



Nursing Home Weekly: Recap of LeadingAge Updates

December 18, 2020

LeadingAge Coronavirus Call, Monday, December 21 to feature President of National Black Nurses Association on vaccine education.

The Pfizer-Biontech COVID-19 vaccine is now being distributed throughout communities and we are looking for ways to help both staff and residents be educated and comfortable with accepting the vaccine. Join us on Monday, December 21 at 3:30 eastern and hear from Dr. Martha Dawson, President of the National Black Nurses Association. She will discuss key strategies to talk about the COVID-19 vaccine and help build confidence in these efforts. She also will talk about engaging mental health resources for staff and discuss the RE:SET program that can help staff with mental health awareness and strategies to deal with stress and pain from being a frontline worker during this crisis. If you have not registered, you can join the [call here](#).

Pharmacy Partnership

Certified beds. If you noticed that CDC staff on the Pharmacy Partnership have been talking about “certified” beds and wondered about the scope of the program....they did not realize that “certified” means Medicare and Medicaid certified. They will probably stop using the term. They mean all beds, the total number of beds (occupied or not) in a provider organization.

Independent living in CCRC/LPCs. We are hearing different policies around the country. In our discussion with CVS representatives yesterday, members asked it a lot and CVS said IL residents on a campus are not covered. We asked CDC this question again. They said the PPLTC does not include stand-alone IL communities. There is more flexibility for IL residents in a CCRC/LPC – though the official policy, based on the ACIP recommendation is that they are not included. However, there is some flexibility in how this is carried out. For instance, jurisdictions may elect to include IL residents of LPCs. The CVS/Walgreens partners will work with states and jurisdictions on these determinations. Unofficially, it is also possible that there will be additional vaccine doses when all staff on the campus and all nursing home and assisted living residents have been immunized. Decisions might be made about how to use those doses.

LTC Toolkit. The toolkit will come out late next week or early the week after. There will be a series of webinars for participating providers once it comes out. It will include consumer friendly materials, among other things. The toolkit will be an evolving and changing document.

FAQs. CDC is working on a set of FAQs about the Partnership.

LeadingAge Vaccine FAQ update – includes EEOC. We continue to update the [FAQs](#) daily. Among other questions it includes updated guidance from the EEOC on what employers need to know about COVID-19 vaccines and the Americans with Disabilities Act. Although it lays out what providers need to follow if they institute a mandatory vaccination program, it did not answer the ultimate question of whether employers can mandate vaccines under the EUA provisions. From what we are hearing from members,

most providers plan to initiate a voluntary program because of all the requirements a mandatory program may entail as well as the workforce challenges and fears surrounding the vaccines.

Here is the latest Q & A within our FAQ document:

Can employers mandate that employees get the COVID vaccine when available?

The federal government cannot mandate a vaccine under an Emergency Use Authorization. The EUA, however, is silent on whether an employer, state or local jurisdiction may require vaccinations. We will continue to monitor state level actions as well as any additional federal guidance as more information becomes available that provides clarity to this issue.

The EEOC updated its guidance – What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws - on December 16, 2020. The guidance explores the requirements and considerations if employers mandate COVID-19 vaccinations for employees. Unfortunately, it does not answer the question of whether a mandatory vaccination policy is allowed if a vaccine only has only FDA EUA approval. See [EEOC Guidance](#).

Generally, for vaccines that have gone through the full FDA process (the Biologics License Application), employers, and specifically health care providers, may require employees to get certain vaccinations as a condition of employment, but those mandates are subject to exceptions based on accommodations for disability or religious objections that might be available under state or federal law. See the [EEOC Guidance](#), specifically Section K, to understand the nuances of the ADA analysis and how to address reasonable accommodation requests from employees that refuse a COVID-19 vaccine.

Even though employers might be able to mandate a vaccine for employees, employers may choose not to make vaccinations mandatory or use alternative methods for ensuring their employees get a vaccine once it becomes available. As this is a new virus and there may be multiple vaccines available, education will be critical for employers to assure their workforce is aware of the benefits of a vaccination.

If employers are exploring whether to mandate a vaccination for employees, they need to consider whether that impacts any potential worker's compensation or personal injury claim by an employee for claims resulting in adverse reactions to the vaccine. They should also consult with their human resources staff and labor and employment legal counsel.

