

ODH GUIDELINES FOR TESTING OF NURSING HOME RESIDENTS AND STAFF

PURSUANT TO DIRECTOR'S ORDER FOR TESTING OF THE RESIDENTS AND STAFF OF ALL NURSING HOMES DATED MAY 27, 2020

UPDATED August 1, 2020

Effective May 27, 2020 at 11:59 PM, all nursing home facilities are subject to the Ohio Department of Health (ODH) [Director's Order](#) and Guidelines indicated above. The state is supporting efforts to test nursing home residents and staff. The following Guidelines and all documents referenced comprise Ohio's approach to conducting baseline testing for nursing home residents and staff. Nursing facilities completed baseline testing for staff on July 31, 2020. Effective August 3, 2020, all nursing homes will be required to have all employees retested at least once every other week. This document includes information regarding requirements for staff retesting and the state's process for supporting facilities' retesting efforts, as well as guidance regarding resident testing. This document will be updated as testing strategies and processes evolve.

GUIDING PRINCIPLES

Nursing home residents are among the most vulnerable for severe COVID-19 infection 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. To support this work, the state has been divided into three zones, each with a hospital lead, working with local coalitions that include the facility and local health department. As newer evidence reveals a much higher than expected rate of infection for those without symptoms, testing individuals before symptoms are evident can be effective in containing the infection in a more proactive manner.

Ohio's Congregate Care Unified Response Team (CCURT) developed an approach for testing nursing home residents and staff guided by the following principles:

- Protect Ohioans in communities and congregate facilities, including prioritization for nursing home facilities.
- Use the best available clinical information and Centers for Disease Control and Prevention guidance adapted to best meet the needs of Ohioans, including testing prioritization within minority communities.
- Empower local communities with resources to mitigate and control outbreaks.
- Leverage the private sector for resources and partnerships.

APPLICABILITY

Each nursing home licensed by the ODH or certified by the U.S. Department of Health and Human Services, the Centers for Medicare and Medicaid Services (CMS), or the Ohio Department of Medicaid (ODM) shall cooperate with the COVID-19 testing for staff and residents as required by ODH. Each nursing home facility (facility) in Ohio shall require all its current and future employees to participate in testing while the Director's order is in place. Nursing facilities should also test residents when clinically appropriate, with an exception for residents who choose to not participate in testing per their resident rights.

Licensed and/or certified nursing homes 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, employees, contract and agency staff (including phlebotomists, attending physicians, etc.), volunteers, and private caregivers. As part of its infection control activities, the facility may encourage these types of individuals who are not employees, but are contracted to perform services, to participate in the facility's testing plan. Note: per the Director's Fourth [Amended Order to Limit Access to Ohio's Nursing Homes and Similar Facilities, with Exceptions](#) dated July 2, 2020, individuals participating in end-of-life

situations are permitted in-person visitation and should not be required to be tested first. End of life situations are defined in the referenced Director's Order.

Effective May 27, 2020 all facilities were required, per the Order, to perform baseline testing of all nursing home employees. Facilities could meet the **baseline staff testing** requirements of the order by participating in state / Ohio National Guard (ONG)-supported testing, and/or by conducting testing without state support. Baseline testing was completed in all nursing facilities on or before July 31, 2020.

Nursing facilities that conducted baseline employee testing without state support could meet the requirements of the Order if each employee's test for COVID-19 was: (1) conducted on or between May 6, 2020 and July 17, 2020, and (2) performed as a [RT-PCR](#) diagnostic test. Facilities that conducted baseline employee testing without state / ONG support must verify that they met the requirements of the Order by submitting a signed letter with a summary of results on the facility's letterhead to CCURT@odh.ohio.gov.

Effective August 3, 2020 facilities will be required, per the Order, to perform re-testing of their staff at least once every other week. Facilities may meet the **staff retesting** requirements of the order by participating in the state-supported testing plan, which will require facilities to collect specimens (i.e. swab) from staff, and/or by conducting testing without state support.

