

Centers for Medicare & Medicaid Services
COVID-19 Call with Nursing Homes
October 14, 2020
4:30 p.m. ET

OPERATOR: This is Conference #: 1897041.

Alina Czekai: Good afternoon and thank you for joining our October 14 “CMS COVID-19 Call with Nursing Homes”. This is Alina Czekai, leading Stakeholder Engagement on COVID-19 in the Office of CMS Administrator Seema Verma.

Today, we are joined by CMS leaders, as well as CDC leaders and, today, we also have providers joining us from the field who have offered to share best practices with you all.

First, I'd like to turn it over to Jean Moody-Williams from the CMS Center for Clinical Standards and Quality for an update from the agency. Jean, over to you.

Jean Moody-Williams: Thanks, Alina. And thanks, everybody. Good afternoon. So glad that you are able to join us this afternoon.

We are fortunate to have a number of our colleagues, as was mentioned, joining. So, I want to make sure we have time for a robust Q&A session. We have our subject matter experts from CMS and CDC.

And just before we get to our topics, wanted to give you a few highlights. I think you're probably aware of most of these, but just to be sure. As you know, we've implemented our – we implemented visitor restrictions in nursing homes a while ago and we know that these restrictions – they were necessary at the time. We had to – there was a lot we didn't know about the virus and still learning every day. We wanted to protect the health and safety of residents.

But overtime, of course, this has taken an emotional, psychological and physical toll on the residents. We know more than we did before. We know

how some of the steps that we need to take to ensure we can keep COVID out of the facilities and keep it from spreading. And we know that you are working hard each day and we want to thank you for all that you're doing to keep residents safe.

But given the toll that it's taken, we recently issued guidance to nursing homes that incorporates the latest science to help facilitate safe visitation. And so, we've heard quite a bit from those since we put – from those that have implemented it since we put it out. We understand it's been welcomed. But we'd like to hear from you on how it's going today as well.

As a reminder, we also released an – really an unprecedented training program that was developed by CMS in consultation with our colleagues from the CDC. And it really is a scenario-based training, which includes five modules for management, but uniquely as well for frontline staff. And so, it covers topics such as hand hygiene, PPE, screening and surveillance, cohorting, infection control, emergency preparedness. It talks about telehealth and vaccine delivery.

So, we have had just a great response to this training. As of last week, approximately 40 percent of all nursing homes in the country has – they've taken this training, over 6,000 nursing homes. We've had over 65,000 individuals on staff and over 24,000 individuals who've identified themselves as management who had completed the training. We've received feedback and responded to that.

So, these numbers are extremely high, but they're not high enough. We really would like to encourage more of you to take the training and to have your staff take the training as well, and so, that we can at least ensure that we have a baseline level of knowledge across the country as we see spikes in certain communities across the country.

We're continuing our interventions of deploying federal strike teams as needed. And the strike teams are sent to areas when we identify that there is a need there due to an outbreak. And so, there are specific facilities that receive

the strike team assistance and state health officials where the state continue to work with us in these areas.

And lastly, we did send out guidance as a reminder to facilitate the residents' right to vote. We sent this guidance memo out and a resident letter, which you can find on the CMS emergency pages. If you don't have it, please ensure that you have taken a look at it and that your residents are made aware of their right to vote.

So, it is my pleasure right now, I'd like to turn it over to Kathy Bridson from the CDC who will give us some information on NHSN and test results reporting. Kathy?

Kathy Bridson: Thanks, Jean. Good afternoon, everyone. I wanted to just share some brief information with you all this afternoon in case you haven't heard. Hopefully, you all received an e-mail this week from NHSN telling you about some upcoming trainings that we have next week, which are intended to provide information related to a new pathway for point of care COVID testing in long-term care facilities.

That pathway is going to be released tomorrow evening. And so, Friday morning it will be ready to – for facilities that would like to start to report data into it.

We – as I mentioned, we're going to have two trainings next week, one at 11 o'clock on Thursday and one at 2 p.m. on Friday. And the pathway really is developed to be another option for long-term care facilities to report data related to – or test results from their COVID testing, those point-of-care machines that are being used to identify or test patients for positivity or negativity for COVID.

