Region 1 Interagency Task Force
for the
Prevention of COVID-19
in the Long-Term Care Environment

Additional Conclusions and Recommendations

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Since early March 2020, the impacts of COVID-19 on the residents of long-term care facilities have been devastating. As of the date of preparation of this report, the end of October 2020, almost 60,000 residents in 15,000 Medicare-certified long-term care facilities have died of COVID-19. In May 2020, the Region 1 Interagency Task Force for the Prevention of COVID-19 in the Long-Term Care Environment (“Task Force”) convened, stemming from the guidance and support of the FEMA Region 1 Federal Coordinating Officer, CAPT Russ Webster, USCG (ret.), and the ASPR Region 1 Federal Health Coordinating Officer, Gary Kleinman. The Task Force, comprising subject-matter experts from a wide range of fields, was instrumental in developing an initial set of noteworthy Conclusions and Recommendations to specifically combat the spread and mitigate the impacts of COVID-19 to long-term care residents, published in ASPR TRACIE on September 9, 2020. Task Force Lead Commander Kelly Valente, Pharm.D., M.S., of the United States Public Health Service and Deputy Lead Ms. Annemarie Marchi, R.N., M.S.N., of the National Disaster Medical System, lead the Task Force to strive for maximum mitigation of negative outcomes of the pandemic. This set of Additional Conclusions and Recommendations explores further topics, not addressed in the initial set, that continue to affect this population, with updated context to reflect the current landscape of the pandemic. Furthermore, this document extends the topics to include non-Medicare-funded congregate care facilities such as assisted living facilities and group homes. While the initial set of Conclusions and Recommendations separated the recommendations according to what approaches local, state, regional, or national entities could consider and take, this edition separates the recommendations by subject matter. We aim to make positive change and serve as a model for our stakeholders, including state and national leadership.

Kelly Valente, Pharm.D., M.S.
Commander, United States Public Health Service
Lead, Region 1 Interagency Task Force

November 25, 2020
INTRODUCTION

Mission Statement
Under the auspices of FEMA and ASPR regional leadership, The Region 1 Interagency Task Force for the Prevention of COVID-19 in the Long-Term Care Environment (“Task Force”) is a team of federal representatives from various emergency and public health agencies that collaborate to identify and foster partnerships to provide technical guidance and support to reduce the incidence of coronavirus disease 2019 (COVID-19) in long-term care facilities.

Background
Since January 20, 2020, when the first case was identified in the U.S., over 9 million Americans have contracted severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), the virus that causes COVID-19, and the numbers continue to grow with no marketed vaccine or cure to date. As of October 2020, 30 percent of COVID-19-related fatalities have occurred in a long-term care facility. Although, the spread of COVID-19 can be reduced through active social distancing, personal protective equipment use, and hygiene maintenance, this can be challenging in congregate living situations such as long-term care and assisted living facilities and group homes. The Task Force strives to continue to identify gaps, coordinate activities, and offer solutions to enable stronger mitigation strategies to these vulnerable populations in New England.

Objectives
- Encourage interagency information sharing among federal partners.
- Encourage state – federal information sharing
- Utilize shared information and data for action item development
- Identify accessible resources that can be made available for such action items

Definitions
The following are definitions of terms as utilized by the Task Force:

Long-term care facility: a type of facility that provides a variety of services, both medical and personal care, to people who are unable to live independently; includes nursing homes, skilled nursing facilities, assisted living facilities, and group homes.

Assisted living facility: Type of living arrangement or accommodation in which personal care services are available to residents as needed; residents live on their own in the facility.

Group home: A small supervised residential home for people who need care, support, or supervision and can participate together in daily tasks.
THE PROCESS

Setting the Priorities

On September 14, 2020, the Task Force recalibrated and set the following additional priorities to develop new recommendations:

- Explore the correlation of pandemic related isolation and mental health exacerbations.
- Prepare for next steps in vaccine development and release.
- Support influenza vaccine availability, access and unintended consequences.
- Review the current issues with long-term care facility infrastructure.

