

# Welcome to ECHO COVID-19 Action Network Continuation Phase: Session 3

**AHRQ ECHO National Nursing  
Home COVID-19 Action Network**





**Questions? Email:**  
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### **Accreditation Statement**

In support of improving patient care, Stanford Medicine is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

### **Credit Designation**

#### **American Medical Association (AMA)**

Stanford Medicine designates this other activity for a maximum of *27 AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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### **Disclosure**

There are **no relevant financial relationships** with ACCME-defined commercial interests for anyone who was in control of the content of this activity.

***CME credits are processed by the end of the series. Instructions on how to view your credits will be provided.***

# Attendance

- **Claim Attendance.** Check the chat for today's link.
- **Missed a Session?** Watch the recording and claim participation. Monthly attendance reports will be provided to you.

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## Cohort 1 Attendance

This attendance form is for participants of the Cohort 1 (Alameda, Santa Clara, Contra Costa) ECHO session hosted by Stanford Center for Continuing Medical Education.

**CLAIM ATTENDANCE**

First Name \*

Last Name \*

Which session are you marking as attended? \*

Participated in Live Session or Watched Recording? \*

E-mail Address \*  
Please make sure that your email address is spelled correctly. We will email you any new information to you.



**ECHO Nursing Home  
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**Session 11 Recording**



# Respect Private Health Information

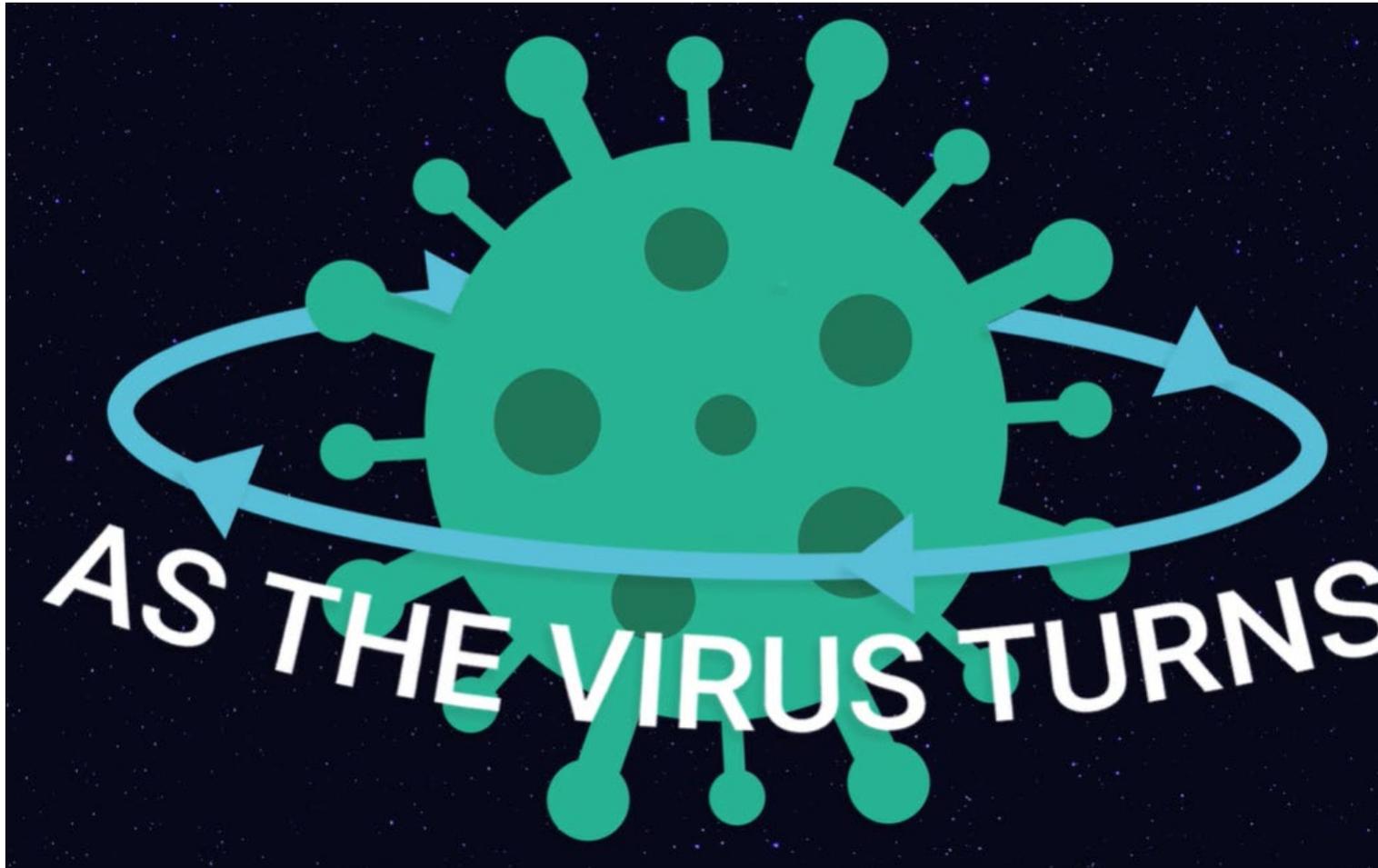
- To protect patient privacy, please only display or say information that doesn't identify a patient or that cannot be linked to a patient.
  - Names
  - Locations
  - Dates
  - Employment
  - Other Common Identifiers
- 
- For educational and quality improvement purposes, we will be recording this ECHO Session. By participating in this ECHO session you are consenting to be recorded – we appreciate and value your participation.

