MEMBER WEBINAR: Coronavirus Preparation and Response

CO-HOSTED BY:



Living Longer Better



WELCOME



David Schless President American Seniors Housing Association



James Balda President & CEO Argentum





AGENDA

- The Basics of COVID-19
- Preparing for An(y) Outbreak
- Elevated Response Levels
- Additional Resources
- Audience Q&A



ABOUT US



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THE BASICS OF COVID-19

WHAT WE KNOW ABOUT NOVEL CORONAVIRUS

- Chinese public health authorities identified a novel coronavirus (2019-nCoV Acute Respiratory Disease) not previously seen.
- The virus causes fever and respiratory symptoms.
- To date, the virus has infected tens of thousands of people, with thousands of reported deaths around the world.
- Public health authorities are actively investigating this outbreak and the situation will evolve.



Sources: (1) http://jiangsu.sina.com.cn/news/s/2020-01-15/detail-iihnzhha2508664.shtml (2) http://wjw.wuhan.gov.cn/front/web/showDetail/2020011509040 (3) http://news.youth.cn/jsxw/202001/t20200115 12170407.html (4) https://www3.nhk.or.jp/nhkworld/en/news/20200116 46/ (5) http://wiw.wuhan.gov.cn/front/web/showDetail/202

(6) http://wjw.wuhan.gov.cn/front/web/list2nd/no/710 (7) http://wjw.wuhan.gov.cn/front/web/showDetail/2020011909074

How does coronavirus spread?

It depends on the particular coronavirus.

Human coronaviruses are rarely spread by fecal contamination but <u>may</u> spread from a infected person to others through: The air by coughing and sneezing

Close personal contact, such as touching or shaking hands

Touching an object or surface with the virus on it, then touching your mouth, nose or eves before washing your hands



Transmission from person to person is occurring with 2019-nCoV acute respiratory disease, most especially among very close contacts.

Current State: COVID-19 In Perspective

- Most people infected with COVID-19 virus have mild disease and recover.
- 80% of laboratory confirmed patients have had mild to moderate disease, which includes non-pneumonia and pneumonia cases.
- 13.8% have severe disease (requires hospitalization).
- 6.1% are critical (respiratory failure, septic shock, and/or multiple organ dysfunction/failure).
- Asymptomatic infection has been reported, but is relatively rare:
 - Majority who are asymptomatic on the date of identification or report went on to develop disease.
 - "Not a major driver of transmission."

Source: https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf





Who's Impacted?

People of all ages can be infected by the new coronavirus (nCoV-2019).

Older people, and people with pre-existing medical conditions (such as asthma, diabetes, heart disease) appear to be more vulnerable to becoming severely ill with the virus. WHO advise people of all age to take steps to protect themselves from the virus, for example by following good hand hygiene and good respiratory hygiene. Does the new coronavirus affect older people, or are younger people also susceptible?





#Coronavirus

COVID-19 VS. THE FLU

- Globally, about 3.4% of cases have died:
 - Highest death rates in China near epicenter
 - Rate may decrease as more cases are detected
 - As of 2/11/2020, China's fatality rate averaged to 8% in patients ages 70-79 and 14.8% in patients over 80.8 years of age
- Seasonal flu generally kills far fewer than 1% of those infected.
- But flu affects many more people so actual number of deaths is higher:
 - To date, COVID-19 deaths >3,800
 - WHO estimates that as many as 650,000 people may die from Influenza Source - https://www.gisaid.org/epiflu-applications/global-cases-covid-19/

https://www.cdc.gov/flu/about/burden/preliminary-in-season-estimates.htm Source - https://jamanetwork.com/journals/jama/fullarticle/2762130 Source - https://www.who.int/influenza/surveillance monitoring/bod/en/





COVID-19 VS. THE FLU

	COVID-19	Influenza
Transmissio n Efficiency	Less	More
Asymptomat ic Transmissio n	Estimated <1% of cases	Common
Severity	More No immunity, it's new No vaccine 	Less Vaccine available
Containment	Is possible	Not possible, not even attempted

at-the-media-briefing-on-covid-19---3-march-2020

AS OF 12:00 NOON TODAY

States Reporting Cases of COVID-19 to CDC*



Source - https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html



STEPS WE ALL CAN TAKE

Public health recommendations focus on standard infection control practices, training and compliance.



