

In an effort to assist facilities with the COVID-19 response, staff from the North Dakota Department of Health will be contacting all Long-Term Care Facilities for site visits. Visits will include Basic Care, Assisted Living and Nursing facilities throughout the state. Our goal is to complete the visits in the next couple weeks. Staff from the Department of Health will be contacting you to set up a date and time. This visit is not a federal regulatory or CMS process, but an additional visit we're requesting in an effort to slow down the spread of COVID-19. No citations will be issued. The questions below are some of the items that we would like to discuss with the facility staff during the visit. These discussions will help us establish where the department might be able to help your staff prevent any COVID-19 from entering your facility. The questions below are a sampling of the discussions that may take place during the site visit and are related to infection control only. THANK YOU in advance for your help in protecting your residents from this serious and life-threatening illness.

1. Has education or training been provided to your direct care staff?
2. Has your nurse or medical professional taken an active role in preparing your facility?
3. What do you plan to do if one of your residents tests positive for coronavirus?
4. Have you adopted the new policies recommended by Department of Health regarding screening and restricting people from entering your facility? If so, what are the restrictions?
5. Has your facility completed an assessment of your readiness for your first coronavirus resident?
6. How is your staffing?
7. How many beds are filled today? – date?
8. Do you have any residents with the flu? - how many?
9. How many of your residents have a compromised immune system?
10. Do you have any staff that are ill at this time are they staying home and not coming in to work?
11. Are you or have you screened your staff to determine if they have been in contact with or traveled to areas where coronavirus is prevalent?
12. Do you currently have residents in isolation & how is your PPE supply at this time?
13. Does your facility have any rooms that have negative pressure?
14. Do you know if your community has a negative pressure room in the hospital if a hospital is located in your community?
15. Do you have housekeeping staff 24/7? Do they have supplies necessary for decontamination of surfaces?
16. Has your facility implemented an increased cleaning and decontaminating process recently - briefly what is your process?
17. Are you limiting social interaction within your facility between staff and between residents?
18. Has your social services staff made an assessment of any residents who are being isolated to determine if isolation is having a negative effect?
19. What areas of weakness have you identified that may impact the spread of the coronavirus?
20. What have you done to mitigate the weaknesses and what can we do to help?
21. How have you dealt with staff questions about the Coronavirus and any fears or misconceptions they may have about the virus?
22. During this busy time, is your nursing staff able to observe care staff as they provide care to residents? What do you do if the observation shows need for improvement?

23. Do you do your own laundry onsite or is all laundry shipped out for processing?
24. Do you have a dock area that could be used to drop off or pick-up supplies where the person delivering the supplies would not need to enter the building?
25. Do you have options for alternative methods of visitation for residents such as video conferencing or video calling?
26. Do you have policies addressing when and how visitors might still be allowed to enter the facility if visitor restrictions are in place (e.g., end-of-life situations)?
27. What is your plan for transferring residents who require a higher level of care than you are able to provide?
28. Do you have a plan for cohorting residents with symptoms of respiratory infection?
29. What do you plan to do if a resident has severe respiratory infection, or a cluster (e.g., ≥ 3 residents or HCP with new-onset respiratory symptoms over 72 hours) of residents have symptoms of respiratory infection, or there is an increase in cases reported in the community?
30. Are you able to get sufficient testing for your staff? After absences? For current or new residents coming into your facility?

We hope these questions are helpful in framing thoughts around facility protection. Please let us know if you have any additional questions to add or if you have comments.

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