# Opening Poll Question

**What did you do to improve your facility's practices in the last week, if anything? (Check all that apply)**

- Identified a change opportunity but did not act on it
- Worked on a change opportunity myself
- Worked on a change opportunity with a team
- Made a small change that will help my facility
- Made a big change that will help my facility
- Have not identified or worked on a change opportunity yet

# As The Virus Turns: Know What's Outside Your Door



# California COVID-19 Weekly Data Update

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# California State Profile Report as of April 30, 2021

<https://healthdata.gov/Community/COVID-19-State-Profile-Report-California/7pid-y24r>

	STATE	STATE, % CHANGE FROM PREVIOUS WEEK	FEMA/HHS REGION	UNITED STATES
NEW COVID-19 CASES (RATE PER 100,000)	11,397 (29)	-29%	19,859 (39)	353,148 (106)
VIRAL (RT-PCR) LAB TEST POSITIVITY RATE	1.4%	+0.0%*	1.8%	4.4%
TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)	1,214,968** (3,075**)	+1%**	1,407,196** (2,732**)	8,514,470** (2,566**)
COVID-19 DEATHS (RATE PER 100,000)	370 (0.9)	-24%	520 (1.0)	4,447 (1.3)
SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	1%†	-2%*	1%	4%
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	2%†	-3%*	2%	12%
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	0%†	-1%*	0%	1%
CONFIRMED AND SUSPECTED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	4,591 (8)	-5% (-6%)	6,831 (8)	69,954 (10)
CONFIRMED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	1,706 (3)	+1% (+0%)	2,554 (3)	34,744 (5)
NUMBER OF HOSPITALS WITH SUPPLY SHORTAGES (PERCENT)	12 (3%)	+33%	20 (4%)	334 (6%)
NUMBER OF HOSPITALS WITH STAFF SHORTAGES (PERCENT)	59 (16%)	-11%	81 (15%)	618 (12%)