Sample of Resources linked from Argentum and ASHA information:

HANDWASHING 101 (ServSafe Fyler) <u>CLEANING: Effective Disinfectants</u> (CDC) <u>CLEANING Disinfection Guidance</u> (CDC) <u>How to MONIITOR Symptoms</u> (CDC) <u>FOLLOW PLANS: Steps to Take Now</u> (WHO) <u>COMMUNICATE: Checklist</u> (Argentum) <u>Situational Updates</u> (Argentum) <u>Preparedness and Response Strategies</u> (ASHA)





PREPARING FOR AN(Y) OUTBREAK

RISK CONSIDERATIONS

Senior living environments present unique circumstances:

- Open, welcoming, inviting
- Encourage socialization and community activities
- Serve a population that has underlying medical conditions
- Some residents can't follow safety precautions
- Staff work in close proximity to residents:
 - Less than 6 feet
 - Personal care is performed
 - Move from resident to resident
- Third party healthcare workers are in the community
- Family and other visitors are in the community
- Vendors move from place to place

AMERICAN SENIORS HOUSING ASSOCIATION



OPERATIONAL MEASURES: Brookdale's Response

Our Approach and Mantra: Stay Informed, Be Prepared, and

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Newsroom Home	News ~	Blog ~	Experts	About Us ~						

How Brookdale is responding to the COVID-19 virus

05 March 2020

Since the first reports of the COVID-19 virus were diagnosed in the United States in January, Brookdale has been working to ensure that we are prepared. Brookdale's number one priority is the health and safety of our residents, patients and associates. Below is the latest information we have to share about COVID-19.

- Media Statement
- Brookdale COVID-19 Toolkit
- What we've done

Media statement as of 3/2/2020:

Brookdale is taking precautionary measures, following guidance from the Centers for Disease Control and Prevention (CDC), which has released guidelines for employers and businesses to contain the spread of the virus. Brookdale's number one priority is the health and safety of our residents, patients, and associates.

OPERATIONAL MEASURES: Brookdale's Communicable Disease Plan

ROOKDALE

Brookdale Assisted Living Communicable Disease Outbreak / COVID-19 Infographic

Communicable Disease Outbreak / COVID-19 Emergency Planning	Communicable Disease Outbreak / COVID-19 Clinical Plan
 COMMUNITY LEADERSHIP RESPONSIBILITIES At the first sign of a communicable disease/COVID-19, ED/HWD will do the following: Establish a Community Communicable Disease Outbreak Committee/Response Team (see policy) and follow the Emergency Manual section "Preparing for an Emergency wit Advance Warning". Review the "Clinical Disease Outbreak Plan" section in the Emergency Manual Contact and follow the local health department recommendations Distribute the resident/family letter and review the talking points (EAQ) as needed Review Communicable Disease Outbreak Policy and the Point of Contact Policy Schedule associate meetings to review basic infection control principles, standard precautions and the <u>Communicable Control Disease Policy</u> Hand Washing Techniques Handwashing Video Appropriate use of Personal Protective Equipment See Environmental Cleaning Responsibilities section below Utilize Supply Level Checklist to verify availability of PPE (e.g., gloves, gowns, masks, he sanitizer, goggles, etc.); for order pricing click here Notify visitors of communicable disease activity and post signage on doors where 	See Levels of Action: Guidance for Communicable Disease / Outbreak in Community RESIDENT HEALTH MONITORING Health and Wellness Director will do the following: Follow the Levels of Action document Monitor resident health status daily for any signs/symptoms of change in health condition Notify physician/healthcare provider if resident is symptomatic and isolate to their room Serve meals to symptomatic residents in their room until treatment plan is determined
anyone enters the community Provide hand sanitizers for use at all community entrances Contact pharmacy/flu clinic provider to reschedule a vaccine clinic if indicated Encourage associates to stay home if symptomatic and follow up for evaluation with th physician	HEALTH MONITORING (ASSOCIATES, VENDORS, VISITORS) Signs on the door where anyone enters the community (door signage) Associates be on high alert to monitor and question associates, vendors and visitors for signs of respiratory symptoms Follow HR Directives Notify HWD and/or ED of any signs or symptoms
ENVIRONMENTAL CLEANING RESPONSIBILITIES	DINING SPECIFIC RESPONSIBILITIES Deliver meals to room until cleared by physician With delivery of meal, provide additional beverages and fluids for hydration

- Follow the Environmental Cleaning Guidelines below:
- Environmental Cleaning and Housekeeping for COVID-19
- If required by the Health Department, refer to Cleaning with Bleach document as needed
- Use disposable dining supplies, see list here Enhance infection control measures
- Follow guidelines according to Levels of Action

Use PPE (e.g., gloves, masks) with delivery of meal; wash hands upon exiting

OPERATIONAL MEASURES: Brookdale's Communicable Disease Plan

Excerpt from the plan:

COMMUNITY LEADERSHIP RESPONSIBLITIES

At the first sign of a communicable disease/COVID-19, ED/HWD will do the following:

