

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

## Session 6: Post-Traumatic Growth

**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.

#### **American Nurses Credentialing Center (ANCC)**

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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.



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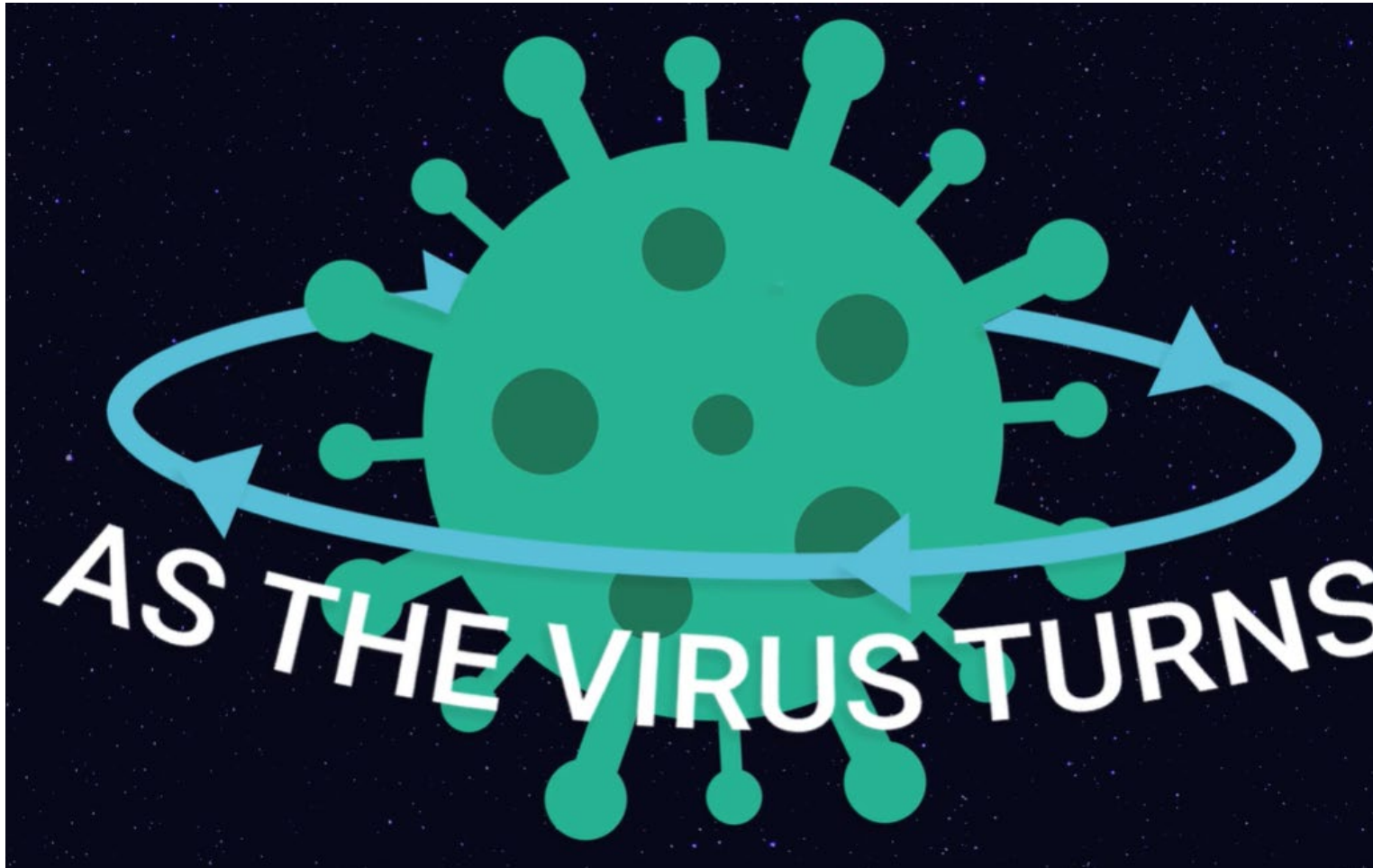
**Session 11 Recording**



# 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.

# As The Virus Turns: Updates on Variants



# California COVID-19 Weekly Data Update

*“Prevention by severing the chain is the immediate solution.”*

*~Mohith Agadi*

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# California State Profile Report

