



KALAMAZOO COUNTY GOVERNMENT

In the Pursuit of Extraordinary Governance...

COVID-19 Update from Kalamazoo County Health & Community Services Department Recommendations for Long Term Care Facility Medical Directors March 25, 2020 10:00am

Today's call was hosted by the Kalamazoo County Government Health & Community Services Department.
(Public Health Department for Kalamazoo County).

The public health department team on the call included:

- Medical Director for Kalamazoo and Calhoun County Public health departments:
 - Dr. Will Nettleton
- Long Term Care Ombudsman for Kalamazoo, Calhoun, Barry, Branch, and St. Joseph
 - Kelly Jonker and Amber Price-Johnson
- Kalamazoo County Deputy Health Officer
 - Deb Lenz
- Older Adult Services Director, Area Agency on Aging IIIA
 - Samantha Carlson, LMSW

70 guests called in from a variety Kalamazoo and Calhoun County Long Term Care Facilities/Nursing Homes, state of Michigan office of the Ombudsman, acute care hospital discharge planning teams, OBRA and nursing home transition teams

The purpose of the call is to provide education, communication, coordination of care and resources for medical professionals serving older adults residing in a nursing homes (long term care facilities), transferred to acute care for COVID-19, stabilized, and cleared for return to their nursing home.

This proactive collaboration is intended to coordinate care in the safest, most efficient way possible given limited resources and the rapidly evolving situation of COVID-19.

Guidelines are evolving quickly. This is an opportunity for us to work together as a community to assist older adults in our region through coordination of care.

The Ombudsman have been working with facilities regarding preparing for COVID-19 since early March. To quickly recap the chain of events regarding The Center for Medicare & Medicaid Services (CMS) through the Department of Health & Human Services (DHHS):

- March 4th, 2020 CMS Clinical Standards and Quality, and Quality Safety and Oversight Group, issued a bulletin modifying recommendations given the current COVID-19 crisis.
 - <https://www.cms.gov/files/document/gso-20-12-allpdf.pdf-1>

HEALTH AND COMMUNITY SERVICES DEPARTMENT

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- March 11, 2020 – State of Emergency announced in Michigan by the Governor. That action initiated conversations in our region to prepare for caring for these residents in accordance with the CMS & CDC bulletin to restrict visitors and follow Infection Control Precautions.
 - <https://www.cms.gov/files/document/qso-20-14-nh-revised.pdf>
 - March 13th, 2020- The President issued a national state of emergency, modifying regulations to accommodate emergent needs with CMS; which referenced CDC.
 - <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html>
- March 23, 2020 Executive order from the Governor 2020-21 limiting visitors through the Stay at Home initiative. https://www.michigan.gov/whitmer/0,9309,7-387-90499_90705-522626--,00.html
 - <https://www.cms.gov/files/document/qso-20-20-all.pdf>

Public health is a resource for the community in this world wide pandemic. Communication and coordination of care is essential for the vulnerable older adults that we all serve in our communities.

Dr. Nettleton reviewed the role of Medical Director Kalamazoo & Calhoun Public Health Departments

This is an important discussion- unified, dynamic response to the current pandemic.

Different sectors working together directly. Our goal is to work together for the safety and well-being of our community.

Public Health Medical Director goals for discussion:

1. The role of the local public health department
2. Process of addressing suspected cases of COVID-19 in nursing homes/facilities
3. Define PPE specific to COVID-19; and where to access it with shortages
4. Testing for potential cases of COVID-19.
5. Discuss transition of care of confirmed, stable COVID-19 cases from acute care back to facility

1. Role of the public health department:

- The local public health department works daily towards safeguarding our community regarding communicable diseases.
- During a state of emergency, the Public Health Department works in coordination with the Office of Emergency Management.
 - Both Kalamazoo and Calhoun County currently have a Coordinated Incident Command Center. Joint with County Emergency Management & County Public Health Department.
- Specific to the current pandemic of COVID-19: the public health department addresses prevention education, exposure education and assessment, recommendations on monitoring for exposed residents and staff, facilitates testing for qualified, potential cases, and provides public health recommendations for isolation and quarantine.

2. Identification of COVID-19 in a long term care facility:

- Older adults are more susceptible to disease and infection. In these settings, common surveillance for this population under normal circumstances include monitoring for pneumonia, urinary tract disease, etc.
- COVID-19 symptoms to date include cough, shortness of breath and fever.
- It should be noted in the older adult population, they may not always present with these symptoms. Confusion or change from baseline for cognitive status may be present instead of fever. In this population, it is important to monitor exposure.