- Facilities testing without state support should begin testing all employees at least every other week beginning between August 1-14.
- Facilities participating in the state-supported process will also begin testing every other week in August. Due to the roll out of the state-supported schedule, some facilities testing with state support may begin testing every other week after August 14.

Nursing facilities that conduct staff retesting without state support can meet the requirements of the Order if each employee of the facility is tested at least every other week using a diagnostic test performed via (1) a molecular RT-PCR test, or (2) an antigen test using a rapid point of care (POC) device in receipt of a U.S. Food & Drug Administration's [Emergency Use Authorization for COVID-19 In Vitro Diagnostic Medical Devices](#).

All nursing facilities must verify that they have met the requirements of the Order to retest staff at least once every other week by submitting results following each round of testing through the Testing in Nursing Homes Results Survey (link forthcoming.) Responses to the survey will provide summary-level testing results for each round of staff retesting.

All facilities should maintain a complete on-going individual level staff COVID-19 test results for compliance purposes. Staff refusals should be documented along with any staff out on extended leave. Upon ODH request, a compiled list of individual-level testing results must be made immediately available in spreadsheet format and must include the date of testing for each individual. Request fulfilments must remove any personal health information that may identify the individuals. Staff compliance will be reviewed through ODH's survey and certification process.

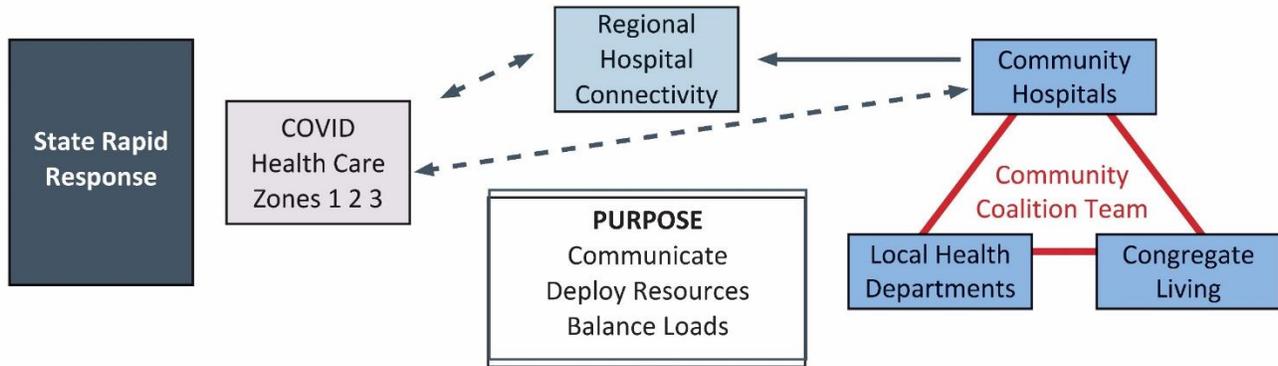
NURSING HOME TESTING TERMINOLOGY, APPROACH, PROCESSES, AND RESOURCES

The Administration of Ohio Governor Mike DeWine created a multi-agency, multi-discipline response team, the Congregate Care Unified Response Team (CCURT), to coordinate testing in congregate care environments. CCURT will provide technical assistance and support to facilities during the COVID-19 pandemic.

Our goal is to save lives, to slow the spread of the virus, and to provide clinically driven approaches through collaboration with facilities, communities, hospital zone partners, and local health departments.