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

May 14, 2021

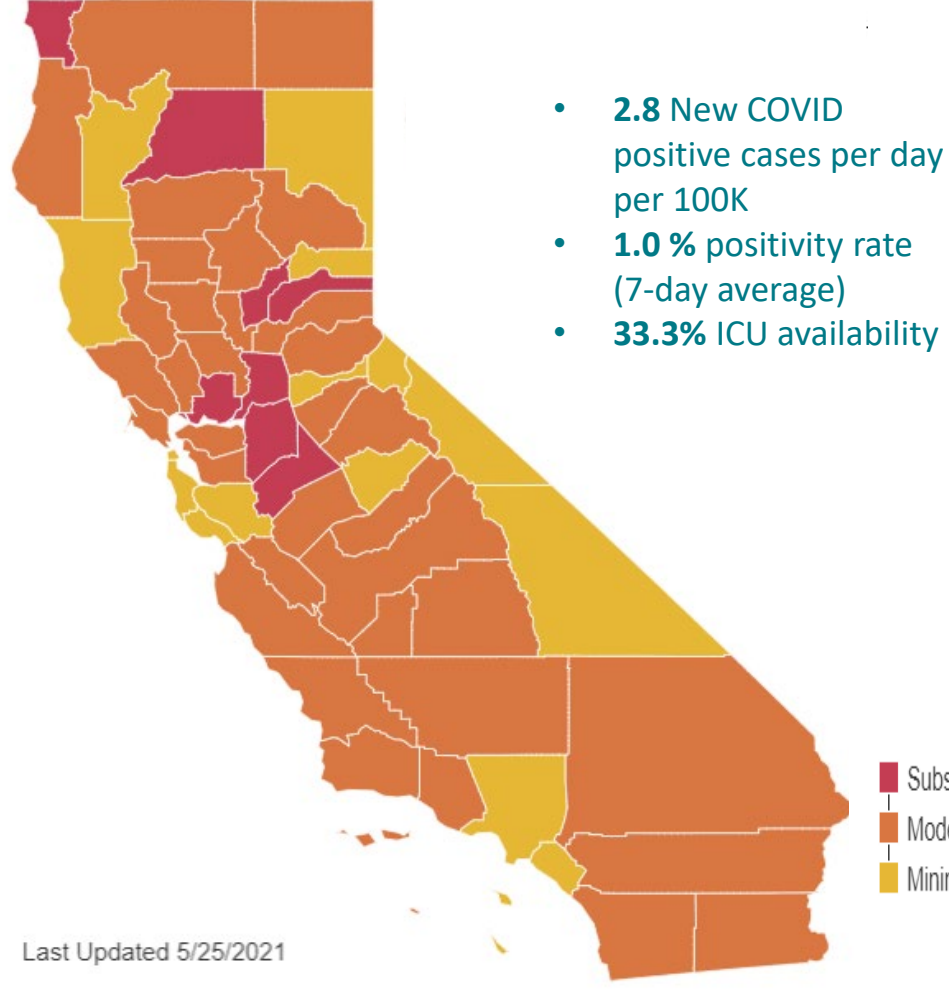
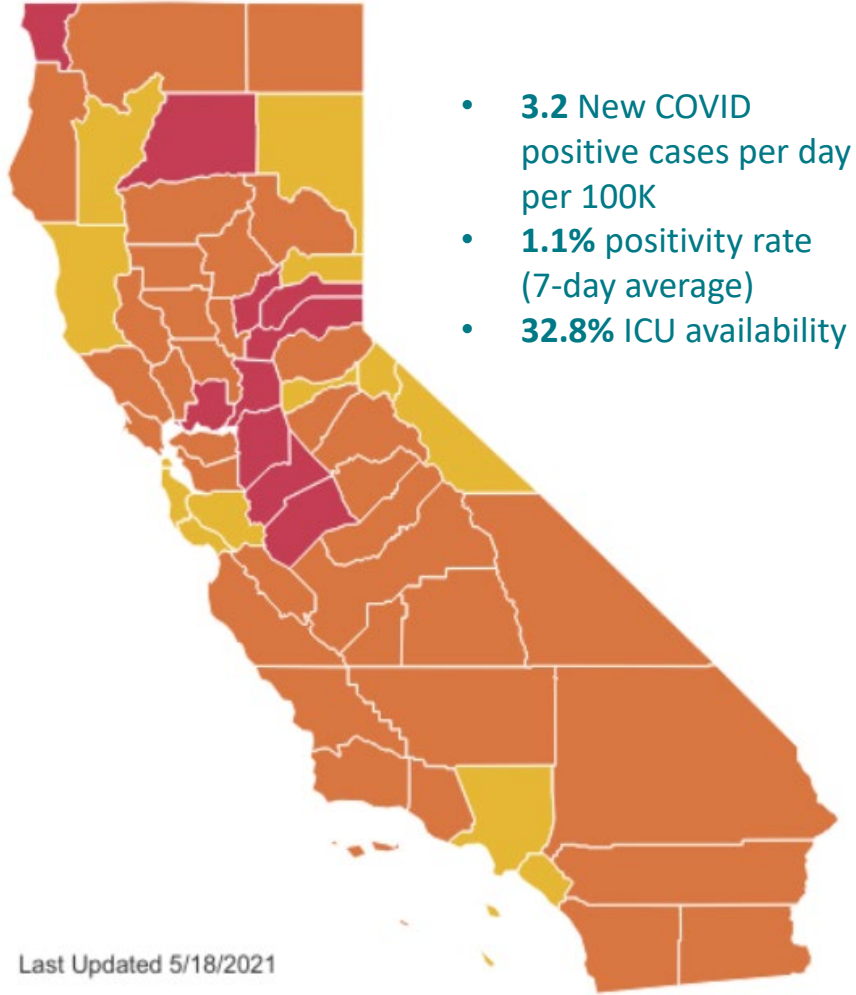
|  | STATE                 | STATE, % CHANGE FROM PREVIOUS WEEK |
|--|-----------------------|------------------------------------|
| NEW COVID-19 CASES (RATE PER 100,000)  | 11,365 (29)           | -6%                                |
| VIRAL (RT-PCR) LAB TEST POSITIVITY RATE                                      | 1.1%                  | -0.1%*                             |
| TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)                           | 1,105,177** (2,797**) | -11%**                             |
| COVID-19 DEATHS (RATE PER 100,000)   | 424 (1.1)             | -25%                               |
| SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE                                      | 1%†                   | -1%*                               |
| SNFs WITH ≥1 NEW STAFF COVID-19 CASE   | 2%†                   | -3%*                               |
| SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH                                     | 0%†                   | N/A*                               |
| CONFIRMED AND SUSPECTED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS) | 4,092 (7)             | -8% (-6%)                          |
| CONFIRMED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)               | 1,418 (2)             | -11% (-9%)                         |
| NUMBER OF HOSPITALS WITH SUPPLY SHORTAGES (PERCENT)                          | 10 (3%)               | -33%                               |
| NUMBER OF HOSPITALS WITH STAFF SHORTAGES (PERCENT)                           | 62 (17%)              | +9%                                |

