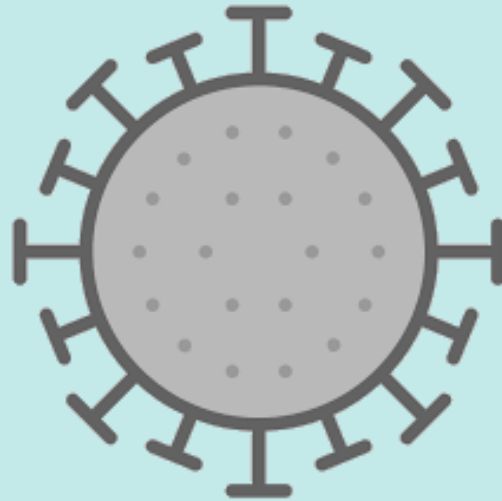


COVID 19 Q&A for Long Term Care (AKA Comagine Call)



Office of Communicable Disease Epidemiology
Washington State Department of Health (WA DOH)

Housekeeping

Attendees will be in listen only mode



Educational webinar



Self-mute your lines when not speaking



Participants from long-term care, regulatory and public health



Type questions into the question window. *Tell us where you are from (e.g., AFH, NH)*



No confidential information presented or discussed





Introductions

Healthcare-Associated Infections (HAI) Team

Consultants/Epidemiologists

- Marisa D'Angeli, MD, MPH
- Larissa Lewis, RN, MPH, CIC
- Sara Podczervinski, RN, MPH, CIC, FAPIC
- Mary Catlin, BSN, MPH, CIC
- Beverly Burt, RN, BSN, CIC
- Lisa Hannah, RN, BSN, CIC
- Audrey Brezak, MPH
- Paula Parsons





Experts on the Line

Shauna Clark, RN

Personal Health Services Supervisor-LTC

Claire Brostrom-Smith, RN, MSN, CIC

Personal Health Services Supervisor-Acute Care
And Outpatient

James Lewis, MD, MPH

COVID-19 Healthcare System Support Co-Lead

Charissa Fotinos, MD

Deputy chief medical officer





Experts on the Line

John Ficker

Executive Director
Adult Family Home Council

Karen Cordero

Director of Education & Support
Adult Family Home Council

Amy Abbott, LICSW, CDP

Office Chief for Policy, Training, Quality
Assurance, and Behavioral Health

Candace Goehring, RN, MN

Director
Residential Care Services





Experts on the Line

Elena Madrid, RN, BSN

Executive Vice President for Regulatory Affairs



Laura Hofmann, MSN, RN

Director of Clinical and Nursing Facility
Regulatory Services



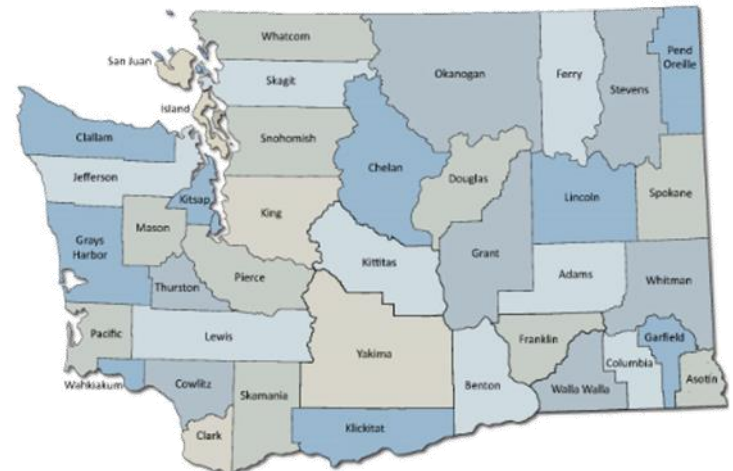
Donna S Thorson, MS, CPHQ, CPPS

Senior Improvement Advisor
Comagine Health



The purpose of this meeting

- To provide infection prevention advice and regulatory advice according to national and local guidelines and recommendations
- This does not constitute legal advice
- Please note - Always check with your local health jurisdiction. If LHJ requirements are more stringent, follow that guidance:
<https://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions>

