



Oregon

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NF-22-025 – Provider Alert



Date: March 31, 2022

To: All Nursing Facility Providers
All Community Based Care Providers

From: Aging and People with Disabilities
Safety, Oversight and Quality Unit (SOQ)

Subject: **Post-Public Health Emergency (PHE) COVID-19 Guidance**

Background: The Public Health Emergency declaration (PHE) in Oregon will be lifted on April 1st, 2022. While many guidelines will change accordingly, we recognize that the COVID-19 virus is still present in our community, and ongoing precautions are necessary. As always, infection prevention and outbreak mitigation efforts remain critically important in long-term care settings where residents are more vulnerable to virus exposure.

Please note that we consider this a transition period where we will deliberately and methodically unwind some of the practices implemented during the COVID pandemic. More changes are likely in the future.

Settings: SOQ has adapted this guidance to include assisted living and residential care facilities as well as nursing facilities. The objective is to keep safe practice standards as consistent as possible across congregate care settings.

Purpose: This guidance outlines updated guidance for nursing facilities, assisted living and residential care facilities specific to vaccination, visitation, testing and COVID-19 reporting.

This guidance supersedes all previous COVID-19 guidance issued by the Oregon Department of Human Services (ODHS).

Executive Orders

The use of Executive Orders (EO) in licensed long-term care settings with active outbreaks of or exposure to the COVID-19 virus will be discontinued effective Friday, April 1st, 2022. However, facilities with active COVID-19 outbreaks are expected to continue following most of the requirements that have historically been contained in the EOs and any other guidance or requirements issued from ODHS, Local Public Health, OHA, CMS, CDC or other authorities.

All long-term care providers are required to continue reporting new confirmed outbreaks to the licensing team within SOQ. Additionally, providers must report to SOQ once the outbreak has been cleared.

For the purposes of this guidance, the term outbreak refers to one or more active cases within a facility.

Ongoing requirements for confirmed outbreak management include:

- **MAINTAIN POSTED SIGNAGE INDICATING OUTBREAK STATUS.**
- **CONTINUE REPORTING OUTBREAK STATUS AS DIRECTED BY OREGON HEALTH AUTHORITY AND LOCAL PUBLIC HEALTH OFFICE.** Providers should continue to report all positive cases of COVID-19 among staff and residents to their [local public health authority](#) within 24 hours. Additionally, any hospitalizations or deaths that occur among patients with COVID-19 should be reported to the LPHA. Reporting may be done via phone, secure e-mail, or through a secure web-based line list (if utilized by the LPHA).
- **EMPLOYEE AND STAFF COVID-19 TESTING:** Licensee must ensure 100% of staff and residents are tested for COVID-19 within 72 hours when a resident or staff member has tested positive for COVID-19, as required in [OAR 411-060-0030](#). ODHS and OHA will continue to work on developing guidance to support transitioning to unit-based testing where appropriate in the near future.
- **ADMISSIONS/ READMISSIONS:** Licensee is allowed to admit or readmit residents during a confirmed outbreak when all of the following criteria are met:
 - Facility is cohorting all confirmed and suspected COVID-19 cases,
 - The facility has sufficient staff to meet the needs of the residents,

- All infection control measures are implemented and strictly followed and monitored in accordance with OHA, CMS and CDC guidelines, and
- When the facility has any COVID positive residents, the facility has dedicated staff to care for COVID positive residents.
- **VISITATION:** Licensee shall allow indoor and outdoor visitation at all times and for all residents in a manner that adheres to the core principles of infection prevention and control as outlined in the most recent revision of [QSO-20-39-NH](#). Please note these standards apply to Assisted Living and Residential Care as well as Nursing Facilities.
- **COMMUNAL ACTIVITIES, DINING AND RESIDENT OUTINGS:** Licensee shall follow all CMS guidance regarding communal dining and group activities in an effort to minimize the risk of spreading COVID-19 as outlined in [QSO-20-39-NH](#). Please note as of this date, requirements for physical distancing are still in place by Oregon OSHA. Please note these standards apply to Assisted Living and Residential Care as well as Nursing Facilities.
- **RELOCATE RESIDENT(S) TO PRIVATE ROOM IF AVAILABLE:** If available the Licensee will move the resident(s) with suspected or confirmed COVID-19 to a licensed room that lowers the risk of spread of infection (shared to private room), unless otherwise instructed by Public Health.
- **FAMILY MEMBER/ AUTHORIZED REPRESENTATIVE NOTIFICATION**
 - Facility must send notification to family members and/or authorized representatives informing them of confirmed COVID-19 infection in the building.

