Jefferson College of Population Health

10 Years of Progress in Population Health
Connecting Health and Healthcare
Clinical Lessons from the Northeast Surge
Navigating Care Transitions During the COVID-19 Surge in Massachusetts

Tuesday, September 15, 2020 | 4-5 p.m. EDT

Patricia M. Noga, PhD, MBA, RN, NEA-BC, FAAN
Vice President, Clinical Affairs
During this time, hospitals never closed and continued to treat every patient in need of care.
Elements of our Response

**Building capacity**
- 1,074 field hospital beds added
- 2,749 ICU beds added
- 4,080 medical/surgical beds added

- Field hospitals

**Other elements**
- PPE / caregiver protection
- Workforce flexibility & liability
- Post-acute coordination
- Treating non-COVID patients
- Commitment to collaboration
- Public health messaging

MHA
Goal: Develop viable guidelines for patient transitions from acute care to post-acute settings during the COVID-19 outbreak via collaboration among provider organization representatives.

("Ready for post-acute Care?" from The Hospitalist, Jan. 5, 2017)
Christine Scibelli, MS, R.N.  
Baystate Health

Maureen Banks, R.N., DNP, MBA, NEA-BC, FACHE  
Spaulding Rehabilitation Network

Keren Diamond, R.N., BSN, MBA  
Partners Healthcare at Home

Brian Doherty, CAE  
Massachusetts Assisted Living Association

Christine McMichael, MA, LMHC  
Hospice & Palliative Care Federation of Massachusetts
Post-Acute Care Transitions
Lessons Learned from the COVID-19 Northeast Surge

Christine Scibelli, MS RN
Sr. Director of Care Management
Baystate Health
The New Hospital World of COVID-19

- Acclimation to new realm of providing hospital care.
- Maximize remote work capabilities and efficiencies.
- Minimize risk and PPE resource conservation.
- Maintain strong support to patients and families regarding the care they receive.

- How do we need to work differently?
- How do we support our teams – and ourselves – in this ever-changing climate?
- How do we prioritize work, overcome challenges, and use technology to the best of our advantage?
Operationalizing New Processes

- Rejuvenate alignment with preferred post-acute providers.
- Develop frequent communications – to assess capability of caring for COVID-19 patients on every level.
- Determine best method for easy access to open bed availability at area SNFs.
- Provide support, education and resources to help area facilities transition and care for our patients safely.
- How do we “Think Outside the Box” – to benefit our patients and families.
- How do we know what’s next?
Initiatives and Collaborations

- Baystate Health collaboration with Berkshire Health – free standing COVID + SNF.
  - How do you do this? How quickly does this need to be done?

- Sicker patients equates to complex transitions
  - How can we assure this is done safely?

- “Why Not Home Initiative”
  - Home is best – more family members also home

- “Plan B Initiative”
  - What if the plan for home has failed?

- Partnering with Home Health, ACOs, Palliative Care/Hospice
  - What do you need for success?
Sustainability / Surge Planning

- How do we rely on technology for ease of capacity?
- Who can **reopen** units/facilities quickly if need?
- Effective “blend” of both worlds – what’s the new normal?
- What lessons learned will we bring forward?
- Help us-help you-help each other. There is strength in numbers!
COVID-19 Surge in Massachusetts

Spaulding Rehabilitation Network

Maureen Banks, RN, DNP, MBA, NEA-BC, FACHE
Chief Operating Officer & Chief Nursing Officer,
Spaulding Rehabilitation Network

September 15, 2020
## Overview

<table>
<thead>
<tr>
<th>Facility</th>
<th>Features</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spaulding Rehabilitation Hospital</td>
<td>• 132-bed Inpatient Rehabilitation Facility</td>
</tr>
<tr>
<td>Spaulding Cape Cod</td>
<td>• 60-bed Community Inpatient Rehabilitation Facility</td>
</tr>
<tr>
<td>Spaulding Hospital Cambridge</td>
<td>• 180-bed Long-Term Acute Care Facility</td>
</tr>
<tr>
<td>Spaulding Nursing &amp; Therapy Center Brighton</td>
<td>• 123-bed Skilled Nursing Facility</td>
</tr>
<tr>
<td>Spaulding Outpatient Network</td>
<td>• 25 Outpatient Clinics in Eastern Massachusetts</td>
</tr>
<tr>
<td>Boston Hope</td>
<td>1,000-bed Stand-up Hospital</td>
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</tbody>
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**COVID-19 Surge in Massachusetts** | Spaulding Rehabilitation Network 2020
Major Changes

- **Spaulding Cambridge**
  - Transition throughout Network
  - COVID + vent units

- **Spaulding Brighton**
  - 14-day quarantine
  - 50% census

- **Spaulding Outpatient Sites**
  - Redeployment
  - Virtual visits
    - Outpatient care
    - Family contact
    - Acute consults
  - Screening employees
## Major Challenges