- Both Kalamazoo and Calhoun County, known community exposure is occurring. This means COVID-19 cases for individuals who have not traveled outside of their community have been identified. Evidence COVID-19 is here, and it is in our community.

3. Defining Personal Protection Equipment (PPE):

- Nationally, all health care workers are experiencing very limited access to these critical resources. In our region, we are at a critical state of lack of PPE. PPE needs to be used judiciously. These limited resources should not be used in every exam room. They are to be used specifically for suspected or diagnosed COVID-19 patients or other conditions identified by facility medical director or Public Health.
- To review PPE specific to COVID-19 for droplet precautions:
 - Respiratory Protection- respirator or face mask.
 - N95 or surgical masks. If N95 is not accessible, surgical masks can be used.
 - Goggles, face shield, protecting the front and sides of the face.
 - Glasses are not considered protection.
 - Removing eye protection before leaving the room is important
 - Cleaning appropriately and reusing under CDC guidelines
 - Gloves:
 - Disposable, frequently changed.
 - Gowns- clean isolation gowns.
 - Prioritize use during aerosol generating procedures (such as a nebulizer treatment), personal care, and housekeeping such as changing linens
 - All PPE should be replaced if soiled or damaged.
 - Reusable items such as goggles should be sterilized appropriately.
 - Prioritizing use of PPE such as gowns if they are in short supply.

It cannot be reiterated enough: Every facility needs to be judicious with the supply they have at this time.

4. Testing and known COVID-19 case in your facility

- The wave is on the horizon. We see the increase in east Michigan. This issue is coming to our community. Facilities have all had education from CMS and Ombudsman regarding recommendations for prep was three weeks ago, and should continue. These are critical interventions to limiting transmission of the disease.
- Isolation: Area designated for COVID-19 pts. Separate sick from non-sick.
- No visitors.
- Stay in the room at this time.
- Adequate environmental controls and disinfection of the facility
- Limiting your staff to the essential, critical workers in compliance with the Governor's orders.
- Administrators need to identify critical staff for care and food distribution.
- Prioritize prevention appropriately with different risks of exposures such as Arousal treatment.
- If collecting a specimen (nasopharyngeal swab) of suspected COVID-19: staff should use a N95 mask (if not available then a surgical mask), gloves, gown, eye protection. One worker, door of room closed, disinfect afterwards.
- If the resident is stable, hospitalization may not be required. Transition to isolation with PPE use.
- If suspected and sent to acute care, the patient should use a surgical mask in transit to contain droplets. The facility will be asked to log and report all staff and residents who interacted with the resident.

5. Accepting a known COVID-19 case back to the facility of origin.

- This information is evolving, and is subject to change and recommendations from the state and local public health department.
- Long term care facilities- safety of the resident to return to your facility will depend on your isolation procedures and the availability of PPE
- March 23rd, CDC posted updated information: <https://www.cms.gov/files/document/qso-20-20-all.pdf>
- Returning to a facility is higher risk due to congregate setting.
- First: The patient/resident is determined to be medically stable by the hospital staff. Please note, they can still be infectious and precautions need to be in place.
- At this time, if transmission based precautions continue after discharge from acute care, the public health department and medical director – particularly if there is an outbreak at the facility, will determine, in consultation with the facility, when and how discontinuation of transmission based precautions will occur.
- The facility needs to plan to dedicated room, possible wing, and PPE for health care workers treating the patient.
- Once accepted back to the facility with the isolation and PPE plan in place, the Public Health Department will work with facility regarding discontinuation of the transmission based precautions.
- Transmission based precautions will be discontinued by either of the following:
 - Test based –(due to limited supplies, not likely)
 - If the facility has adequate testing supplies, multiple tests are administered.
 - This is ideal with the higher vulnerability population but not realistic given shortages of testing supplies.
 - Non-test based observation of symptoms and time consideration of onset. This is coordinated in conjunction with public health.
 - There may be a decision due to the status of the pandemic, limited supplies, to use a non-test based decision strategy to discontinue precautions.
 - Public Health Department may recommend non-test based considering the length of illness, symptom observation.

