



## Long-term care FAQs

### **Q: What is being done to protect long term care (LTC) residents from COVID-19?**

A: Administrators have been instructed to restrict visits, cancel group activities, shut down dining rooms and screen residents and staff for fevers and respiratory diseases.

### **Q: Are LTC residents and staff required to be tested for COVID-19?**

A: Yes. The Illinois Department of Public Health (IDPH) is requiring every skilled and intermediate LTC facility to test all residents and staff for COVID-19 (starting May 28, 2020). Each facility must collect specimens and arrange for laboratory testing. The number of residents and staff tested, and the number of positive, negative, and indeterminate test results are to be reported to public health officials.

### **Q: What steps must an LTC facility take?**

A: Each LTC facility needs to develop and to implement a written COVID-19 testing plan and response strategy by June 11 that accounts for scenarios when the facility is or is not experiencing a COVID-19 outbreak.

The testing strategy must identify the ordering physician, method of obtaining consents for the test, and the criteria and frequency for testing residents and staff. The results of the testing should be used to identify cases with no symptoms, to confirm infection in cases with symptoms, to evaluate quality indicators, to follow-up on infection control programs, and to support decision-making.

The response strategy must include a policy on personal protective equipment (PPE) that specifies the types and quantity of PPE needed and details the personnel and training required to properly care for the facility's residents.

The facility must also upon request provide a copy of its infection control policies and procedures to residents, to the resident's family or representative, and to IDPH and local health departments.

**Q: Are LTC facilities legally required to notify residents, family, or staff of COVID-19 cases?**

A: An LTC facility must provide notification to staff, residents, the resident's next of kin or guardians, and IDPH when people working or living in the facility are diagnosed with COVID-19. The notification identifies whether the diagnosed individual is a staff member or resident.

**Q: How soon is an LTC facility to provide notification of a COVID-19 diagnosis to family, to a guardian, or to an agency responsible for a resident's care?**

A: Verbal communication is to be provided immediately upon diagnosis as required by 77 Ill. Admin. Code 300.3210(o).

**Q: What other responsibilities does an LTC facility have upon a COVID-19 diagnosis?**

A: Each resident of the facility, next of kin, guardian, or emergency contact is to receive written notification of the fact a resident or worker has been diagnosed with COVID-19. Notification also is required to be posted in a conspicuous place near the main entrance announcing a resident or a staff member has been diagnosed with COVID-19, as is written notification to their local health department.

**Q: What is the responsibility for the LTC facility in the event of a COVID-19 resident death?**

A: The administration of the facility must notify next of kin, emergency contact, or guardian of the resident who passed away within 24 hours.

**Q: Where can I find information about LTC facility outbreaks?**

A: The number of confirmed cases and deaths at long term care facilities from January 24, 2020 can be found at: <http://dph.illinois.gov/covid19/long-term-care-facility-outbreaks-covid-19>. The numbers are provisional and will be updated weekly. LTC facilities will have the most up-to-date information on cases in their facility.

**Q: Why is there a disparity sometimes in LTC testing data between local and state health departments?**

A: LTC facilities first notify local health departments of cases and there can be a lag in time before the information is reported to the state. Once a case is reported, the focus of the state, local health department, and the LTC facility becomes ensuring steps are taken for appropriate infection control, the need for wearing personal protective equipment (PPE), proper use and donning and doffing of PPE, and isolating and/or quarantining residents. Reporting numbers is not the most important function and can wait while the facility and public health focus on resident safety and care.

**Q: Has IDPH issued any LTC citations for deficiencies related to infection control? Staffing shortages?**

A: IDPH's priority is to stop the spread of the virus in facilities to protect the health and safety of residents and staff. Guidance from the federal Centers for Medicare and Medicaid Services is not to issue citations, but rather encourage surveyors to ensure violations are remedied quickly and residents are properly cared for. If warranted, IDPH will use its enforcement powers to hold facilities accountable for uncorrected or egregious violations.

**Q: Should LTC staff exposed to COVID-19 patients wear PPE?**

A: Once there is a confirmed case in a facility, staff are instructed to wear PPE and residents should wear masks. When entering the room of a patient with known or suspected COVID-19, staff should wear a facemask, gown, gloves, and eye protection. LTC facilities, health care workers, and first responders are priorities for distribution of PPE. As of April 19, 2020, the state has supplied more than 5 million surgical masks, more than 1.5 million N95 masks, about 20,000 gowns, more than 4 million gloves, and almost 200,000 face shields.

**Q: Is there a reporting system for LTC supply needs like there is for hospitals?**

A: LTC facilities contact their local health departments for PPE needs and IDPH coordinates with the LHDs to ensure the needs are met.

**Q: How does IDPH keep LTC facilities informed about the latest information on COVID-19 infection control procedures, proper use of PPE, cleaning, isolation/quarantine?**

A: IDPH conducts weekly webinars to help facilities prepare for and prevent COVID-19 from spreading in their facility. In the event of an outbreak, IDPH staff work remotely to provide guidance and instruction, but if additional assistance is needed, public health staff will visit the facility.