The LEAN Model

This Task Force used the LEAN model as it approached each topic. The LEAN problem-solving method is a practical way for groups to identify the root causes of problems and propose fixes for those problems using a no-bias approach. Topics were dissected using the LEAN methodology on breaking down the problem, understanding the work to done, and the problem’s point of occurrence. Then, through asking a series of “whys,” the root cause of the problem can be identified for corrective action. With a wealth of subject-matter experts available for each of the discussions, thoughtful analysis of each topic developed into possible recommendations. This analysis went into determining if recommendations were practical, actionable, and ultimately beneficial to assisting facilities in preventing the spread of COVID-19 in the long-term care environment. In almost all instances, these recommendations were fruitful for a larger reform of the long-term care environment and not just to mitigate the spread of COVID-19 to this at-risk population.

An Open Discussion and Recommendation Formulation

From September 21, 2020 to October 14, 2020 the Task Force convened to review and discuss the items on the priority list. The Task Force decided to primarily focus on the impact of social isolation on the overall health of a long-term care resident, how facilities should plan for the federal COVID-19 response for vaccines/therapeutics, how facilities can improve their infrastructure, resources for the long-term care facility populations, and a potential repository for information related to the Task Force’s work.
RECOMMENDATIONS

Vaccine Planning

When information becomes available for a COVID-19 vaccine release and distribution, long-term care facilities, inclusive of nursing homes, skilled nursing facilities, assisted living facilities, and group homes, should have readily executable plans in place for mass vaccinations that include having the appropriate staff and/or equipment, training, storage, logistics, documentation, and actionable plans for contingencies.

Social Isolation

Long-term care facilities are encouraged to recognize the increasing stress of pandemic-induced social isolation on their residents and to train staff (a) to recognize the signs of loneliness, (b) to assess the residents’ need for social connections, and (c) to coordinate with appropriate mental health services to implement strategies to support residents. Facilities are encouraged to come up with novel solutions to boost resident social interactions while maintaining infection-control measures. State and local regulators are encouraged to consider increasing funding and guidance for these facilities.

Physical Environment

Federal, state, and local partners are encouraged to incentivize grants for healthcare delivery innovation models that meets quality standards and CDC recommendations for infection-control practices in the long-term care setting.

Assisted Living Facilities

States should take inventory of their activities for individuals in these living arrangements and make this inventory public. The Task Force recommends (a) a coordinated effort throughout the state in regard to infection control, and (b) that all assisted living facilities and group homes report cases and deaths to their respective departments of health and annotate dwelling type in reports.

Information and Resources

The Task Force recommends that the Secretary of Health and Human Services form a clearinghouse of available resources for stakeholders in the long-term care and residential facility communities. This clearinghouse would include information regarding, financial considerations, education, training, lessons learned, regulations, and other pertinent topics. The Task Force will work with the ASPR TRACIE team to establish guidelines for information display and dissemination and then secure oversight of this clearinghouse for content.

Endnotes:

2) CDC COVID Data Tracker (URL: https://covid.cdc.gov/covid-data-tracker/#cases_casesinlast7days, accessed November 4, 2020)
3) COVID-19 Nursing Home Dashboard (URL: https://www.ahcancal.org/Data-and-Research/Pages/default.aspx)
# APPENDIX A - THE THINK TANK TEAM

## US Department of Health and Human Services

**Gary Kleinman** - Federal Health Coordinating Official  
Regional administrator, ASPR Region 1

**Mark Libby, R.N.** - Deputy Health Coordinating Official  
Senior Regional Emergency Coordinator, ASPR Region 1

**Kenneth Cliffer, PhD** – Senior/Lead Planner, Healthcare Resilience Working Group  
Senior Program Analyst, ASPR Planning Division, Strategic Planning Branch

**CDR Kelly Valente, PharmD, MS** - ASPR Liaison Officer for Region I / CMS Regional Pharmacist for Medicare Drug and Health Plans Operations