Update from CMS regarding guidelines

- As we are all aware, nursing homes (long term care facilities) are required by Centers for Medicare & Medicaid Services (CMS) guidelines.
- March 23rd, CMS issued an updated Memorandum (QSO20-20-All)
- <https://www.cms.gov/files/document/qso-20-20-all.pdf>
- Summary of the Memorandum:
 - Federal and State guidelines for essential health and safety standards continue to apply.
 - CMS's national strategy for targeted health care facility inspections was announced on Monday, 3/23. They have initiated a three pronged approach:
 1. CMS continues to prioritize investigation for Immediate Jeopardy allegations
 - (Such as physical or sexual abuse, neglect, or other conditions causing imminent threat to the health and safety of patients/residents).
 2. CMS is working with the CDC to identify high risk areas for infectious disease concerns, evaluating compliance with longstanding federal infection control requirements.
 - (Utilizing the Focused Infection Control Survey Tool to expedite reviews and minimize interruption of services to residents)
 - Third and final- New CMS Voluntary Self-Assessment for preparedness in response to COVID-19.
 - 3. Infection Control checklist (Focused infection control survey tool) shared with providers for self-assessment. This transparency critical to preparing for this outbreak. It provides an opportunity for coordination of care and support with CMS to focus on quality and safe preventive Person Centered Care planning.

- Long Term Care Ombudsman (LTCO) are available to assist with residents, families, and caregivers seeing support and education. Please note, our Ombudsman are accessible by telephone only. To minimize risk, they are not visiting facilities at this time unless absolutely necessary.
 - Our LTCOs cover Kalamazoo, Calhoun, Barry, Branch and St. Joseph counties. In the follow up email, we can also provide the state ombudsman contact information.
 - 1-866-485-9393
 - State of Michigan LTCO <https://mltcop.org/>

PPE: Where to get resources:

5th District Medical Response www.5dmrc.org

COVID-19 Long Term Care Facilities can request PPE through this organization. It will be entered into the operations director for that specific region, and will be challenged through the incident command system through the state inventory.

During a public health crisis, the public health department coordinates with the Office of Emergency Management for resources, supplies, and assistance with barriers to care.

Public health is a resource for all communities. We encourage coordination of care and discussion with public health, acute care, and the long term care facility to address specific needs of older adults in our communities.

Questions:

- Bronson Commons: Executive Director notes there is a concern for supplies from the 5th District Medical Response. They differed supplies to the system hospital.
- Discussion of shortage from the 5th District Medical Response.
 - Review of Prioritization for known COVID-19 cases- high priority. Incident Command discussion daily updated on PPE. Keep the discussion ongoing as supplies continue to change.
- Question regarding using disposable dining wear such as plastic/Styrofoam
 - Differ question to Environmental Health through the Public Health department.
 - While contact transmission is a concern, respiratory droplet transmission is the main concern. Question is forwarded to Environmental Health for direction.

In closing, all parties involved should remember this is a world-wide pandemic. The Public Health Department is committed to coordinating efforts for safety of our vulnerable older adults. This situation continues to evolve and change. In a state of emergency, PPE may be redistributed through Emergency Operations as needed once one case is stabilized, and a new case is discovered in another facility. Managing limited resources will be a community effort. Thank you for your engagement and efforts.

For updated Kalamazoo statistics regarding COVID-19 case in the county, as well as state and national trends, go to our website at www.kalcounty.com/hcs for more information. It is updated daily.

Kalamazoo County Public Health Hotline for COVID-19 screening questions, and concerns: 269-373-5267.

Calls are answered by trained public health nurses. A request for a physician to physician consult with Dr. Nettleton, the Public Health Medical Director for Calhoun and Kalamazoo County can be requested at this line.

Resource:

Centers for Disease Control & Prevention (CDC)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

Centers for Medicare & Medicaid Services- results from the investigation for Life Care Center nursing home in Kirkland, Washington- their epicenter of 2019 Novel Coronavirus (COVID 19).

<https://www.cms.gov/newsroom/press-releases/cms-announces-findings-kirkland-nursing-home-and-new-targeted-plan-healthcare-facility-inspections>

CMS National strategy for patient safety in nursing homes and healthcare facilities article. All recommendations subject to change, supply and local and state public health recommendations.

Infection control recs:

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html#adhere><https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html#adhere>

Disposition of hospitalized patients with COVID-19:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html><https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

Strategies to optimize PPE and equipment:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html><https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>