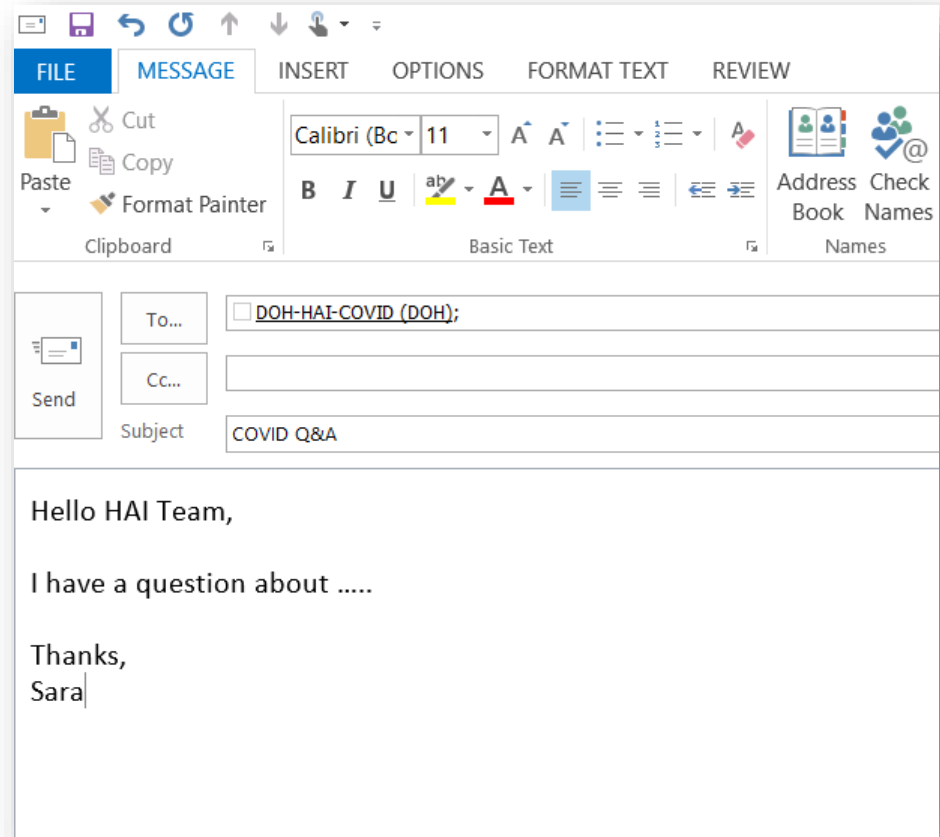


Q&A Every Thursday:

Send Us Your Questions Ahead of Time

Subject Line:
COVID Q&A

Email:
HAI-COVID@doh.wa.gov







Safe Start for Long-Term Care Facilities

Washington State Department of Health and Department of Social and Health Services

November 15 through December 14, 2020

COVID-19 has had a disproportionate effect on Washingtonians who live in long-term care facilities or receive care from Supported Living agencies in their homes. This phased approach to reopening is designed to keep them healthy and safe. The LTC phase that a facility or agency is in will vary by county and mirror Governor Inslee's Safe Start Washington Plan. **Additionally, a facility or agency must meet certain criteria before entering a new LTC phase, including going 28 days without a resident/client or staff member testing positive for COVID-19 and having at least a 14-day supply of Personal Protective Equipment (PPE) on hand.** Until the COVID-19 public health threat has ended, facilities and agencies will practice social distancing, universal masking, screen all staff and residents entering for symptoms, maintain access to testing and follow all local and federal PPE guidelines. This document is a summary of the detailed Safe Start Recommendations and Requirements documents for each facility or agency type. More detail for each phase and topic is available in the full Safe Start plan.





