Promoting Safe Visitation During COVID-19

Cohort 9 Session 13

February 23, 2021 1:00 pm

> Please note, Project ECHO collects registration, participation, questions/answers, chat comments, and poll responses for some ECHO programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives.

















Today's Agenda

Follow-up from Session 12 – Promoting Safe Care Transitions during COVID-19

Promoting Safe Visitation during COVID-19

Case Study

Performance Improvement Discussion & Breakout Rooms

Wrap-up and Poll

Questions & Answers













Session 12 Follow Up Promoting Safe Care Transitions During COVID-19

Follow-up Questions?















Promoting Safe Visitation during COVID-19



Queen Anne Nursing Home, Hingham













Why is it so important to reopen nursing facilities to visitation

Humans are social beings

 The elderly are particularly vulnerable to the effects of isolation















Lack of social interaction in the elderly can lead to:

- Changes in mood such as depression and anxiety
- Decline in mentation
- Increase in behaviors in residents with Dementia.
- Decreased desire to eat leading to weight loss.

- Can cause other physiological effects such as increased blood pressure or cardiovascular events.
- Some studies have shown that social isolation can lead to premature death













Regulatory Timeline-CMS



March 13

 Restriction of All Visitors except Compassionate Care May 18

 CMS Issues Reopening Guidance

Sept 17

 Indoor **Visitation** Guidance Sept 28

 CMS Issues Revised Reopening Guidance













Key Points from Guidance (CMS)

County Positivity Rates:

 Utilize the COVID-19 county positivity rate as additional information to determine how to facilitate indoor visitation:

Visitor Testing:

- Not required but facilities are encouraged in medium or high-positivity counties to test visitors, if feasible.
- If testing facilities should prioritize visitors that visit regularly (e.g., weekly), although any visitor can be tested.
- Facilities may also encourage visitors to be tested on their own prior to coming to the facility (e.g., within 2–3 days) with proof of negative test results and date of test.













Regulatory Timeline DPH



March 16

•Restrict all except Compassionate Care

July 2

Outdoor Visits

September 15

Indoor Visits –
 no confirmed or
 suspected cases
 on the unit, wing
 or floor in the
 past 14 days

November 4

Visitor Testing

December 7

•Indoor visit – no confirmed or suspected cases in the facility in the past 14 days

February 3

•Revert to September Guidance

















Update – EOHHS Letter 2/19/21



COVID-19 Prevention Protocols Post-Vaccination

February 19th, 2021

Many families and friends of loved ones residing in long-term care communities have asked whether there will be changes to COVID-19 policies, in particular visitation, now that residents are fully vaccinated. Since June 3rd, families and friends have been able to visit their loved ones. You may visit your loved one so long as there have not been any new cases on your loved one's floor or unit for 14 days. This policy was recently revised as prior to this change, visitation was not allowed when there were any positive cases in the facility. The Department of Public Health (DPH) will continue to modify these policies gradually as more communities become fully vaccinated, and as we learn more from the CDC.

It is important to recognize that fully vaccinated individuals can still contract COVID-19 and spread the virus to others. COVID-19 safety protocols have helped contain infections dramatically since last March, and we want to keep infections to a minimum, particularly given recent information that several virus variants could spread rapidly. You can find more information on the current number of COVID-19 cases and deaths in nursing homes and rest homes, referred to as Long-Term Care (LTC) Facilities, on the DPH Daily Dashboard under "COVID-19 Cases in Long-Term Care (LTC) Facilities."

When will I be able to visit my loved one in a long-term care facility?

You may visit your loved so long as there have not been any new cases on your loved one's floor or unit for 14 days. Visitation is critically important to a long-term care resident's emotional well-being and quality of life and therefore we encourage you to visit if able. Regardless of the vaccination status of your loved one or those within the facility, it is important to continue to adhere to COVID-19 safety protocols. As we all know, COVID-19 can spread rapidly in LTC. Furthermore, fully vaccinated residents may experience little or no symptoms, and inadvertently transmit the virus to visitors.

What else will change in long-term care facilities after residents are vaccinated?

