

## Long-Term Care COVID-19 Phasing Guidance Frequently Asked Questions

June 15, 2020

### Q: What does a long-term care facility need to do today to move from Phase I to Phase II?

A: All facilities are currently in Phase I of the Phasing Guidance. Facilities will now be allowed to progress to Phase II by meeting the basic requirements for Phase II and by the facility's respective local health district having achieved the equivalent directed health measure (DHM) phase of Phase 2.

### Q: Are facilities required to test all staff and residents for baseline testing to move into Phase III?

A: No. Facilities must complete baseline testing for all staff at minimum. It is recommended to complete testing for residents, but it is not a requirement.

### Q: Is my facility required to use TestNebraska to complete baseline testing, or can we use another testing source?

A: Facilities are not required to use TestNebraska. TestNebraska is being offered by the state to help facilitate testing at no charge to facilities for specimen collection materials, laboratory testing, and personal protective equipment (PPE). If a facility chooses to use another testing service, this will still meet baseline testing requirements but will not be reimbursable by the state.



### Q: If my facility is interested in completing weekly or other regular testing of staff or residents can we use TestNebraska?

A: TestNebraska is intended to be used for baseline testing of facilities' staff and residents, and testing related to positive cases in a facility. Due to limited resources of TestNebraska and the need to utilize TestNebraska resources for other testing throughout the state, regular testing is not an option at this time. If a facility is interested in completing regular testing, the facility should work with another testing service to complete this frequency of testing.



### Q: Does my facility need to wait to complete baseline testing?

A: A facility can start scheduling testing as soon as possible. Please complete the survey found [here](#) to start this process.



### Q: If a resident or staff member tests positive, does the facility automatically return to Phase I?

A: The facility will not automatically return to Phase I, but they will need to notify and work with their local health department immediately to determine if regression is needed. Depending on the scale of the exposure and the ability of the facility to isolate or quarantine those exposed, regression to Phase I for the entire facility may not be required.



**Q: Is my facility required to progress through the Phases?**

A: Facilities are not required to progress through the phases. Facilities should consider what is in the best interest of their residents, staff, and the facility before progressing through to the next phase. Facilities are able to be more restrictive than the phase equivalent to their local health department directed health measure (DHM) phase; however, facilities cannot progress beyond the phase equivalent of their local health department DHM. For example, if the local health department DHM is equivalent to Phase II in this guidance, the facility may be as restrictive as Phase I but may not progress to Phase III in this guidance.

**Q: My facility has had no COVID-positive residents or staff, so we would like to advance to Phase II and begin lessening restrictions; but our local health department is still in Phase I, so we are not able to progress to Phase II. Why is the phasing guidance for long-term care facilities based on the DHM phase of a local health department?**

A: Even though a particular facility may not have experienced cases in their facility, either in staff or in residents, their surrounding community may be experiencing a substantial number of cases. Residents over the age of 65 or with some chronic conditions are at an increased risk for severe outcomes. Restrictions included in the Directed Health Measures (DHMs) are carefully considered prior to being added or removed from a particular local health district. DHM restrictions are intended to help reduce transmission of coronavirus to protect community members and not overwhelm the local health care system. In order to minimize the possible risk for resident exposure to coronavirus, it is important that local community spread and other factors (like those reflected in the DHMs) be considered before reducing restrictions for vulnerable populations like residents of long-term care facilities.