Terminology:

- Congregate Care Unified Response Team (CCURT): in coordination 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 of staff from multiple state agencies who are organized into four key areas of responsibility:
 - Unified Response Teams (URTs): teams of state staff accompany facilities through the testing, resulting, and aftercare processes. A Contact Administrator (CA) from an URT will contact facilities prior to testing, coordinate with other state and local partners, and remain a contact person throughout the testing process. Three teams are being led by:
 - Zone 1 - James Hodge, Chief, Bureau of Regulatory Operations, ODH
 - Zone 2 - Rebecca Sandholdt, Chief, Bureau of Survey and Certification, ODH
 - Zone 3 - Julie Evers, Medicaid Health System Administrator 3, ODM
 - Bridge Team: working with the CCURTs, this team will assist facilities to address urgent staffing, supply, and other needs. This team is described in more detail below.
 - Lab Team: a team that coordinates efforts among ODH and other state-supported labs or commercial labs. By working with all of Ohio's testing labs and monitoring Ohio's lab testing capacity, an efficient schedule for testing can be managed and adjusted to provide an appropriate cadence of testing.
 - Local Health Department Liaisons: state agency staff who work with the local health departments to coordinate and support overall communications, testing, and contact tracing.
- Emergency Operations Center (EOC): unifies Ohio's statewide emergency management by coordinating activities to mitigate, prepare for, respond to, and recover from disasters, including the COVID-19 pandemic. It is important for facilities to continue coordinating with local emergency response and local health departments as they do today unless otherwise instructed in these Guidelines.
- Office of the State Long-Term Care Ombudsman: state employees and regional representatives who advocate for and work with individuals, families, and facilities to offer information, link residents to services, and resolve problems or concerns.
- Local Coalitions: Congregate care facilities, local health departments, and hospitals are forming local coalitions to provide expert infection control and clinical leadership across Ohio. These coalitions coordinate with regional public health and hospital leadership, which coordinate with hospital zone leadership. The purpose of local clinical alignment is to create a broader community view that extends beyond individual facilities and 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, to regional and zone leadership.
 - Organizing for local or community surges.
 - Integrating efforts with state-level monitoring and rapid response.



Approach:

Testing in nursing homes requires collaboration and coordination between facilities, labs, local health departments, Hospital Preparedness Zone leadership, local partner hospitals, and state resources. Testing provides important data for infection control that limits the spread of the virus, as well as person-centered clinical planning.

The CCURT team is overseeing development and deployment of state-supported testing for staff and residents. The ONG is assisting with logistical and operational support for Ohio's collaborative testing effort.

- For **staff baseline testing**, the ONG is performing specimen collection/swabbing at nursing facilities.
- For **staff retesting**, the ONG will provide support for transporting specimens from facilities to laboratories that perform COVID-19 tests.

Staff re-testing specimen collection/swabbing will be conducted by the facility medical staff. Collected specimens will be sent/transported to state-supported and/or commercial labs for COVID-19 laboratory analysis via three options: the ONG will visit the facility to pick-up and transport specimens, a courier will visit the facility to pick-up and transport specimens, or specimens will be transported by a commercial shipping company.

Each facility should work with their local coalitions and assigned partner hospital to conduct testing if needed before the facility's State testing date. If a resident or staff member becomes symptomatic before the facility's State testing timeframe, the facility should not wait for State supported testing and should arrange testing immediately.

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.

- Detailed guidance regarding caring for individuals with COVID-19 within congregate care settings can be found in the [Long-Term Services and Supports Toolkit](#) on [Ohio's Testing in Nursing Homes website](#).
- The facility should follow ODH's [Transfer from Skilled Nursing Facility Protocol](#), which is available on [Ohio's Testing in Nursing Homes website](#), to determine if a resident should be transferred to the hospital.
- If a hospital-level of care is not required and the facility determines it cannot meet the individual's needs in the present location, the facility may also consider transferring the resident who needs to be quarantined or isolated to a Health Care Isolation Center

State Support for Staff Retesting

The following is an overview of the process being used to support nursing homes with ongoing testing for staff every other week. The process for testing staff outlined below recognizes the need to:

- Coordinate resources, including lab testing capacity across lab sites.
- Coordinate the testing schedule.

- Communicate with facilities, labs, local health departments; hospital zone and local hospital partners, and regional health care coordinators.
- Provide technical assistance and support to facilities throughout the retesting and aftercare process.
- Provide additional guidance for facilities to ensure access to testing for residents through local health departments and partner hospitals.

