



Department of Health

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March 14, 2020

DAL: DHCBS 20-08
Subject: COVID-19 Guidance for
Home Health Care Agencies
and Hospice Providers

Dear Administrator:

The purpose of this letter is to provide guidance from the New York State Department of Health (NYSDOH) to certified home health agencies, long term home health care programs, hospices, and licensed home care services agencies pertaining to the current novel coronavirus (COVID-19) outbreak.

This guidance is effective immediately and shall remain in effect for the remainder of the disaster emergency declared by Executive Order No. 202, or until the issuance of subsequent guidance by the NYSDOH prior to the expiration of such state disaster emergency declaration.

The health and safety of healthcare workers and our ability to provide and support patient care remain our priorities. Recently, community-wide transmission of COVID-19 has occurred in the United States (US) including NYS, and the number of both Persons Under Investigation (PUIs) and confirmed cases are increasing in NYS. The situation with COVID-19 infections identified in the US continues to evolve and is very rapidly changing. It is important for all agencies to keep apprised of current guidance by regularly visiting the Centers for Disease Control and Prevention (CDC) and NYSDOH websites, as well as the NYSDOH Health Commerce System (HCS), for the most up-to-date information for healthcare providers.

- CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- NYSDOH: <https://www.health.ny.gov/diseases/communicable/coronavirus.htm>
- HCS: <https://commerce.health.state.ny.us>

Agency management must also keep their staff updated as the situation changes and educate them about the disease, its signs and symptoms and necessary infection control to protect themselves and their patients. The NYSDOH distributes alerts and advisories through the HCS notification system, and therefore it is key that providers maintain their up-to-date contact information in the HCS Communications Directory.

Do I need to make changes to my infection control policies to care for patients suspected to have a COVID-19 infection?

All agencies are strongly urged to review and reinforce their policies and procedures regarding infection control for standard precautions (applicable for the care of all patients), and droplet and contact precautions with agency staff. The state regulations that address infection control policies are:

- Certified Home Health Agencies – 10 NYCRR 763.13(m)
- Licensed Home Care Service Agencies – 10 NYCRR 766.11(l)
- Hospices – 10 NYCRR 793.5(k)

Should my agency be screening patients upon admission?

The NYSDOH strongly recommends that agencies ask screening questions regarding symptoms and exposure, as described below, prior to accepting new admissions and referrals for care.

At this time, the following individuals should be referred for evaluation: (1) those with signs or symptoms of a respiratory infection, such as fever, cough, shortness of breath, or sore throat; (2) those who have, in the last 14 days, had contact with someone with a confirmed diagnosis of COVID-19, or under investigation for COVID-19, or are ill with respiratory illness; (3) those who have travelled internationally within the last 14 days to countries with sustained community transmission (for updated information on affected countries visit:

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>); or (4) those who are residing in a community where community-based spread of COVID-19 is occurring.

The agency must contact the Local Health Department (LHD) where the patient resides in advance of upcoming, scheduled patient visits to determine if any of their patients are under mandatory quarantine or precautionary quarantine for possible COVID-19 infection and discuss with the LHD how to ensure required patient care, particularly if the patient is a Classification Level 1 patient who cannot miss their regular care. Therefore, the agency must develop a plan to work with the LHD to ensure timely and accurate information is received before patient visits, which includes identifying points of contact and the process for verifying information while maintaining patient confidentiality. LHD contact information is available at:

https://www.health.ny.gov/contact/contact_information/.

Should agency nurses or aides have concerns about the possibility that one of their patients may be infected with COVID-19, the staff person should immediately notify their agency. The agency should immediately notify the LHD where the patient resides for follow-up based on the report by the agency nurse or aide and any additional information that is available. Agencies may wish to provide internal agency contact information for their staff and clients to call with concerns, reports or questions. If the agency is unable to reach the appropriate LHD, the NYSDOH Bureau of Communicable Disease Control can be contacted at 518-473-4439 during business hours or the NYSDOH Public Health Duty Officer at 1-866-881-2809 evenings, weekends, and holidays.

What are the responsibilities of agency nurses or aides to observe changes in a patient's condition?

Agencies must the opportunity to review with all employees the applicable state and/or federal regulations and the associated agency policies pertaining to "changes in patient condition". The regulations that address this topic are:

- Certified Home Health Agencies – 10 NYCRR 763.4(h)(4) and (h)(7)(iii)
- Licensed Home Care Service Agencies – 10 NYCRR 766.5(b)(3) and (d)(3)
- Hospices – 42 CFR 418.76(g)(4)

The agency must ensure that agency nurses, aides and staff are educated to be able to obtain the following information from their patients:

1. Ask/observe patient's condition regarding upper respiratory symptoms (e.g., cough, sore throat, fever, or shortness of breath);
2. Ask the patient, "Have you traveled to a country for which the CDC has issued a Level 2 or 3 travel designation within the last 14 days?"; and
3. Ask the patient, "Have you had contact with any Persons Under Investigation (PUIs) for COVID-19 within the last 14 days, OR with anyone with known COVID-19?"

If the patient answers "Yes" to questions 2 or 3, but does not report, or upon observation does not show signs of, respiratory infection symptoms, the homecare nurse/aide should contact their agency and inform them of the patient's risk factors (based on the responses to questions 2 and

3) and report if there are changes in the patient's condition based on observation, patient self-report and vital signs to receive guidance.

If the patient shows signs of respiratory distress or other medical emergency at the visit, the agency should contact 911, but the LHD still must be made aware of the patient and the 911 dispatch should be informed of the concern for COVID-19 infection. The LHD would be responsible for following up on the patient with respect to COVID-19.

The agency must stay in contact with the LHD to confirm that the individual is being monitored and to receive guidance on how to assure the patient receives any care, that is essential for their health and well-being.

Should my agency be screening staff?

Home care staff are exposed to the general community each day and could become infected with an acute respiratory illness (e.g. COVID-19, influenza, respiratory syncytial virus (RSV)), if community transmission of that illness is occurring. Staff must be screened for respiratory and fever symptoms upon arriving at work. Accordingly, agencies should ensure they have a policy in place to speak with staff prior to their daily patient visits to screen them for symptoms or contacts that might have put them at risk. It is important that agencies strictly enforce their illness and sick leave policies. Staff showing symptoms of illness must not be permitted to remain at work or visit patients and must not return to work until completely recovered. NYSDOH regional epidemiologists are available for consultation regarding work restrictions for ill healthcare employees.

Staff persons who have been potentially exposed to someone with confirmed COVID-19, or to someone who is a person under investigation (PUI) for COVID-19, will be placed under precautionary quarantine or mandatory quarantine by public health officials, based on the symptoms presented and/or level of risk for having contracted COVID-19.

If a staff person is found to be ill upon screening, the agency must send the person home and direct them to contact their primary care physician immediately. If the agency has reason to be concerned that the person may be infected with COVID-19, the agency must send the person home and contact the New York State Department of Health by contacting the Bureau of Healthcare Associated Infections at 518-474-1142 during business hours or the NYSDOH Public Health Duty Officer at 1-866-881-2809 evenings, weekends, and holidays.

Where can I direct my questions about COVID-19?

Questions can be directed to the following email address: icp@health.ny.gov and/or covidhomecareinfo@health.ny.gov; or to the toll-free call center at 888-364-3065.

Your diligence in implementing appropriate measures for COVID-19 preparedness is appreciated.

Sincerely,

Mark Hennessey, Acting Director

Division of Home and Community Based Services