



**State of South Carolina**  
**Department on Aging**

Henry McMaster  
Governor

Connie D. Munn  
Director

**Program Instruction (PI) to Long-Term Care Ombudsman Program  
COVID-19**

Effective March 13, 2020: In response to the COVID-19 pandemic, the Long-Term Care Ombudsman Program (“Office”) is issuing temporary program instructions to Representatives of the Office as it relates to their duties under the Older Americans Act and South Carolina state law.

Representatives of the Office at both the regional level and at the S.C. Department on Aging should proceed with obtaining a census sheet from each of their assigned facilities, as well as the name and phone number of both the Resident Council and Family Council president, where applicable.

As of 3:00 pm on March 13, 2020, the S.C. Department of Health and Environmental Control is restricting access to nursing homes and assisted living facilities with the exception of end-of-life situations. Representatives of the Office should assess each of their assigned facilities’ capabilities to allow virtual visits (e.g., FaceTime, WhatsApp, Skype) with family members. Moreover, because all facility visits are now restricted, Representatives of the Office should be prepared to notify family members who have been denied access that, per the guidelines from the Centers for Medicare and Medicaid Services, facilities have the capability to do so in order to prevent community-associated infection or communicable disease transmission to the resident, and that decision has been affirmed at the state level by the S.C. Department of Health and Environmental Control.

Representatives of the Office are furthermore advised to contact the facility Administrator to determine how you can keep in touch with residents and conduct investigations virtually so that the mandates of the Long-Term Care Ombudsman Program under the federal Older Americans Act may be met.

Please see the attached document which provides guidance to Representatives of the Office so that messages to the community are targeted and consistent for the following situations:

1. Intake line receives calls concerning COVID-19.
2. Ombudsman staff receives calls that facilities are screening, limiting, or restricting visitors, including immediate family members.
3. Ombudsman staff receives calls that residents are not being permitted to re-enter facilities after a trip into the community (e.g., shopping, visiting family, etc.)

**[Remainder of this page intentionally left blank]**



**State of South Carolina**  
**Department on Aging**

Henry McMaster  
Governor

Connie D. Munn  
Director

**The following guidance should be used when a caller has general questions about or is seeking information on COVID-19, including testing, in South Carolina:**

- Ensure that during the call you remain calm, stay on message, and ensure the caller that you understand their concerns and will refer them to the appropriate resource. Because compassion is necessary, using active listening skills and saying things like, “I hear you” or “I understand that you have concerns/feel scared” will let the caller know that you value their humanity.
- If the caller has questions about COVID-19, refer the caller to the Care Line at the S.C. Department of Health and Human Services, which can be accessed from 8 a.m. to 6 p.m. each day; the number is 1-855-472-3432.
- If the caller is experiencing symptoms, refer them to the virtual screening options, available either through Prisma or MUSC. Calmly encourage the caller to also contact their primary health care provider for screening and testing options.
- If the caller has questions regarding insurance coverage, relay to the caller that:
  - Medicare covers the lab test for the virus, with no out-of-pocket cost to the senior
  - Medicare covers all medically necessary hospitalizations
  - While a vaccine is not available currently, it will be covered under all Medicare Prescription Drug Plans (Part D) once it is developed
- Medicare Advantage Plan members have access to these same benefits, and allows cost-sharing waivers for the lab test; ask caller to check with their individual plan representatives about coverage and associated costs
- Medicare will also cover “virtual check ins” with doctors by phone or by video to determine whether a patient needs to come in for a visit; this option should be used where a patient is symptomatic to avoid community spread.
- Other resources available to callers include the Centers for Disease Control and Prevention (CDC) ([www.cdc.gov/covid19](http://www.cdc.gov/covid19)) and the National Council on Aging ([www.ncoa.org](http://www.ncoa.org))
- Again it is important to all staff having direct verbal contact with members of the public to avoid panicking, or acting in such a way as to induce panic in our constituent population. As you all have family members or friends or may be in the most vulnerable age group yourself, please treat the voice you are speaking to on the other line with compassion, exercising good judgment and trying to keep the caller as calm as possible.

**The following script should be used when a caller states that their visits to a nursing home or assisted living facility have been restricted:**

- Ensure that during the call you remain calm, stay on message, and ensure the caller that you understand their concerns and will refer them to the appropriate resource. Because compassion



## State of South Carolina Department on Aging

Henry McMaster  
Governor

Connie D. Munn  
Director

is necessary, using active listening skills and saying things like, “I hear you” or “I understand that you have concerns/feel scared” will let the caller know that you value their humanity.

- Note that federal guidelines give nursing facilities the capability to restrict access in order to prevent community-associated infection or communicable disease transmission to the resident; these precautions are in place for residents as well as family members.
- State that the S.C. Department of Health and Environmental Control has restricted access to nursing homes and assisted living facilities with the exception of end-of-life situation
- Again it is important to all staff having direct verbal contact with members of the public to avoid panicking, or acting in such a way as to induce panic in our constituent population. As you all have family members or friends or may be in the most vulnerable age group yourself, please treat the voice you are speaking to on the other line with compassion, exercising good judgment and trying to keep the caller as calm as possible.

**The following script should be used when a caller states that they have been prohibited from being re-admitted to the facility after a visit to the community (e.g., shopping, visiting family, etc.):**

- Ensure that during the call you remain calm, stay on message, and ensure the caller that you understand their concerns and will refer them to the appropriate resource. Because compassion is necessary, using active listening skills and saying things like, “I hear you” or “I understand that you have concerns/feel scared” will let the caller know that you value their humanity.
- Refer the caller to the S.C. Department of Health and Environmental Control; as the survey and licensing entity in the State, SC DHEC has jurisdiction to handle these issues.
- Again it is important to all staff having direct verbal contact with members of the public to avoid panicking, or acting in such a way as to induce panic in our constituent population. As you all have family members or friends or may be in the most vulnerable age group yourself, please treat the voice you are speaking to on the other line with compassion, exercising good judgment and trying to keep the caller as calm as possible.

