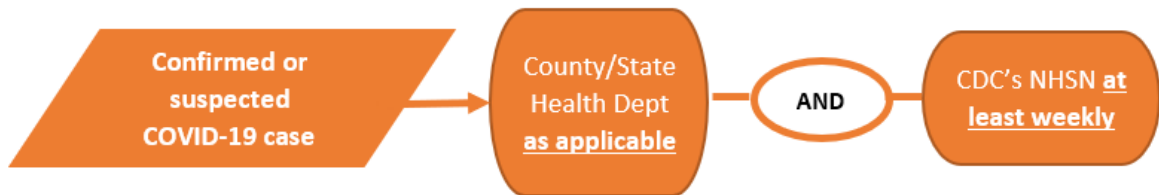


COVID-19 Reporting & Notification Guidelines for Nursing Homes

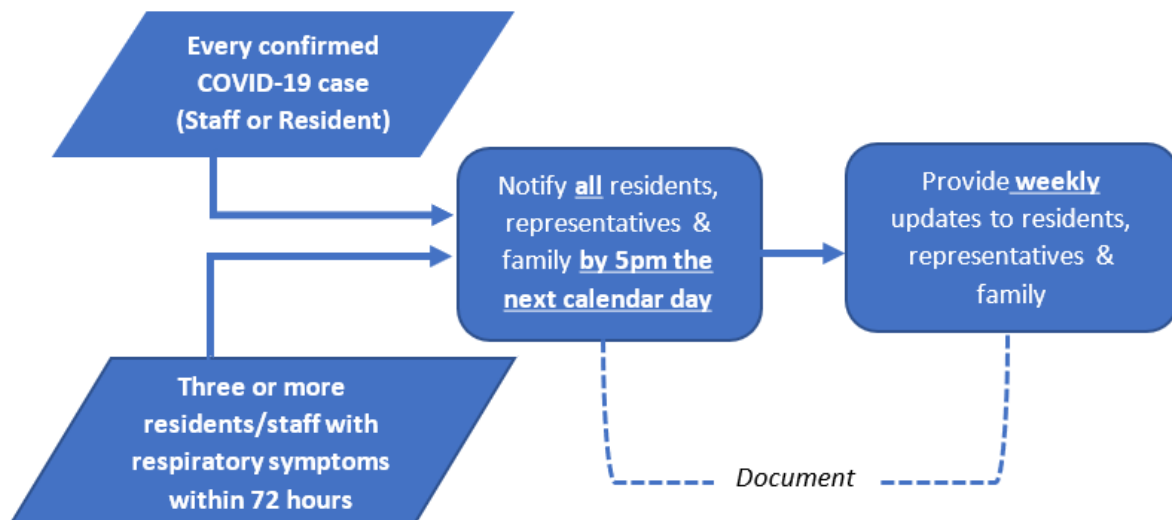
Note: This is a summary of CMS requirements and guidance that went into effect on May 8, 2020.

Summary Flow Charts

1. Reporting Confirmed and Suspected Cases



2. Notifying Residents and Representatives



1. Reporting Cases

- All confirmed or suspected cases of COVID-19, in addition to other required data, must be reported to CDC's National Healthcare Safety Network (NHSN) at least weekly, and to county/state health departments according to their guidelines.
- For details on NHSN Reporting, visit their [website](#).

2. Notifying Residents, Representatives, and Families

- Effective May 8, 2020, for every confirmed case of a resident or staff member AND/OR if a group of three or more residents or staff have new onset respiratory symptoms within a 72-hour period (referred to as a "cluster") the following must occur:
 - Notify residents, representatives, and families **by 5 p.m. the next calendar day** after the occurrence.
 - If you do not have any new confirmed cases or new clusters of 3 or more residents/staff with new onset respiratory symptoms within a given week, you must provide a **weekly** update.
 - Each update must include mitigation actions you are taking.
- This is a [template letter](#) you can use.

When COVID-19 is suspected or confirmed (whether resident or staff) in a nursing home, several notifications must occur.

For each resident in the nursing home who has a COVID-19 positive test (including each additional case after initial cases):

- Notify the resident, their representative, and family when they have a positive COVID-19 test.
- Notify the primary physician for the resident who has a confirmed case.
- Notify the local and state health departments with information per local/state reporting requirements.
- Notify all residents in the facility, as well as their representatives and family members **by 5 p.m. the next calendar day.**
 - This can be done by letter, website posting, listserv, recorded telephone message, or other means that make the information easily accessible.
 - The information reported must be cumulative. According to CMS, this means you must:
 - Report the total number of confirmed cases (residents/patients and staff) that have occurred in the building **since May 8, 2020** (the effective date of the new reporting requirements) at the time of the notification. This number will increase each time a new case is confirmed or remain the same if no new cases have occurred since the last reporting period. In other words, you should not remove an individual from this total if they recover or leave the facility.
 - Note: CMS's [frequently asked questions](#) on these requirements state that the facility is not required to identify new versus total cases in its reports. Whether you choose to report a single number or to identify new versus total cumulative cases is up to your preferred communication approach.
- Include information of efforts taken to mitigate the virus and any changes to normal facility operations.
- **Notifications must be done in accordance with existing privacy regulations and statute and must not include Personally Identifiable Information (PII), such as names or specific medical information.**
- This is a [template letter or script](#) you can use.
- Recommendation: Document in a log or tracking tool that required notification has been provided. Keep a record of time stamped updates to webpages, social media feeds, or recorded messages when notifications have been updated.
- Recommendation: Share the notification provided to residents, representatives and families with staff to keep them informed of the information provided.
- Include in your report as required to CDC's NHSN at least weekly.

