facilities should update their verification letter to document test results for employees who return from leave within one week of the employee's return to work.
30. Where can staff who are unavailable during the Ohio National Guard visit get tested for COVID-19?	A map of testing sites, including private companies and community health centers, has been posted here on the coronavirus.ohio.gov website.
31. If an employee is not available to undergo testing when the ONG is on site and gets tested elsewhere, will they still need to use the Universal Lab Form at the local lab collection center?	No.
Local and Zone Collaboration and Coordination	
32. What roles will local health departments (LHDs) play in implementing the Order?	Ohio's 113 LHDs are monitoring and preventing the spread of COVID-19 in our communities. As nursing homes implement the Order, LHDs will: • Engage with local collaborative efforts,

	- Follow up on positive employee results and assist with implementation of ODH's Return to Work Guidelines, - Be responsible for following up on positive employee results, based on the employee's LHD of residence, - Assist in planning strategic resident testing for cohorting purposes, and - Conduct contact tracing for residents and staff who test positive for or have been exposed to COVID-19.
33. How can I tell which Zone is assigned to my facility?	Please review the Zone Map and County Listing available at Ohio's Testing in Nursing Homes website.
34. Why do nursing facilities have hospital assignments? Where can I review the assignments?	Congregate care settings, hospitals, and local health districts have developed clinical alignment plans to build local, coordinated COVID-19 clinical support. This alignment is fully described in the Protocol to Facilitate Local COVID-19 Collaboration Among Hospitals, Nursing and Other Congregate Care Facilities and Local Health Districts. In support of local collaboration efforts, the Ohio Hospital Association worked with its members to develop a plan to align each nursing facility in Ohio with a hospital partner. The list of matches is available at Ohio's Testing in Nursing Homes website. Please note: some nursing facilities along the state border align with out-of-state hospitals for clinical support. The purpose of clinical alignment is to create a broader community view that extends beyond individual systems to share planning and problem-solving for maximal collective impact. Examples of alignment opportunities include, but are not limited to: - Streamlining real-time sharing of information and communications to alert coalition partners to early signs of shortages or surges. - Standardizing processes to improve clinical efficiency and effectiveness while also meeting the unique characteristics of each community. - Maximizing allocation and use of resources based on broader areas of needs, with an emphasis on PPE, testing, personnel, and transportation. - Swiftly conveying information about local situations, including resource allocation. - Organizing for local or community surges. - Integrating efforts with state-level monitoring and rapid response.
Scheduling & Planning	
35. Who is my point of contact for the CCURT?	Once your facility has been scheduled for testing, a member of the CCURT will be in contact via email or phone and identify themselves as your assigned Contact Administrator. Prior to scheduling, questions, and comments for the CCURT can be sent to CCURT@odh.ohio.gov.

36. When will my facility be scheduled for testing? How will I know when my facility is scheduled?	Facilities will be contacted at least one week prior to testing. Please review the ODH Guidelines available at Ohio's Testing in Nursing Homes website for additional details.
37. Can we pick the time of day the ONG will conduct specimen collection? Will the ONG team be able to work around meals, shift changes, therapies, etc.?	The ONG will take resident care and shift changes into consideration when scheduling their arrival. Any concerns or needs should be discussed with your CCURT Contact Administrator.
38. If my facility already has a confirmed case or presumptive confirmed case of COVID-19, how will that impact our testing?	If the facility has a confirmed case or presumptive positive case, all staff and strategic resident testing will take place. A clinical team call will take place to identify the best strategy for resident testing in this scenario.
39. How should administrators inform and educate staff and residents about testing at their facility?	Facilities are encouraged to notify all staff, agency/contract personnel, residents, guardians, powers of attorney, sponsors, and/or other supporters of the facility that this testing will be occurring, and medically-trained members of the Ohio National Guard will be assisting with the testing. The facility is also encouraged to provide these parties with a brief explanation on the purpose of testing and descriptions of other infection control efforts the facility is undertaking at this time to prevent the spread of COVID-19.
40. Can medical professionals employed by or working with the facility perform or assist in performing specimen collection?	Clinical personnel who are appropriately trained to collect specimens for RT-PCR testing may conduct or assist in swabbing of staff and residents. Test results must still be reported in accordance with the ODH Director's Journal Entry of March 14, 2020, "Amended Reporting Requirements for 2019- Novel Coronavirus Under Ohio Revised Code 3721.13 and 42 C.F.R 483.10." Nursing facilities that plan to have their clinical personnel lead or assist in specimen collection and who want to utilize the state's supplies and/or logistical support must work with their Contact Administrator to coordinate a testing plan.
41. How long of a process is this for your typical 100 bed facility?	The ONG will take approximately 30 minutes set up and 30 minutes take down at the facility. While at the facility, an average a National Guard team of 10 medical professionals can gather 80 specimens for testing per hour.
42. Where in my facility will the testing occur?	The National Guard will work with the facility prior to going onsite in order to identify the best area for testing.
Resulting and Aftercare	
43. Can staff continue working while waiting for testing results?	Asymptomatic personnel may work while awaiting test results. All nursing facilities must comply with ODH Contingency and Crisis Facility Staffing Guidance before considering scheduling staff that have tested positive, been exposed to, or are displaying symptoms of COVID-19.