May 21, 2021

|  | STATE                 | STATE, % CHANGE FROM PREVIOUS WEEK |
|--|-----------------------|------------------------------------|
| NEW COVID-19 CASES (RATE PER 100,000)  | 3,799 (10)            | -52%                               |
| VIRAL (RT-PCR) LAB TEST POSITIVITY RATE                                      | 1.0%                  | +0.0%*                             |
| TOTAL VIRAL (RT-PCR) LAB TESTS (TESTS PER 100,000)                           | 1,151,263** (2,914**) | -3%**                              |
| COVID-19 DEATHS (RATE PER 100,000)   | 98 (0.2)              | +63%                               |
| SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE                                      | 1%†                   | -1%*                               |
| SNFs WITH ≥1 NEW STAFF COVID-19 CASE   | 2%†                   | -2%*                               |
| SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH                                     | 0%†                   | N/A                                |
| CONFIRMED AND SUSPECTED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS) | 3,835 (6)             | -6% (-8%)                          |
| CONFIRMED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)               | 1,371 (2)             | -3% (-5%)                          |
| NUMBER OF HOSPITALS WITH SUPPLY SHORTAGES (PERCENT)                          | 10 (3%)               | +0%                                |
| NUMBER OF HOSPITALS WITH STAFF SHORTAGES (PERCENT)                           | 64 (17%)              | +3%                                |

