COVID-19 PANDEMIC: MOVING FORWARD

Reopening Nursing Homes Safely

Moving Forward Requires us to examine where we have been:

- March 6th NYSDOH DAL "Stay Informed"
- March 13th NYSDOH DAL "Suspend all Visitation, Dining, Activities, Active Screening Staff, Residents"
- March 21st NYSDOH DAL "Presume All Residents Positive", All residents Contact and Droplet
- March 25th NYSDOH DAL Nursing Homes must Take Covid +"
- CMS Memorandum- Multiple evolving guidance documents
- CDC Guidance multiple evolving guidance documnets
- Facilities need to review crisis mode experience and response to an unprecedented spread of a novel virus, resulting in resident and staff illness and death

Existing and Emerging Issues

- Physical and psychological impacts on both leadership and direct care staff staff
- PPE shortages, multiple types of PPE in crisis mode, including lack of recommended N95s
- Staffing shortages
- Constant requirements for reporting, such as HERDS survey submissions
- Lack of clear governmental agencies
- On site and Virtual Infection Control surveys adding to facility burden and anxieties
- Conflicting information from sources including Epidemiology, State, and City Health Dept

Psychological Impact

- Staff and families mourning residents and staff that expired due to COVID-19:
- Approximate # NH Resident COVID-19 Deaths
 - Nationally: 25,923
 - New York: 6,271
- State COVID Information:
 - State Cases: 392,930
 - State Deaths: 24,842
 - COVID-19 Fatalities by Underlying Conditions:
 - Underlying Conditions Unknown: 11.8%
 - Underlying Conditions: 87.6%
 - Case Distribution 75+ Years: 11.7%
 - Fatality Distribution 75+ Years: 48.8%
 - These death totals are unprecedented in LTC and are likely to have long term impacts

Psychological Impact Continued

- Provide memorial services, acknowledge losses and post Mental Health Support information.
 - NYS Emotional Support Helpline: 1-844-8639314
 - NYC Well Helpline: 1-888-692-9355
 - Psychological Services for staff and residents, can utilize Telehealth.
- Residents isolated from loved ones and each other for 4 months resulting in physical and psychological decline. The unforeseen impact of isolating families in Mid-March was the creation of abandonment as a comorbidity

Moving Forward, Impacts on Residents and Staff

- Upstate Region(s) Phase 3
- Nassau Phase 3 June 24th
- NYC Phase 2 June 22nd (Phase 3 scheduled for July 6th)
- Continuing weekly staff testing with continued furloughs and confusing test results +/-. As of last week NYSDOH stated employees that were Covid + and were out for 14 days that retest positive do not need to be furloughed an additional 14 days but require a negative test to return to work.

Moving Forward, Impacts on Residents and Staff

- Baseline Resident Testing complete small numbers of residents with positive tests, resulting in placement on COVID unit/area
- Continue with Observation Unit/area for new and readmissions with negative test from hospital. Observe for 14 days with droplet/contact PPE and repeat a negative test. Waiting for updated guidance on Observation Unit.
- Awaiting NYSDOH FAQ Round 3 Guidance

Goals: Resilience of Skilled Nursing Facilities

- Minimize/Eliminate COVID infection
- Support staff, residents, and families
- Reopen facilities for safe visiting, socially distanced group activities, dining, beauty parlor/barber services, as well as consultant services
- Rebalance facility census, reestablish SNF services, community role, and care transitions

Visitation

- <u>Visitation</u> CMS Reopening Nursing Homes Memo 20 30 . . <u>Awaiting NYSDOH</u> Guidance.
- CMS Factors that should inform decisions about relaxing restrictions in Nursing Homes:
 - Case status in community
 - Case status in the Nursing Home(s)
 - Adequate staffing
 - Access to adequate testing
 - Universal source control
 - Access to adequate PPE for staff
 - Local hospital capacity

Visitor Guidance *awaiting NYSDOH approval

- Only residents that have tested negative for COVID-19 will participate in outdoor visiting
- Families/Resident representative will call facility to set up visiting reservation through facility activities staff
- Residents will be screened just prior to the visit by the direct care nursing staff of the unit
- Visitors will be provided written education by Infection Preventionist at the start of the visit
- Transfer to and from the outdoor space must be orderly
- Visitors may provide food and beverage to the resident consistent with dietary restrictions, but food should not be shared between residents and visitors
- The Activities Director/designee and a member of the Nursing staff will be present throughout the visit
- At this time, visits inside the facility will only be conducted for approved compassionate care and end of life visitation

Next Steps / Additional CMS Guidance for Reopening

Rehab

• Facility will need to determine the layout of the gym, whether social distancing is possible, and proper infection prevention and control measures that can be implemented to prevent transmission such as, but not limited to, cleaning and disinfection of equipment, hand hygiene, and source control.

Small Group Activities

• QSO memo 20-30-NH states the following: Restrict group activities, but some activities may be conducted (for COVID-19 negative or asymptomatic residents only) with social distancing, hand hygiene, and use of a cloth face covering or facemask.

Small Dining Groups

- QSO memo 20-30-NH states the following:
 - Communal dining limited (for COVID-19 negative or asymptomatic residents only), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet).
 - Eating in dining areas with appropriate social distancing only applies to residents without signs or symptoms of a respiratory infection, and without a confirmed diagnosis of COVID-19.

Fall 2020 What to Watch For

- Potential Second wave of COVID-19 infection: Identify, Isolate, Test, and Treat with evidenced based protocols (JAMDA NYS Medical Directors Article) https://www.jamda.com/article/S1525-8610(20)30484-9/pdf
- Influenza season: Vaccinate, Differentiate from COVID-19, Respiratory panels, COVID Testing
- Continued Staff, Resident, and Visitor Screening
- Establish a Respiratory Program with fit testing for N95s
- Develop a Pandemic Plan as part of Emergency Preparedness - NYSDOH to provide regulations on new legislation
- Support and competency-based education for staff, including PPE, hand hygiene and Environmental Cleaning and Disinfection
- Ongoing Communication and QAPI led by Infection Preventionist, Medical Director, DON and Direct Care Team members



QUESTIONS?

Mary Gracey-White

• GNYHCFA, RN, BSN, QCP, Director of Regulatory Compliance

• Email: mgwhite@gnyhcfa.org

Sources

- https://www.jamda.com/article/S1525-8610(20)30484-9/pdf.
- https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html.
- https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and-memos-states-and/covid-19-survey-activities-cares-act-funding-enhanced-enforcement-infection-control-deficiencies-and.
- https://www1.nyc.gov/site/coronavirus/index.page
- https://coronavirus.health.ny.gov/home