Tuesday, January 26, 2021

ADHS' Kathy McCanna Announces Retirement

Congratulations to ADHS Branch Chief, Health Care Institution Licensing's Kathy McCanna on her upcoming retirement! She recently announced that her last work day will be this Friday, January 29, 2021. As an RN with a Bachelors in Nursing, she has held essential leadership positions at ADHS for over 20 years. Kathy has been a valuable advocate for long term care in her decades of service and we are very grateful.

Kathy started with the Department of Health Licensing when it was located on Morten Avenue back in 2000. This was after many years in the private sector doing regulatory compliance work. Her first years were spent as a surveyor and she soon moved to be the Medical Facilities Program Manager. She was responsible for a diverse program of medical facilities from hospitals to outpatient treatment centers for both state licensing and Medicare certification. In 2013, she became the Branch Chief for Healthcare Institutions where she settled in and will retire.

We wish Kathy all the best in her retirement!

IMPORTANT VACCINE INFO

♥CVS pharmacy®   *Walgreens*

ADHS Outlines Vaccine Information for Assisted Living Communities

ADHS Outlines Vaccine Information for Assisted Living Communities
If you have not already obtained or scheduled COVID-19 vaccinations for your residents and staff, please see the information below regarding how to do so from ADHS:

- **If your facility previously registered for the CDC Pharmacy Partnership for Long Term Care Program with CVS and Walgreens and has received confirmation indicating that the facility is enrolled:**
  - CVS and Walgreens are scheduling clinics for assisted living facilities and other remaining long term care facilities. Once facilities are contacted by CVS or Walgreens, they can expect the pharmacy to schedule three (3) onsite vaccination clinics to ensure that residents and staff all receive first and second

doses at least 28 days apart.

- **If your facility previously registered for the CDC Pharmacy Partnership for Long Term Care Program with CVS and Walgreens, but has been notified your facility is ineligible for vaccination coverage:**
  - Please visit the CDC website to review eligibility requirements HERE.
  - After reviewing the requirements, if you still believe that your facility meets the eligibility requirements of the program, but you have been unable to schedule a vaccination clinic with CVS or Walgreens, please contact HEOC_vaccine@azdhs.gov

- **If you are unsure if your facility previously registered for the CDC Pharmacy Partnership for Long Term Care Program with CVS and Walgreens or unsure if your facility is enrolled:**
  - Email HEOC_vaccine@azdhs.gov to verify whether the facility is enrolled.
  - Search the registration list by clicking the link in the bullet below to check to see if your facility is enrolled. As a reminder, enrollment for this program is closed, if you are not enrolled, you will need to work with your local county health department or a local pharmacy/provider.
    - PPP Enrollment Status_210107.pdf

- **If your facility did not previously register for the CDC Pharmacy Partnership for Long Term Care Program with CVS and Walgreens:**
  - We encourage you to work with your local county health department or a local pharmacy/provider in your area that normally administers flu vaccines to obtain the COVID-19 vaccine for your residents and staff.

Lastly, please continue to check the AHCA/NCAL #GetVaccinated page for additional resources and updates.

CDC Updates Guidance on Antigen (POC) Testing in Long Term Care Facilities

CDC recently updated its guidance on antigen testing in long term care facilities. Of important note, the CDC modified the algorithm on interpreting antigen tests to include:

· When to perform confirmatory PCR tests:
  --*Asymptomatic people* who test antigen positive should have a confirmatory test performed.
  --*Symptomatic people* who test antigen negative should have a confirmatory test performed.

· What to do with discordant results.

· Additional new variables to the decision-making process (outbreak, close contact or no outbreak).

· Additional guidance on infection control measures to take in response to test results.
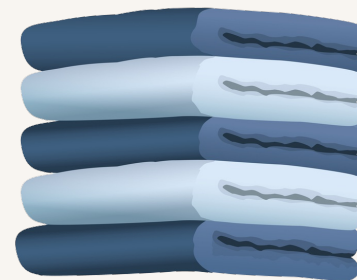
Exploring the Top Ten Deficiencies in SNF Infection Control Surveys: *Housekeeping and Laundry*

The *Disaster Ready EPIC* program has been offering "Tip Topics" on the top ten deficiencies cited in infection control surveys.