# California's County Risk Levels—Updated May 25<sup>th</sup>

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



|             | Counties | Population |       |
|-------------|----------|------------|-------|
| Substantial | 8        | 3,740,561  | 9.3%  |
| Moderate    | 35       | 18,765,828 | 46.8% |
| Minimal     | 15       | 17,622,771 | 43.9% |



# California Variants as of May 19, 2021

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

## Known Variants of Concern (VOC) in California

| Variant | Background Information   | # of Cases | Change from May 12 |
|---------|--|------------|--------------------|
| B.1.1.7 | Discovered in UK; identified in US in December 2020  | 7,075      | +1,325             |
| B.1.351 | Discovered in South Africa; identified in US in January 2021   | 92         | +20                |
| P.1     | Identified in travelers from Brazil, who were tested at airport in Japan. Detected in US in January 2021 | 903        | +233               |
| B.1.427 | Detected in California 2/2021  | 6,506      | +85                |
| B.1.429 | Detected in California 2/2021  | 12,320     | +359               |

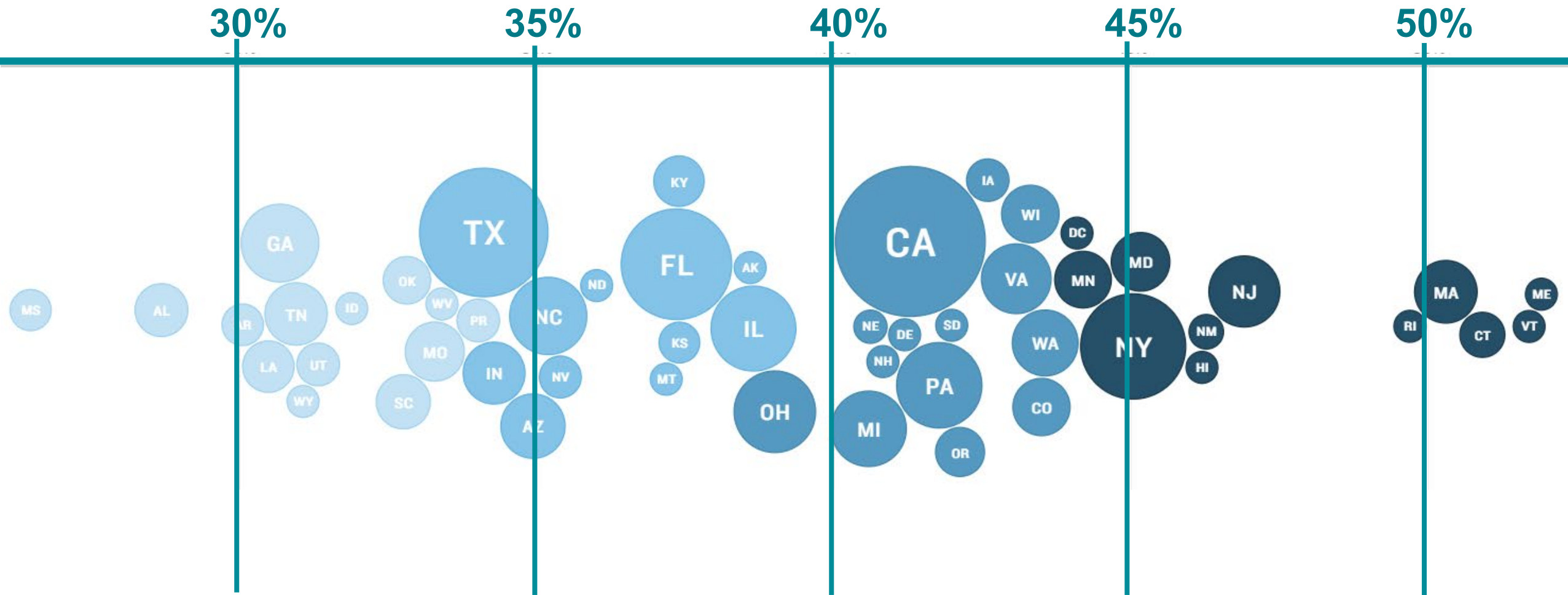
## Known Variants of Interest (VOI) in California