**Annemarie Marchi, RN, MSN, PHN** – ASPR Region 1 ASPR Lead Vaccination Planning Team

## US Department of Homeland Security

**Jamie Clem** - Deputy Operations Section Chief  
FEMA Region 1 RRCC Training and Exercise Coordinator, Response Division

**Nate Spada** - Emergency Services Branch Director  
Regional Continuity Manager

**Kate McCarthy-Barnett, EdD, CEM** - Disability Integration Advisor  
Region 1 Disability Integration Advisor

**Eva Cante** – Deputy Planning Section Chief  
FEMA Region 1 Geospatial Coordinator

## US Department of Health and Human Services

**LCDR Kara Jacobs Slifka, MD, MPH** - LTC Outbreak SME  
Medical Officer with LTC team in CDC Division of Healthcare Quality Promotion (within National Center for Emerging Zoonotic and Infectious Diseases)

**Nimalie Stone, M.D., M.S.** - LTC Infection Control SME  
LTC Team Lead, Prevention and Response – Division of Healthcare Quality Promotion

## US Department of Veterans Affairs

**Candace Christenson** - Region 1 VHA LNO  
VHA Office of Emergency Management Area Emergency Manager

## US Department of Health and Human Services

**Clifford (Cliff) Jackim, RPh** - Quality Assurance Resource (R1 CMS)  
CMS Pharmacist Surveyor (health systems regulator)

**LCDR Jackeline Rodriguez, MPH, MS, RN-BC** – LTC Survey SME (R1 CMS)  
CMS Nurse Surveyor (health systems regulator)
Other Contributors

Rita Ejiofor - Sixth-Year Pharmacy Student (Research Assistant to TF Leaders)  
University of Connecticut

Krishna Patel - Sixth year Pharmacy Student (Research Assistant to TF Leaders)  
University of Connecticut

David Cruickshank, M.S. - Region 1 ASPR ESF-8 Desk  
National Disaster Medical System Safety/Security/Planning

CDR Harvey Ball - U.S. Department of Health and Human Services/  
Assistant Secretary for Preparedness and Response

LTC Shaun McBain - U.S. Department of Defense/National Guard Bureau

Lauren McLane, CEM - Future Operations Advisor  
FEMA Region 1 Planning Branch Chief
APPENDIX B – Discussion Notes:

Discussion on Vaccine Planning

- Long-term care facilities should start thinking of prioritizing who will receive the COVID-19 vaccine first. Once the vaccine is available, the tracking of vaccine administration should be similar to flu and pneumonia pursuant to government regulation. Long-term care facilities should to continue to test residents for COVID-19 based on the immunities developed and report to the Vaccine Adverse Effect Reporting System (VAERS) if any side effects should occur. There should also be a system in place for staff and/or residents who refuse receiving vaccine.
- Long-term facilities should plan for residents and staff that will be contraindicated for the vaccine.
- Long-term care facilities should have written plans for vaccine procurement, receipt, storage and dissemination that work for their facilities.
- Regulators should assist in creating tools to aid long-term care facilities in their vaccine planning.
- Although it is unknown at this time, federal agencies may assist in coordination and distribution of a vaccine donation.
- Support public service announcements that Medicare and Medicaid beneficiaries will not have a cost share for this vaccine.

Discussion on Social Isolation

- Long-term care facilities and state regulatory agencies should coordinate on ensuring residents get assessed for pandemic related mental health exacerbations. These assessments should be frequent and healthcare approaches should occur catered to the result of these assessments.
- Long-term care facility staff training to recognize subject signs of loneliness and mental health exacerbations. The staff should also acknowledge that residents with cognitive disabilities may have negative outcome that is not easily apparent.
- Long-term care facilities, along with state and federal regulatory agencies should acknowledge that social isolation is an enormous factor in the stress residents and staff are experiencing during the pandemic. This pandemic has caused a disruption in routines and this can also contribute to negative outcomes.
- Long-term care facilities should look into utilizing volunteers or staff to broaden the use of video technology for virtual resident visits with family and friends.