## California COVID-19 Vaccine Summary

RECEIVED AT LEAST ONE DOSE			
PEOPLE	PCT OF POP	PEOPLE 65+	PCT OF 65+ POP
19,178,415	48.5%	5,092,875	87.2%

FULLY VACCINATED			
PEOPLE	PCT OF POP	PEOPLE 65+	PCT OF 65+ POP
11,945,441	30.2%	3,870,398	66.3%

# California Variants as of May 5, 2021

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-Variants.aspx>

## Known Variants of Concern in California

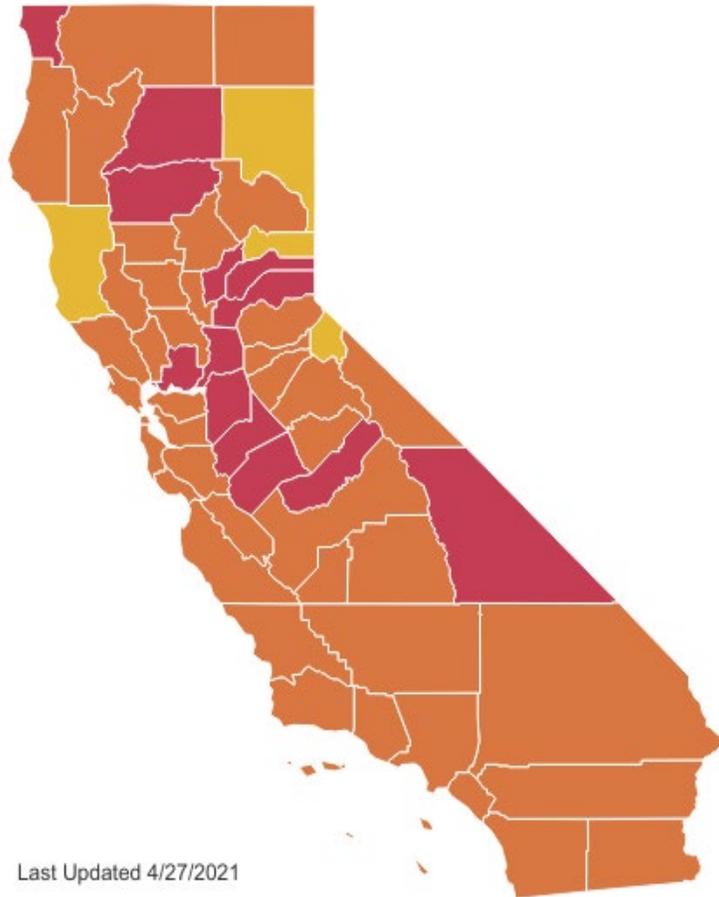
Variant	Number of Cases Caused by Variant
B.1.1.7	4,971
B.1.351	67
P.1	524
B.1.427	6,275
B.1.429	11,844

## Known Variants of Interest in California

Variant	Number of Cases Caused by Variant
B.1.526	281
B.1.525	27
P.2	61

# California's County Risk Levels

<https://covid19.ca.gov/safer-economy/#tier-assignments>



## COUNTY RISK LEVELS

	Counties	Population	
Substantial	12	4,654,389	11.6%
Moderate	39	24,188,844	60.3%
Minimal	7	11,285,927	28.1%

- **4.2** New COVID positive cases per day per 100K
- **1.3%** positivity rate (7-day average)
- **32.8%** ICU availability

