



Visit our COVID-19 Page
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Dear Member:

Update on Maine Distribution of Electronic Devices

We have been diligently working to obtain a supply of IPAD devices to distribute to Maine facilities and as of this morning, our vendor has received enough stock into their Chicago warehouse to ship the 203 iPads needed to complete this distribution. We are anticipating delivery Tuesday or Wednesday of next week and will reach out as soon as possible to facilitate delivery. Thank you for your patience!

Recap of This Week's Maine CDC Call with Rita Owsiak and Carrie Rice

During yesterday's call with the Maine CDC HAI Team Rita discussed the current trends of information being reported in to NHSN from our facilities. Each week the CDC and the QIO work hard to review the information entered and the information left outstanding in order to prevent facilities from being penalized for non-compliance of data entry. THE ONLY WAY to ensure that the team within Maine (CDC/QIO) has the ability to aid in the avoidance of a \$1000 fine for not entering the data is to confer rights to the Maine provider group. PLEASE have your NHSN designee do the following:

1. Log into NHSN and select NHSN LTC Reporting
2. From the left-hand menu, select Group, then Join
3. Enter the Group ID (19515) and Group Joining Password (QIOHcA2020!). Password is case-sensitive.
4. Then click Join Group
5. When the Confer Rights Long-Term Care screen comes up, click Accept

By conferring right and reporting by Wednesday, the QIO will analyze each facilities data to ensure timely completion of modules to prevent citation. The Maine CDC further analyzes data for quality control.

Q&A:

Where can we find expanded definitions on compassionate care?

CMS FAQ question 2 at the following site for Compassionate Care visits:

<https://www.cms.gov/files/document/covid-visitation-nursing-home-residents.pdf>

Can we accept donations of Books & Magazines? If yes, is a Quarantine period needed?

Evidence shows COVID-19 is primarily spread from person to person, mainly through respiratory droplets produced when an infected person coughs, sneezes, or talks. [federal CDC: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html#Spread>]. Donations of books and magazines may be accepted without a quarantine period. General Infection Control: Perform hand hygiene after handling donated materials.

What is the plan for use of Antigen Testing in Nursing Homes?

According to the Maine CDC:

- Symptomatic persons (within first 5 days of symptom onset) – **Agreement OK to Use**
- Universal screening or baseline testing/retesting – **Lack of Consensus from Experts**

Baseline Testing/Retesting – who covers costs?

- Swabs obtained through County EMA = **FREE**.
- Swabs obtained through other vendors = **Responsibility of Facility**
- Specimen collection fees, if any = **Responsibility of Facility**
- Specimen transport to laboratory = **Responsibility of Facility**
- Can the Swab and Sends be used to transport specimens to HETL?– **Not at this Time**
- Testing of specimen at HETL (Maine State Public Health Laboratory) = **FREE**
- Testing of specimen at other clinical laboratory = **Responsibility of Facility**

Should vendors be included in facility baseline testing/retesting plan?

All vendors should be screened before entering the facility. If the vendor is routinely in the facility (e.g. daily, weekly), then yes. If vendor is only in the facility occasionally, then no. Which vendors are included or excluded in the testing plan is for the facility to determine.

New Email for Maine CDC Consultation questions: MeCDC.HAI@maine.gov Please use this email for all consult questions as it will go to all HC EPI staff, so if some one is out of the office, your email will reach others.

Updated Call Schedule: 08/26/2020 is the last scheduled meeting with Rita and Carrie

Following the meeting next week the Maine CDC plans to **provide updates through:**

- Newsletters (e.g. MHCA)
- Individually scheduled webinars
- Email questions to MeCDC.HAI@maine.gov

MHCA and LeadingAge ME/NH feel strongly that these calls are an important piece of assisting our facilities with COVID response and preparedness. We will continue to advocate for a continued call schedule (perhaps modified) that would allow for updates directly from the Maine CDC to our member facilities. We will update members as this occurs.

Federal CDC Interim Guidance on Rapid Antigen Tests

This week, the Centers for Disease Control and Prevention (CDC) released new [interim guidance](#) on rapid antigen testing for COVID-19. The key points that members should be aware of include:

The two rapid antigen tests on the market (BD Veritor and Quidel Sofia2, which are being sent to all nursing homes by CMS) are currently intended for use in diagnostic testing of symptomatic patients within five days of symptom onset.

Through this new guidance, CDC expands use of these rapid antigen tests to include use as screening tool in congregate settings (such as a nursing home) for staff and residents.

All long term care facilities must defer to state or local guidance on their use. If no such guidance exists, you may consider following CDC guidance.

Evaluating the test results must be done in context with the person's symptoms and how likely COVID-19 is in the group of people getting the tests, which is usually similar to the community's rate of COVID-19.

Providers who are utilizing these antigen test devices must undergo proper training and be able to demonstrate competency and completion.

It's very important that providers who are utilizing the point of care antigen test device understand this new CDC guidance. AHCA/NCAL has developed a more comprehensive [summary](#) here that members can utilize.

AHCA/NCAL has also added information on how to access training for both antigen devices (BD Veritor and Quidel Sofia2) to its [summary](#) of important steps providers must take in preparing to use these testing devices.

Additionally, CMS is expected to update the list of nursing homes receiving the point-of-care (POC) antigen tests later today (Thursday, August 20).

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

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