

Welcome to Community Based Care News Hour April 22nd, 2021

Please remember to put your phone on mute
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Agenda

- Compliance Trend Report
- Compliance Tips:
Fire Drills: Dave Mackowski
- Survey Updates: Jeanne Bristol, SOQ
- Hot Topics:
Vaccine Maintenance: Crys OGrady



Compliance Trend Report

Top Ten Citations: 01/01/2021 - 03/31/2021

- | | |
|-----------------------------------|---|
| 1: C 420 Fire Drills (27) | 6: C 160 Reasonable Precautions (18) |
| 2: C 260 Service Plan (26) | 7: C 310 Medications (17) |
| 3: C 303 Treatment orders (19) | 8: C 372 Training 30 days (16) |
| 4: C 422 Fire & Life Safety (19) | 9: C 231 Abuse reporting (15) |
| 5: C 270 Change of Condition (18) | 10: C 280 Resident Health Services (15) |

Fire Drills and Fire & Life Safety Training

CBC News Hour
April 22, 2021

Expectations

- SOQ expects every facility to be conducting fire drills and fire and life safety training for staff and residents according to the current OARs.
- Survey will review facility fire drill and F&LS records and issue citations for non-compliance.

Fire Drills

- The purpose of conducting fire drills:
 - To ensure staff know what to do in the event of a fire;
 - To ensure residents know what to do in the event of a fire; and
 - To identify residents who will not comply or need extensive assistance to evacuate.
- Remember: the role of the local fire department is to fight the fire. It is the responsibility of the facility to try to the best of its ability to evacuate its residents.

Fire Drills: Expectations

- The facility is expected to:
 - Conduct a fire drill for each of its licensed units at least every other month;
 - Alternate shifts;
 - Simulate fires in different locations of the building with different exit routes; and
 - Relocate residents.

Fire & Life Safety Training for Staff

- F&LS training should be provided to staff on alternating months.
- Topics can relate to fire drills or responses to other common emergencies such as:
 - Power outages;
 - Gas or water leak;
 - High winds, damage to building;
 - Forest fires and evacuation preparedness.

Fire & Life Safety Training for Staff

- F&LS training is not counted toward the annual training hours required under 411-054-0070.
- There are no minimum requirements for how long the F&LS training needs to be.
- Ensure you keep documentation of the topics provided and the staff who attended.
- The facility should have a plan to provided make-up training for staff who miss scheduled F&LS training.

Fire & Life Safety Training for Residents

- Residents must be instructed about the facility's fire and life safety procedures.
- This requirement applies to all residents in an ALF, RCF and MCC.
- Training must be provided within 24 hours of admission.
- Re-training must be provided at least annually.
- The content of the training must be documented.

Training for Residents in an MCC

- The OARs acknowledge that some residents may have difficulty understanding and/or retaining the information.

“This requirement does not apply to residents whose mental capability does not allow for following such instruction.”
- However, a facility cannot make a blanket determination that all of its residents lack the mental capability and then just not make any effort to provide instruction.

Training for Residents in an MCC

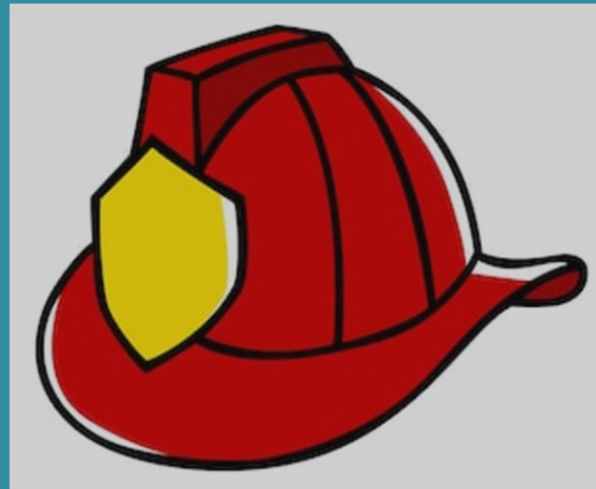
- The facility should still document that instruction was provided and then document as to the resident's ability to understand the information.
- The resident's ability to understand can be incorporated into the service plan in regard to assistance needed to evacuate in the event of an emergency.

Training for Residents in an MCC

- Remember: for individuals with memory deficits, providing only verbal instruction may not be effective.
 - **Consider providing guided instruction and/or modeling.**
- Also, individuals with memory deficits often benefit from repetition. In other words, “Practice.”
 - **Consider incorporating F&LS practice into the weekly schedule of activities to improve recall.**

Thanks for your attention!

