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| Long-Term Care Facilities COVID-19 Advisory Group – Meeting Minutes | **September 9, 2020**3:00PM-4:00PM |

**Intro and reminder of virtual meeting protocols**

**Review and approval of meeting minutes:**

* Reviewed comments received on minutes and obtained approval of minutes and second. Minutes approved.

**Review of draft charter:**

* Discussed proposed addition of goal in the charter to provide optimal treatment practices. Ultimately the group consensus was that this is out of scope for this group.

ACTION ITEM: Candy Goehring to reach out to Dr. von Preyss to discuss how to potentially create, collect and share resources for best practices to optimize patient care and experience.

ACTION ITEM: Send out final charter before next week’s meeting to advisory group.

It was also noted that in the future, stakeholders should be aware of the Governor’s plan to issue proclamations in advance of issuance.

**Website:**

We are building a webpage for the activities, documents and resources produced from the Advisory Group.

ACTION ITEM: Distribute web address to group once it is available.

**N-95 masks and fit testing:**

* This process is difficult for facilities to manage. A provider is only fit tested on one type of N95 mask. Due to lack of availability of masks, different brands are being ordered and if the provider is not fit tested with that mask, the mask is considered ineffective.
* Depending on the size of the facility and the locations of facilities, accessing PPE can be a challenge.
* Adult Family Homes and Supported Living Providers face unique challenges in that they are not large corporations or facilities with the ability to purchase large quantities of items or get fit testing on a large scale – it’s a setting by setting challenge.

From LNI:

* LNI is available to assist smaller facilities/providers although serving thousands of across the state on a provider by provider basis will be a stretch for LNI resources.
* DOSH is intended to provide consultation to smaller entities. That is part of their mission. DOSH is a voluntary compliance group.
* LNI will provide the group with a list of regional managers and other resources they have available.
* LNI is not targeting providers. Since March they have only been responding to employee complaints.

ACTION ITEM: LNI to provide list of regional managers and other resources they have available.

Other discussion/questions:

* What is the purpose of fit testing? It is to make sure the respirator fits correctly for each person and that the respirator is performing correctly.
* Many women fail fit testing because masks are made for men. The reality is that if we have N-95 masks available, they are usually one size.
* One size fits all doesn’t work in this situation. N-95 masks are the least protective respirator so you may have to find one that is more protective and see if it fits.
* We use PAPRs (Powered Air Purifying Respirators) at Harborview because of the fit issue with N-95s.
* PAPRs are not an option in long-term care facilities. These are not hospitals or occupational settings.
* We also are not able to order the same masks each time, resulting in new fit testing each time we place a new order.

ALTSA’s experience in accessing masks and fit testing for staff and Individual providers:

* ALTSA staff have explored several avenues for obtaining PPE and fit testing of masks for staff and individual providers
* We are working with Concentra for fit testing, who has 19 locations along the I-5 corridor and one location in Spokane. This obviously leaves gaps in other areas of the state not served by Concentra.
* We are considering National Fit Testing (which is a national company) to do train the trainer fit testing.
* We are exploring fit testing with occupational health centers
* We had 24 staff work with our state EOC to test all different types of masks and found that all but 4 staff passed the fit test of the BYD mask and everyone passed the fit test of the Outdoor Research Essential mask with filter.

ACTION ITEM: Dawn Williams (who presented ALTSA’s experience) offered her email address and resources they have found.

**Next meeting:**

* N95 mask availability and fit testing continued discussion – **Louis Flora, Dawn Williams and group discussion on resources**
* Update on visitation: **- Provider associations on visitation topic, Amy Abbott/Candy Goehring on survey and investigations update**
	+ How are essential support person visits going?
	+ What are barriers and challenges identified in allowing essential visits and compassionate care visits?
* Update on annual inspection surveys, complaint investigations and follow up by surveyors on findings:
	+ Timeline for addressing the backlog and how far behind RCS is on following up on compliance visits for known deficiencies. What are the plans for catching up? (This is in reference to an article about a facility in Pierce County that had a poor infection control survey in early March. Soon thereafter four residents came down with COVID and three passed away. The Department stated no follow up survey was done by RCS.)