The outline below provides an overview of the steps and actions involved in this effort. Note: changes in these steps and actions are likely to be implemented as teams gain new insights into best practices and processes.

While the initial baseline specimen collection for staff testing was performed by the ONG, **specimen collection/swabbing for staff retesting will be performed by facility staff**. The state will support transportation of collected specimens to the facility's assigned lab. The CCURT and ONG will provide logistical support to facilities throughout this process. Facilities are strongly encouraged to continue educating staff about the need for re-testing and the specimen collection process. Informational resources to educate residents and staff on the importance of testing can be found on [Ohio's Testing in Nursing Homes website](#).

Process for Retesting Facility Staff

The outline that follows is primarily intended to detail the process for retesting staff of facilities, Questions regarding the applicability of this process to your facility should be directed to CCURT@odh.ohio.gov.

THE FOLLOWING SECTION APPLIES TO STAFF RETESTING ONLY

Scheduling & Planning

1. Facility Identification, Notification, Survey, & Webinar

- a. Facilities will be asked to fill out a scheduling [survey](#) by July 28th, 2020 to provide information that will assist CCURT with the scheduling and planning process.
 - i. Facilities that plan to conduct testing that meets the requirements of the Order without state support should use the scheduling survey to “opt-out” of the state-supported process for staff retesting testing.
 1. Nursing facilities that “opt-out” of state supported testing are responsible for ensuring all staff are tested at least once every other week.
 2. Facilities that “opt-out” of state/ONG support will be required to verify ongoing compliance with the order by filling out the Testing in Nursing Homes Results Survey (link forthcoming). The survey response will provide summary-level testing results for all facility employees.
 3. The facility should maintain a complete ongoing individual-level staff COVID-19 test results for compliance purposes. An ongoing list of resident testing results should also be maintained. These lists must be made available to ODH upon request.
 - ii. Facilities that opt-out may opt back in later by contacting CCURT@odh.ohio.gov.
 - iii. The CCURT may share facility survey results with the following groups for planning purposes:
 1. Zone leads, partner hospital contacts, and labs assigned to the facility
 2. ONG members who will be planning the mission to pick up and deliver specimens.
 3. The LHD where the facility is located.
- b. The CCURT will develop and disseminate a list of facilities and corresponding specimen collection/swabbing and pick-up dates
 - i. Facilities will be expected to collect staff specimens/swabbing on the collections date identified and have specimens ready by the pick-up date.

2. Training and Support for Staff Retesting

- a. The CCURT team and members of the state supported lab or the commercial lab will provide training and technical assistance to facilities about the staff retesting testing process through regularly occurring webinars.
 - i. Webinar attendees will include facilities, Zone clinical and lab leads, state-supported lab leadership, local health departments, and local partner hospitals.
 - ii. The webinar will address:
 1. An overview of the staff retesting process and operations.
 2. Details about the commercial lab account set-up, lab requisition form(s) and clinical orders for tests, ordering clinician information, and the clinicians NPI number along with the registration process.
 - iii. Attendees will have the opportunity to ask questions.
- b. The CCURT prepared the following training materials for facility personnel who will conduct specimen collection/swabbing:
 - i. A [clinical checklist](#), and
 - ii. A [training video](#).
- c. Additional training and technical assistance regarding will be available through CCURT/Zone clinical leads regarding:
 - i. Infection control,
 - ii. Return to work guidance, and
 - iii. Caring for residents with positive results.