Discussion on Physical Environment

- Federal agencies should compile a clearinghouse of resources including funding resources related to funding for COVID-19-associated activities in long-term care and other residential facilities.
• Federal and state agencies should incentivize facilities to improve their physical plant to lower the risk of infections that still meet physical accessibility legal requirements.

Discussion on Assisted Living Facilities and Group Homes

• Federal and state agencies should acknowledge the different needs that an assisted living facility, a group home and a nursing home require and support these needs as much as they can within their authority. Federal agencies should support states and associations to boost awareness and acknowledgement of the need of and develop relationships with assisted living facilities and group homes and their residents.
• Federal, state and local agencies should encourage a unified and aligned message with regulations of these facilities.
• Federal, state and local agencies should support public and private community agencies that can assist with engaging residents of assisted living facilities.
• Federal agencies should assist with disseminating COVID-19 pandemic resources including funding to the assisted living facilities.
• Assisted living facilities should look at lessons learned from the long-term care pandemic related negative outcomes.
APPENDIX C - Resources

External Links:
- Nursing Homes and Covid-19 (6/2020)
- Guidance for Relaxing Communal Dining and Activity Restrictions for Assisted Living Residences (6/18/20)
- Communal Dining Guidance - AHCA/NCAL (9/25/20)
- ACL – Aging, Independence, and Disability Program Data Portal (2020)
- AHRQ ECHO National Nursing Home COVID-19 Action Network (10/2020)
- COVID-19 Resources for Nursing Homes & Long-Term Care (Updated regularly)
- Coronavirus (COVID-19) Advice for the Health and Aged Care Sector (Australian Government - 9/30/20)

Centers for Disease Control Guidance
- Preparing for COVID-19 in Nursing Homes – CDC.gov (6/25/20)
  - Performing facility-wide testing in nursing homes
  - Considerations for Memory Care units in LTCFs
  - Key strategies for LTCFs
  - Responding to COVID-19 in nursing homes
  - Testing for COVID-19 in nursing homes (10/16/20)
  - Infection prevention and control assessment tool
- COVID-19 Preparedness Checklist for Nursing Homes and other Long-Term Care Settings
- Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19 (05/2020)
- Strategies to Optimize the Supply of PPE and Equipment

Centers for Medicare and Medicaid Services Guidance
- Long Term Care Infection Control Self-Assessment Worksheet (8/2020)
- COVID19 Focused Survey Tool (8/26/2020)
- Current Emergencies Page
  - Nursing Home Reopening Recommendation FAQ (5/18/20)
  - Toolkit for States to Mitigate COVID-19 in Nursing Homes (10/2020)
  - Guidance on Notification Requirements of Confirmed and Suspected COVID-19 Cases Among Nursing Home Residents and Staff (5/6/20)
  - COVID-19 LTCF Transfer Scenarios (4/13/20)
  - COVID-19 Long-Term Care Facility Guidance (4/2/20)
  - Guidance for Infection Control and Prevention of COVID-19 in Nursing Homes (REVISED) – (9/28/20)
- Guidance for use of certain industrial respirators by health care personnel (3/10/20)
APPENDIX D - Articles

External Links
- For 2 Types of Senior Living Homes Facing Coronavirus, a Striking Disparity in Federal Support (6/29/2020)
- HHS announces $20 billion in new COVID-19 relief funding; Assisted living eligible (10/2/20)
- Limits and Opportunities of Federal Reporting on COVID-19 in Nursing Facilities (6/15/20)
- Governor Lamont Orders Independent Analysis of COVID-19 in Connecticut’s Nursing Homes and Assisted Living Facilities (6/8/2020)
- People with Developmental Disabilities More Likely To Die From COVID-19 (6/8/20)
- COVID-19 Kills Hundreds in Group Homes for Developmentally Disabled in N.Y. (6/25/20)

Research
- COVID-19 Infections and Deaths Among CT Nursing Home Residents: Facility Correlates (6/18/2020)
- Universal and Serial Laboratory Testing for SARS-CoV-2 at a Long-Term Care Skilled Nursing Facility for Veterans – Los Angeles, California, 2020 – CDC.gov (5/28/2020)