# **GREATER NEW YORK NEWS**

Greater New York Health Care Facilities Association FOR THE NEWS THAT MATTERS TO OUR MEMBERS



### **Recap of July Webinar**

Our latest webinar provided updates on COVID-19 emergency preparedness requirements, testing, and reopening. Please find a summary of topics discussed on page 2.

#### **COVID-19 and Influenza**

As flu season approaches, Mary Gracey-White, RN, discusses how to differentiate between influenza and COVID-19, as well as recommendations for symptom monitoring.

#### **Looking Ahead**

Notable contributions from our Executive Director, Michael Balboni, and GNYHCFA Life Safety Consultant, John Kerney outline changes to pandemic planning legislation and current building operation regulations.

### In Memoriam

We would like to honor GNYHCFA Board Member, Judith Dicker, who recently passed away. Judith was a member of the association for over 40 years, and an active member of the board since it's inception in 2003. Judith served as the Executive Director of Hillside Manor Rehabilitation and Extended Care Center and was an inspiring leader with a life-long passion for caring for others. She redefined what it meant to challenge the future and continuously looked for ways to adapt to the ever changing health care system. Judith's lasting impact remains permanently interwoven throughout Greater New York and will continue to guide us in our everyday work.



# COVID-19: What do we know? Where do we go? July 2020 Webinar Recap

On July 1<sup>st</sup>, 2020, Greater New York Health Care Facilities Association hosted a webinar to provide the latest updates relating to COVID-19.

Dr. Tzvi Jonas, MD, MBA is the Chief Medical Officer at Sheepshead Nursing and Rehabilitation. He shared with us how Sheepshead responded to the COVID-19 crisis, what they learned, and his recommendations going forward. Additionally, Dr. Jonas discussed PCR Testing, telemedicine, advanced care planning, and the critical issue of social isolation and loneliness. Due to the many benefits of telehealth and the broad expansion to reimbursement recently made by CMS, Dr. Jonas encouraged facilities to develop their own telemedicine systems. He educated the audience on the severe risks associated with loneliness and social isolation and urged facilities to prioritize these issues and consider the strategies he provided.

John Kerney, our Director of Health Life and Safety, discussed the current CMS emergency plan requirements and provided step-by-step recommendations for how facilities can implement an effective crisis response.

Lourdes Martinez, Partner at Garfunkel-Wild Law Firm, provided an explanation of each of the executive orders recently issued by New York State. Lourdes also discussed the investigations underway by the DHHS, Office of Inspector General, Attorney General, and House Select Subcommittee.

Lastly, Mark Kissinger joined us from the NYS Department of Health to discuss visitation, changes to emergency preparedness requirements, weekly testing, and what to expect as we look ahead.

A more in-depth summary is available upon request, and the full-length recording can be found on our website: <u>https://gnyhcfa.org</u>.

# **Upcoming Webinar**

Our next webinar will take place on <u>Tuesday</u>, July 30<sup>th</sup>, 2020. Please be sure to visit our website at www.gnyhcfa.org for additional information.

# Preparing for Flu Season: COVID-19 or Influenza? Mary Gracey-White, RN, Director of Regulatory Compliance, GNYHCFA

NYS continues to demonstrate a marked reduction in the spread of COVID-19 infection. As we continue to learn more about COVID-19 (SARS-CoV-2), we are also looking ahead to a potential second wave in the fall, which could coincide with Influenza season. The CDC has issued an updated guidance differentiating influenza from COVID-19. Many of the symptoms such as fever, malaise, and chills are similar in both infections. One different symptom that may present in COVID-19 is the loss of taste and/or smell. This can be difficult to assess in the elderly population. As we have learned during the evolving pandemic, the population in skilled nursing facilities often presented without fever in COVID-19 infections and in some cases, had symptoms that were atypical. If a person has COVID-19, it could take them longer to develop symptoms than if they had the flu. Typically, persons with influenza present with symptoms 1-4 days following exposure, whereas SARS -CoV-2 infections can present anywhere from 2-14 days after exposure. In addition, both illnesses have similar spread through infected droplets, but SARS-CoV-2 has shown to have more "super spreader events." The research continues as more is known about COVID-19 including differentiating it from a respiratory disease and more of a multisystem inflammatory disease that also affects blood vessels causing coagulopathy. Treatment protocols for this infection continue to evolve as clinicians learn more.