WIDESPREAD

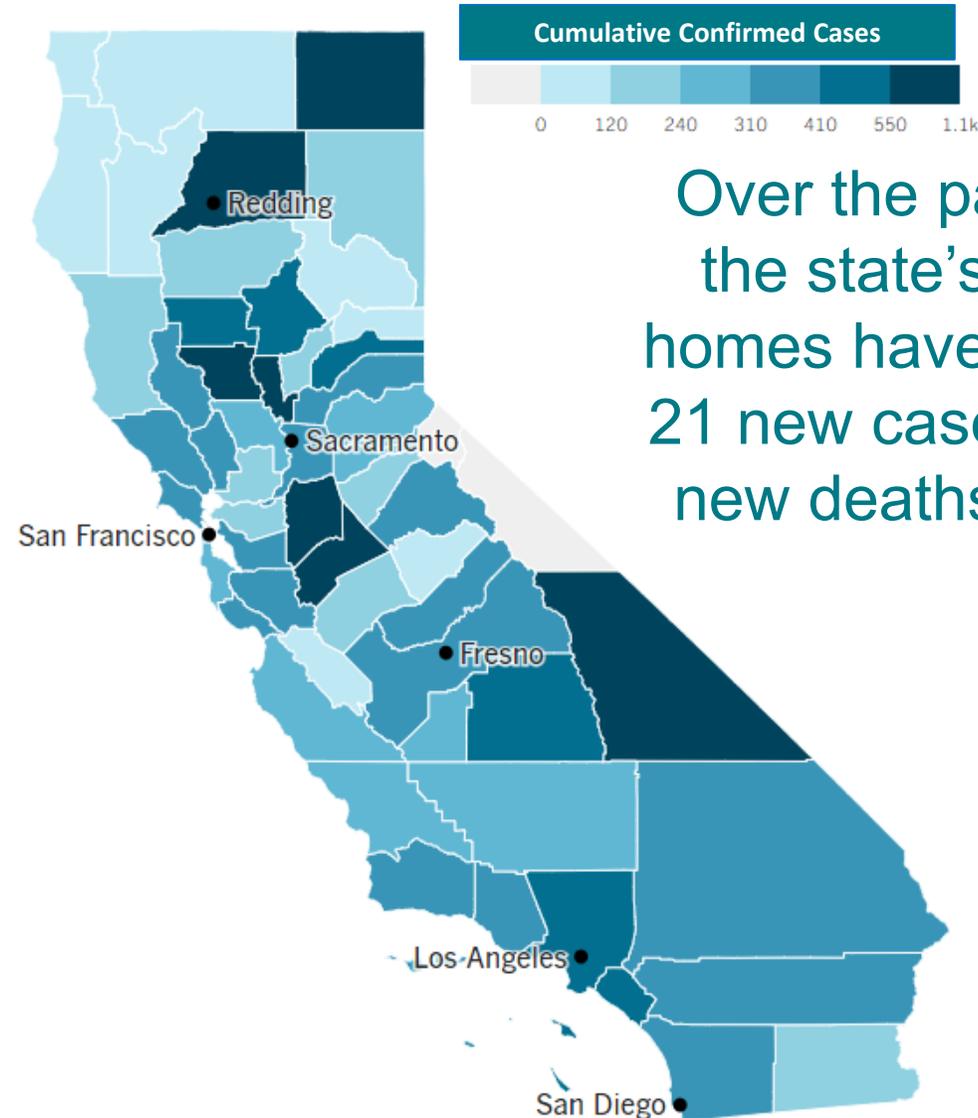
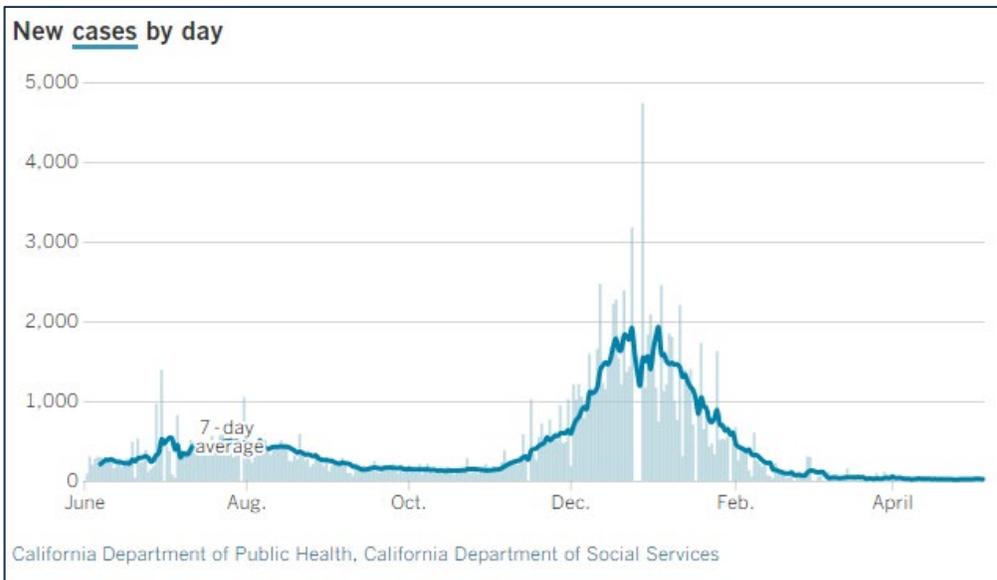