3. Lab Assignments, Portal Set-Up, Ordering/Requisition Process

- a. The CCURT will assign each facility to a state-supported or commercial laboratory to process COVID-19 tests. *Please note, all lab assignments are subject to change based on lab capacity and statewide testing needs, and the lab assigned to a facility for staff retesting may be different than the lab that was assigned for the facility's baseline testing of staff.*
- b. Facilities should complete lab processes and forms based on where the samples will be sent – either a state supported labs or commercial labs.
 - i. All order forms must be completed electronically, **and all fields must be completed**, including insurance information for each employee.
 - ii. Facilities are responsible for maintaining record of the medical order.
- c. If the facility has not worked with their assigned lab in the past, they will be contacted to set up an account and/or to access the lab's online portal / requisition system.
 - i. State supported labs - ODH Universal Portal & Form (used by ODH lab, Ohio State University, Dayton Children's Hospital, and University Hospitals).
 1. This process is used by all state-supported labs. Facilities that worked with any one of these labs in the past will be able to use their portal login for work with any of these labs.
 2. The nursing facility will receive an onboarding email from ODH indicating which state supported lab they are assigned.
 3. Facilities must reply to the email to request access to the online portal.
 4. Facilities will then be able to fill out individual lab order forms electronically.
 - ii. Commercial Lab – Quest Portal and Form
 1. Commercial labs will reach out to the facility to obtain ordering NPI and to set up their account.
 2. Facilities will receive a welcome letter confirming account number and portal access process.

3. Administrators must set-up their online portal access and enter ordering clinician information
 4. Facilities must out individual patient registration & lab orders.
- d. Ordering / Requisition of Tests
- i. 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.
 - ii. Physicians and other clinicians who order tests for COVID-19 will act within an appropriate standard of care.
 - iii. Staff 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.
 - iv. 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 residents in accordance with the Public Health Order and Ohio State Medical Board regulations. [O.A.C. 3701-17-13\(A\)\(1\)\(b\)\(5\)](#).
 - v. Please see the [CDC's guidelines for ICD-10 coding](#) for information regarding diagnosis codes to include on COVID-19 test orders.
4. Preparing for Retesting of Staff Specimen Collection/Swabbing
- a. Each nursing facility in the state will be assigned a specific specimen collection/swabbing date and specimen pick-up date by the CCURT.
 - b. Test kits will be shipped to the facility prior to their testing day.
 - i. The facility should immediately contact their CCURT zone lead if test kits do not arrive and/or if a sufficient number of test kits are not provided.
 - c. If a facility is facing PPE shortages that compromises the ability of staff to safely perform staff specimen collection/swabbing, the facility should follow the virtual PPE stockpile guidance and work with their designated hospital partner. If assistance cannot be provided through one of those mechanisms contact the CCURT Bridge Team by following the process laid outlined in step 11 of this section.

Staff Retesting

5. Specimen Collection/Swabbing
- a. All specimen collection/swabbing should occur on the date identified by the CCURT as the specimen collection/swabbing date.
 - b. Specimen collection/swabbing should be performed by the facility's appropriately trained staff.
 - c. Prior to specimen collection/swabbing, staff must verify the completion of the required sections on each lab form.
 - d. Facilities should reference and follow the [Clinical Check-List for Specimen Collection of COVID-19 Test](#) when collecting specimens/swabbing.
 - i. This check list was developed to guide identified and trained clinical staff through the specimen collection/swabbing process.
 - ii. An [instructional video](#) on specimen collection/swabbing is also resource to help prepare staff for the specimen collection/swabbing date.
 - iii. Additional questions about performing specimen collection/swabbing can be sent to the CCURT inbox at CCURT@odh.ohio.gov.
6. Packing, Storing, and Pick-up of Staff Retesting Specimens
- a. Each facility will be assigned a specific pick-up date by the CCURT for the collected specimens to be picked up delivered to the facility's assigned lab.
 - b. Facilities should reference and follow the [Check-List for COVID-19 Test Specimen Storage and Transport](#) after collecting specimens/swabbing to properly store specimens.