As we prepare for the 2020-2021 Influenza season during the continued pandemic, we need to ensure our staff identifies and reports any changes in resident condition and that clinicians act to quickly assess the resident to determine what treatment and monitoring is indicated. Recommendations from the CDC include COVID-19 testing as well as influenza testing, respiratory panel and other labs as indicated. The revised CDC guidance states if a resident presents with COVID-19 symptoms, the resident should be placed on Droplet and Contact Transmission Based Precautions and only moved to a COVID unit/area if COVID test by PCR is positive. This will minimize moving residents to a COVID area that may have another type of illness.

Planning for a timely and aggressive influenza vaccination program is always important in LTC, this season even more so. Ensure your facility is prepared as we move forward through COVID-19.

For More on this including a chart comparing Influenza and COVID-19 can be accessed at <u>https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm</u>.

# Changes to Emergency Preparedness Plan Requirements Michael Balboni, Executive Director, GNYHCFA

On June 17, 2020, Governor Cuomo signed into law the requirement of more extensive plans for a pandemic. This law is a reaction to the response of the state and nursing home community to the pandemic. The new law now requires several things:

- 1. Submission of a Pandemic Emergency Plan to the Department of Health by September 15, 2020. This will be an annual requirement.
- 2. Every facility must maintain either on site or through a contractual arrangement, sixty days supply of Personal Protective Equipment, and provide the details of that supply on the website of the facility.
- 3. Each plan must include within it a plan to communicate the conditions of its infected residents once a day during a pandemic, and the status of all residents once a week as well as the number of infections and deaths. In addition, the communication plan must provide a cost-free capability for daily video conferencing with residents and family members.
- 4. Outline of the steps that the facility will take to safely admit hospitalized patients back into the facility, while at the same time ensuring a bed for that resident.

There are many questions surrounding this law including who declares the pandemic, how are the PPE supposed to be acquired, paid for and stored. Executive Director, Michael Balboni, has been working with the Department of Health and the Division of the Budget on what constitutes a sixty days supply, and how an individual facility can compete in a global market place for PPE.

Lastly, failure to prepare and submit an emergency plan will expose the facility to civil penalties of \$2,000 for the first occurrence and \$10,000 if there is a serious physical harm as a result of not preparing the plan. The penalties could even include a criminal penalty for a willful violation of this provision.

## Building Operations: Regulations and Strategies John Kerney, Life Safety Consultant, GNYHCFA

### **Regulations and Requirements**

As we have focused on the control of the COVID-19 pandemic, there may be some areas which were put on the back burners. Despite the waiver put out by CMS, which related to Life Safety, mandatory inspections and emergency repairs of life safety systems were to continue.

- Many facilities may have purchased and installed additional patient care items such as oxygen concentrators, nebulizers, and thermometers, which will need to be documented into the medical device log.
- There was a recall of the Genius 2 and 3 Tympanic thermometer, which should be reviewed.
- New York City delayed the LL84 energy report, which was due May 1, 2020. It is now due August 1, 2020.
- Your report card must be posted by October 1, 2020 as per <u>Local Law 33 as</u> amended by LL95 of 2019 Steps to Compliance.

We can also expect to start receiving the annual inspections from localities for our use permits as Local government returns to normal activity. If there any questions on these please do not hesitate to contact us.

### **Strategies and Recommendations**

- Create a strategic plan prior to opening a building. The plan should include measures to make occupants feel safer, ensure supply chain for critical items such as filters and communication plans for building support and safety measures for occupants.
- If the building opening takes place when Personal Protective Equipment (PPE) requirements are still in place, <u>ASHRAE's Occupancy Guides</u> can be referenced to deal with functioning buildings during the epidemic.
- Review HVAC programming to provide flushing two hours before and post occupancies. This includes operating the exhaust fans as well as opening the outside air dampers. For buildings without the capacity to treat large quantities of outside air and when outside air conditions are moderate, open all windows for a minimum of two hours before reoccupation.
- Ensure that custodial scope includes proper cleaning procedures built from EPA and CDC guidance on approved products and methods:
  - Disinfect high-touch areas of HVAC and other building service systems (e.g. on/off switches, thermostats).
  - Disinfect the interior of refrigerated devices, e.g. refrigerators, where the virus can potentially survive for long periods of time.
- Run the system on minimum outside air when unoccupied.
- Garage exhaust, if any, should run two hours before occupancy.