For each staff member of the nursing home with a COVID-19 positive test (including each additional case after initial cases):

- Notify the local and state health departments with information per state reporting requirements.
 - CDC [guidelines](#) state the health department should be notified about Health Care Professional (HCP) with symptoms of respiratory infection. Required information may vary by state.
- Notify all residents in the facility, as well as their representatives and family members **by 5 p.m. the next calendar day.**
 - This can be done by letter, website posting, listserv, recorded telephone message, or other means that make the information easily accessible.
 - The information reported must be cumulative. According to CMS, this means you must:
 - Report the total number of confirmed cases (residents/patients and staff) that have occurred in the building **since May 8, 2020** (the effective date of the new reporting requirements) at the time of the notification. This number will only increase each time a new case is confirmed or remain the same if no new cases have occurred since the last reporting period. In other words, you should not remove an individual from this total if they recover or are no longer employed by the facility.
 - Note: CMS's [frequently asked questions](#) on these requirements state that the facility is not required to identify new versus total cases in its reports. Whether you choose to report a single number or to identify new versus total cumulative cases is up to your preferred communication approach.
 - Include information of efforts taken to mitigate the virus and any changes to normal facility operations.
 - **Notifications must be done in accordance with existing privacy regulations and statute and must not include Personally Identifiable Information (PII), such as names or specific medical information.**
 - This is a [template letter or script](#) you can use.
- Recommendation: Document in a log or tracking tool that required notification has been provided.
- Recommendation: Share the notification provided to residents, representatives and families with staff to keep them informed of the information provided.
- Include in your report as required to CDC's NHSN at least weekly.

When three or more residents or staff have new onset respiratory symptoms within 72 hours of each other:

- Notify the resident representative for each resident with new onset respiratory symptoms (resident already knows as this is the person experiencing the symptoms).
- Notify the primary physician for each resident who has new onset respiratory symptoms.
- Notify all residents in the facility, as well as their representatives and family members, **by 5 p.m. the next calendar day.**

- This can be done by letter, website posting, listserv, recorded telephone message, or other means that make the information easily accessible.
- According to CMS, when reporting these “clusters” you must:
 - Report by 5 p.m. the next day every time there is a new cluster (when there are three or more residents/staff with new onset respiratory symptoms within 72 hours of each other).
 - If one or more of the individuals in the cluster tests positive, report this as an increase in cumulative COVID cases in the building (prompting a report by 5 p.m. the next day).
 - Continue to report--at least weekly or whenever a subsequent occurrence of a positive case or new cluster prompts a new required report by 5 p.m. the next day--the presence of the “cluster” in the building **until one or more of the individuals in the cluster is ruled out with a negative laboratory test**. If one or more individuals in the cluster tests negative, there is no longer a cluster of 3 or more and you are no longer required to report it. You do not need to report whenever an individual who was in a cluster is ruled out. However, if a new suspected case occurs, it may create a new cluster within a subsequent 72-hour period, you then need to report that by 5 p.m. the next day and follow the same process outlined above.
 - Note: CMS’s [frequently asked questions](#) on these requirements state that the facility is not required to identify new versus total cases in its reports. Whether you choose to report a total number of current “clusters” in the building at the time of the report (until they are ruled out) or differentiate the reporting of a new cluster from an existing, previously reported cluster, is up to your preferred communication approach.
- Include information on efforts taken to mitigate the virus and any changes to normal facility operations.
- **Notifications must be done in accordance with existing privacy regulations and statute and must not include Personally Identifiable Information (PII), such as names or specific medical information.**
- This is a [template letter or script](#) you can use.
- Recommendation: Document in a log or tracking tool that required notification has been provided. Keep a record of time stamped updates to webpages, social media feeds, or recorded messages when notifications have been updated.
- Recommendation: Share the notification provided to residents, representatives and families with staff to keep them informed of the information provided.
- Notify the local and state health departments with information per state reporting requirements.
 - CDC [guidelines](#) state the health department should be notified about residents with severe respiratory infection or a cluster of respiratory infections (e.g., 3 or more residents or Health Care Professional (HCP) with new-onset respiratory symptoms over 72 hours) and of residents or HCP with symptoms of respiratory infections.



- **AHCA/NCAL NOTE:** COVID-19 would constitute a severe respiratory infection and should be reported; required information may vary by state.
- Include in your report as required by CMS to CDC's NHSN at least weekly.

For all communications above, keep records of notifications that have been made. There is no required format, but it is important to retain documentation because CMS may take enforcement action if timely notifications are not made.