Finally, unionized employers should look at any collective bargaining agreement in place to determine if that impacts any policy on vaccinations.

Upcoming CDC calls. Several chances this weekend to spend time with our friends at CDC! Please be advised of the upcoming CDC calls below. Note that all calls take place **Friday) through Monday**. (Notes in red are from CDC about who to promote to.)

CDC/Clinical Partner Call – Vaccine Update

Date: Friday, December 18, 2020

Time: 1:00 – 2:00 pm ET

Dial in information: [Click here to join the meeting](#) or call in (audio only) [+1 404-718-3800,665103324#](#) United States, Atlanta; [\(888\) 994-4478,665103324#](#) United States (Toll-free)

Phone Conference ID: 665 103 324#

COCA Call: What Clinicians Need to Know About the First Two FDA-Authorized COVID-19 Vaccines

Date: Friday, December 18, 2020

Time: 2:00 – 3:00 PM ET

Dial in information: https://emergency.cdc.gov/coca/calls/2020/callinfo_121820.asp

CDC/IDSA COVID-19 Clinician Call

Date: Saturday, December 19, 2020

Time: 3:00 – 4:00 PM ET

Dial in information: Click [here](#) to register in advance

ACIP Meeting Webcast

Date: Saturday and Sunday, December 19 – 20, 2020

Time: 11:00 am – 4:30 PM ET (both days)

Dial in information: <https://www.ustream.tv/channel/VWBXKBR8af4>

COVID-19 Partner Update: COVID-19 Response Vaccine Update

Date: Monday, December 21, 2020

Time: 3:00—4:00 p.m. ET

Dial in information: Click [here](#) to register in advance

Holiday guidance. As we progress through the December holidays, both CMS and CDC wish to remind us that all guidance and precautions are still in effect. The CMS alert on holidays is [here](#). The CDC guidance on winter holidays can be found [here](#) and general travel guidance is available [here](#).

Highlights from CMS: Encourage residents to stay put for the holidays. Offer enticing alternatives in your community, but remember that visitation requirements and restrictions DO NOT CHANGE. Encourage staff to make smart choices (not traveling, not gathering with individuals outside their household). And remember, VACCINATION WILL NOT CHANGE THESE RECOMMENDATIONS! Even if your staff and/or residents have been vaccinated, no one will be fully vaccinated in time for the holidays and neither CMS nor CDC will be changing recommendations for source control, PPE, visitation, or testing any time soon.

BD Veritor demo recording available. We had a live demo and presentation from BD on the Veritor POC. The [recording is here](#). Included, is a Question and Answer period at the end of the session.

Vaccine Allocation Amounts: Today, HHS is publishing the week one allocations provided to states and jurisdictions. Operation Warp Speed is coordinating the delivery of the orders from states against the initial 2.9 million doses. The data for the initial week’s allocations are currently available [here](#). Each week on Tuesday, states and jurisdictions will be provided allocations available to ship the following week. States and jurisdictions will order against their allocation that week and direct OWS where shipments of the vaccine should be delivered. These allocations, and more related information, are located on the [HHS COVID-19 Vaccines page](#).

Ventilation in Buildings: CDC updated information and tactics to improve [ventilation in buildings](#). The webpage includes a list of ventilation interventions that can help reduce the concentration of virus particles in the air, such as SARS-CoV-2. They represent a list of “tools in the mitigation toolbox,” each of which can be effective on their own. Implementing multiple tools at the same time is consistent with

CDC mitigation strategies and increases overall effectiveness. These ventilation interventions can reduce the risk of exposure to the virus and reduce the spread of disease, but they will not eliminate risk completely.

Conversation with CVS/Omnicare. This [article summarizes Wednesday's conversation](#) with Jim Love, President of CVS/Omnicare, who joined LeadingAge's Coronavirus Update Call to share the latest information on the COVID-19 vaccine Pharmacy Partnership for Long Term Care. His colleagues Beth Coryea, Senior Director, Account Management and Ryan Jeannerette, Senior Director, Strategy, also answered operational questions. CVS has set up a one stop shop for resources at [this link](#). It's your recommended first place to seek answers to questions that come up. CVS guests on the call today also shared an email address for provider enrollment questions - CovidVaccineClinicsLTCF@CVSHealth.com – mainly for providers who have signed up but haven't heard from CVS yet.