- The OARs regarding fire drills and fire and life safety instruction can be found at:
- 411-054-0090 (1)
- 411-054-0090 (5)





Survey Update

- Jeanne Bristol, SOQ

Long-Term Care Facility Vaccine Maintenance Update

April 22, 2021



COVID-19 RESPONSE & RECOVERY UNIT
Office of the Director



Ongoing COVID-19 Vaccination for LTC Facilities

Beginning April 5th, all nursing facilities, assisted living facilities, and residential care facilities licensed by the Oregon Department of Human Services (ODHS) began reporting weekly COVID-19 vaccination data to OHA through a Reporting Survey.

Licensed nursing facilities, assisted living facilities, residential care facilities, memory care communities and adult foster homes are directed to develop vaccine maintenance plans through options we've identified. **The primary resource will be contracting with long term care pharmacies.**

It will take time to ensure facilities are matched to partners, and we anticipate some facilities will need help identifying partners and obtaining allocations. **Teams at ODHS and OHA - VPU Pharmacy Branch are prepared to help match facilities with other pharmacies and partners during this “bridge” period, if needed.**

Vaccine Maintenance Planning: Facility's Role

1. **Develop a procedure** to screen new residents and staff for COVID-19 vaccine status.
 - a) For residents, the facility should develop a vaccine plan within 72 hours of admission, if needed. If possible, the facility should work to vaccinate resident prior to admission. Once scheduled, a vaccine should be administered to a resident within two weeks of admission if vaccine resources are available.
 - b) For staff, the facility should direct staff to community resources for vaccinations or offer onsite support through the models with long term care pharmacies.
2. **Coordinate with LTC pharmacy or other entity** to ensure residents and staff have ongoing access to COVID-19 vaccination.
 - a) If subcontracted by an LTC pharmacy, clearly define their operational process for vaccination administration.
 - I. Ensure that the vaccine administration process outlines the protocol to on how a vaccinator will respond to any severe allergic reactions. This protocol should address the administration and storage of epinephrine.
3. **Maintain records of vaccination status of residents and staff** to share with ODHS, LPHA or OHA as necessary to monitor and address public health concerns. The OHA-developed vaccination tracking tool is an option for facilities.

Option #1

Facilities Contact Their Long-Term Care Pharmacy provider

LTC Pharmacy service delivery options

Option 1a: A LTC pharmacy subcontracts with a facility to administer vaccine.

Option 1b: A LTC pharmacy gives a facility priority appointments in a reservation-based model, or serves an event at a community-based organization.

Option 1c: A LTC facility coordinates LTC pharmacy vaccination options for residents and requests staff to arrange their own vaccination at a local retail pharmacy.

Option 1d: A LTC pharmacy continues to offer vaccine clinics at a facility.

Additional Options for LTC Facilities

Option 2

Develop a pod with other LTC facilities in your region, and become a state enrolled vaccine provider as a group.

Option 3

LTC facility partners with local hospital or home health agency to administer vaccines to residents and staff.

Option 4

If your facility is unable to implement an ongoing vaccination plan for residents and staff using options 1-3, contact your SOQ policy analyst.

Discharge Policy & Support

- Our discharge policy requests hospitals administer first doses and develop a plan for second dose administration prior to discharge in partnership with the discharge facility.
- With long term care pharmacies obtaining allocations, your facility could work with your pharmacy partner to obtain the second dose.

Where to Find More Resources

[Long-Term Care Facility COVID-19 Vaccine Maintenance Resource Guide](#)

LTCF Vaccination Tracking Status Update

April 22, 2021



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LTCF Vaccination Tracking System- Background (1)

- Two Components:

1. Use of OHA tools to track vaccination status of facility residents and staff. Tools auto-calculate key summary metrics
2. Reporting of summary metrics to OHA:
 - a) Partial/Complete Vaccination Percentages
 - b) Declination Percentages

- Goals:

- Inform next steps for reopening
- Inform vaccine uptake progress as a performance measure
- Identify gaps so that vaccine assistance can be allocated appropriately
- Facilitate reporting to state and federal public health authorities