- Establish a Community Communicable Disease Outbreak Committee/Response Team (see <u>policy</u>) and follow the <u>Emergency Manual</u> section "Preparing for an Emergency with Advance Warning".
- Review the "Clinical Disease Outbreak Plan" section in the Emergency Manual
- Contact and follow the local health department recommendations.
- Distribute the <u>resident/family letter</u> and review the <u>talking points (FAQ)</u> as needed.
- Review Communicable Disease Outbreak Policy and the Point of Contact Policy.
- Schedule associate meetings to review basic infection control principles, standard precautions and the <u>Communicable Control Disease Policy</u>.
 - > Hand Washing Techniques
 - ➢ Handwashing Video
 - > Appropriate use of Personal Protective Equipment
 - > See Environmental Cleaning Responsibilities section below.
- Utilize <u>Supply Level Checklist</u> to verify availability of PPE (e.g., gloves, gowns, masks, hand sanitizer, goggles, etc.); for order pricing <u>click here.</u>
- Notify visitors of communicable disease activity and post <u>signage</u> on doors where anyone enters the community.
- Provide hand sanitizers for use at all community entrances.
- Contact pharmacy/flu clinic provider to reschedule a vaccine clinic if indicated.
- Encourage associates to stay home if symptomatic and follow up for evaluation with their physician.





OPERATIONAL MEASURES: Brookdale's Community-Level Response

• Stop and Ask Yourself Flyer:

Add your phone number, save, print and post on ALL entrance doors to your community, and discuss it with your associates.

- Execute *Brookdale's Community Communicable Disease Outbreak/COVID-19 Plan.*
- Have hand sanitizer available throughout the community and convenient to the community entrances.







We thank Brookdale for providing a flyer template to all via <u>this download link</u>.

OPERATIONAL MEASURES: Brookdale's Corporate-Level Response

The health and safety of our residents, patients and associates is our top

Residents & Patients

- Communicating with residents and patients
- Assisted Living & Memory Care: Multiple daily observations for symptoms
- Limit large group events and converting to live webcasts with outside groups, when possible

Regulatory Authorities

- Federal & state protocols already incorporated in our processes
- Our experienced clinical team actively reviews for updates from:
 - CDC
 - Local public health authorities
 - Large reputable hospital sources

Families of Residents

- Communicating with families of residents
- Local Community Facebook regular updates

Click for Toolkit prepared by Brookdale's Emergency Response Team

Public at Large

- Entrance notices to self-assess before entering our communities & corporate office
- Limiting large group events and converting to live webcasts with outside groups, when possible

Associates

- Enacted emergency preparedness plan
- Focused on prevention
- Created specific guidelines re: COVID-19
- Enhanced cleaning & sanitation protocol related to COVID-19
- Re-educated community leader staff on disease prevention efforts
- Advised to plan & practice for situations (e.g. flu shutdown)
- Have response protocols, if needed
- Non-essential business travel ban

Vendors

- Vendors report appropriate supplies for our communities and no expected supply disruption for Medication or Food
- Sent a letter to vendors regarding our safety requirements.

COMMUNICATIONS MEASURES

ARGENTUM

Communicating With Your Comm

As we navigate the new challenges emerging due to compiled sample messaging and talking points that) with your residents and their families, staff, visitors, a these messages when necessary and alongside info Centers for Disease Control and Prevention. You m from partner and member organizations, via our Co at argentum.org/coronavirustoolkit.

As this is an evolving issue, we will stay informed (revisions regularly to the toolkit. Sharing misinfort resources to stay informed on the latest updates a

Resident Commun

Please know that we are ready and prepa

- and we have detailed plans in place that Maintaining your health, wellness, and sa It is important for you to know our associ
- follow strict protocols based on that train Please take extra care to help your neigh touching your eyes, nose, and mouth; an
- To further protect yourself, frequently to with a cleaning spray or wipes, following
- We will continue to monitor official reso may have to limit or postpone some act community. We apologize in advance fi If you have any family members or visit
- them to reconsider visiting the commu We will continue to update you on any Please visit [website, social media addition]

🖗 Wipe-Down Wednesday

Clean Your Area

Routinely clean all frequently touched surfaces in the workplace, such as workstations, countertops and doorknobs. Use cleaning agents that are usually used in these areas, and follow the directions on the label. Chair handles

(where hands go)

Elevator buttons/

handrails

- Door knobs

- Lather your hands by rubbing them together with the soap.

- Watch Your Cough/Sneeze Etiquette 1. Cover your mouth and nose with a tissue when you cough
- or sneeze, then place the tissue in a waste basket. 2. If you don't have a tissue, cough or sneeze into your elbow.