This articles focus is on housekeeping and laundry.

Facilities should adhere to this new guidance when using antigen tests.

Updated CDC Guidance on Antigen Testing in Long Term Care Facilities

ACT NOW!
WEAR A MASK   STAY 6 FEET APART   AVOID CROWDS
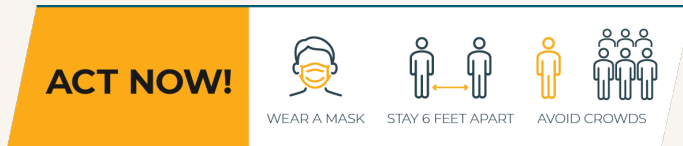
Some of the most frequent citations involve not following the facility policies and appropriately wearing PPE for transmission-based precautions while cleaning, a lack of training for the housekeeping staff and laundry staff not following the proper procedures for handling the linen from the COVID-19 unit.

To learn more about corrective actions and best practices to consider, check out this Tip Topic.

EPIC Resource Data

CITATIONS FOR DEFICIENCIES

Assisted Living Top 10 Cited Deficiencies from November 1, 2019 through October 31, 2020

Check out the ADHS Top 10 cited deficiencies for assisted living through last October. If you have questions, please reach out to AHCA's Kay Huff.

1. Service Plans: R9-10-808.C.1.g. was cited 26 times.
A manager shall ensure that a caregiver or an assistant caregiver documents the services provided in the resident's medical record.

2. Medication Services: R9-10-816.B.3.b. was cited 24 times.
If an assisted living facility provides medication administration, a manager shall ensure that a medication administered to a resident Is administered in compliance with a medication order.

3. Emergency and Safety Standards: R9-10-818.A.4. was cited 23 times.
A manager shall ensure that a disaster drill for employees is conducted on each shift at least once every three months and documented.

4. Administration: R9-10-803.E.1. was cited 21 times.
A manager shall ensure that, unless otherwise stated documentation required by this Article is provided to the Department within two hours after a Department request.

5. Residency and Residency Agreements: R9-10-807.B.1.a-b. was cited 19 times.
A manager shall ensure that before or at the time of acceptance of an individual submits documentation that is dated within 90 calendar days before the individual is accepted by an assisted living facility and if an individual is requesting or is expected to receive supervisory care

services, or directed care services:

- Includes whether the individual requires: Continuous medical services, Continuous or intermittent nursing services, or Restraints; and Is dated and signed by a: Physician, Registered nurse practitioner, Registered nurse, or Physician assistant.

6. Personnel: R9-10-806.A.10. was cited 18 times.

A manager shall ensure that: Before providing assisted living services to a resident, a manager or caregiver provides current documentation of first aid training and cardiopulmonary resuscitation training certification specific to adults.

7. Emergency and Safety Standards: R9-10-818.A.5.a. was cited 17 times.

A manager shall ensure that an evacuation drill for employees and residents Is conducted at least once every six months.

8. Environmental Standards: R9-10-819.A.11. was cited 16 times.

A manager shall ensure that poisonous or toxic materials stored by the assisted living facility are maintained in labeled containers in a locked area separate from food preparation and storage, dining areas, and medications and are inaccessible to residents.

- **Service Plans: R9-10-808.A.5.a-d was cited 16 times.** Except as required in subsection (B), a manager shall ensure that a resident has a written service plan that when initially developed and when updated, is signed, and dated by: a. the resident or resident's representative; b. The manager; c. If a review is required in subsection (A)(3)(d), the nurse or medical practitioner who reviewed the service plan; and d. If a review is required in subsection (A)(3)(e)(ii), the medical practitioner or behavioral health professional who reviewed the service plan.

9. Administration: R9-10-803.A.9. was cited 15 times.

A governing authority shall ensure compliance with A.R.S. § 36-411 (fingerprinting requirements).

