

| QUESTION | ANSWER |
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| INCREASING NUMBER OF BEDS IN CCFFHs | |
| Are CCFFHs allowed to have more than 3 clients? Will it be CTA approved? | No. There are no plans at this time to have CCFFHs over their certificate capacity. All clients have to be NH level of care to be admitted. DOH is only interested in homes that have the availability to admit clients who are infected with COVID-19 to take care of them. While there is not a current need they are working to identify them. If a home is interested they should send an email to covid@comties.com. We currently do not have the need or resources to increase bed capacity outside of the annual inspection timeframe. CCFFHs can always have family members stay with them. That has never been limited as long as the clients care does not decrease because of care they are having to administer to family members. However, if the family member is infected, the risks to others, including clients, should be considered by discussing the client's case manager. |
| So as foster homes if we have available room can we accept additional clients? | |
| what about if the caregiver is not certified yet for 3 clients. but willing to accept additional client? | |
| Can we accept clients who are not nursing facility level of care or family members to help the community take care of people? | |
| VISITOR AND GOING OUT | |
| Are we allowed to have visitors for our clients | Yes. Visitors are only being limited if they meet certain criteria. It remains recommended that visitors observe the social distancing guidelines and other protocols currently in place. If visitors are restricted due to meeting criteria other alternatives for client contact and visitation need to be arranged such as frequent phone calls or video chats. |
| Can my client's daughter who is working in a facility, can come and visit her mom after coming from her work? | yes although the daughter should take extra precautions if she has been around those infected with COVID-19. |
| Can clients to go out on pass; her daughter picks her up on sunday | Yes although people take the risk of being cited by the police for not staying at home. |
| Is there an exemption letter our SCGs can show to authorities just in case they get stopped on their way to foster home to substitute to a PCG who has to go to work? | PCGs can make their own letter stating they are healthcare professionals who are considered essential to provide care to the elderly and disabled in a CCFFH setting. |
| My resident wants to go to the bank do I allow him? | Bank lobbies are closed. You cannot prevent a competent adult from going to a bank's atm. Educate using proper precautions. |
| If we limit the visit for our clients and we check temperature, what if that person visiting has already contracted with covid but not showing any signs and symptoms yet? | Would need more information to answer this question but unless someone is showing signs and symptoms and test positive it would be difficult to know if they have COVID-19 or another cold/flu virus or infection. Use of all the precautionary measures already told to CCFFHs in newsletters continues to be recommended. |

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| Are we allow to do sign in sheet for visitors and questionnaire to be completed? | Yes |
| is it possible to have NO VISITORS at all? | Only if someone in the CCFFH, client or visitor meets the criteria outlined in the March 13, 2020 newsletter from CTA. Any restriction needs to be communicated with visitors as to why they are being restricted. The visitors must have another means of contacting their loved one in the CCFFH whether that is multiple daily calls, video chats, etc...as much as the client and visitor wishes to be in contact. |
| my resident always going out everyday and always collect bottles in the community. how can i stop her from going out? very alert and oriented resident don't want to stay at home. i'm worried that resident will bring virus in the house. i gave mask & gloves but i dont know that shes using it when shes out. Can I enforce a rule that they stay in? What if they refuse? | You cannot stop people from moving about. You cannot hold them prisoner. However, they may face a citation from the police if they are caught disobeying the stay at home order. When that person returns to the home, it should be encouraged to practice all protocols already outlined as precautionary measures. |
| Can a caregiver prevent a client from going outside the home? If yes, then how? | No. If they are cited by the police they will face those natural consequences of having to pay a fine or go to jail. When that person comes home the recommended protocols already discussed are recommended. |
| CCFFHs – want to know if they can stop visitors from coming to their homes. At this time, visitors are only being restricted if they meet the exposure guidelines or are sick. They have requested that no one to come to their CCFFH including CMA and CTA RNs. | Visitation is not being restricted at this time unless visitors meet certain criteria as outlined in the March 13, 2020 newsletter |
| PEOPLE SICK IN THE CCFFH | |
| What if both caregivers are sick? Where will the patient go? | If clients are exposed to a caregiver or HHM who has COVID-19 or have it themselves, they are to shelter in place, isolate and not be transferred or discharged unless directed by nursing or medical personnel to go to the ER. CCFFHs should have back up SCGs to care for the clients in case of these emergencies. If a CCFFH does not have a SCG available they are to contact their client's CMA and request assistance in locating some SCGs willing to get paid to work. CCFFHs are responsible for paying their own staff. |
| PCG gets COVID then what happens to the clients? Will they be transferred or remain in the Foster Home? | |
| If HHM gets the virus, what is the protocol? | |
| What if the PCG and all of the SCGs are sick? What is the protocol? | |