REMEMBER: Covering your mouth when you cough or sneeze and wash your hands are the most effective ways to prevent the spread of viruse

For more information, visit CDC.gov.

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1. Wet your hands with water and apply soap.

- PRO TIP: Be sure to lather the backs of your hands, between your fingers and under your nails.
- 3. Scrub your hands for at least 20 seconds.
- Rinse your hands well.
- 5. Dry your hands using a clean towel or air dry them. PRO TIP: To prevent the transfer of germs onto your clean hands, use a paper towel to open the restroom door.



Media Communication/Talking Points

- The health and wellness of our residents remains our number one priority.
- We have detailed and specific plans in place for a wide-range of emergencies and illnesses like this.
- We are communicating regularly with our residents and their families, staff members, visitors, and vendors, on precautions they can take and how they can help limit the spread of illness.
- Our staff are trained in infection control practices and we follow those protocols each and every day.
- Older adults can be particularly vulnerable to the spread of illnesses, so we are asking everyone who comes into contact with our community or community members to be especially vigilant at this time:
 - Washing hands regularly and sufficiently.
 - Cleaning and wiping down frequently-touched surfaces
 - Limiting contact with others and avoiding visits to the community if they are feeling.
 - Notifying staff immediately if they are feeling ill
- As we navigate this challenge, we remain focused on providing exceptional care and service for our residents. This includes sharing regular updates and information and taking any precautions required to limit the spread of illness or misinformation.







COMMUNICATIONS MEASURES: With your Associates



Watch for future email updates coming from the Brookdale Emergency Command Center!



COMMUNICATIONS MEASURES: With your Associates

- Read and follow the *Coronavirus/COVID-19 Associate Guidelines*.
- Share the related Talking Points for your associates in stand-up meetings.
- Provide the Associate Takeaway Document to associates in your stand-up meetings.





BROOKDALE Associate Guidance: Coronavirus/COVID-19 3-5-20 COVID-19 is a rapidly changing situation. We will provide updates or adjustments as needed With influenza and the COVID-19 (Coronavirus) cases in the U.S. and around the world, please take the following precautions to help protect our residents, families, patients, and associates. Below is guidance around precautions we need to take. This process is aligned with our current approach regarding illness and infection control, as stated in the Associate Handbook If an associate has symptoms that may be COVID-19: · If an associate has flu-like symptoms (for example, but not limited to: fever, cough, shortness of breath, a general feeling of being unwell, respiratory problems, etc.), they should not return to work for at least 24 hours until after their fever is gone or their symptoms are no longer present without the use of medication (e.g. Tylenol®, Advil®). It is strongly encouraged that the associate contact their primary care provider prior to returning to work. <u>Virtual Visits</u> are a great and an affordable way to see a physician quickly. If an associate cannot work because of illness, they need to use their PTO or sick time, if available under applicable law. If they exhaust their PTO and have hours in their extended sick bank they can use those. If no PTO, sick time, or extended sick bank hours are available, the associate can take unpaid medical leave. Please email COVID-19QuarantineGuidance@brookdale.com to notify Brookdale Corporate of any associate with COVID-19 symptoms that does not come to work. If an associate has tested positive for COVID-19: Take similar steps as mentioned above. · Additionally, the associate will need to provide a certificate of good health from their primary care provider prior to returning to work Please email COVID-19QuarantineGuidance@brookdale.com to notify Brookdale Corporate of any associate with COVID-19 who has tested positive for COVID-19. If an associate had direct contact with someone who is COVID-19 quarantined: · If an associate had direct contact (within 6 feet) with someone who is guarantined by the local health department for COVID-19, please email COVID-19QuarantineGuidance@brookdale.com This will be evaluated on a case by case basis. If a COVID-19 case is confirmed within a community or BHS agency: · If a case is confirmed within a community or BHS agency, the Company's response will be governed by the local health authority. Refer to current <u>Brookdale Policy</u> for additional guidance. If an associate has traveled to an affected area/country: · If an associate has traveled in the past 2 weeks prior to the date of this memo to a high risk affected area (as defined by the CDC), that has a CDC Health Level of 2 or greater, the associate may not return to work for 14 days from their date of return (max of the incubation period for COVID-19) and they must have a fitness for duty certificate or medical certification of an absence of communicable disease from their primary care physician before returning to work. The associate will need to follow the guidance above and take PTO if unable to work because of their travel, etc. · As of 3/4/2020, this CDC list includes the following countries: China, Italy, Iran, Korea, and Japan Refer to this CDC link for the current affected countries as this is being updated on regularly by the CDC. Report any of the above information to your supervisor and HRBP in these instances as soon as possible. If an associate plans to travel outside the U.S.: If an associate plans to travel outside of the U.S. they must notify management of where they are going which will allow management to determine when they can come back to work.