Masking

Masking requirements remain in place in licensed healthcare settings as outlined in Oregon Administrative Rule (OAR) 333-019-1011, including long-term care facilities licensed by ODHS. Masking is required for staff and visitors. Residents should be encouraged to wear masks in all areas outside of their immediate living space.

Screening

Facilities must continue screening protocols for individuals entering the building. Screening should be limited to checking for current symptoms, and whether visitors meet criteria outlined for resident quarantine, regardless of vaccination status. Facilities may not use vaccination status as a requisite criterion for entering the building.

NOTE: EMS personnel responding to an emergent situation should not be screened so they can attend to an emergency without delay. All facility staff, including individuals providing services under arrangement as well as volunteers, should adhere to the core principles of COVID-19 infection prevention and must comply with [OAR 411-060](#), COVID-19 Testing in Licensed Assisted Living Facilities, Nursing Facilities and Residential Care Facilities.

Visitation

Visitation is allowed in all long-term care settings where active outbreak management protocols are not in place. Providers must ensure appropriate infection control practices are maintained, including regular disinfecting of high-touch areas, PPE and social distancing. Visitation may occur indoors or outdoors, but outdoor visitation is *preferred* for individuals who are not fully vaccinated. Facilities may not require visitors to disclose vaccination status as a condition of the visit.

While previously acceptable during the PHE, facilities may no longer limit the frequency and length of visits for residents, the number of visitors, or require advance scheduling of visits. Visitors should be able to adhere to the facility infection control policies, including symptom screening upon entry, handwashing, and the appropriate use of masks and other PPE as necessary. Facilities may offer to test visitors but cannot require visitors to test as a condition of the visit.

Routine Testing

Providers must adhere to routine testing guidance issued by CMS. Routine testing of staff who are not up to date with vaccinations should be based on the extent of the virus in the community. Staff who are up to date with vaccinations do not have to be routinely tested.

Level of COVID-19 Community Transmission	Minimum testing frequency of staff who are not up to date
Low	Not Recommended
Moderate	Once a week
Substantial	Twice a week
High	Twice a week

For complete and up-to-date information, please refer to the CDC [testing guidance](#).

Infection Prevention

Providers must ensure comprehensive infection control protocols are practiced, including but not limited to:

- Screening of all potential visitors who enter the facility.
- Hand hygiene performed with the use of alcohol-based hand rub (ABHR) prior to and following visit.
- Face covering or mask covering both mouth and nose.
- Instructional signage is placed throughout the facility and to include proper visitation education on infection control practices.
- Proactive and ongoing visitor education on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of facecovering or mask, specified entries, exits and routes to designated visiting area, hand hygiene).
- Cleaning and disinfecting high frequency touched surfaces in the facility often, and designated visitation areas after each visit.

Vaccination and Vaccination Reporting

Vaccination requirements are detailed in [OAR 333-019-1010](#) and as of October 18, 2021 all individuals that work or volunteer in a long-term care setting are required to have proof of COVID-19 vaccination or an approved exception on file as detailed in OAR 333-019-1011.

Per [OAR 411-061](#), providers are required to continue reporting vaccination status updates as directed by the Oregon Health Authority (OHA). The Centers for Disease Control and Prevention (CDC) released a [statement](#) on March 29, 2022 updating its COVID-19 vaccination guidelines to include an additional booster dose for some adults. In light of these updates, the Oregon Health Authority (OHA) is reviewing its COVID-19 vaccination reporting protocols and will provide updates as soon as possible. In the interim, OHA recommends that facilities document additional booster dose information for staff and residents internally; facilities using the OHA COVID-19 Vaccine Tracking Tools can use the Additional Comments column to document this information.

Tracking tools are available here:

- [Resident COVID-19 Vaccine Tracking Tool](#)
- [Staff COVID-19 Vaccine Tracking Tool](#)

Information about vaccine exceptions can be found on the Oregon Health Authority (OHA) website. Exceptions are approved by providers and are to be kept in the employee's file. The OHA forms are linked below. These forms are not mandatory, and facilities may choose to use their own form, however the same details must be included.

- [Religious exception form](#)
- [Medical exception form](#)

If you have licensing questions, please contact your licensing team:

CBC.team@dhsoha.state.or.us

NF.licensing@dhsoha.state.or.us

Oregon Department of Human Services website: www.oregon.gov/DHS/