### Incident Command Center
- Daily
  - PPE
  - Staffing
  - Data
  - Testing
  - Regulatory Mandates
- Leadership Succession
- 2 person major meetings
  - Infection Prevention
  - Policies & procedures
- Gyms
  - NYC lessons
  - ICRA barriers

### Surge Planning
- Patients
  - iPads
- Staff
  - EAP
  - Virtual Town Halls
  - Zoom/MS Teams
- Emergency Fund
  - Housing
  - Scrubs
  - Snacks
  - Personal PPE

### Advocacy
- Social Distancing
- Employees
- Fit testing
- N-95 decontamination

### Education
- Referral hospitals
- Outpatients
- Families
  - MMS
  - Social media
  - Patient Gateway
  - Newsletter

### Communication
- Community training
- Dialysis
- Codes/Rapid Response
- Analytics
  - Changing definitions
  - System
  - State
  - Federal

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COVID-19 Surge in Massachusetts | Spaulding Rehabilitation Network 2020
Today

- **Current Status**
  - After-action review
  - Outpatient transition
    - COVID Recovered Program
  - Resurgence
    - Census
  - Remote Work Force
    - Financial Impact

- **Greatest Achievements**
  - Communication
  - Education
    - Research
    - Publications
  - Flexibility
  - Technology
Partners HealthCare at Home: Strategies for Managing Through a Pandemic

Keren Diamond, Sr. VP & COO
September 15, 2020
Partners HealthCare at Home

- Part of Mass General Brigham
- Serves the eastern third of Massachusetts
- Home Health Average Daily Census of 4600+
- Annual revenues of $110 million
- 850+ employees

Served approximately 800 COVID positive and 700 COVID risk patients since March 2020. Average Daily Census was approximately 500 at peak.
Our Commitment

During this unprecedented time, Partners HealthCare at Home never paused, slowed down, or stopped patient care or interrupted the continuity of operations for any of our programs.
Upholding Our Commitment

- Provision of PPE

- Implemented many new strategies to reduce patient and staff exposure

- Our clinicians used creativity and perseverance in providing care to patients that reduced their fears.
  - One of our Occupational Therapists provided care by standing outside a glass enclosed sun room to visually assess a patient’s level of function while using cell phones to communicate with the patient and family who were terrified to have anyone enter their home.
  - Before we had masks with clear panels that allowed patients to see the wearer's mouth through the mask, one of our Speech and Language Therapists designed and made such a mask to help her perform therapy with patients.

- Collaborations with Boston Hope, the 1000 bed field hospital set up in a convention center to care for COVID patients.

- Many patients, physicians, and others expressed gratitude for the help we provided. One example regarding the efforts of our Maternal and Pediatric team: “Thank you all and especially the home nurses for continuing to follow our fragile babies at home in a very uncertain situation.”
Recovery and Looking Ahead

• In April our admission volume dropped 40%.
• By the end of June we were receiving our pre-COVID volume of referrals and we ended July over budget for admissions. A much faster recovery than we expected.
• During this period
  • We lost some clinical staff for a variety of reasons.
  • Aggressive hiring since June.
  • Doubled our Orientation capacity starting in August.
  • Encouraged our clinicians to take well deserved time off over the summer.
  • Capacity challenges are continuing which limit our admission volume.
• In the next surge our main goal is to be as prepared as possible to care for anticipated higher volume while also accepting and caring for COVID patients. Adequate staffing will be key.
The Population Served in Assisted Living in Massachusetts

As of 2018, there were 257 residences and approx. 17,543 units.

### ALR Report Residences vs. All Reporting ALRs in MA

<table>
<thead>
<tr>
<th>Ownership Status</th>
<th>ALR Report Residences</th>
<th>All Reporting ALRs in MA</th>
</tr>
</thead>
<tbody>
<tr>
<td>For Profit</td>
<td>209 81.3%</td>
<td>4,511 25.7%</td>
</tr>
<tr>
<td>Not for Profit</td>
<td>48 18.7%</td>
<td>13,032 74.3%</td>
</tr>
<tr>
<td>Total ALRs</td>
<td>257 13.7%</td>
<td>17,543 100.0%</td>
</tr>
</tbody>
</table>

### ALR Report Representing

- **# of Special Care Units**: 749 39.9%
- **# of Traditional Units**: 1,129 60.1%
- **Total Units**: 1,878 100.0%

### Special Care Residences

- **Total # of ALRs with 1 SCR**: 179 84.4%
- **Total # of ALRs with 2 SCRs**: 35 16.5%
- **Total # of ALRs with 3 SCRs**: 13 6.1%
- **Total # of ALRs with 4 SCRs**: 4 1.9%
- **Total # of SCRs**: 212 100.0%

