



**To:** Adult Care Facility (ACF) Operators  
**From:** Division of ACFs and Assisted Living Surveillance  
**Subject:** Guidance Regarding ACF Operations During COVID-19 Outbreak  
**Date:** March 22, 2020

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ACFs should review existing guidance issued by the Department of Health (“Department”), posted on the Health Commerce System and online at <https://coronavirus.health.ny.gov/home>. Please refer inquiries to the established email address: [covidadultcareinfo@health.ny.gov](mailto:covidadultcareinfo@health.ny.gov).

In response to inquiries received to date, the Department provides the following guidance:

### **Personal Protective Equipment (PPE)**

**Question #1:** How does an ACF request PPE?

**Answer #1:** To request PPE, ACFs must utilize the existing process through the local Office of Emergency Management (OEM). If you need help, email [covidadultcareinfo@health.ny.gov](mailto:covidadultcareinfo@health.ny.gov). ***Please always ensure that the identified Point of Contact listed in the request will be immediately available when contacted.***

[The existing PPE request process is below as reference:](#)

1. Use existing vendor agreements and procurement plans to place orders for quantities needed by type and size of PPE.
2. Activate existing Mutual Aid Agreements to obtain available support from those partners.
3. Notify County Office of Emergency Management (OEM) when all existing agreements are exhausted and supply needs exceed those available from these sources.
4. Coordinate with County OEM to identify and utilize other existing county resources.
5. Notify the respective Department’s Regional Office of ongoing need.
6. If all local resources have been exhausted, submit a request via the County OEM, to the New York State OEM. The request **must** include as much detail as possible, including, at minimum, the following elements:
  - Type and Quantity of PPE by size;
  - Point of Contact at the requesting facility or system;
  - Delivery location;

- Date request is needed to be filled by; and
- Record of pending orders.

Upon receipt of a request submitted to NYS OEM, the Department will be notified and will use the information provided to validate the request and its ability to meet the identified need. ACFs should ensure that the identified Point of Contact listed in the request will be immediately available.

### **Criminal History Record Check (CHRC)**

**Question #1:** Will the Department continue to allow for documented supervision of provisionally hired direct care staff while awaiting fingerprint results?

**Answer #1:** Yes, there has been no change in the requirement for supervision of provisionally hired staff.

**Question #2:** During the emergency response, will the Department waive verification of newly hired employees against the Justice Center for the Protection of People with Special Needs Staff Exclusion List and the Office of Children and Family Services Statewide Central Registry of Child Abuse and Maltreatment State Central Registry?

**Answer #2:** No, there has been no change to this requirement.

### **Required Medical Evaluations**

**Question #1:** Will the Department waive the requirements for annual medical evaluations for existing employees and residents?

**Answer #1:** The Department recognizes this extraordinary time and, as such, requires that an ACF unable to secure necessary medical evaluations for existing employees and residents shall:

- A. Screen the existing employee(s) for symptoms of communicable disease and document such finding in the employee's record, and document the date of the scheduled appointment when known; and
- B. Discuss the existing resident's needs with his or her primary care physician, request prescription refills that may come due when the medical evaluation is due, document in case management notes such outreach and results, and when known, the resident's appointment date.
- C. If possible, use telehealth.

**Question #2:** Will the Department require that prospective employees and residents receive medical evaluations?

**Answer #2:** Yes. The medical evaluation should be done via telehealth, if possible.

## **Uniform Assessment System – NY (UAS-NY)**

**Question #1:** Will the Department continue to require a Community Health Assessment (CHA) based on a face-to-face assessment for assisted living program (ALP) participants?

**Answer #1:** Yes, there is no change in the requirement for a CHA. To promote compliance and avoid unnecessary exposure to COVID-19, effective immediately and until further notice, registered nurses may conduct the CHA by telephone or telehealth. During this time period, CHAs conducted by telephone or telehealth, which would otherwise require a face-to-face assessment to be fully completed, may be used to develop an initial plan of care for ALP participants.

**Question #2:** If the CHA cannot be completed, what method should an ALP use to determine eligibility and develop a plan of care?

**Answer #2:** A CHA that cannot be completed may not be used to determine initial eligibility for ALP services. Until such time as the CHA is fully completed, the ALP participant's licensed home care services agency (LHCSA) must develop and monitor the plan of care.

**Question #3:** During the COVID-19 response, will ALP participants' periodic reassessments be required?

**Answer #3:** No.

## **Congregate Dining & Medication Management**

**Question #1:** Is the ACF required to provide tray service or other alternatives to avoid residents congregating in large groups?

**Answer #1:** Yes. The ACF must consider alternatives to full ACF congregate meals as congregating in large groups is a potential threat to health and safety of both ACF residents and staff during the COVID-19 outbreak. We strongly encourage all ACFs to take necessary steps to preserve health and safety.

**Question #2:** Will the Department consider allowing untrained staff to pour and assist with the self-administration of medication?

**Answer #2:** No, not at this time.

## **Activities**

**Question #1:** Based on the requirement to limit group size, can the regulatory activity requirements be waived?

**Answer #1:** No. Consistent with regulation, ACFs should plan for activities respectful of social distancing protocols that are intended to engage the residents in activities.

## **Visitors/Deliveries/Facility Repairs**

**Question #1:** Are physical therapists, hospice caregivers, and companions appropriate "visitors"?

**Answer #1:** Yes, when the resident's primary care physician indicates a medical service is medically necessary and/or the resident is in receipt of end-of-life supports, then such visitors may be appropriate. All visitors must be appropriately health screened and knowledgeable of and compliant with droplet precautions. Follow the guidance located online at: <https://coronavirus.health.ny.gov/system/files/documents/2020/03/acfguidance.pdf>.

**Question #2:** Can the mailperson be allowed entry into the ACF?

**Answer #2:** No. Deliveries should be left outside the ACF in a safe, secure location.

**Question #3:** The ACF has an annual inspection of the kitchen hood system next week, and these necessary inspections are challenging to reschedule. Can the inspector be allowed access to the ACF?

**Answer #3:** Yes. The ACF should monitor compliance with existing guidance to ensure the health and safety of its residents.

### **Plans of Correction**

**Question #1:** Will the Department waive the plan of correction (POC) requirement in the wake of the pandemic?

**Answer #1:** No. POCs remain due within thirty (30) days of receipt of the written inspection report. Department staff will prioritize the review of proposed POCs and render determinations as appropriate and as time permits. As health and safety remains paramount, the Department will extend any and all efforts to demonstrate flexibility.

Please continue to refer inquiries to [covidadultcareinfo@health.ny.gov](mailto:covidadultcareinfo@health.ny.gov).

Thank you for your service during this challenging time.