

Regional LTCF/AFH COVID-19 Webinar

9/16/2020









Welcome

Reminders and updates Columbia County Public Health – Welcome

Fire/Smoke Issues, Air Quality & Emergency Planning

TRACIE Healthcare Emergency Management Resources Review Air quality resources and recommendations

Resident Cohorting & Staffing Considerations

Overview and Q&A – bring your cohorting questions

Facility Sharing

Q&A

Reminders and Updates:

Reminder - Public Health led webinar Welcome Columbia County Public Health Tri-county website:

https://multco.us/novel-coronavirus-covid-19/covid-19-webinarsgroup-living-facilities

DHS Alerts:

https://www.oregon.gov/DHS/PROVIDERS-PARTNERS/LICENSING/Pages/admin-alerts.aspx

OHCA website lab list:

https://www.ohca.com/members/coronavirus/testing/

Short informational videos

Other updates or announcements?

Emergency Planning and Air Quality https://asprtracie.hhs.gov/technicalresources/52/long-term-carefacilities/47#plans-tools-and-templatesexercises

Cohorting

Staffing and resident planning for covid-19

Meredith Falbo RN, BSN

Cohorting is a control measure for covid

- Cohorting could be called grouping, breaking into teams, making a pod
- A staffing plan to control infection
- Plans to cohort staff, residents, and both
- Cohorting is how to ensure residents are isolated and quarantined appropriately

Residents

- Cohorting residents. When you have a resident that is positive for covid and needs isolation, or one that is under quarantine, how will you separate them from the rest of the residents?
- Be ready ahead of time.
- Have a cart, box, or PPE station ready to go, that every caregiver knows how to use.
- Are most of your residents in shared rooms? Do you have a room empty and ready for isolation should one resident become positive, you need to isolation them, and quarantine their roommate?
- Residents could need to be separated into 3 groups, negative, positive and quarantined (exposed but not positive).

Staff

- Cohorting staff can look like making teams. To limit the number of staff that would be out on quarantine should anyone on your staff become covid-19 positive.
- Cohorting can also be creating resident care teams. If you have positive residents, consider separating the staff teams, so different staff care for residents that are in your "covid hall", limiting staff moving back and forth between rooms that have positive and negative residents with covid-19 if possible.

Staff

- Staffing a care facility is challenging normally. Covid adds to these challenges.
- How would a positive case of covid-19 in a caregiver affect your staffing?
- Possibilities to consider,
- Their roommate would need to be out an extended time as well under quarantine.
- Their close contacts at work would also be out for 14 days under quarantine. This is anyone they spent 15 minutes with, within 6 feet while infectious, even while wearing a mask. For caregivers this is often other caregivers they worked a shift with.

Staff Shortages

- Staffing shortages often result when a covid case happens to a staff member at a facility.
- Example; One staff is out ill on isolation for 10 days, their roommate is out for 24 days on quarantine, and the 3 other caregivers they worked a shift with over the 2 days they were infectious are out on a 14 day quarantine.
- What are your resources for covering ill staff normally? What can you do to strengthen those resources?
- Local agencies, your licenser, sister facilities can all be good resources

Please Share

- Any example from your facility of cohorting you would like to share?
- Staffing resources?

Resources

- CDC info on responding to covid-19 in a facility
- https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homesresponding.html
- CDC info on planning ahead
- https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html
- OHA's LTCF Toolkit, pages 7 and 13
- https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Emergin g%20Respitory%20Infections/LTCF-COVID-19-Response-Toolkit.pdf