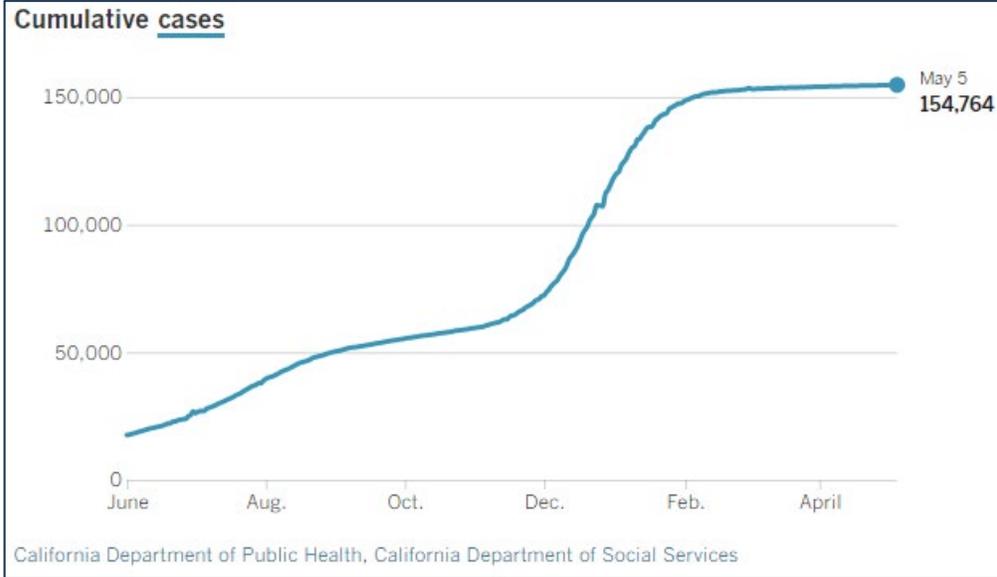
SUBSTANTIAL