Additional information:

Associates may be required to submit to a medical evaluation and may not be allowed to return to work without a
physician's certification, if they have had known exposure to someone with COVID-19 or have traveled to an affected
area in the last 14 days.

Human Resources

COMMUNICATIONS MEASURES: With Families, Associates and the Public



Ctrl-Click the image to view handwashing video by Brookdale

Ctrl-Click the image below to view Brookdale CEO video



Argentum and ASHA thank Brookdale for publishing these videos and <u>downloadable template letters</u> for external audiences and business partners via <u>their toolkit</u>.





COMMUNICATIONS MEASURES: With Residents and Families

- Read and follow the *Coronavirus/COVID-19 Associate Guidelines*.
- Share the related Talking Points for your associates in stand-up meetings.
- Provide the Associate Takeaway Document to associates in your stand-up meetings.





Associate Guidance: Coronavirus/COVID-19 3-5-20

COVID-19 is a rapidly changing situation. We will provide updates or adjustments as needed.

With influenza and the COVID-19 (Coronavirus) cases in the U.S. and around the world, please take the following precautions to help protect our residents, families, patients, and associates. Below is guidance around precautions we need to take. This process is aligned with our current approach regarding illness and infection control, as stated in the <u>Associate</u> <u>Handbook</u>.

If an associate has symptoms that may be COVID-19:

- If an associate has ful-like symptoms (for example, but not limited to: fever, cough, shortness of breath, a general
 feeling of being unwell, respiratory problems, etc.), they should <u>not</u> return to work for at least 24 hours until after their
 fever is going or their symptoms are no longer present without the use of medication (e.g. Tylenol 0, Achi 0).
- It is strongly encouraged that the associate contact their primary care provider prior to returning to work. <u>Virtual Visits</u> are a great and an affordable way to see a physician quickly.
- If an associate cannot work because of illness, they need to use their PTO or sick time, if available under applicable law.
 If they exhaust their PTO and have hours in their extended sick bank, they can use those. If no PTO, sick time, or extended sick bank hours are available, the associate can take unpaid medical leave.
- Please email <u>COVID-19QuarantineGuidance@brookdale.com</u> to notify Brookdale Corporate of any associate with COVID-19 symptoms that does not come to work.

If an associate has tested positive for COVID-19:

- · Take similar steps as mentioned above.
- Additionally, the associate will need to provide a certificate of good health from their primary care provider prior to returning to work.
- Please email <u>COVID-19OuarantineGuidance@brookdale.com</u> to notify Brookdale Corporate of any associate with COVID-19 who has tested positive for COVID-19.

If an associate had direct contact with someone who is COVID-19 guarantined:

- If an associate had direct contact (within 6 feet) with someone who is guarantined by the local health department for COVID-19, please email <u>COVID-19QuarantineGuidance@brookdale.com</u>.
- · This will be evaluated on a case by case basis.

If a COVID-19 case is confirmed within a community or BHS agency:

- If a case is confirmed within a community or BHS agency, the Company's response will be governed by the local health authority.
- · Refer to current Brookdale Policy for additional guidance.

If an associate has traveled to an affected area/country:

- If an associate has traveled in the past 2 weeks prior to the date of this memo to a high risk affected area (as defined by the <u>CDC</u>), that has a CDC Health Level of 2 or greater, the associate may not return to work for 14 days from their date of return (max of the incubation period for COVID-19) and they must have a fitness for duty certificate or medical certification of an absence of communicable disease from their primary care physician before returning to work.
- . The associate will need to follow the guidance above and take PTO if unable to work because of their travel, etc.
- As of 3/4/2020, this CDC list includes the following countries: China, Italy, Iran, Korea, and Japan.
- · Refer to this CDC link for the current affected countries as this is being updated on regularly by the CDC.
- Report any of the above information to your supervisor and HRBP in these instances as soon as possible.

If an associate plans to travel outside the U.S.:

 If an associate plans to travel outside of the U.S., they must notify management of where they are going which will allow management to determine when they can come back to work.

Additional information:

Associates may be required to submit to a medical evaluation and may not be allowed to return to work without a
physician's certification, if they have had known exposure to someone with COVID-19 or have traveled to an affected
area in the last 14 days.

Human Resources

COMMUNICATIONS MEASURES: With Residents and Families

Customize (date, signature) the *Resident/Family Letter* and provide it to your residents and families, along with the related *FAQ Document*.









