Background
On May 18, 2020, the Centers for Medicare and Medicaid Services (CMS) issued new guidance with recommendations for the “reopening” of nursing homes during the COVID-19 public health crisis. The document provided updated recommendations for state and local officials on:

- Criteria for relaxing certain restrictions and mitigating the risk of resurgence;
- Visitation and service considerations; and,
- Restoration of survey activities.

This document provides recommendations from the Wyoming Department of Health (WDH) for nursing facilities and assisted living facilities and also briefly summarizes the new guidance from CMS.

Summary of CMS Guidance for Skilled Nursing Facilities
CMS is allowing states to make policy decisions and recommendations regarding the “reopening” of nursing facilities based on current conditions of COVID-19 in the state; states will determine the level of mitigation needed for facilities in communities across the state in order to prevent the transmission of COVID-19. As recommended by CMS, factors the state will consider in recommending the reopening of nursing facilities include:

- COVID-19 case status in the community;
- COVID-19 case status in the facility;
- Adequate staffing;
- Access to adequate testing, including the ability for all facility residents and staff to receive COVID-19 baseline, as well as ongoing, testing when appropriate and necessary;

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2 Ibid.
• Ability for the facility to control infection and transmission of respiratory illness;

• Access to adequate personal protective equipment (PPE) for all staff; and,

• Hospital capacity in the community.

Updated Recommendations from the WDH for all Long-term Care Facilities

Due to the current prevalence of COVID-19 in Wyoming, as of June 11, 2020, and identified clusters of COVID-19 cases impacting long-term care facilities in Wyoming, the WDH recommends that all nursing facilities and assisted living facilities maintain current practices to mitigate the potential spread of the virus.

• To the extent practicable, continue to restrict visitation of all visitors and non-essential personnel, with the exception of required contractors as well as certain compassionate care situations such as end-of-life events.

• In cases where visitors need to be allowed into the building for compassionate care situations, the following guidelines should be followed:
  o Visitors must be screened for symptoms of respiratory illness;
  o Physical distancing should be maintained to the greatest extent practicable;
  o Visitors must be required to wear face coverings while in the building; and,
  o Visitors must be restricted to the room of the resident whom they are visiting.

• Facilities may allow in-person visitation in a designated outdoor space, provided that the following guidelines can be maintained:
  o Residents suspected or confirmed to be infected with COVID-19 cannot be visited;
  o All visitors should be screened for symptoms of respiratory illness;
  o A facility staff member trained in patient safety and infection control measures must remain with the resident at all times during the visit;
  o Visitors must be limited to no more than two individual visitors;
  o Staff and residents must wear a surgical face mask for the duration of the visit; and,
  o Visitors must wear a face covering for the duration of the visit.

• Continue to screen all residents and staff for symptoms of respiratory illness and ensure those residents suspected of having COVID-19 are screened by a healthcare provider and tested for the virus.

• Continue enhanced infection control practices, including proper hand wash techniques, increase in the availability and accessibility of hand-washing stations and alcohol-based rubs (ABHRs), re-enforcing strong hand hygiene practices and no-touch receptacles for disposal, and requiring staff and allowed visitors to perform hand hygiene upon entering the building. Staff should also regularly clean and disinfect the facility, paying special
attention to high-touch areas and surfaces. Staff should use personal protective equipment (PPE) when appropriate, following CDC, CMS, and WDH guidance.

- Continue to limit communal dining and requiring distancing of at least six (6) feet between residents in dining situations. For facilities with active or suspected COVID-19 cases, communal dining should be avoided and residents should consume meals in their rooms.

- Test a minimum of 20% of staff and residents for SARS-CoV-2 (COVID-19) at least every two weeks as outlined in the WDH’s “Long-Term Care Testing Protocol.”

The WDH will continuously re-evaluate these recommendations and update guidance as necessary based on current conditions of the COVID-19 outbreak in Wyoming.

More information about COVID-19 can be found at:

health.wyo.gov
cdc.gov
cms.gov.