Isolation and quarantine precautions:

At this point, isolation and quarantine recommendations for staff and residents have not changed, even if the person has received one or two doses of the COVID-19 vaccine. This includes quarantine for staff and residents after an exposure, and residents after admission to the long-term care facility.

COVID-19 Testing:

Testing will continue as currently outlined in DPH guidance, Long Term Care Surveillance Testing, regardless of vaccination status for individual residents or staff in the long-term care facility. This includes weekly testing of all staff, testing of symptomatic staff and residents as well as more extensive outbreak testing of all residents and staff when a new COVID-19 case is identified

Screening:

Screening residents, staff, and visitors for signs and symptoms of illness will continue as outlined in DPH guidance, even after residents and staff at the facility have been vaccinated. There have been no changes to recommendations for screening for signs and symptoms of COVID-19 in long-term care facilities. No staff should work with fever or symptoms of acute illness, regardless of whether it is caused by COVID-19 or another illness.

HARVARD MEDICAL SCHOOL













Visitation



Virtual

Face time, Zoom, Skype, Google Duo







Outdoor

Window visits

Designated outdoor visitation space



Indoor

Compassionate Care visits

Designated indoor visitation space

Resident room visits













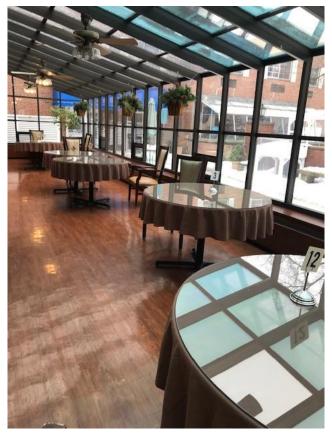
Your Visitation Innovations



Mary Immaculate

The Ellis















Compassionate Care Visits

Compassionate care situations" does not exclusively refer to end-of-life situations.

- A resident, who was living with their family before recently being admitted to a nursing home, is struggling with the change in environment and lack of physical family support.
- •A resident who is grieving after a friend or family member recently passed away.
- A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
- A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past.)











Case Study

- 90 year old patient, at end of life, patient recently admitted to Hospice. HCP (daughter) lives in Abu Dhabi. Daughter wants to know if she should get on a plane and travel 24 hours to see her mother. Will she be allowed into the building for a compassion visit?
- Does she need proof of negative test before visiting?
- Will Binax be sufficient?
- If the patient can be brought off floor would this impact decision making?
- What other factors might impact decision making?











What does visitation look like in your buildings? Breakout Sessions – 3 rooms, 10 minutes

- What are your current practices?
- Do you use Binax on visitors?

Are out of state visitors treated differently?

Following state guidelines?

- Asking for proof of negative test?
- Have visitors asked about children visiting?
- Have you started to formulate a plan for changes to DPH plan based on vaccination status?















What does visitation look like in your buildings? Breakout Sessions - Continued

Is visitation different for different scenarios:



- Resident and Visitor are both vaccinated
- Resident is vaccinated, visitor is not
- Resident is new admission on quarantine, received one dose of vaccination













Report Out

How did you do?















