|  |  |
| --- | --- |
| Long-Term Care Facilities COVID-19 Advisory Group – Meeting Minutes | **FEBRUARY 3, 2021**  3:00PM-4:00PM |

**Review and approval of meeting minutes:**

* Reviewed previous meeting minutes and tabled for minute content clarification. Will review at next meeting.

**Monoclonal antibodies (MA therapy) discussion:**

Evaluation of need done in Utah. Defined populations eligible, how to triage and prioritize dosing and they would administer. Utah utilizes the National Guard. They built a very comprehensive plan.

Dr. Bob Lutz is the lead at WA DOH. Jennifer Dixon was not on the call as she was standing up a large vaccination site in Spokane. Dr. Lewis, Dr. von Preyss, nurses from Fred Hutchinson with expertise in this area were on the call.

Weekly meetings are being set up to develop a WA strategy.

There is a one page clinical summary done by Dr. Roxby.

This treatment is very well indicated in our settings.

Potential solution for WA is expanding the role of the rapid response teams.

There is a funding issue as well. There is an initiative put forward by stakeholders that will go to Bill Moss regarding a funding ask for this therapy.

Dr. von Preyss: It would be great to see something happen by next week.

Per RCS: The rapid response teams can do this work, it’s just a matter of contract and funds.

It was reported that WA is currently not utilizing our existing supply of MA therapy.

There is a meeting tomorrow (2/4) with DOH – they have an immunization team.

Per Laura, there was an announcement from FEMA of a 100% cost share. Wondering if this is funding we can look at?

Per RCS, yes, we are looking at all funding options.

Question: Is there a waiting period after getting the MA therapy before getting the COVID vaccine? Yes, the waiting period is 90 days after MA therapy, then you are eligible for the COVID vaccination.

Let’s keep this topic on the advisory group agenda.

**Vaccine Update:**

Kathy Bay:

Finished first dose at all skilled nursing facilities in WA. Some have also finished 2nd dose or second dose is scheduled.

Unique to CVS and Walgreens regarding data:

70,266 doses administered in LTC facilities in WA

1,777 clinics scheduled

1,633 2nd clinics scheduled

We set a goal for all LTC facilities to have 1st clinics done by Feb 22.

We are testing rapid vaccination teams in Thurston County – we have done some of these in AFHs. We will be expanding to other counties.

[Kathy showed data on vaccinations]

Anyone scheduled in March will be moved back to February.

CVS/Walgreens are running behind with still quite a few clinics to do.

70 clinics are scheduled after Feb 22 and DOH has asked the pharmacies to move those up.

Question from Robin: How many true ALFs are remaining?

Kathy: With a few outliers, all ALFs are done with their first clinic.

DSHS also has about 50 nurse delegators that will help DOH vaccination teams.

Question: We heard that on the 3rd clinic, CVS and Walgreens said they were not going to start any new vaccinations? Kathy: No, CDC has said on the 3rd clinic, the pharmacy should offer a vaccine to anyone who wants one even if there isn’t another one scheduled. Even one dose can give 50% protection. DOH will push out that message once the CDC releases this guidance.

There are still issues with independent residents at CCRCs being declined by pharmacies. Kathy: Yes, CVS seems to still be saying this. DOH continues to tell them to vaccinate, but CVS has said it is a capacity issue in that you may have 150 facility residents at the CCRC but 1000 who are independent living.

We did have the National Guard do some vaccinations in HUD housing and independent living in CCRCs. Seattle King County has asked DOH not to bring in the National Guard as they have set up their own infrastructure and this would interrupt their process.

LeadingAgeWA, Deb: Emerald Heights CCRC in King County has 450 independent living residents. CVS was doing vaccinations of independent residents at a CCRC in the same neighborhood (Timber Ridge CCRC) but wouldn’t do it for Emerald Heights. The National Guard can get through 1000 vaccinations of independent living residents at Panorama but can’t impact this one in King County.

ACTION ITEM: Kathy to call CVS and see if she can resolve the issue at Emerald Heights.

King County is reviewing National Guard assistance with the King County Execs.

Kathy: Original bed numbers for the federal program that were part of the planning phases only included licensed beds and independent living is not included in “licensed”.

The goal for Feb 22 is to get all AFHs through their first clinic. This includes the federal program, mobile teams, RCS call group, etc.

ReadiMed is out and starting this work.

John: Is there a means to track the completion of the first clinic in AFHs? Kathy: DOH is working on getting lists of completions from the pharmacies as they are completed. Should have a summation Feb 22.

DOH also has address data that they can match in their IIS system to see who got vaccinations and can determine if those were AFHs.

RCS is starting to call AFHs to connect them with pharmacies. DSHS needs Spokane/Yakima data on AFHs. Kathy: Spokane only had 108 homes needing to be done and since the time they first reported they have done 20 of those. They have two mobile teams in Spokane and they feel quite confident that can complete this.

What about the vaccination discussion regarding when people are leaving the hospital?

DOH: WSHA is polling hospitals and looking at national data on this. There is a meeting next week to talk about how many people are transitioning (part of the WSHA poll).

Question: What about new staff in a facility? Kathy: We are not as worried about that because those individuals will have opportunities for vaccination in the community (store front vaccination options, etc).

**Safe Start for LTC:**

Revisions to documents went live Monday.

RCS conducted webinars with DOH last week. RCS is currently dividing up the questions that were asked. Will send out answers as soon as they are all completed.

RCS is also working on an FAQ that should help.

These guidelines better define compassionate care, supportive person, communal dining, etc.

There was a technical correction in the ALF document related to eye protection. It has been updated to be more consistent with the AFH version.

RCS is developing one pagers on compassionate care and essential support person for facility staff to give to residents and families.

ACTION ITEM: RCS to provide updates on development of providing answers to webinar questions, developing one pagers and FAQ

The numbers of cases in facilities are going down so that is good news. It shows that it’s working.

**Agenda for next meeting:**

Follow up on today’s agenda items.