- i. This check list was developed to ensure collected specimens maintain integrity to be tested.
 - ii. After collection, test kits should be packed into a large clear bag, utilizing a zip tie to shut and close the bag.
 - iii. Specimens must be kept refrigerated until picked-up and transported to the testing lab.
- c. To maintain the collected specimens' integrity, facilities MUST collect/swab staff during the window identified by the CCURT and be prepared for pick-up the following day. Working within the assigned time frame will help ensure specimens transported by the state coordinated team remain viable when they arrive at the lab for testing.
- d. Each facility's specific transportation plan will be communicated to the facility by the CCURT. Facilities will have specimens picked up and delivered to the lab in one of three possible scenarios:
 - i. The ONG will pick-up the specimens for transport.
 - 1. Note: For at least the first two rounds of staff retesting, the Ohio National Guard will transport all specimens from nursing facilities to their assigned lab.
 - ii. A commercial courier will pick-up and transport specimens, following directions given to them by the CCURT.
 - iii. A facility will schedule a specimen pick-up and transport with a shipping company.

Staff Retesting Results

7. Awaiting Staff Retesting Results

- a. The facility should continue daily monitoring of staff and residents for the symptoms of COVID-19.
- b. The local health department and/or partner hospital should be immediately notified if staff or residents develop symptoms.
- c. All nursing facilities must comply with ODH's [Contingency and Crisis Facility Staffing Guidance](#) before considering scheduling staff that have tested positive, been exposed to, or are displaying symptoms of COVID-19.
- d. As outlined in the ODH Contingency and Crisis Facility Staffing Guidance, asymptomatic staff awaiting results can continue to work and should continue COVID-19 infection control precautions, including wearing appropriate PPE.
- e. The facility should continue daily monitoring of staff for the symptoms of COVID-19.
- f. The local health department and/or partner hospital should be immediately notified if staff or residents develop symptoms.

8. Receipt of Staff Retesting Results

- a. Lab results for staff and residents will be delivered to the nursing facility's identified contact person. The lab will report both positive and negative results for each person tested. Results may be delivered through electronic means or fax.

Staff Testing Aftercare

9. Action Based on Receipt of Staff Results

- a. All nursing facilities must comply with ODH's [Contingency and Crisis Facility Staffing Guidance](#) before considering scheduling staff that have tested positive, been exposed to, or are displaying symptoms of COVID-19.
- b. Individuals who test positive for COVID-19 should follow [ODH's Guidance for Discontinuing Transmission-Based Precaution in COVID-19 Patients](#).

10. Bridge Team Assistance with Resident or Staff Related Problems

- a. Should testing and/or results lead to challenging situations, facilities, local health departments, local hospital partners, and zone leads can contact the Bridge Team for assistance. Information regarding engaging and using

the Bridge Team, including its staff augmentation resources, can be found in the CCURT Bridge Team Guidance and Information document posted on [Ohio's Testing in Nursing Home Website](#).

- b. 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.

11. Contact Tracing for Staff

- a. Exposure notification specialists from local health departments will conduct case investigations for staff facilities who test positive for or are diagnosed with COVID-19.
- b. Exposure notification specialists will follow individuals who have been exposed to or test positive for COVID-19 until the end of their quarantine or isolation periods.

State Support for Baseline Staff Testing

The following is an overview of the process that was used to collect baseline specimens from employees and other staff at nursing homes. The process for testing staff outlined below recognizes the need to:

- Coordinate resources, including lab testing capacity across lab sites.
- Identify facilities to be tested and coordinate the scheduling of testing.
- Communicate with facilities, labs, local health departments, hospital zone and local hospital partners, and regional health care coordinators.
- Provide technical assistance and support to facilities from beginning to end of the benchmark testing process.
- Provide additional guidance for facilities to ensure access to testing for residents through local health departments.

The outline below provides an overview of the steps and actions involved in this effort. Note: changes in these steps and actions are likely to be implemented as teams gain new insights into best practices and processes.

Process for Baseline Testing of Facility Staff

The outline that follows is primarily intended to detail the process for testing employees of facilities, particularly for facilities that are not experiencing an acute need for testing of residents or staff. Questions regarding the applicability of this process to your facility should be directed to CCURT@odh.ohio.gov.