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| What if a client in a shared room gets COVID-19? Can they move to another bedroom if it has not been approved by CTA? | Yes. Any available bedroom even a shared room with another client, if it's okay with that client, even if it doesn't meet size requirements. Size requirements will not be cited when actual isolation precautions need to be put in place. |
| What if there is no other room available for a client who has COVID-19? | Then you will need to isolate that client as far away from others as is possible but they will need to shelter in place. Continue to use all precautions as previously stated. |
| What happens if PCG or family member gets COVID-19? | Follow doctor orders , isolate and take all standard precautions and infection control procedures you are currently doing. Hire and utilize SCGs as you would normally if a PCG got sick. |
| Shouldn't CCFFH follow the same guidelines as nursing homes? | No. CCFFHs are not the same setting or environment as nursing homes, assisted living or even larger ARCH homes. They are not considered congregate areas and do not carry the same risks as larger facilities. |
| Can a CCFFH still transfer or discharge a client during these times? | Not unless medically necessary. Clients need to shelter in place where they are as much as possible. CCFFHs should avoid transfers and discharges unless absolutely necessary. There needs to be sufficient documentation as to why it would be necessary to transfer or discharge the client. |
| APPOINTMENT QUESTIONS | |
| What if my patient have scheduled surgery? Do I need to cancel? | Please check with the client's doctor regarding appointments. You may not delay them if the doctor says they need to see them. If you prevent a client from receiving necessary medical care it will be reported to APS and CTA by the client's CMA. Doctors can elect to do telehealth visits if allowed by the insurance carrier. The doctor will know if they can use telehealth or not. Infusion therapy and dialysis are considered life saving treatments, if these treatments are stopped the client could die, please do not cease life saving treatments unless directed by a doctor to do so. |
| my patient goes to tripler for his monthly catheter change, shall i bring him? | yes unless the doctor tells you otherwise |
| my pt is ckd his HnH IS LOW and he has appt. at infusion therapy at straub this week, but he is doing okay, shall i bring him or wait for a while? | yes unless the doctor tells you otherwise |
| Can we request home health therapist to reschedule on a later time if visit isn't urgent? | No. Therapy delays can result in permanent physical abnormalities. It is up to each Home health agency to schedule or re-schedule appointments based on doctor instructions and client care needs. |
| if patient contracts covid what OTC medications should we keep in stock to prepare? | Ask the persons doctor. Do not give OTC meds without an order. |

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| If CCFFH needs PPE where can they get it if they are to take care of covid 19 ? | There is currently a short supply and it unknown when that will change. The WHO and CDC recommend using what you can as something is better than nothing at all including the use of bandanas around the mouth and nose. Cloth Face Masks are now being recommended to be worn when in public for instances when social distancing is difficult like grocery stores and pharmacies. Please see the CDC website for guidance. |
| what about diyalisis pts? would it be better to have HD at home? | This is up to the client's doctor |
| what to do about the patient/resident who goes dialysis 3 times a week | Dialysis is a life saving treatment and the client needs to go unless directed by a doctor not to attend. |
| For regular check up with their PCP is it wise to postpone their appointment only if client is doing well | This is up to the PCP. |
| Not to alarm or make people more scared, is there a difference from a person has yearly or annual flu shot than person has not none? can flu shot helps you not to get infected from covid19? | Please discuss with your physician |
| How about Hospice clients? | Hospice services should continue especially because the patient is on Hospice. Unless hospice agencies discontinue their services by order of a physician these services are to continue. |
| CMA AND CTA VISIT QUESTIONS | |
| Is it OK for the nurse to do phone call instead of face to face monthly visit? | As of April 3, 2020, Telehealth has been approved by the Office of Health Care Assurance to replace the required face to face visits although it is up to the discretion of each case manager for each client to determine whether or not to perform those services under nursing laws, rules and regulations as determined by the Hawaii State Board of Nursing. If a case manager determines a face to face visit is necessary, the CCFFH must allow for that to occur or face a citation and possible sanction. |
| Some caregivers aren't allowing case manager to do monthly visit. Can we do facetime with caregiver? | |
| When will you be making a decision re allowing tele-visits? | |
| As a case manager, do I need to restrict visits to face time? | |
| What about the face to face visits for the case managers? | |
| Regarding CMA monthly visits is it acceptable to conduct tele-visits vs. face-to-face? Many doctors are utilizing it already. | |
| Should CMA's visits should also be suspended for now and call or facetime for now especially if there's no problem with our residents. | |