And there are a variety of means or processes that are – have been identified – three processes by the Department of Health and Human Services through the CARES Act, the Coronavirus Aid Release and Economic Security Act, one of which is to report data to state and local health departments via a secure platform – electronic platform. And that is really the type of process that would be encountered if you were to choose to use the NHSN option.

What would happen is that facilities would enter their data into the system, and then, NHSN will send the data via an HL7 secure message to the AIMS platform which is part of the Association for Public Health Labs, which would then send the information to the state health pharmas or local health departments who can share it with the Department of Health and Human Services.

Some states already have reporting pathways that are set up for facilities and NHSN system is not meant to circumvent that process. So, if states already have a process that's working for them or if some facilities are having success with that, certainly continue to do that. And there is no mandate to use NHSN. It is simply just another option for facilities to meet the reporting requirements.

We have built the pathway with minimal viable – at minimal viable products, meaning that we have been very attentive to ensuring that we are requesting the minimal amount of data that's necessary to be able to respond to the outbreak and to prevent transmission outside of current cases.

And we've also taken a lot of steps to ensure that the system has built in some defaults and some use of previously-entered data to auto-populate fields, so that the burden that is required to report the data is the least that it – that it can be.

So, I would encourage all of you to tune in for one of the trainings next week. As I said, please check your e-mail from – for an e-mail from NHSN that went out yesterday. You should have that.

Another one went out today. Yesterday's went out to nursing homes. Today's went out to assisted-living facilities. All long-term care facilities are eligible to report data through the pathway. But it's really targeted for skilled nursing facilities. I think I will stop there and maybe, if there are questions at the end, I can answer those at that time.

Jean Moody-Williams: Thank you so much, Cathy. And thanks to your team as well from the CDC. I have been sitting in on the meetings and I know the effort that has

gone into trying to streamline, as was mentioned, reporting so that I know that many nursing homes are already reporting a high number, already reporting through NHSN for other areas.

And so, this is intended to be another avenue that is decreasing – looking at how we can decrease burden and keep – and continue to get the important information that's needed to manage the pandemic.

So, with that, I'd like to turn to (Natasha Frazier), who is the director of nursing for Ignite Medical Resort in Kansas City, Missouri. It is always I think one of the most valuable parts of this call when we hear directly from those that are learning and sharing information from the field. And so, we'll hear from (Natasha), and then, we'll open it up for questions for either (Natasha) or any of us at CMS or CDC. So, Ms. (Frazier), I'll turn to you.

(Natasha Frazier): Hi. My name is (Natasha Frazier). I am – I am a registered nurse with a Bachelor in Science of Nursing and I am the chief nursing officer for Ignite Medical Resorts in OKC, Oklahoma. And I was just asked to come on today and speak regarding of managing COVID-19 in the nursing home.

So, just a couple of things that are unique about Ignite Medical Resort OKC is that, whenever COVID came to the Oklahoma City metro area, we were the only facility that was offering a – and established a separate COVID unit. We had a whole separate floor just specifically for COVID patients to help really the overwhelming need that the hospitals were having for COVID beds.

And so, how that works and how we were able to, you know, protect our staff, as well as other residents that were not on the COVID floor was that the COVID unit was on a separate floor and we had a separate entrance where only COVID-assigned staff would enter through that entrance and do the required screening at that entrance, work their shift, and then, leave through that entrance as well where there was no traffic between the units as well to minimize that exposure.

We have always continued our education with all of our staff, including our non-COVID units on their proper PPE wearing and hand hygiene. And we

have also recently incorporated auditing with feedback forms with compliance checking rights and stability.

And then, one very important thing I thought was really great about our facility is that we are an off-field unit and we have 75 total beds. So, that way, we don't have any long-term care beds in the facility, so we are able to help the community with its COVID-19 crisis. And since March of 2020, we have been able to help heal over 124 total residents of COVID-19 and have them return to their previous lives. And I appreciate you all having me on today.