New at home testing options and Binax cards for home use. In the last two days, FDA issued two emergency use authorizations for at-home COVID-19 tests. Yesterday, FDA approved the Ellume test, which can be available over the counter and produces results in as little as 20 minutes. This afternoon, FDA approved the Abbott Binax Cards for at-home use with a prescription. We are planning a training with Abbott for January and will ask them to include information on this new at home option. We will monitor both testing options as they enter the market and urge prioritized access where appropriate for aging services.

FDA announcement for Ellume: <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-authorizes-antigen-test-first-over-counter-fully-home-diagnostic>

FDA announcement for Abbott: <https://www.fda.gov/news-events/press-announcements/coronavirus-covid-19-update-fda-issues-new-authorization-binaxnow-covid-19-ag-card-home-test>

Vaccine resources from CDC. Our partners at CDC shared a number of resources with us that we want to be sure everyone is aware of. In order for our nation's vaccination strategies to be effective, folks actually need to get vaccinated. With vaccine hesitancy high, one of the best ways to address concerns is by sharing information and dispelling myths. These resources can help:

[Post Vaccine Considerations for Healthcare Personnel | CDC](#)

[Post Vaccine Considerations for Residents | CDC](#)

[Importance of COVID-19 Vaccination for Residents of Long-term Care Facilities | CDC](#)

[Interim Clinical Considerations for Use of Pfizer-BioNTech COVID-19 Vaccine | CDC](#)

[The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine — United States, December 2020 | MMWR \(cdc.gov\)](#)

ACIP recommendations were presented on a CDC partner call Sunday. Slides from the presentation can be found at: <https://www.cdc.gov/vaccines/covid-19/planning/index.html>

The [COVID-19 vaccination website for healthcare professionals](#) has been updated to direct healthcare professionals to clinical information including ACIP recommendations, storage and handling information, and vaccination provider requirements and support.

The new [Pfizer-BioNTech COVID-19 Vaccine webpage](#) has information specific to Pfizer's vaccine, including resources to assist providers in storing, handling, and administering the vaccine.

Providers participating in the COVID-19 Vaccination Program can find information about the requirements of the CDC COVID-19 Vaccination Provider Agreement at [COVID-19 Vaccination Provider Requirements and Support | CDC](#) and on the websites listed in the footnotes of the agreement.

Updates to CDC's COVID-19 [vaccine information for consumers](#):

[What to expect at your vaccination appointment](#)

[What to expect after getting vaccinated](#)

Recording available now: [Webinar December 14, 2020 - What Every Clinician Should Know about COVID-19 Vaccine Safety \(cdc.gov\)](#)

Article on discussion with Josh Sharfstein. Leading Public Health expert Dr. Joshua Sharfstein, Vice Dean of the Bloomberg School of Public Health, joined LeadingAge Coronavirus Update Call on Monday, December 14. He provided key insights into the science of the new vaccines, the hurdles in distribution, and how we can expect the situation to evolve with the pandemic in the early parts of 2021. Here's an article covering the [Q&As](#) from that conversation.

Phase 3 Provider Relief Arriving. HHS started sending out \$24.5 billion in Phase 3 General Distribution PRF payments this week. This is more than originally planned as HHS was able to secure additional funds after the applications demonstrated additional need. While payments began arriving in bank accounts today, providers shouldn't be concerned if they didn't receive a payment today as HHS will be distributing payments to the 70,000 providers through January 2021. For more details, Nicole wrote an [article](#) posted today. We also here in related news that the November Nursing Home Infection Control Incentive payment will be going out soon (it is under review right now). We believe that about \$35-40 billion remains in the PRF account following the Phase 3 distribution which leaves hope that there could be another phase of applications and distributions to potentially address providers/members financial needs for third and fourth quarter.

CDC COCA webinar on post-vaccine adverse events and infection control. CDC held a COCA webinar yesterday on post-vaccine adverse events and infection control considerations. This included reporting through VAERS and V-Safe, as well as managing staff and residents with post-vaccine symptoms. This webinar is available [here](#) and the LeadingAge summary is available [here](#).

CDC Guidance on Post-Vaccine Infection Control Considerations. CDC released 2 documents over the weekend to guide decision-making around post-vaccine symptoms: [Post-Vaccine Considerations for Healthcare Personnel](#) and [Post-Vaccine Considerations for Residents](#). Key points:

Clinical trials have studied whether people get sick, not whether they transmit virus to others. Even once individuals have been vaccinated, we will still need to use PPE and other source control measures (masks, social distancing, hand hygiene) to prevent transmission.