THE FOLLOWING SECTION APPLIES TO BASELINE STAFF TESTING ONLY

Staff Baseline Testing Scheduling & Planning

1. Facility Identification, Notification, Survey, & Webinar

- a. The CCURT identifies facilities that will be tested in blocks of time or “sprints.” Staff testing for the sprint period will begin approximately one week after facilities are notified.
- b. Facilities will be asked to fill out a scheduling [survey](#) within 24 hours of notification.
 - i. Scheduling survey questions will be used to help the CCURT and ONG allocate resources and plan for staff testing at facilities across the state.
 - ii. Facilities may use the scheduling survey to indicate that they have already conducted or plan to conduct staff testing that meets the requirements of the Order. Facilities that indicate they already meet or intend to meet the requirements of the order without state/ONG support can “opt-out” of the rest of this process.
 1. Facilities that “opt-out” of state/ONG support must send a signed letter on the facility’s letterhead to CCURT@odh.ohio.gov to verify the facility is in compliance with the public health order once their testing is completed outside of the state/ONG supported

process. The survey response must provide summary-level testing results for all facility employees.

2. The facility should maintain a complete ongoing individual-level staff COVID-19 test results for compliance purposes.
- iii. Facilities that opt-out may opt back in later by contacting CCURT@odh.ohio.gov.
- iv. The CCURT may share facility survey results with the following groups to plan staff testing:
 1. Zone leads, partner hospital contacts, and labs assigned to the facility
 2. ONG members who will be planning the mission to collect specimens.
 3. The LHD where the facility is located.

2. Creation and Confirmation of Staff Baseline Testing Plan

- a. The ONG will reach out to schedule the facility's staff testing day and confirm scheduling survey information. If the scheduling survey has not been completed, the ONG will provide the facility with a link to the scheduling survey.
- b. The CCURT team and members of the state supported lab and the commercial lab will host an informational webinar for all facilities involved in upcoming testing dates.
 - i. Webinar attendees will include facilities, Zone clinical and lab leads, state-supported lab leadership, local health departments, and local partner hospitals.
 - ii. The webinar will provide a detailed overview of the staff testing process and operations.
 - iii. The webinar will provide details about lab processes, lab requisition form(s) and clinical orders for tests.
 - iv. Attendees will have the opportunity to ask questions.

3. Lab Assignments, Portal Set-Up, Ordering/Requisition Process

- a. The CCURT will assign each facility to a state-supported or commercial laboratory to process COVID-19 tests. *Please note, all lab assignments are subject to change based on lab capacity and statewide testing needs.*
- b. Facilities should process specimens and forms based on where the samples will be sent – either a state supported labs or commercial labs.
 - i. All order forms must be completed electronically, **and all fields must be completed**, including insurance.
 - ii. Facilities are responsible for maintaining record of medical order.
 - iii. When filling out lab requisition, facilities should use staff's home address, not the address of the nursing facility. This is key for LHD follow up and contact tracing.
- c. Each facility will receive outreach from their respective lab to establish access to the lab's online portal/requisition system.
 - i. State supported labs - ODH Universal Portal & Form
 1. The nursing facility will receive an onboarding email from ODH indicating which state supported lab they are assigned.
 2. Facilities must reply to the email to request access to the online portal.
 3. Facilities will then be able to fill out individual lab order forms electronically.
 - ii. Commercial Lab – Quest Portal and Form
 1. Commercial labs will reach out to the facility to obtain ordering NPI.
 2. Facilities will receive a welcome letter confirming account number and process.
 3. Administrators can then go through the process for set-up of the online portal and enter ordering clinician information
 4. Facilities should then fill out individual patient registration & lab orders.
- d. Ordering / Requisition of Tests

- i. All fields within the test requisition / order must be completed, including insurance information.
- ii. 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.
- iii. Physicians and other clinicians who order tests for employees/staff will act within an appropriate standard of care.
- iv. Staff 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.
- v. 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\(A\)\(1\)\(b\)\(5\)](#).
- vi. Please see the [CDC's guidelines for ICD-10 coding](#) for information about diagnosis codes to include on COVID-19 test orders.