	All staff should continue infection control precautions and should wear appropriate PPE, as potential exposures can occur when personnel come within 6 feet of an infected person for at least fifteen minutes, during performance of an aerosol-generating procedure, or from direct contact with infectious secretions while not wearing recommended personal protective equipment.
44. How will notification of test results occur?	All lab results for staff and residents will be sent back to the nursing facility's identified contact person named in the "submitter information" section of the universal lab requisition form. The lab report will include both positive and negative results for each person tested. Results may be delivered by individual fax. The testing lab will report positive test results on an individual level, and negative results on an aggregate level, to ODH.
45. If staff or residents test positive for COVID-19, will the facility be required to undergo contact tracing?	Yes, if staff or residents test positive within the facility, the LHD will conduct contact tracing within the facility for staff and residents who may have been exposed to COVID-19.
46. Can nursing facilities employ agency staff to help offset any potential staffing shortages due to COVID-19?	Yes, nursing facilities can use agency staff to supplement staff who are unable to work due to COVID-19.
47. Who should I contact if the facility is facing challenges with staffing, supplies, or other areas of concern due to COVID-19?	The CCURT Bridge Team was created to assist nursing facilities after testing has been completed if the facility identifies a staffing or resource need associated with COVID-19. Facilities, LHDs, local hospital partners, and zone leads can contact the Bridge Team for assistance. Information on how to engage and use the Bridge Team can be found in the CCURT Bridge Team Guidance and Information document posted on the Ohio's Testing in Nursing Homes website. The Bridge Team responds to a facility's identified need in emergency situations. The team will collect relevant information from the nursing facility and others on the ground to assist decision making. Once activated, the Bridge Team will coordinate facility communication with all relevant state agencies, the Emergency Operations Center, health care zones, hospitals in the area, and the local health department to provide immediate assistance.
48. What types of support can be accessed through the Bridge Team?	The Bridge Team classifies provider issues as: • Staffing shortages • Evacuation • Supplies, outside of a normal request to the Local Emergency Management Agency (EMA) when lack of a specific supply would endanger the safe operation of the home
49. When can staff who have tested positive, been exposed to, or are	All nursing facilities must comply with ODH Contingency and Crisis Facility Staffing Guidance before considering scheduling staff that

displaying symptoms of COVID-19 begin working again?	have tested positive, been exposed to, or are displaying symptoms of COVID-19. The ODH Contingency and Crisis Facility Staffing Guidance can be found on the Ohio's Testing in Nursing Homes website. This guidance is relevant for all health care personnel, as well as potentially exposed staff not directly involved in patient care (i.e., clerical, food & laundry service.)
50. When should residents with COVID-19 symptoms be transferred from a nursing facility to a higher level of care?	Nursing facility residents who have tested positive for COVID-19 and are asymptomatic or have mild symptoms should continue to receive care in place when clinically appropriate. • Additional detailed guidance regarding caring for individuals with COVID-19 within congregate care settings can be found in the LTSS Toolkit on Ohio's Testing in Nursing Homes website. Clinical guidance to assess an individual's need for hospital care is available as follows: • ODH's Criteria for COVID-19 Positive Skilled Nursing Facility Patient Transfer and Admission to Acute Hospital, which is available on Ohio's Testing in Nursing Homes website.

For additional information, visit coronavirus.ohio.gov.

For answers to your COVID-19 questions, call 1-833-4-ASK-ODH (1-833-427-5634).

Your mental health is just as important as your physical health. If you or a loved one are experiencing anxiety related to the coronavirus pandemic, help is available 24 hours a day, seven days a week. Call the COVID-19 CareLine at 1-800-720-9616.

CORONAVIRUS DISEASE 2019

Ohio | **Department of Health**

Protect yourself and others from COVID-19 by taking these precautions.

PREVENTION

STAY HOME EXCEPT FOR WORK AND OTHER NEEDS

WEAR A FACE COVERING WHEN GOING OUT
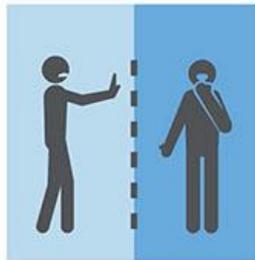
PRACTICE SOCIAL DISTANCING OF AT LEAST 6 FEET FROM OTHERS

SHOP AT NON-PEAK HOURS

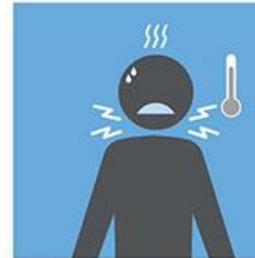WASH HANDS OFTEN WITH WATER AND SOAP (20 SECONDS OR LONGER)

AVOID TOUCHING YOUR EYES, NOSE, OR MOUTH WITH UNWASHED HANDS OR AFTER TOUCHING SURFACES

COVER YOUR MOUTH WITH A TISSUE OR SLEEVE WHEN COUGHING OR SNEEZING

CLEAN AND DISINFECT "HIGH-TOUCH" SURFACES OFTEN

DON'T WORK WHEN SICK

CALL BEFORE VISITING YOUR DOCTOR