	 LTC Phase 1	 LTC Phase 2	 LTC Phase 3	 LTC Phase 4
Visitation <i>Remote visits, window visits, and outdoor visits are allowed in all phases. Facilities should have policies in place for remote visitation, including access to technology that allows residents to communicate with family, friends or their spiritual community regardless of phase.</i>	<ul style="list-style-type: none"> Indoor visits: <ul style="list-style-type: none"> End of life visits: or, if a resident is unable to participate in outdoor or remote visits an essential support person is allowed to visit once daily and only for a compassionate care reason. Outdoor visits limited to two visitors each day. All visitors must wear a cloth face coverings or facemasks during visits. 	<ul style="list-style-type: none"> Indoor visits: <ul style="list-style-type: none"> End of life visits: or, if a resident is unable to participate in outdoor or remote visits an essential support person is allowed to visit once daily and only for a compassionate care reason. Outdoor visits limited up to 5 people for an outdoor visit including the resident. All visitors must wear a cloth face coverings or facemasks during visits. 	<ul style="list-style-type: none"> Indoor visits: <ul style="list-style-type: none"> End of life visits: or, if a resident is unable to participate in outdoor or remote visits an essential support person is allowed to visit once daily and only for a compassionate care reason. Outdoor visits limited up to 5 people for an outdoor visit including the resident. All visitors must wear a cloth face coverings or facemasks during visits. 	<ul style="list-style-type: none"> Indoor visits: <ul style="list-style-type: none"> End of life visits: or, if a resident is unable to participate in outdoor or remote visits an essential support person is allowed to visit once daily and only for a compassionate care reason. Outdoor visits limited up to 5 people for an outdoor visit including the resident. All visitors must wear a cloth face coverings or facemasks during visits.
Testing and screening	<ul style="list-style-type: none"> The facility must maintain access to testing for all residents and staff. Testing will occur based on federal, Department of Health and Local Health Jurisdiction guidance. Residents and staff, as well as any essential health care personnel entering the building, must be screened for symptoms daily. Compassionate care and outdoor visitors must be screened. 	<ul style="list-style-type: none"> LTC Phase 1 testing and screening mandates are still required in Phase 2. Non-essential personnel must be screened. Compassionate care and outdoor visitors, as well as essential support persons, must be screened. 	<ul style="list-style-type: none"> Remains the same as earlier phases. 	<ul style="list-style-type: none"> Facilities should follow current federal, Department of Health and Local Health Jurisdiction guidance for testing. Continue to screen all residents, staff and persons entering the facility for symptoms.
Personal Protective Equipment (PPE)	<ul style="list-style-type: none"> All staff must wear a cloth face covering or face mask while in the facility. All staff and essential health care personnel must wear appropriate PPE when interacting with residents. Facilities must follow federal PPE optimization strategies. 	<ul style="list-style-type: none"> LTC Phase 1 PPE mandates are still required in LTC Phase 2. 	<ul style="list-style-type: none"> Remains the same as earlier phases. 	<ul style="list-style-type: none"> Follow federal, Department of Health and Local Health Jurisdiction guidance for PPE.
Group activities	<ul style="list-style-type: none"> Communal dining is not recommended. If it occurs, residents must be seated at least six feet apart. Restrict group activities as much as possible. Facilities and agencies should have procedures in place that allow residents to use technology to participate virtually in activities that improve their quality of life. 	<ul style="list-style-type: none"> Onsite group activities are permitted, but limited to no more than 10 people. Outdoor activities require masking, social distancing and monitoring of residents or clients. Residents or clients may eat in the same room while practicing social distancing. 	<ul style="list-style-type: none"> Group activities remain limited to no more than 10 people. Visiting family members may participate in group activities, but must practice social distancing and wear a mask. Communal dining with six foot social distancing is permitted. 	<ul style="list-style-type: none"> Regular group activities resume.

What is allowed for Long-Term Care Facilities Visitation

Washington State Department of Health and Department of Social and Health Services

November 15 through December 14, 2020

A facility or agency must meet certain criteria before entering a new phase, including going 28 days without a resident or staff member testing positive for COVID-19 and having at least a 14-day supply of Personal Protective Equipment (PPE) on hand. Until the COVID-19 public health threat has ended, facilities and agencies will practice social distancing, universal masking, screen all staff and residents entering for symptoms, maintain access to testing and follow all local and federal PPE guidelines.

	 LTC Phase 1	 LTC Phase 2	 LTC Phase 3	 LTC Phase 4
Window visits	✓	✓	✓	✓
Remote visits	✓	✓	✓	✓
Outdoor visits	✓*	✓***	✓	✓
Limited indoor visits	✓**	✓**	✓	✓
Normal visitation				✓

* Limited to two visitors each day.


** End of life visits:

or, if a resident is unable to participate in outdoor or remote visits an essential support person is allowed to visit once daily and only for a compassionate care reason.

*** Limited up to 5 people for an outdoor visit including the resident.

Holiday Pledge

Comagine Health resource for a Holiday Pledge for health care facilities to share with staff to gain commitment to proper safety protocols over the holidays.



My Holiday Pledge

Name: Date:

I pledge to protect myself, my family, my co-workers and my residents from exposure to COVID-19 by choosing to do the following:

While at work:

- Wear the designated PPE appropriately (mask covering my nose and mouth)
- Perform hand hygiene with alcohol-based hand sanitizer in between resident care or interaction (or with soap and water for at least 20 seconds if my hands are soiled)
- Maintain a distance of at least 6 feet from staff and residents except when I am providing direct care to residents
- Support my co-workers to do the same

While outside of work:

<https://comagine.org/resource/1177>

Announcements

1. Statewide restrictions extended to January 4
2. DSHS Dedicated COVID-19 Care Units website:
 - <https://www.dshs.wa.gov/altsa/information-providers-and-long-term-care-professionals>
 - Provider letter:
<https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/020-12-08.pdf>
3. DSHS Rapid Response Short-Term Crisis Staffing – refer to Provider letter for link to request form:
<https://www.dshs.wa.gov/sites/default/files/AL TSA/rcs/documents/multiple/020-12-02-3.pdf>
4. DOH website: Reporting COVID-19 Test Results for Point-of-Care Testing Facilities
<https://www.doh.wa.gov/Emergencies/COVID19/HealthcareProviders/ReportingTestResults/ReportingCOVID19TestResultsforPointofCareTestingFacilities>
5. Reminder: LTC Q&A call feedback due COB today:
<https://www.surveymonkey.com/r/J6GHH6L>

Q & A Portion

Please type your questions into the question window and tell us what type of facility you are from (e.g., ALF, SNF, AFH)