COMMUNICATIONS MEASURES: Media Talking Points

- The health and wellness of our residents remains our number one priority.
- We have detailed, specific plans in place for a wide range of emergencies and illnesses like this.
- We are communicating regularly with our residents and their families, staff members, visitors, and vendors, on precautions they can take and how they can help limit the spread of illness.
- Our staff are trained in infection control practices and we follow those protocols each and every day.
- Older adults can be particularly vulnerable to the spread of illnesses, so we are asking everyone who comes into contact with our community or community members to be especially vigilant at this time, by:
 - Washing hands regularly and sufficiently;
 - Cleaning and wiping down frequently-touched surfaces;
 - Limiting contact with others and avoiding visits to the community if they are feeling ill;
 - Notifying staff immediately if they are feeling ill.
- As we navigate this challenge, we remain focused on providing exceptional care and service for our residents. This includes sharing regular updates and information and taking any

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RISK MANAGEMENT MEASURES: CORPORATE LEVEL

Take action and prepare:

- Provide leadership
- Create an incident command including functional leaders
- Establish a routine meeting to keep updated
- Get organized know what's in place and what additional resources are needed
- Monitor the situation globally, nationally and locally
- Develop communication content and methods
- Consider staffing issues





RISK MANAGEMENT MEASURES: COMMUNITY LEVEL

Take action and prepare:

• Provide leadership

Living Longer Bette

- Create an incident command including managers, supervisors, nurse leader
- Establish a routine meeting to keep updated stand up
- Review and implement contagious disease outbreak plan
- Make assignments to oversee and implement tasks
- Verify supplies are available and for how long; request additional supplies and other resources as



RISK MANAGEMENT MEASURES: COMMUNITY LEVEL

Take action and prepare:

- Prepare education and training for staff and residents
- Plan communication message and methods for employees, residents and families
- Establish surveillance methods and logs
- Consider staffing issues
- Monitor CDC messages and updates
- Contact the department of health and licensing agencies for concerns



RISK MANAGEMENT MEASURES

Liability and Insurance Policies

- Each applicable policy of insurance must be reviewed to determine the extent, if any, of coverage for COVID-19.
- Coverage may vary depending on the jurisdiction and circumstances.
- Every potential claim will be evaluated individually subject to the facts, circumstances and the applicable policy details
- See "Insurance Considerations" under Additional Resources



LIABILITY CONSIDERATIONS

Primary Concerns: Health-Related

- Failure to follow rigorous infection control procedures
- Failure to identify an infected person
- Failure to warn others of potential for infection
- Failure to prevent contagion / spread of infection



LIABILITY CONSIDERATIONS

Secondary Concerns: Personal Rights

- Denial of visitation rights
- Privacy, protected health information
- Defamation
- Disability discrimination



LIABILITY CONSIDERATIONS

Consider Preparing the Following Documentation:

- Record of education and training of residents, staff, family members
- Questionnaires for residents, visitors, vendors, staff regarding exposure to known or suspected COVID carriers, foreign travel
- Schedules, logs for sanitation of surfaces
- Written rules about hand washing, waste disposal, use of masks, gloves, protective clothing
- Policy regarding exclusion of staff, vendors, visitors with any respiratory symptoms
- Written policy specifying when to limit congregate dining, group activities
- Written policy specifying when and how, using CDC criteria, to follow up with a Person Under Investigation (PUI) for COVID-19
- Policies for isolation, transfer, readmission of an infected resident
- Policy for notification of physician, family, licensing agency, local health officials; limited communication to other residents, media





ACTIVATING COMMUNITY RESOURCES

- Don't be afraid to reach out to your public health authorities
 - Lots of resources and expertise available
- Follow advice from public health officials
 - Awareness
 - Control measures CDC Strategies to Prevent the Spread of COVID-19 in Long-Term Care Facilities (LTCF)
 - <u>https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html</u>
- Keep in mind... CMS current focus is on urgent compliance issues
 - As of March 4, routine surveys temporarily suspended
 - <u>https://www.cms.gov/newsroom/press-releases/cms-announces-actions-address-spread-coronavirus</u>





ELEVATED RESPONSE LEVELS
REFER TO YOUR OUTBREAK THREAT LEVELS

uepartments, etc.,,

Guidance to determine the level of impact illness has on the community, and appropriate action steps to follow

