



Visit our COVID-19 Page Here

Dear Member:

#### **CMS extends NHSN deadline to May 31st**

CMS is requiring all Medicare certified Nursing Homes to enroll and begin submitting data to NHSN. Although the initial reporting deadline is May 17th, CMS is allowing a grace period. May 31st is when they will start issuing warnings followed by fines. **Importantly, you still have time.** Healthcentric Advisors, a member of the IPRO QIN-QIO, is hosting Office Hours to help you navigate the NHSN COVID-19 module for long-term care facilities. **Starting this week, join Healthcentric Advisors weekdays, at 10 am or 2 pm .** During each session, their QI experts will briefly outline need to know details (including the requirements, deadlines, process, & lessons learned) and then open the floor to address your questions. Registration is limited. [Reserve a session spot.](#)

#### **Highlights from today's CDC Call**

- During today's call with Rita Owsiak, it was mentioned that the CDC has updated their guidance for Infection Control practices in **healthcare settings**. These recommendations coincide with the newly released CMS guidance regarding a tiered approach to reopening nursing homes. In addition, there are recommendations for dedicated full-time infection preventionists in buildings with over 100 resident beds.
- There was also discussion regarding outdoor visitation during the gradual state reopening. Rita discussed driveway parades, plexiglass 'chatter boxes' and roped off areas of lawn. She states that outdoor visits are a better option than in facility visits and suggested that facilities look at their outdoor areas for where it may be feasible to allow visits that allow for 6 feet of social distancing between resident and family. In addition, she recommends that the CDC guidance of masking for both the resident and their family member be required for such a visit. (SEE today's Innovation Corner)
- The definition of outbreak (3 or more positive COVID-19 individuals) has not changed.
- There were several questions regarding the allowance of hairdressers into homes. The CDC specifically notes hairdressers as 'non-essential personnel' and that the risk to allowing entrance outweighs the benefit. However, in previous conversations

with the Maine Division of Licensing, there was discussion that if the hairdresser was an independent practitioner and was able to follow the Governor's guidelines for reopening, that facilities may allow these individuals into buildings following strict screening, infection control and PPE usage. The CDC guidance differs from Licensing's position, stating that this is not recommended or defined as essential at this time. MHCA has reached out to Licensing for further clarification.

### **Innovation Corner – Outside visitation plan yields 134 visits per week!**

Yesterday, we shared Caribou Rehab & Nursing Center's plans for outside visitation, including the facility's template to ensure appropriate social distancing is maintained. Today, the facility called the primary family member of each of its 57 residents to determine interest and plan for staffing. Families were thrilled, and some brought to tears, at the very thought of visiting their loved one in person. The results of this phone survey established a demand of 134 visits per week (19 visits per day). **This translates into approximately a third of all the facility's residents being visited every day.** We can't wait to hear how it goes and applaud the facility for its staffing and infection control commitment to facilitate this for its residents and their families. We will follow up in a future Daily Briefing.

### **Today's Corner – Everyone loves a parade!**

Parades are popping up at facilities across the state and have proven to be a safe, effective way to visit residents and show appreciation for staff who are working hard during this pandemic. Take a minute to visit the news links or Facebook pages of these members to see the parade and peruse the positive comments. Happy residents, staff, families and good PR too!

- Hosting a colorful and festive parade of family members and friends at [Marshall Healthcare](#)
- A car parade in support of the incredible frontline staff superheroes at [Sentry Hill at York Harbor](#), [Durgin Pines](#), and [Gorham House](#)
- Encouraging connection through a Mother's Day Parade for the residents of [Eastside Center for Health and Rehab](#)
- Hosting a family car rally/parade to the delight of residents and loved ones alike at [The Lincoln Home](#)
- A socially distanced parade for the residents of [Courtland Rehab](#)

If you have an idea to share, please email [ngrosso@mehca.org](mailto:ngrosso@mehca.org) with **Innovation Corner** in the subject line.

### **Revised OSHA Policies**

The U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) has adopted [revised policies](#) for enforcing OSHA's COVID-19 requirements, which will become effective May 26, 2020. The [previous memorandum](#) will be rescinded.

OSHA is increasing in-person inspections at all types of workplaces. In geographic areas with sustained elevated community transmission or a resurgence, OSHA will prioritize on-site inspections for high-risk workplaces, such as health care providers treating patients with COVID-19.

OSHA is also revising its previous enforcement policy for recording cases of COVID-19. Under OSHA's recordkeeping requirements, COVID-19 is a recordable illness. Employers are responsible for recording cases of COVID-19 if the case:

- Is confirmed as a COVID-19 illness
- [Is work-related](#)
- Involves one or more of the [general recording criteria](#) such as medical treatment beyond first aid or days away from work.

Under the new policy issued, OSHA will enforce [recordkeeping requirements](#) for employee COVID-19 illnesses for all employers. OSHA acknowledges the difficulty in determining whether a COVID-19 illness is work-related, especially when an employee has experienced potential exposure both in and out of the workplace. OSHA's guidance emphasizes that employers must make reasonable efforts, based on the evidence available to the employer, to determine whether it would be considered work-related.

Thank you for all you do to care for your residents and staff.

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