4. Confirming Staff Baseline Testing Day Logistics

- a. The ONG team will complete a final logistics confirmation for each facility at least 24 hours before their visit.
- b. The ONG team will have all the necessary testing kit supplies /PPE, they may need a table depending upon the facility's set-up.
- c. Test kits may be shipped to your facility for your staff testing day, or the ONG may bring them when they arrive.
 - i. If staff testing kits are shipped to the facility, please confirm the number of kits you receive is greater than the number of people you indicated would be tested during the final confirmation call.
 - ii. Please reach out to your contact administrator if you believe the facility received fewer kits than anticipated

5. Baseline Testing Day for Staff

- a. All testing will occur inside the facility. The ONG team will arrive, don PPE, and set-up.
- b. The facility will need to provide staff to escort ONG teams, and they may need to provide a table for the ONG to use while onsite.
- c. Prior to swabbing, the ONG team will verify the completion of the required sections on each lab form.
- d. The ONG will perform swabbing to collect specimens.
- e. While onsite to conduct staff specimen collection, the ONG will have extra test kits and will collect specimens from residents who are experiencing symptoms or may have been exposed to COVID-19.
- f. The ONG will conduct tear-down activities, exit the premises, and ensure kits are delivered to the facility's assigned laboratory.
- g. Nursing facilities are responsible for ensuring all employees, including those who are not present on testing day and any new hires, have a baseline COVID-19 test. Facilities should verify that they meet this requirement within three weeks of the ONG's visit to the site or within 3 weeks of hiring.
- h. ONG teams will deliver staff testing specimens to labs based the CCURT assignment.

Staff Baseline Testing Results

6. Awaiting Staff Testing Results

- a. 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. This guidance is available on [Ohio's Testing in Nursing Homes website](#).
- b. As outlined in the ODH Contingency and Crisis Facility Staffing Guidance, asymptomatic staff can continue to work and should continue COVID-19 infection control precautions, including wearing appropriate PPE.
- c. The facility should continue daily monitoring of staff for the symptoms of COVID-19.

- d. The local health department and/or partner hospital should be immediately notified if staff or residents develop symptoms.

7. Receipt of Staff Test Results

- a. Lab results for staff and residents will be delivered to the nursing facility's identified contact person. The lab will report both positive and negative results for each person tested. Results may be delivered through electronic means or fax.
- b. The testing lab will report positive test results on an individual level and negative results on an aggregate level to ODH 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."

Staff Baseline Testing Aftercare

8. Action Based on Receipt of Staff Results

- a. 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.
- b. All nursing facilities should follow the Contingency and Crisis Facility Staffing Guidance posted on [Ohio's Testing in Nursing Home website](#) for staff who have tested positive.

9. Bridge Team Assistance with Resident or Staff Related Problems

- a. Should staff testing and/or results lead to challenging situations, facilities, local health departments, local hospital partners, and zone leads can contact the Bridge Team for assistance. Information regarding engaging and using the Bridge Team, including its staff augmentation resources, can be found in the CCURT Bridge Team Guidance and Information document posted on the [Ohio's Testing in Nursing Homes website](#).
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

10. Contact Tracing for Staff

- a. Exposure notification specialists from local health departments will conduct case investigations with staff and residents from nursing facilities who test positive for or are diagnosed with COVID-19.
- b. Exposure notification specialists will follow individuals who have been exposed to or test positive for COVID-19 until the end of their quarantine or isolation periods.

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-

CORONAVIRUS DISEASE 2019

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

PREVENTION

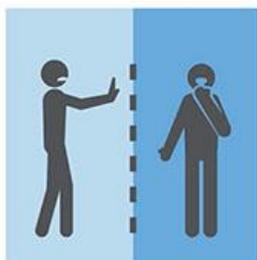
For additional information call 1-833-4-ASK-ODH or visit coronavirus.ohio.gov.



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

800-720-9616.