LEVEL 1

ACTION STEPS REAK PROTOCOL ON BROOKDALE REPORT ACTIVITY TO DISTRICT/REGIONAL LEVEL LEADERS. PHIC (contains information about when DISTRICT/REGIONAL NURSE LEADER TO ENGAGE WITH LOCAL HEALTH ponsibilities of different community DEPARTMENT FOR COLLABORATIVE DETERMINATIONS RELATED TO SYMPTOMATIC RESIDENTS/ASSOCIATES AS NEEDED. FOLLOW THE BROOKDALE COMMUNITY COMMUNICABLE DISEASE IF DISEASE IS WIDESPREAD IN THE GREATER AREA (COUNTY OR REGION), OUTBREAK - COVID-19 GUIDELINES. CONSIDER LIMITING RESIDENT OUTINGS. ISOLATE SYMPTOMATIC RESIDENTS TO THEIR APARTMENT/ROOM. COMMUNITY RESPONSE TEAM TO MEET DAILY TO REVIEW COMMUNITY REQUIRE SYMPTOMATIC ASSOCIATES TO STAY HOME; AND NOT REPORT IMPACT (see #7 above). TO WORK: SEE ASSOCIATE GUIDELINES. ENSURE SIGNS AND SYMPTOMS POSTER IS ON ALL OUTSIDE ENTRY DOORS. . SERVE MEALS TO SYMPTOMATIC RESIDENTS IN APARTMENT/ROOM. BE ON HIGH ALERT TO MONITOR AND QUESTION ASSOCIATES, VENDORS, NOTIFY RESIDENT'S PHYSICIAN / HEALTHCARE PROVIDER. VISITORS, OUTSIDE GUESTS, VOLUNTEERS, ETC., FOR SIGNS OF REVIEW AND FOLLOW REPORTING REQUIREMENTS OF LOCAL HEALTH RESPIRATORY ILLNESS. DEPARTMENT. USE AN ASSUMPTIVE APPROACH THAT THE COMMUNITY WILL FOLLOW USING THE APPROPRIATE PROTOCOL ACCORDING TO THE BKD INFLUENZA INFOGRAPHIC OR COMMUNICABLE DISEASE/OUTBREAK

	INFOGRAPHIC > CLINICAL PLAN).	
LEVEL 2	 FOLLOW LEVEL 1 ACTION STEPS, PLUS: EVALUATE THE ACTUAL CASES AND DETERMINE (ACCORDING TO BUILDING LAYOUT) TO DETERMINE IF SPECIFIC PUBLIC SPACES (E.G., ACTIVITIES ROOMS OR DINING ROOMS) SHOULD BE CLOSED. 	ACCORDING TO AFFECTED RESIDENT'S LOCATION, SALES TEAM TO CONSIDER ALTERNATE TOURING OPTIONS, SUCH AS LIMITING TOUR TO FRONT LOBBY AND/OR UNAFFECTED AREAS, or MEETING PROSPECTS IN THEIR HOME, SHARING PHOTOS FROM WEBSITE, VIRTUAL TOURS (COVID- 19 PUBLIC HEALTH DIRECTION
LEVEL 3	 FOLLOW LEVEL 1 AND 2 ACTION STEPS, PLUS: COMMUNITY COMPLETELY CLOSED TO ALL COMMUMITY TOURS AND NEW MOVE INS DUE TO <u>ONE OF THE FOLLOWING</u>: 	MANDATED BY THE DEPARTMENT OF HEALTH-FOR COVID-19 THERE WILL BE ADDITIONAL DIRECTION FROM PUBLIC HEALTH and CDC OR OTHER REGULATORY ENTITIES. DECISION MADE BY COMMUNITY, DISTRICT AND DIVISION AFTER ANALYSIS OF THE OUTBREAK.





CDC RECOMMENDATIONS: PREVENTING SPREAD *INTO* COMMUNITY

- Assess residents' symptoms of respiratory infection upon admission to the facility and implement appropriate infection prevention practices for incoming symptomatic residents.
- Post signs at entrance instructing visitors not to visit if they have symptoms of respiratory infection.
- Establish one access/exit point for your community.

Follow your organizations' communicable disease procedures.

CDC Strategies to Prevent the Spread of COVID-19 in Long-Term Care Facilities (LTCF) https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-care-facilities.html





CDC RECOMMENDATIONS: PREVENT SPREAD WITHIN COMMUNITY

- Keep residents and employees informed.
- Monitor residents and employees for fever or respiratory symptoms.
- Support hand and respiratory hygiene, as well as cough etiquette by residents, visitors, and employees.
- Identify dedicated employees to care for COVID-19 patients and provide infection control training.
- Provide the right supplies to ensure easy and correct use of PPE.

Follow your organizations' communicable disease procedures.