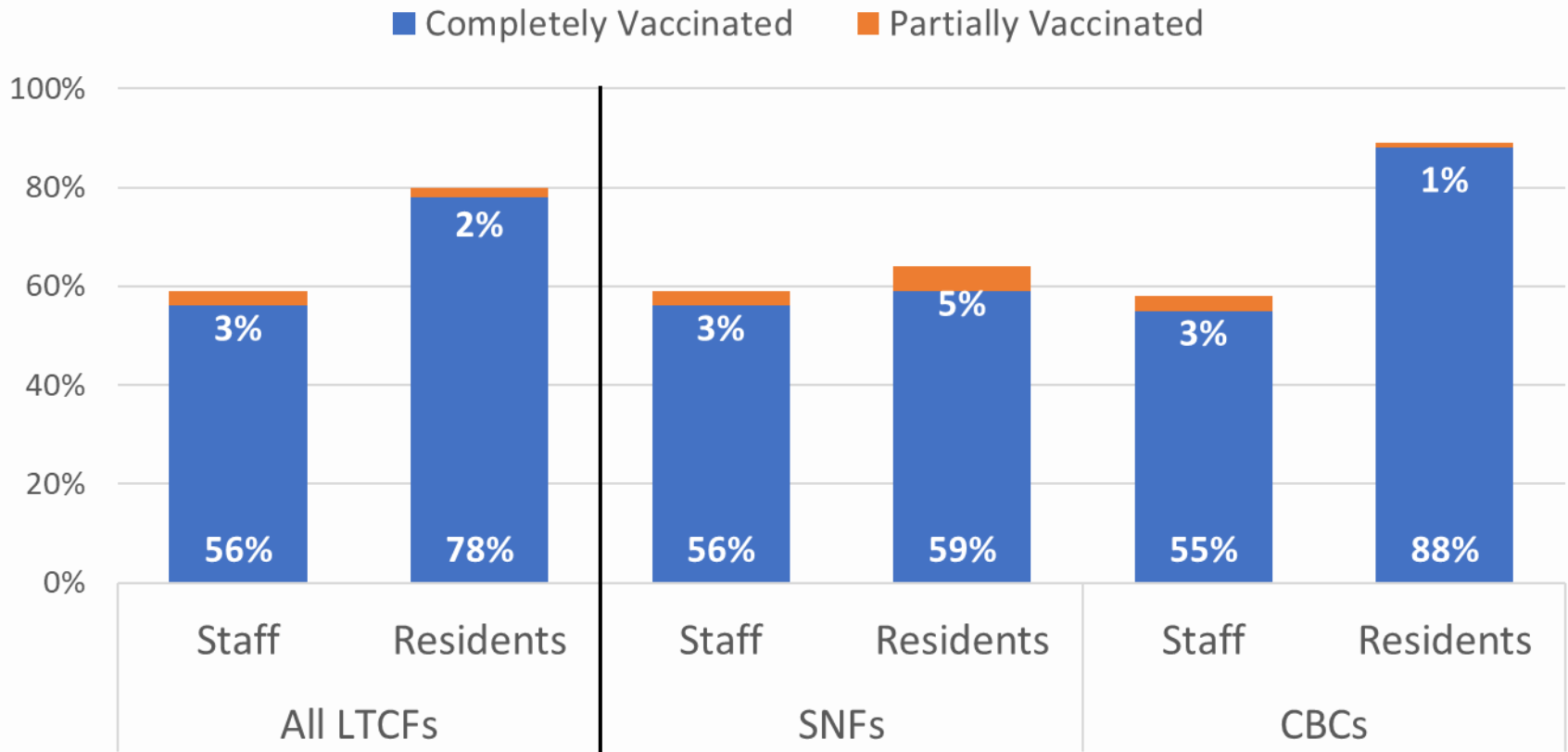
Facility Registration and Reporting

As of April 20th at 6:00 AM:

	SNFs	Percent	CBCs	Percent	Total	Percent
Registered Facilities	91	70%	275	49%	366	46%
Completed Reporting						
Week of 3/29-4/4	85	65%	194	35%	279	40%
Week of 4/5-4/11	86	66%	213	38%	299	43%
Never Reported	44	34%	313	56%	357	52%

Thank you to those of you who have already submitted your facility's data.

LTCF COVID-19 Vaccination Reporting for the Week of 4/5-4/11/2021



Data includes: 43% of LTCFs

66% of SNFs

38% of CBCs

*DATA IS PRELIMINARY AND SUBJECT TO CHANGE
INTENDED FOR INTERNAL USE, DO NOT SHARE WIDELY*

Report summary vaccination data to OHA

- Reporting from all facilities is needed to understand the complete picture of COVID-19 vaccination coverage among staff and residents
- Facilities can still report summary vaccination data for the week of 4/5-4/11 until COB Friday, 4/23. Ongoing weekly reporting will continue.
- Resources are available in prior [Provider Alerts](#) and on the [OHA COVID-19 Healthcare Providers Page](#)
(see 'Specific Guidance for Long-Term Care Facilities' under the 'Healthcare Providers and Clinical Laboratories' section)

Contact Lisa Iguchi at lisa.c.iguchi@state.or.us with any questions on COVID-19 vaccine tracking and reporting.

Thanks so much!

Next News hour:

July 22nd 2021

9:00 am

Questions????

CBCTeam@state.or.us

CBC web site Address::

<http://www.oregon.gov/DHS/PROVIDERS-PARTNERS/LICENSING/CBC/Pages/index.aspx>

