

August 18, 2022

LTC COVID-19 Update

Presented by:

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Today's Topics

- General population, updated CDC guidance – Dr. Vuppalanchi
- Provider questions of the week, Monkeypox quick update – Lori Davenport
- New Surveyor Guidance – Comprehensive Care Plans, Pharmacy Services -- Controlled Medications and Unnecessary Drugs & Psychotropic Drugs – Lori Davenport
- Q&A

Equipping Staff: Infection Control Focused Training & Competency Assessments, a webinar on Sept. 20, details [HERE](#)

Assisted Living Symposium, an in-person event on Nov. 18, details coming soon!

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COVID-19 Management Guidance Member Questions of the week

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COVID Guidance Confusion

Some of the visitors coming to see our residents are really upset when they are required to screen and continue to wear a mask. They are confused with the quarantine guidance that was recently published for the general population.

- Help! – when the guidance comes out and the general population follows one thing and “nursing homes” are mandated to follow another set of guidance – it creates problems at our front door.



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Support

- Is there any platform to support nursing home providers and assisted living with the confusion the general population guidance and how it differs from that when entering a nursing home or assisted living facility?
- A way to help message because there is resistance and confusion.



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Red Unit vs Red Room

- Do I need to have a COVID-19 designated unit and staff when I have an outbreak, or can I keep residents in their home (room)?



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Reporting

- Does the reporting guidance change when the facility has had someone different become positive over several weeks – June and now there are several positive cases in the facility. The first positive was reported back in June, and we have never gone without at least one positive each week. It is now August. Now there are over 10 today that are COVID 19 positive.



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Q & A COVID Questions

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Monkeypox in Healthcare Settings CDC updated guidance for healthcare settings on August 11

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Summary of Changes

- How to monitor exposed residents and when isolation should be implemented.
- Managing exposed employees and when to apply work restrictions.
- Updated risk assessment table for HCW



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Surveyor Guidance Update §483.21 Comprehensive Care Plan F658 & F659 - §483.21(b)(3)

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Overview: Comprehensive Care Plan

- Added to guidance on services provided related to care plan and reporting practitioners not adhering to professional standards of quality (misdiagnosis with antipsychotic use).
 - Misdiagnosed with new diagnosis of schizophrenia
 - Excluded from long stay antipsychotic quality measure
 - **May** require a referral to State Medical Boards or Board of Nursing



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Recommended Actions

- Review related policies and procedures.
- Communicate with practitioners to ensure their understanding of updated guidance.
- Utilize Medical Director for communications to other practitioners.
- Review communications with family, and residents.
- Review procedures with staff.



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§483.45 Pharmacy Services- Controlled Medications F755 - §483.45(a)(b)(1)(2)and (3)

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Pharmacy Services-Controlled Medications

- CMS updated guidance – FDA and manufacturer instructions for how to dispose of used fentanyl patches.
- Fold in half with sticky sides together
- If allowed flush in sink or toilet or use of drug disposal products systems.
- **Minimize accidental exposure or diversion.**



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Recommended Actions

- Review policy and procedure
- Educate appropriate staff of the updated guidance and ensure staff are competent in demonstrating compliance.
- Add to new employee orientation for newly hired licensed staff.



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**§483.45 Pharmacy Services –
Unnecessary Drugs and Psychotropic
Drugs
F757 - §483.45(d) & F758 -
§483.45(c)(3)and (e) Psychotropic Drugs**

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Overview:

- CMS added definitions for Dose, Duplicate Therapy and Excessive dose.
- Added a statement – as part of QAPI program, a facility may track its use of certain classes of medications, such as antipsychotics, through reports from pharmacist which could identify trends and reduce adverse event.



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Continued

- Documentation in the medical record of the diagnosed condition for which a psychotropic medication is prescribed.
- CMS provided a list of medication classifications that affect brain activity and when they fall under psychotropic requirements. – substitution for a psychotropic medications and not for approved indication.



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Continued

- Gradual Dose Reduction requirement guidance – minimize withdrawal and compliance.



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Recommended Actions

- Review policy and procedures
- Meet with pharmacist and discuss enhanced tracking of certain medications classes and ensure documentation captures the reason for prescribes medication.
- Determine use of non-psychotropic medications that still affect brain activity under the psychotropic medication requirement.



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Q & A

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THANK YOU!



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