

**Michigan Department of Health and Human Services
Long-Term Care: COVID Relief Facility
Frequently Asked Questions**

December 7, 2020

1. What is the definition of “dedicated staff” mentioned in MSA Policy 20-73?

Dedicated staff are defined as direct care staff that work only in the COVID-19 designated area of the nursing facility (NF) for the duration of the facility outbreak. Outbreak is defined as one or more COVID-positive resident(s) that do not meet the criteria to discontinue transmission-based precautions. At a minimum, dedicated staff should include certified nursing assistants (CNAs) and nurses assigned to the day-to-day care for COVID-positive residents. To the extent possible, facilities should restrict access of ancillary personnel (e.g. dietary).

All efforts to keep the same staff reporting solely to the COVID-designated area is considered best practice and highly recommended. However, if there are not a sufficient number of direct care staff to dedicate to the COVID-designated area despite efforts to mitigate staffing shortages, facilities may dedicate staff to the COVID-designated area for the duration of a staff's shift on any day of the outbreak. All efforts should be made to continually schedule the same staff to the COVID-unit, but dedicated staffing by shift is allowable.

2. I don't have a COVID-designated area set up yet. Can I still apply for CR Facility designation?

If your facility is seeking the ability to retain COVID-positive residents, the application must demonstrate the facility's plan to convert existing areas for COVID-positive use. While these plans do not need to be fully implemented upon application, your application must provide enough detail to assure MDHHS that the facility is prepared to make these changes by the time the policy goes into effect or in advance of an outbreak. Details required will include:

- A transition plan for any COVID-negative residents currently occupying the area that will be converted to a designated COVID-positive area.
- A fully demarcated floor plan indicating rooms included, existing/temporary barriers, staff entrance/exits, donning/doffing, and any additional areas to be utilized by dedicated staff.
- A plan to prevent cross-contamination of staff in common areas.

If your facility is seeking the ability to admit new COVID-positive residents, the COVID-designated space must be fully in place at the time of application. As a condition of designation, LARA will conduct virtual site reviews of facilities seeking to admit new COVID-positive residents to verify that the COVID-designated area is fully equipped to care for an increase in COVID-positive residents.

3. Can my facility be designated as a Care and Recover Center (CRC) and a COVID Relief (CR) Facility?

When a nursing facility applies for both CRC and CR Facility designation, the CRC designation takes precedence if the identified COVID-designated area is the same space in both applications. A facility cannot utilize the same set of rooms for both a CRC

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and CR Facility. If the NF is approved to be a CRC, the CR Facility designation will remain “on hold” and will take effect if a facility decommissions as a CRC. If the facility applied for CRC and CR Facility designation with a separate set of non-overlapping rooms, they may be designated for both if all other criteria are met. A facility may be required to submit an updated floorplan that identifies both COVID-positive care areas.