CDC Strategies to Prevent the Spread of COVID-19 in Long-Term Care Facilities (LTCF) https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-carefacilities.html





CDC RECOMMENDATIONS: PREVENT SPREAD BETWEEN COMMUNITIES

- Notify facilities prior to transferring a resident with an acute respiratory illness, including suspected or confirmed COVID-19, to a higher level of care.
- Report any possible COVID-19 illness in residents and employees to the local health department, including your state HAI/AR coordinator.

Follow your organizations' communicable disease procedures.

CDC Strategies to Prevent the Spread of COVID-19 in Long-Term Care Facilities (LTCF) https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/prevent-spread-in-long-term-carefacilities.html





IF YOU THINK A RESIDENT HAS THE VIRUS

- Have them examined by a physician and contact your local health department.
- Ask the physician to assess the resident under the <u>CDC</u> <u>Persons Under Investigation (PUI) guidelines</u>.
- Place the person in a single room with a closed door while waiting for guidance from the health department (recommended by the Society for Post-Acute and Long-Term Care Medicine).
- Implement isolation for all residents, suspend group gatherings and use standard precautions for respiratory infection.
- Suspend prospect tours and new admissions.
- Find out where in the past 30 days the resident has traveled and whether they've come in contact with someone who may have the virus.

Follow your organizations' communicable disease procedures.





ADDITIONAL RESOURCES

- Web Links to Cited Resources
- Insurance Considerations
- Personnel Considerations
 Online FAQs and Resources

CITED RESOURCES

- <u>CDC COVID-19</u>
- <u>WHO COVID-19</u>
- <u>CMS Guidance for Infection Control and Prevention of COVID-</u> 19 in Nursing Homes
- <u>NACCHO's Directory of Local Health Departments</u>
- <u>Argentum.org/coronavirustoolkit/</u>
- <u>seniorshousing.org</u>
- <u>Coronavirus Preparedness and Response for Senior Living</u> <u>Communities</u> (Hanson Bridgett, LLP)
- Brookdale COVID-19 Toolkit
- Ecolab.com/pages/coronavirus
- <u>Willistowerswatson.com</u>





INSURANCE CONSIDERATIONS

General and Professional Liability

- Liability polices provide coverage for negligence resulting in bodily injury and property damage to residents, visitors and others who reside at or access the community.
- Claims develop from allegations that the community failed to act properly - failed to recognize, failed to warn, respond timely or make all reasonable efforts to mitigate and contain the infectious outbreak and/or its spread.
- The coverage response will be determined by individual policy details and the claim's allegations. For example certain policies have exclusions for communicable diseases, organic compounds, microbials, fungi, etc... which for some claims could result in a disclaimer for AMERICAN OVID19 related claims.





INSURANCE CONSIDERATIONS

Workers Compensation

- Traditionally to be covered under Workers Compensation the injury must be determined to arise out of the employment.
- This could be difficult to establish in the event of a widespread COVID19 outbreak in a region where the community is located. State specific WC regulations will also come into play.
- Caregivers and employees who are found to have direct exposures at work different from the general public, will have the most compelling claims for WC benefits.
- Traveling employees who enter areas with high infection rates are also likely to get more consideration.





INSURANCE CONSIDERATIONS

Business Interruption: Property Insurance -- Physical Damage

- Most commonly property polices cover physical damage to insured property from a covered peril (all risks policy).
- Without physical damage from a covered peril, COVID-19 driven income loss associated with declining revenue due to changes in customer purchasing patterns or reduced demand for residencies and services, generally does NOT trigger the property policy.
- However a close review of the entire policy should be taken as some polices have sub-limited coverage available for conditions like disease, contamination, crime scene residuals.
- In addition some of these conditions require a regulatory authority or government order restricting or limiting access to the property.





PERSONNEL CONSIDERATIONS

Employers should implement the following procedures:

- Disseminate current resources and information to workforce
- Avoid discrimination claims
- Require employees to engage in preventive workplace behaviors
- Assess whether telework and additional preventive measures are appropriate
- Establish leave administration and accommodations guidelines
- Establish travel guidelines
- Establish protocol for exposure and sickness
- Assess potential work slowdown/stoppage issues
- Engage in Crisis Management Response approach to ensure coordinated risk management and business continuity Source: <u>https://www.pillsburylaw.com/en/news-and-insights/mitigating-</u> <u>employment-law-risks-as-covid-19-coronavirus-spreads.html</u>





ONLINE FAQs and RESOURCES

AHCA-NCAL Updates

Administration for Community Living (ACL)

CMS Guidance re: Medicare

National Restaurant Association (NRA)

Occupational Safety & Health Administration (OSHA)

Seattle-King County Public Health Department Advisory



AUDIENCE Q&A

THANK YOU for joining our Member Webinar:

Coronavirus Preparation and Response

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