Source:
Executive Office of Elder Affairs Assisted Living Residence Certification Program Resident Aggregate Information Annual Report 2018
Assisted Living Residences are Serving an Older and Higher Acuity Population

- 63% of residents are 85+ years old
- 45.9% of residents have Alzheimer’s or related dementia

Source:
Executive Office of Elder Affairs Assisted Living Residence Certification Program Resident Aggregate Information Annual Report 2018
Pandemic Response Timeline

• February – Early-March: Enhanced infection control, screening visitors

• March: Visitor restrictions

• April: Skilled services & Workforce relief
Educating The Continuum About The Benefits And Limitations Of The Assisted Living Model For Hospital Discharge

• Collaborating with MHA Post-Acute Care Transitions Workgroup

• Hospital discharge guidelines - memory care vs traditional, self-isolation instructions, ability of residence to provide the care needed or for it to be arranged, status of other positive cases in the residence
Educating Assisted Living Providers on COVID-19 Response Best Practices

- On September 9th, Mass-ALA, in collaboration with the Betsy Lehman Center for Patient Safety, presented a webinar on Infection Control and Safety in Assisted Living. There were 300+ attendees who participated.
  Topics included were:
  - Best practices in infection control
  - When and how to properly use personal protective equipment (PPE)
  - Preventing the spread of communicable illness
  - Remaining safe while providing care to residents
Educating Assisted Living Providers on COVID-19 Response Best Practices (continued)

- Mass-ALA’s Annual Conference, “Navigating Assisted Living in an Uncertain Time”, will be held as a two-day virtual event on Wednesday, September 30th and Thursday, October 1st.
  
  Topics to be covered include:
  - Planning for communicable disease in the future
  - Impact of pandemic on operations in assisted living/memory care
  - Lessons learned from COVID-19 and how to apply those to future issues
  - Making the most of community life during a pandemic/state of emergency
  - Universal precautions/infection control/proper use of PPE in assisted living
  - Screening and moving in new residents during a pandemic
  - Maintaining meaningful engagement while social distancing
Navigating Care Transitions During the COVID-19 Surge in Massachusetts

Christine McMichael
Executive Director
Hospice & Palliative Care Federation of Massachusetts
“You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die peacefully, but also to live until you die.”

-Dame Cicely Saunders, founder of the modern hospice movement
Hospice

Considered the model for quality compassionate care for many people facing a life-limiting illness, hospice provides expert medical care, pain management, and emotional and spiritual support expressly tailored to the patient’s needs and wishes. This support extends to the family as well.

Hospice focuses on caring, not curing. In most cases, care is provided in the patient’s home but may also be provided in freestanding hospice facilities, hospice and nursing homes and other long-term care facilities. Hospice services are available to patients with any terminal illness or of any age, religion or race.
“How people die remains in the memory of those who live on”.

- Dame Cicely Saunders
Collaboration Across the Care Continuum – As An Essential Service, Hospice Intersects With Each Sector of the Care Continuum.

Advance Care Conversations & Planning – Promoting Everyday Wellness, Managing Health Needs & Chronic Illness, Living With Serious Illness, Especially During a Public Health Emergency
“Suffering is only intolerable when nobody cares. One continually sees ….. care is made infinitely easier by faith in someone who has shown kindness and sympathy.” - Dame Cicely Saunders
Questions?
Spread the Science, NOT the Virus
Clinical Lessons from the Northeast Surge Series

Next Week: Behavioral Health & Substance Use Disorder
September 22 at 4:00 pm ET | Register Here

Presented by the Foundation for Healthy Communities, the community health and quality partner of the New Hampshire Hospital Association

Featuring:
• Nancy Fennell, MA, Foundation for Healthy Communities
• Bianca Ciuffredo, LCMHC, Mental Health Center for Greater Manchester
• Dan Andrus, MS, MPA, Foundation for Healthy Communities
• Seddon Savage, MD, Dartmouth-Hitchcock Medical Center
• Anne Diefendorf, MS, RDN, LD, Foundation for Healthy Communities

Weekly Webinar recordings can be found at Jefferson Digital Commons
https://jdc.jefferson.edu/covid-19-ssnv

For more information or questions visit our website or contact Mary.R.Cooper@Jefferson.edu.
Population Health & Complexity Science
A Leadership Primer

September 16, 2020 | 12:00-1:00 pm ET

Register Now!

Doron Schneider, MD, FACP
Vice President
Population Health Services
Tandigm Health

Mary Reich Cooper, MD, JD
Program Director, Healthcare Quality & Safety and Operational Excellence
Jefferson College of Population Health

Visit our Website for more detailed information and upcoming PopTalks

Contact Vivian.Castillo@Jefferson.edu with any questions.
Thank You!