Review and approval of meeting minutes:
- Reviewed meeting minutes from last meeting – Approved and Seconded.

Safe Start Plan Update:

Released visitation guidance and completed webinars. All questions/answers are being reviewed and finalized for release. Should be out shortly. Responses to recent email questions are being incorporated into those Q&As as well.

We are working on updating the rest of the plan and condensing it so it isn’t 30+ pages long. There is another meeting tomorrow for the workgroup. More final versions should be out soon for broader review.

Question: What were the themes of the questions that came in from the webinars?

Themes:
If the resident is vaccinated, can they have visitors?
Who can the visitors be?
Is proof of vaccination required? For this one, there is a sign posted at the front door and in the visitor area. Proof is not required, however if a visitor confirms they are not vaccinated and the resident is also not vaccinated, the facility should tell them that they cannot visit right now. The facility cannot disclose that the resident isn’t vaccinated (the visitor may figure that out when they are told they can’t visit however).

Another issue that has come up is that facilities can’t hinge visitation on staff availability. They are not required to ask for vaccination proof – the signs are there to inform the visitors to do the right thing.

There were also lots of questions about travel. DOH is working on this issue. The CDC does not cover the same issues with visitation and travel advisories as WA has.

When the Governor’s announcement first came out on visitation, the “effective immediately” piece was difficult for facilities to manage because they had visitors showing up to the facility but no guidance yet on what to do. That has now been resolved.

Question: Is there any review for plain talk? WHCA is getting feedback from ALFs on behalf of residents. The documents and some of the high level wording can be confusing.

The other frustration is that vaccinated residents can go out into the community with other vaccinated residents, have lunch, go out with their families, etc. But vaccinated residents...
cannot dine with other vaccinated residents in the facility dining room. It’s particularly inequitable for Medicaid residents who don’t have the resources to leave the facility and go out for a meal.

Response: None of the plans say dining isn’t an option. Dining and activities in the facilities were allowed in phase 1 provided you could socially distance.

Additional feedback to response: If a group of residents is vaccinated, why can’t they socialize differently. It’s not “having a meal together” if you’re sitting a different tables spaced a part. If they are fully vaccinated, they should be able to sit together. In adult family homes, there’s only one table – they are not set up to spread out. AFHC is hearing similar frustrations about not being able to dine together.

This is an area we can discuss tomorrow in our Safe Start Plan meeting. We will also bring it up to DOH/Dr. Lutz/Dr. Linquist to get thoughts on this.

Comment: We are concerned with the number of cases called into the RCS hotline recently. Need to keep an eye on that.

Cases, hospitalizations and deaths are all going up again in WA.

If cases go up in the community, they go up in facilities because there is community exposure. If we knew the reason for the uptick, our approach could be tailored to meet it. Maybe we should change how we are asking the questions to report vaccination. Add vaccinated/unvaccinated to the list of questions.

Question: If cases are going up, are we also getting an uptick in requests for monoclonal antibodies?
Answer: No. But the numbers are still low. And in looking at the data, the positive cases are mostly staff. In yesterday’s report, 2 of the 16 positive cases were residents. It’s coming in pretty consistently at about 90% staff infection. The cases in the community are mostly middle aged individuals (under 65).

Kathy Bay discussed DOH support for another push toward vaccination for facility staff. This will not likely be facility-based clinics, like it was. The pharmacy may deliver vaccine to the facility but facility staff would do their own administration. In some cases we could deploy mobile teams depending on the situation. It just requires coordination between the facility and pharmacy and DOH can support that effort.

**Visitation signage and travel guidance:**

There is visitor info and acknowledgement and a visitor log to document acknowledgement.

*Please note: Comments expressed by individual stakeholders within these minutes do not necessarily represent the views of the entire advisory group.*
They are working on guidance related to travel. Larissa Lewis DOH is currently drafting.

The travel guidance puts the burden on the traveler.

**Review of Visitation Guidance Visual Guidance Doc:**

Feedback:
This is really great. Will be really helpful.

The pictures may be a little misleading – the outdoor visit, they are touching in the picture – they need to distance.

In the compassionate care picture, they are touching. Compassionate care is used for many different reasons. If they are visiting a resident with COVID, they should be wearing PPE, but otherwise they can wear source control (mask/eye protection).

Still think the compassionate care picture needs to show them farther apart.

Overall this is great – having something like this that is easy to understand for residents and families is great.

**Vaccination:**

Kathy is working on a transcript of yesterday’s vaccine webinar.

Question: How easy has it been to get vaccines into facilities post federal program?

Discussion: Dr. von Preyss mentioned she has seen some success but they haven’t gone the usual route with pharmacies. Laura mentioned one facility has a King Co drop team coming Monday. Omnicare and Mercury haven’t really done anything. AFHs are still wrapping up second clinics.

Kathy talked about CVS – they get vaccines federally and not from WA. Mercury is a little different – Kathy will talk to them as we’ve given them state allocated vaccines before.

If pharmacies are part of the state partnership, DOH can get them vaccines.

Question: How is hospital vaccination going?

Answer: It’s moving along. Harborview starts Monday. Swedish is going. MultiCare has said they are doing it on all discharges. Fairfax behavioral health hospital in Spokane is ready to start. They continue to build on vaccinations in hospitals prior to discharge. Prioritizing J&J vaccine for hospital discharges.
Links from 3/31 mtg
SARS-CoV-2 Sequencing and Variants in Washington State
COVID-19 Coronavirus Announcement for Visitors (wa.gov)
COVID-19 Accessible Guidance Template (wa.gov)

Agenda for next meeting:
Update on rule making meetings – Amy
Safe Start Plans - Amy
Follow up on today’s agenda items.

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