

Long-Term Care Facilities COVID-19 Advisory Group – Meeting Minutes

APRIL 28, 2021
3:00PM-4:00PM

Review and approval of meeting minutes:

- Reviewed meeting minutes from last meeting – Approved and Seconded.

CDC updated guidance on visitation, group activities and dining:

Larissa Lewis showed updated guidance on screen and walked through it:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-after-vaccination.html>

Document provides details on updates to:

Testing recommendations/CMS changed testing guidance

Visitation guidance

Additions to communal activities and dining

DOH clarified with the CDC that “vaccination” includes healthcare workers – so if all are participating in an activity and the worker leading or participating in the activity (assisting a resident to participate, for example) has not been vaccinated, all participants should wear source control. It doesn’t just apply to vaccinated/unvaccinated residents. If one person is unvaccinated, source control.

DOH also encourages that all visits outside of the facility (in the community) follow public health guidelines (masks, distance, etc).

Question: Is there any concern with not doing routine testing of unvaccinated workers?

DOH: Yes, this has been brought up. DOH will very likely align with CDC guidance. These concerns have been brought up locally and brought to CDC’s attention.

There is still lack of vaccine confidence amongst staff.

Question: If unvaccinated, does everyone have to wear mask and physically distance?

DOH: If one person is unvaccinated, the whole group must wear source control. The unvaccinated person must physically distance from the rest.

Question: Will the Governor or DOH accept this CDC guidance?

DOH: DOH is supportive of following the guidance.

DSHS: DSHS is also supportive and it is being taken to cabinet.

As it pertains to the role of this advisory committee, we have never brought forward a recommendation – maybe it’s time to do that?

How do we do that? Verbally? In writing?

Robin Dale stated that there was a conversation with Amber Leaders this morning and that they conveyed the sense of urgency to get this done. Amber was going to talk with RCS.

It would be nice to do this before this weekend. The longer we delay, the harder this is on our residents and families and facility staff.

The group would ask the state participants to help move this forward as quickly as you can.

Amber did email DOH and DSHS this morning and we conveyed that the communal dining and activities guidance is good. The Governor's office is still looking at visitation.

The group activities within the facility are okay, but something of concern is a visitor coming in to do the activity – would have to follow infection control practices.

There is also concern about singling out unvaccinated residents in the group. Feeling of being ostracized. Would it be better if everyone comes in masked up and follows physical distancing so you don't single out residents who are not vaccinated? Or how will this be implemented in real terms?

Providers will have to work through these issues.

Question is, what does the Safe Start guidance say or what do the Governor's guidelines say? Because providers have the best interest of the residents in mind, but they are also running a business and have to follow RCS guidance, etc.

Motion put forward to make a formal recommendation to the Governor to adopt CDC guidance completely with urgency.

Discussion:

Laura: One concerned is numbers going up and vaccinations going down. But won't stand in the way of this recommendation to move guidance be adopted.

It sounds like the Governor is already on board though so do we need to do anything?

Response: Governor's office is aware but we shouldn't assume.

If we put forward visitation recommendation, we need to decide which one because a subgroup of this workgroup put forward something slightly different than the CDC guidance a couple weeks ago – so do we go with our original or with the CDC guidance?

We proposed that for consistency and because we thought the Governor would prefer it.

If we adopt the CDC guidance and adjust community metrics to DOH standard, that seems complicated...

We need to send a clear message that dining and activities can be done immediately. Visitation has gotten complicated but that should not hold up dining and activities moving forward.

People coming in to lead activities shouldn't be asked their vaccination status. It needs to be clear to facilities whether they should inquire. If the person from outside is leading the activity and their vaccination status is unknown, everyone follows infection control practice. This should be the same for all visitors.

Fear that if we combine visitation with dining/activities, visitation will delay the other two.

Motion: Recommend we move forward immediately to adopt dining and activities in alignment with CDC guidelines and swiftly move forward with visitation in accordance with prior visitation recommendations of this group and DOH recommendations.

Any objections?

Comment: Facilities still need to make sure everything is in place to continue to respond to COVID-19 as they have.

Other concerns?

We need to recognize the differences in settings. AFH and SL for example are set up differently than larger facilities.

Walt Bowen: Erring on the side of caution with rise in cases. Like the direction this is headed, but not fully there. Not enough personal exposure to full form an opinion but erring on the side of caution.

John: We should make an immediate recommendation for dining and group activities today and let visitation follow.

Motion made to move forward immediately with dining and group activities. Seconded.

Robin will write up a letter tomorrow and get signatures from the group.

Walt: Comfortable that everyone will at least have the same reference point. DOH/Larissa agreed with this.

Vaccine update:

Pause ended on J&J

DOH is working on getting all of the documentation so we can start administering J&J again.

LTC facility survey for need for vaccination has been in place for 3 weeks.

1st week – 18 requests

2nd week – 4 requests

3rd week – 9 requests

All requests have been supported for vaccination and are either completed or underway. Several of these facilities' needs were met within 24 hours.

Local pharmacies are up and running.

Home-based vaccination system through RedCap – 170 responses requesting vaccination and those have all been supported.

Question: How are Omnicare and Pharmerica doing?

DOH: We've heard that things are going as they are supposed to – this has come from the LHJs and other "boots on the ground" groups.

Question: Do we know the vaccination rate in long-term care?

No, but we do know 4,300 facilities statewide and only 31 have reached out to us in the last 3 weeks for vaccination assistance. Some of these have been facilities that have "flipped" (changed their mind about receiving vaccination and now would like it).

RCS sent out a communication with all the information on vaccination resources and they will be doing this again in the form of a Dear Provider letter so that providers again have the information and they can also find it again in the future as it will be housed online with the other Dear Provider communications.

Agenda for next meeting:

Follow up on today's agenda items.

Updates on request for Governor to adopt CDC guidance on communal dining and activities

Updates on visitation guidance

Other Safe Start updates

Case trends and vaccination updates