Jean Moody-Williams: Thank you so much and – for all you're doing and for the learning and shout out to the registered nurses that are on the frontline every day doing such great work and providing leadership to staff and other members. So, appreciate you.

So, let's – I'm going to open it up for questions and I'd like to ask the operator to please give instructions for how we can take questions at this time.

Operator: Ladies and gentlemen, if you would like to ask a question, you will need to press "star," "1" on your telephone keypad. Again, that is "star," "1" on your telephone keypad. Please stand by while we compile the Q&A roster. Again, everyone, if you would like to ask a question, you will need to press "star," "1" on your telephone keypad. One moment for the first question, please.

Jean Moody-Williams: So, operator, do we have any questions? This is unusual for a nursing home call not to have any, so I want to make sure since we've got all of our experts on the line that, if there are any, we want to make sure to get – to get to them.

Alina Czekai: Right now, it looks like there are no questions. Operator, do you mind giving the instructions one more time for folks?

Operator: Yes, ma'am. Again, everyone, if you would like to ask a question, you will need to press "star," "1" on your telephone keypad. Again, that is "star," "1" on your telephone keypad.

Jean Moody-Williams: OK. Well, I'm going to take that as a good sign. But we encourage you, if there are any specific agenda items that you would also like included in the call, we did hear from a state today that they would like for us to provide more information on dementia and managing that in a COVID situation. And so, we will try and include speakers on that topic on this call.

And there were a couple other areas of interest. So, if you have those, please send those in and we will be sure to try and address those.

So, with that, I will turn to Alina to give us any final instructions.

Alina Czekai: Great. And, actually, it looks like we have a couple of questions in the queue. So, should we take those before we wrap?

Jean Moody-Williams: Sure. Yes.

(Paul): Alina, can I – it's (Paul). Can I just add something to what Jean just said? Jean said that we've got ...

Alina Czekai: Yes.

(Paul): ...more requests for more information on caring for residents with dementia in the nursing home during the pandemic. And I just wanted to point out that one of the modules in the scenario-based training that Jean mentioned at the beginning of the call is exactly targeted for information in that field. It's called "Caring for Residents with Dementia During a Pandemic". So, yet another reason to take the scenario-based training. Thanks.

Jean Moody-Williams: Great. Yes. Thank you. Yes, questions?

Operator: Thank you, ma'am. We do have a question from the line of (Seller) – I mean, (Sheryl). Your line is open. You may ask your question, please.

(Sheryl): Thank you. Yes. My question is related to, I received – and I'm sure we all did – the e-mail regarding the NHSN reporting of flu vaccinations. Is that a requirement or just a recommendation?

Jean Moody-Williams: I will turn that to CDC or Evan if you want to address that, please?

Evan Shulman: Hi, everyone. This is Evan Shulman. It's not a requirement, but we strongly encourage it. We strongly encourage that everyone submit to the extent that they can flu vaccination information.

(Sheryl): And would that be on a – on a weekly basis like we're doing the rest of the NHSN reporting?

Evan Shulman: That one I actually do need to ask if any of our CDC colleagues can answer.

(Andrea): Evan, it's (Andrea). Can you hear me?

Evan Shulman: Yes.

(Andrea): Yes. OK. It is set up for weekly with the intent that – you know, to give folks that same cadence. And there would probably be a close-out period I would assume based on the flu season?

Yes. The – I think the close out is the end of March, but I'm not sure that I remember that exactly, but it's something like that for the – for the end of the season, yes.

(Sheryl): OK. Thank you.

Operator: Thank you. Again, everyone, if you would like to ask a question, you will need to press "star," "1" on your telephone keypad.

Jean Moody-Williams: And, Alina, I'll turn it to you. This is Jean.

Alina Czekai: Great. Thanks, Jean. And thanks, everyone, for joining our call today. You can continue to submit questions through our COVID-19 mailbox, which is covid-19@cms.hhs.gov. And our next nursing home call will take place on Tuesday, October 28.

This concludes today's call. Have a great rest of your day.

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