Human Frailty and Standard Work





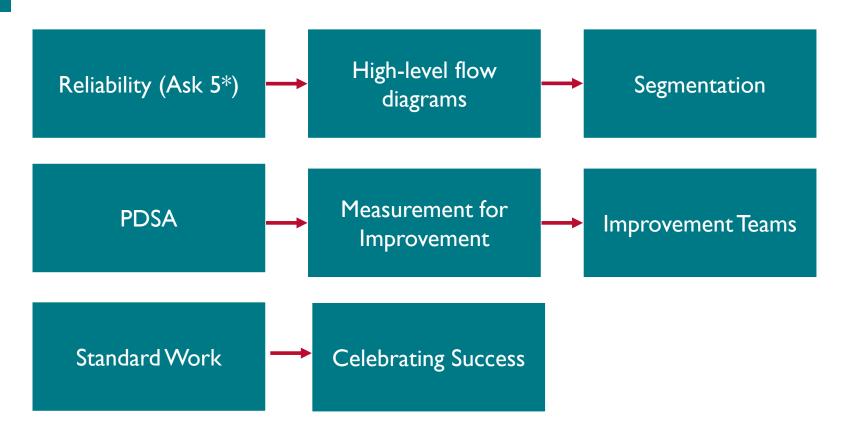


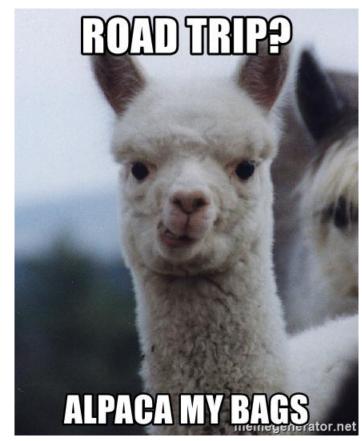






The QI Journey





Ask 5: Who, When, Where, How, What













Some Observations



If 80% of those using the designed process understand and believe **why the** project is important then you are ready for implementation.



Relying on humans to always do the right thing even if they want to is a poor design assumption.



Relying solely on education, training and vigilance to guarantee process acceptance will likely cause process failure.



The best way to achieve implementation of an idea even if the **why** is highly accepted is to assume human failure and design appropriately

Education and Training

- Absolutely required but not sufficient.
- Tends to be the only implementation tool for most processes.
- Uses and wastes a lot of resources.
- Often uses compliance, feedback and more training rather than accepting frailty of the design.

How to thwart human failure

Use design principles that assume human failure will occur from the onset so whenever possible help humans to remember.



Checklists



Double checks



Reminders

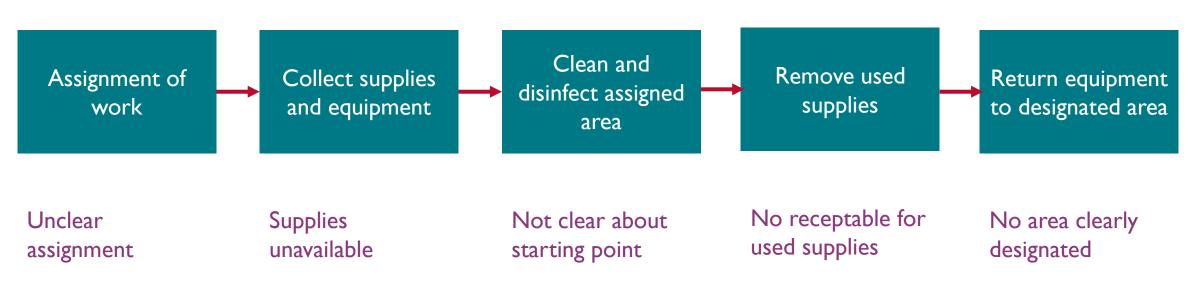


Mechanical interfaces



Habits and patterns

Associate problems with a box in the flow diagram



Supplies not labelled properly Did not know that mop head must be replaced

between rooms

Designated area cluttered













Improve the Labeling of Cleaning and Disinfecting Products

- Why Ensure safety of the user and residents
- Who Person assigned to review inventory
- When During inventory check
- Where In the stock receiving area (or places where prepared)
- How Review existing label; if not appropriate correct with appropriate label
- With what Use the label maker to produce label













Set Up For Your First Small Test of Change

- Explain what you are trying to accomplish: in this case, appropriate labeling of products by person responsible for inventory control to label products
- Ask the person to carry out the task as designed
- Debrief after the completion of the trial













Debriefing the Tester

- Were there products that were not properly labeled?
- Were they easy to identify?
- Were you able to re-label correctly?
- What may have prevented you from completing this task?
- How long did it take you to complete the task?
- Is there something we should consider doing differently?













Leave in action

Pick one step of one process that you want to improve













What to expect next...

Next Session: March 2, 2021

Topics:

 Session 14: Promoting Solutions for Making the Built Environment Safer During COVID-19

Please send questions/best practices to Lauren at Lauren7junge@gmail.com













Wrap Up and Poll

• Please watch your screen and respond to our 2 poll questions as they launch





















Questions?











