



LTC 100 Coronavirus Task Force Executive Summary – Call #5

From COVID-Safe to COVID-Specialty: SNFs Out in Front

April 13, 2020

Through weekly **LTC 100 Coronavirus Task Force** conference calls with top experts and providers on the front lines, we aim to provide you with **best practices in crisis management** and **valuable business-scenario planning**. This week focused on SNFs becoming COVID specialty centers to decant hospitals.

Featured Contributors

Stephanie Handelson, CEO, Greystone Health Network

Donna Kelsey, CEO, American Senior Communities

Jim Klausman, CEO, Midwest Health

Joe Steier, CEO, Signature Healthcare

Lynn Siedenstrang, VP Continuum of Care, MultiCare Health System

Eric Tanner, CEO, OnPointe

Jerry Wilborn, CEO, GAPS Health

Overview

SNF executives from across the nation shared best practices for battling CV19 cases, including training, testing, cohorting and the prospect of COVID specialty programs to decant hospitals. Despite early challenges in staff trepidation and PPE availability, executives say their initial fears are now mostly allayed. Donna Kelsey (ASC) said it was “very scary” at the start not knowing where the infection would spread, but now reports having “much better protocols” in place.

Staffing

A top priority among SNFs is addressing their strained workforce. **Stephanie Handelson** (Greystone) described an employee screening protocol that is mitigating spread within facilities and maintaining proper staffing. It entails oxygen-level and temperature readings before, during and after shifts, as well as strict protocols for donning and doffing work and street clothes. **Joe Steier** (Signature) is addressing staff morale with free employee meals, an employee food pantry, daycare subsidy, staffing pools and compensation. **Lynn Siedenstrang** (MultiCare) stated that partner SNFs have begun to employ travel agencies to supplement staff shortages.

Cohorting Residents

Donna Kelsey (ASC) described their containment practices, including a massive move to create two COVID-free units. Staff on these units were tested first and, if negative, remained on the COVID-free unit. **Eric Tanner** (OnPointe) employs a process that every resident entering the facility is presumed, and handled, as if COVID positive for 14 days. These residents are placed in private rooms and staff cares for them in full PPE.



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Testing & PPE

Access to testing still varies widely by location. Some SNFs report adequate testing, while others face challenges. **Eric Tanner** (OnPointe) expressed that perhaps one of his centers has the layout, medical capability, and leadership to potentially become a COVID specialty center, however barriers such as not being able to get guarantees on PPE and testing prevent this from happening. **Donna Kelsey** (ASC) tested early and often, which led to the discovery of a large number of asymptomatic residents in one Indianapolis facility. Of 101 residents tested, 66 were positive, yet only 19 showed any symptoms. **Jim Klausman** (Midwest Health) feels assured about his testing capabilities, and is utilizing a lab in Houston to source kits. **Dr. Jerry Wilborn** (GAPS Health) expressed how surveilling benefits both staff and residents, and touted the importance of testing so that operators have the knowledge to act accordingly until recommendations become guidelines.

Health System Support

Health system and SNF relations have been strained during the pandemic. **Lynn Siedenstrang** (MultiCare) described the two-phase approach they've adopted in working with SNFs. The initial phase consists of bringing in epidemiologists and public health experts to educate staff on the risks existing within their facilities and to help prepare them for a surge. They survey the facilities regarding their ability to obtain testing kits and PPE, and assist in filling in the gaps. The second surge phase consists of six volunteer providers, two surgeons on furlough due to canceled elective surgeries, two board certified hospice and palliative care doctors, and nurses going in to provide support. MultiCare is strongly encouraging "care in place" within SNFs when appropriate as an ER/hospital visit is very dangerous for this vulnerable population.

■ [LTC 100 COVID-19 Business Planning & Crisis Management Resources](#)

To receive an invitation to participate in task force calls, please contact:
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