The Pfizer vaccine will not impact COVID-19 testing. A positive viral test (PCR or antigen) should be evaluated just the same as you would evaluate any positive test, regardless of vaccine status. A positive viral test result cannot be excused by the vaccine.

Some post-vaccine symptoms may overlap with COVID-19 symptoms. These symptoms include fever, chills, headache, fatigue, muscle ache, and joint pain. Symptoms that are consistent with COVID-19 and are *not* consistent with post-vaccine symptoms include cough, shortness of breath, runny nose, sore throat, and loss of taste or smell.

Post-vaccine symptoms develop within 3 days of vaccination (with Vaccine Day being Day 1) and resolve quickly. Most post-vaccine symptoms occur the day following vaccination.

- Residents who develop *any* symptoms and have had prolonged exposure in the past 14 days to someone who was COVID-positive should be treated like a person showing COVID symptoms, regardless of vaccination status. Proceed with isolation, transmission-based precautions, and testing.
- Residents who develop *only* symptoms that may be vaccine-related (fever, chills, fatigue, etc.) within 3 days of vaccination and have not had prolonged exposure in the past 14 days to someone who was COVID-positive should be isolated in place and monitored, provided they are not showing any symptoms that are not likely to be vaccine-related (cough, shortness of breath, runny nose, etc). PPE should be used with these individuals until discontinuation of transmission-based precautions. If symptoms do not improve or fever does not resolve within 2 days, proceed with testing for COVID-19.
- Staff who develop *any* symptoms and have had unprotected exposure in the past 14 days to someone who was COVID-positive should be treated like staff showing COVID symptoms, regardless of vaccination status. Proceed with testing and exclusion from work until criteria have been met for return to work.
- Staff who develop *only* symptoms that may be vaccine-related (fever, chills, fatigue, etc.) within 3 days of vaccination and have not had unprotected exposure in the past 14 days to someone who was COVID-positive may continue to work, provided they are not showing any symptoms that are not likely to be vaccine-related (cough, shortness of breath, runny nose, etc). If symptoms do not improve or fever does not resolve within 2 days, proceed with testing for COVID-19 and restrict from work.
- Staff or residents who show any symptoms that are not likely to be vaccine-related, regardless of whether this is accompanied by symptoms that may be vaccine-related, should be managed like staff and residents showing COVID symptoms.

The guidance also provides considerations for evaluating test results, including when to follow up antigen tests with confirmatory PCR testing. Remember that these recommendations and considerations come from CDC and CMS has not issued any guidance at this time. Providers should check with state/local public health when implementing this guidance.

EUA for Pixel COVID-19 Test Home Collection Kit: The FDA issued an EUA to LabCorp for its [Pixel COVID-19 Test Home Collection Kit](#) for use with LabCorp’s COVID-19 RT-PCR Test. The Pixel COVID-19 Test Home Collection Kit is the first COVID-19 direct-to-consumer (non-prescription) test system, allowing a person to self-collect a nasal sample in their home and then send the sample to LabCorp for testing. It can be used by anyone aged 18 or over, and purchased online or in a store without a prescription. A health care provider delivers positive or invalid test results to the user by phone call. Users may access negative test results by an online portal or by email.

Several additional CDC updates this week:

Older Adults: CDC updated information for [older adults](#) who are at greater risk of requiring hospitalization or dying if diagnosed with COVID-19.

What In-home Social Service Providers and Clients Need to Know about COVID-19: [In-home social service providers](#) include caregivers or aides, teachers or tutors, social workers, and resettlement agency personnel who visit the homes of their clients during COVID-19.

Must-See Webinar: Provider Relief Funds Reporting Requirements

Did you miss the sold-out webinar on PRF reporting earlier this month? The recording is now available

for you to learn how to maximize use of payments received from the Provider Relief Fund while complying with current reporting requirements. CE credits are available. [Access the recording now!](#)

New Insights and Tools From LeadingAge

[New CDC Vaccine Communications Toolkit](#)

[COVID-19 Vaccine Considerations for Long-Term Care Residents and Staff](#)

[FAQs and Resources on COVID-19 Vaccines and Vaccinations](#)

[Vaccination Toolkit](#)