MODERATE

MINIMAL

# COVID-19 Cases in California Nursing Homes

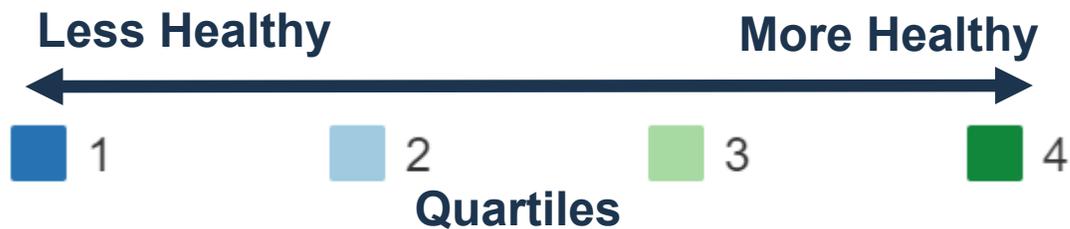
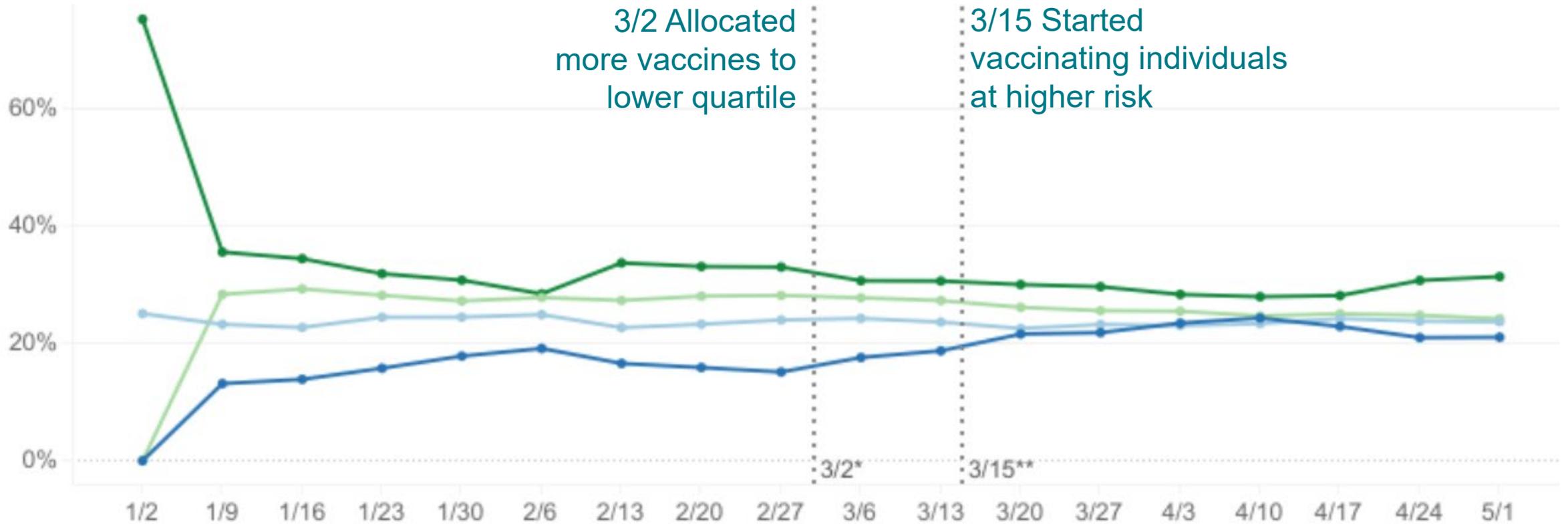
<https://www.latimes.com/projects/california-coronavirus-cases-tracking-outbreak/nursing-homes/>



Over the past week, the state's nursing homes have averaged 21 new cases and 0.6 new deaths per day.

# California Vaccination Progress to Ensure Equity

<https://covid19.ca.gov/vaccination-progress-data/#overview>



	Quartile 1 Less Healthy	Quartile 4 More Healthy
Not vaccinated	50.4%	25.8%
Partially vaccinated	16.7%	22.3%
Fully vaccinated	32.8%	51.9%

# COVID-19 Breakthrough Cases

<https://covid19.ca.gov/vaccination-progress-data/#overview>

## ■ A small percentage of fully vaccinated will develop COVID-19

- Vaccines are not 100% protective
- It takes 2 weeks for the body to build protection after vaccine
- Some variants might cause illness in some people after vaccine

## Identifying COVID-19 Breakthrough

- Monitor reported cases for clustering
- Consider specific variant causing infection in community
- Assess resident/patient risk factors; age, gender, time since vaccination
- Consider vaccine administered
- Report to local DPH

## Vaccine Breakthrough Infections Reported to CDC

Females	5,827 (63%)
People aged $\geq$ 60 years	4,245 (45%)
Asymptomatic infections	2,525 (27%)
Hospitalizations*	835 (9%)
Deaths+	132 (1%)