- **Residency and Residency Agreements: R9-10-807.A.1-2. was cited 15 times.** Except as provided in R9-10-808(B)(2), a manager shall ensure that a resident provides evidence of freedom from infection tuberculosis, before or within seven calendar days after the resident's date of occupancy, and as specified in R9-10-113.

- **Personnel: R9-10-806.A.1.b.i. was cited 15 times.** A manager shall ensure that a caregiver provides documentation of completion of a caregiver training program approved by the Department or the Board of Examiners for Nursing Care Institution Administrators and Assisted Living Facility Managers.

10. Personnel: R9-10-806A.8.a-b. was cited 13 times.

A manager shall ensure that a manager, a caregiver, and an assistant caregiver, or an employee or volunteer who has or is expected to have more than eight hours per week of direct interaction with residents, provides evidence of freedom from infectious tuberculosis: On or before the date the individual begins providing services at or on behalf of the assisted living facility and as specified in R9-10-113.

Updated CMS County Positivity Rates

CMS posted an updated chart for county positive ratings using data through **January 19, 2021**. For SNFs, this is the data you need to use regarding your staff testing regiment. Green requires staff testing once per month, while Yellow requires staff testing once per week and Red requires staff be tested twice per week.

Check CMS data here weekly

County	Code	State		Population	Metro type			%	Status
Apache County, AZ	4001	AZ	9	71,887	Non-core	2,916	4,056	15.8%	Red
Cochise County, AZ	4003	AZ	9	125,922	Small metro	6,106	4,849	20.2%	Red
Coconino County, AZ	4005	AZ	9	143,476	Small metro	13,535	9,434	15.5%	Red
Gila County, AZ	4007	AZ	9	54,018	Micropolitan	2,022	3,743	21.0%	Red
Graham County, AZ	4009	AZ	9	38,837	Micropolitan	766	1,972	28.2%	Red
Greenlee County, AZ	4011	AZ	9	9,498	Non-core	52	547	17.3%	Yellow
La Paz County, AZ	4012	AZ	9	21,108	Non-core	1,181	5,595	14.7%	Red
Maricopa County, AZ	4013	AZ	9	4,485,414	Large central metro	382,208	8,521	19.4%	Red
Mohave County, AZ	4015	AZ	9	212,181	Small metro	11,112	5,237	27.0%	Red
Navajo County, AZ	4017	AZ	9	110,924	Micropolitan	5,816	5,243	20.9%	Red
Pima County, AZ	4019	AZ	9	1,047,279	Medium metro	57,593	5,499	28.1%	Red
Pinal County, AZ	4021	AZ	9	462,789	Large fringe metro	37,029	8,001	22.1%	Red
Santa Cruz County, AZ	4023	AZ	9	46,498	Micropolitan	3,607	7,757	22.7%	Red
Yavapai County, AZ	4025	AZ	9	235,099	Small metro	10,928	4,648	22.5%	Red
Yuma County, AZ	4027	AZ	9	213,787	Small metro	12,423	5,811	29.6%	Red

AzCHER Offers Free Individual Crisis Intervention

Not everyone is comfortable talking in a group setting. So AzCHER has individual sessions of Crisis Intervention available, free of charge to your facilities employees. The purpose of this session is to debrief, process concerns, learn coping strategies, and assess if additional services/resources are recommended: Register below or call 480-405-6234 and a counselor will return your call within 1 business day.

Register here

Antibody Drug Reduces Risk of Contracting Symptomatic COVID-19 By 80% Among LTC Residents

Eli Lilly's monoclonal antibody drug reduces the risk of contracting symptomatic COVID-19 among long term care residents by 80%, according to new results from a phase 3 trial. Industry advocates are hailing the news."

The drugmaker reported last week that "eight weeks after receiving the drug bamlanivimab via infusion, staff and residents had a significantly lower frequency of symptomatic COVID-19 than placebo groups."