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| when can we get the notice if case managers can do face time?? its almost end of the month. | |
| A big concern for us is the safety for our visiting case managers. Is there any option to do FaceTime/Skype/Video Conference visits instead for the time being? If the client truly needs to be seen in person to possibly check out skin or some other reason then a face to face could still be done but that brings up another big concern, PPE. There's just none available so what are the case managers supposed to do about this to protect themselves as well as the clients. | Face masks are not recommended to be worn except by those who have COVID-19 and those taking care of known COVID-19 positive cases. CTA has not been made aware of any other PPE shortages. The WHO and CDC continue to recommend precautions everyone can take to slow the spread of this virus. At this time, the virus cannot be stopped only slowed down so that the number of people infected at one time does not overrun our healthcare system. Information regarding cloth face masks and their usage can be found on the CDC website. |
| Some caregivers are not allowing the CM's to see the client's. Please let them know that the CM's need to see the patients, when it is needed. | A newsletter was emailed on 3/27/20 to all CCFFHs. CMAs can take a copy with them to the visits or pull it up on their phone if needed. Homes that refuse to let the CMA should be reported to CTA for a citation and investigation. |
| CMAs are having a hard time getting into some homes because they are scared. What is the protocol? | If a home refuses entry CMAs are to notify the CTA office to make a complaint. The CCFFH will be cited. CMA RNs can tell the home if they don't comply with the DOH requirements then they will be cited and it may go above just being cited on paper with a corrective action plan. They can either let CMAs in or face the consequences of not doing so. They are also hindering the client from getting appropriate medical care which could also involve APS reporting depending on the circumstances. |
| Does CTA will still continue to do unannounced visits if you're yearly recertification is almost due? | Yes. |
| Are CTA people allowed to do unannounced visit? | Yes. In fact, the visits must be unannounced per law. |
| Are CTA still doing recerts? | Yes. |
| How about CTA doing unannounced visits and they are visiting 15-20 homes a day should that be suspended right now to protect our residence and family. | CTA does not visit this many homes in a day. If you are compliant with the items being reviewed, CTA will be in and out of the home more quickly, lessening the amount of exposure time. CTA staff are following all acceptable measures of precaution to slow the spread of the COVID-19 virus. |
| COVID-19 SPECIFIC QUESTIONS | |
| Are u allowing nurse aide not just CNA to take care of resident in CCFFH in this time? | Yes. As of 3/27/20, the limited hours of 5 hours per day up to 28 hours a week are being suspended through the public's stay at home orders. |

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| if its contact precaution what about mail being delivered and money circulated ? | Not sure about why this question is being asked. Mail delivery and money being circulated is not under the authority of DHS or DOH. Clients are still able to receive their mail and handle their own money. |
| Where can we get supplies if everyone is out? | If a home is low on supplies they should contact the client's CMA in order to try and locate available resources. |
| What is the life span of the virus after it exits the body? | this is unknwn and it currently being studied by scientists around the world. |
| AlohA. So what is the medication if u get the virus. Or what is the best way to get rid of it | please seek a physician if you have signs and symptoms and follow their directions. |
| But can u take a cough syrup ? | please seek a physician if you have signs and symptoms and follow their directions. All OTC meds for clients need doctor orders. |
| Once you get the virus, are you protected from getting again in future? | I am unsure if anyone knows the answer to this question as the virus is new and will take time to study. |
| How many hour you will wear or replace mask? | Please refer to the manufacturer's instructions as they can all vary. |
| Whats the ratio for Bleach to water with proper contact time to disinfect surfaces before wiping away ? | <p>According to the CDC website: Use diluted household bleach solutions if appropriate for the surface. Check to ensure the product is not past its expiration date. Unexpired household bleach will be effective against coronaviruses when properly diluted.</p> <p>Follow manufacturer's instructions for application and proper ventilation. Never mix household bleach with ammonia or any other cleanser.</p> <p>To make a bleach solution, mix: 5 tablespoons (1/3rd cup) bleach per gallon of water</p> <p>OR 4 teaspoons bleach per quart of water</p> |