# Maintaining Staff Well-Being

<https://www.kff.org/report-section/kff-the-washington-post-frontline-health-care-workers-survey-toll-of-the-pandemic/>

Percent of frontline health care workers who say they feel the following about going to work these days:

	Hopeful	Optimistic	Motivated	Burned out	Anxious	Angry
<b>Total frontline health care workers</b>	76%	67%	62%	55%	49%	21%
<b>Where they work</b>						
Hospitals	72%	66%	63%	55%	50%	26%
Nursing homes/Assisted care facilities	71%	66%	60%	56%	47%	21%
Doctor's office/Outpatient clinic	76%	67%	62%	54%	46%	20%
Patient in-home care	80%	70%	69%	50%	51%	13%
<b>Worked directly with COVID-19 patients</b>						
Direct care	75%	65%	61%	58%	49%	26%
Had a patient die as a result of COVID-19	75%	66%	61%	62%	52%	32%
No direct care	78%	70%	66%	50%	48%	14%
<b>Tested positive for COVID-19</b>						
They tested positive	74%	60%	62%	55%	48%	29%
Someone in household tested positive	80%	66%	63%	58%	51%	19%
No COVID-19 in household	76%	69%	63%	54%	49%	20%

NOTE: See topline for full question wording.

SOURCE: KFF/Washington Post Frontline Health Care Workers Survey (Feb. 11- March 7, 2021). • PNG

# Staff Well-Being Depends on Trauma-Informed Principles

<https://www.youtube.com/watch?v=hlonFuhPURE>

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# Mindfulness Moment

<https://www.youtube.com/watch?v=IdFD-L-Csz0>

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# Quality Improvement Corner: Performance Improvement Projects

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# Improvement in 5 Steps

1. Get curious about the nature of the problem.
  - Observe it
  - Talk to staff (huddles!)
  - Map/diagram/brainstorm
  - Measure it
2. Set a goal for what you want to achieve.
3. Decide what you want to try.
4. Test/try it on a small scale...1 day, 1 resident.
5. Measure your impact in ways that make sense.

# COVID-19: Post-Vaccination PIP

## Step 1 – Get curious...Can we find out:

- Where are the most pressing challenges/questions from staff and residents?
- Where is our system the weakest?
- What are we most worried about?
- What tools can we use to identify weaknesses in our current system?
- Do we have a reliable process for our question?

# COVID-19 Post-Vaccination PIP

## Step 2: Set the goal for what you want to achieve

- How good do you want to be, by when?

## Step 3: What can we try that may lead to an improvement?

- Have you identified opportunities for improvement?
- Where have you seen this process work well?
- Do your colleagues (perhaps those on this call) have suggestions for you?
- Do staff/residents/family members have change ideas to try?

# COVID-19 Post-Vaccination PIP

## Step 4: Pick something to try

- Create a plan for your first test of change
- Test at the level of 1:
  - One providers, one resident, one family member, one day, etc.

## Step 5: Measure your impact

- # of residents and staff engaged who .....
- % vaccinated residents who.....

# COVID-19 Post-Vaccination PIP

Now iterate....

- What are you learning?
- What is working?
- What will you change?
- How can you conduct rapid cycle PDSAs to keep learning?
- As you learn – how can increase the size of your tests, the location of your test, etc.?

**Remember: The goal will be to make the improvement the standard!**

# This Week's Closing Discussion

What PIP do you have in progress?

What questions do you have for the ECHO community that could help provide insight and strengthen your PIP?

# Closing Poll Question

How much will the information from today's session help you improve your quality-improvement and COVID-related programs?

- Not much
- Some
- A lot
- Not Sure



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**COMMUNITY PAGE**

[nhecho-cohorts.Stanford.edu](mailto:nhecho-cohorts.Stanford.edu)

THANK YOU

[Need help? Email nursingecho@stanford.edu](mailto:nursingecho@stanford.edu)

# General Q&A

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# Thank You!

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