Read more here

Five Trends for Senior Living in 2021

Senior living thought leaders gathered nationally this past fall and have sketched the framework of the "new normal" of housing and services for older adults, outlining five trends to "future-proof" the industry in a new report. The five trends are:

1. Redefine the meaning of "community."
2. Expand the built and unbuilt environment.
3. Integrate technology through all operations.
4. Emphasize wellness culture and lifestyle.
5. Strengthen workforce quality, growth and retention.
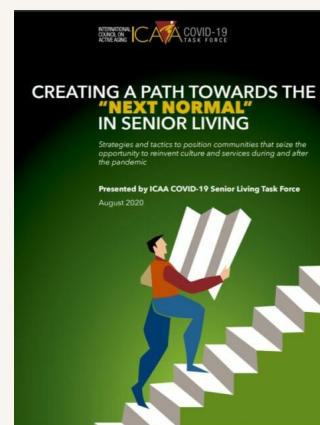
Baseline strategies for addressing these trends can be found in the "Creating a path towards the 'next normal' in senior living" report.

Important to Document Staff Shortage

Many of you have reported to AHCA your issues

with staff shortages during this pandemic. Even before COVID-19 hit Arizona, staffing was an issue, and it has become exponentially worse over the last year.

There are no easy solutions or silver bullets for this problem. That said, please be aware that AHCA continues to strongly advocate for grant funding for staffing. The Governor's office made $25m available to hospitals for staffing. We've been working with the state to make similar funding available for long term care.

Here's the challenge… *we need objective data to support our case*. Many of you don't report staffing shortages in the NHSN database because you're covering them with management, increased overtime or other temporary solutions, *and this is currently the only documented data we have available to use in our advocacy efforts*. **So, if you choose not to document your staffing shortage in the NHSN data base, then please take the time to send it directly to me at dvoepel@azhca.org**. Please specify for me your daily hourly work shortage and the amount of dollars that position costs. Remember, this important information will help build a case for workforce funding distribution to long term care.

In the meantime, here's a short list of possible workforce solutions:
- Work COVID+ employees in positive units
- Use therapists as CNAs
- Use dietary staff to serve meals
- Use laundry personnel to make beds and help answer call lights
- Use the 8-hour TNA online course to establish temporary nurse aides. This program is from AHCA/NCAL and can be found at this link: **AHCA Education: Temporary Nurse Aide (ahcancal.org)**
- Cross train all staff
- DON, ADON, and MDS work as floor nurses
- Advertise on CraigsList
- Use the Nurse Registry
- Use healthcare staffing agencies or At Work, SnapNurse, Clipboard and others. Here's a list of agencies as compiled, but not endorsed by ADHS: **Click Here**
- Stop admissions until your staffing levels are where they need to be

AHCA will continue to work on increased funding for staff and together we'll get through this. Thank you for your hard work and perseverance!

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AzCHER Cybersecurity Tabletop Exercise – Register Today!

AzCHER has joined the Department of Homeland Security's Cybersecurity and Infrastructure Security Agency (CISA) and the FBI to present a tabletop exercise on February 10 and 11, 2021 that is free to AzCHER members and partners.

Objectives of this exercise include:

· Integration of Emergency Management and Information Technology functions within the healthcare organization
· Increasing awareness of cybersecurity and the impacts on healthcare delivery
· Increasing threat awareness and response capabilities

• Discussing plans, procedures, roles, and responsibilities during a cyber emergency

In addition to the exercise, participants will have the opportunity to hear from federal agencies such as the FBI and ADHS about resources available to your organization. The target audience for this event includes information technology staff, emergency management staff, public information officers, and healthcare executives. There is no limit to the number of participants who can attend from the same organization.

February 10 exercise is full and has closed.
February 11 exercise is still open. Register below.

The same exercise will be offered on two different days. For CISA's planning purposes, registration will close on Friday, February 5, 2021. Questions about the event should be emailed to Robin Oothoudt, AzCHER's Training and Exercise Manager, at **ROothoudt@azhha.org**.

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Register here

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QUESTION OF THE WEEK

Q: When are we supposed to test individuals who have recovered from COVID?

A: After 90 days you should put these individuals back into the testing pool. CDC should be issuing further guidance on this in the coming weeks.

To submit questions email the DR EPIC online Help Center atEPIC@azhca.org. You can also **call the DR EPIC phone Helpline at 602-241-4644** and we will assist you.

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