| Variant   | Background Information  | # of Cases | Change from May 12 |
|-----------|---|------------|--------------------|
| B.1.526   | Detected in November 2020 in New York   | 431        | +110               |
| B.1.526.1 | Detected in October 2020 in New York  | 297        | +91                |
| B.1.525   | Detected in United Kingdom and Nigeria in December 2020                                   | 43         | +7                 |
| P.2       | Detected in Brazil in April 2020  | 61         | No change          |
| B.1.617   | Include sublineages B.1.617.1, B.1.617.2, and B.1.617.3<br>Detected in India October 2020 | 163        | +59                |

# Which States are Leading in The Race to Get Vaccinated?

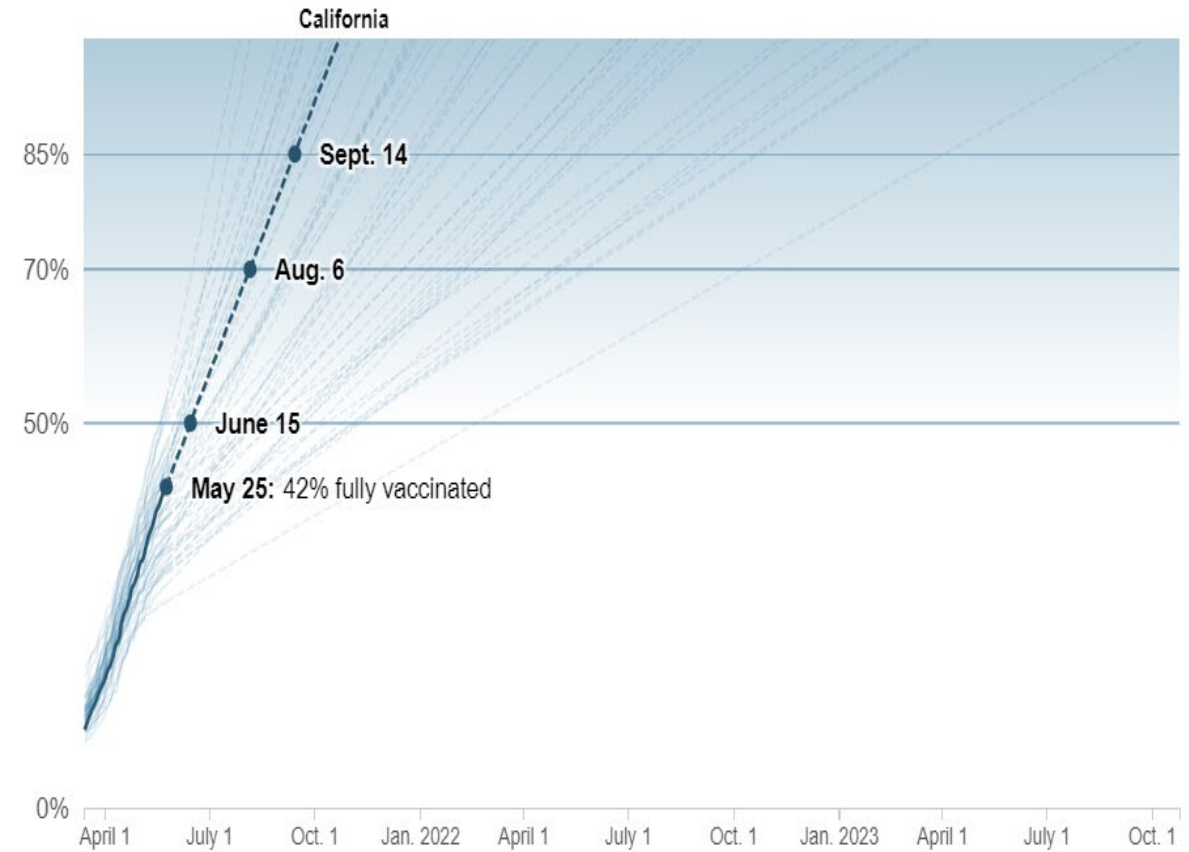
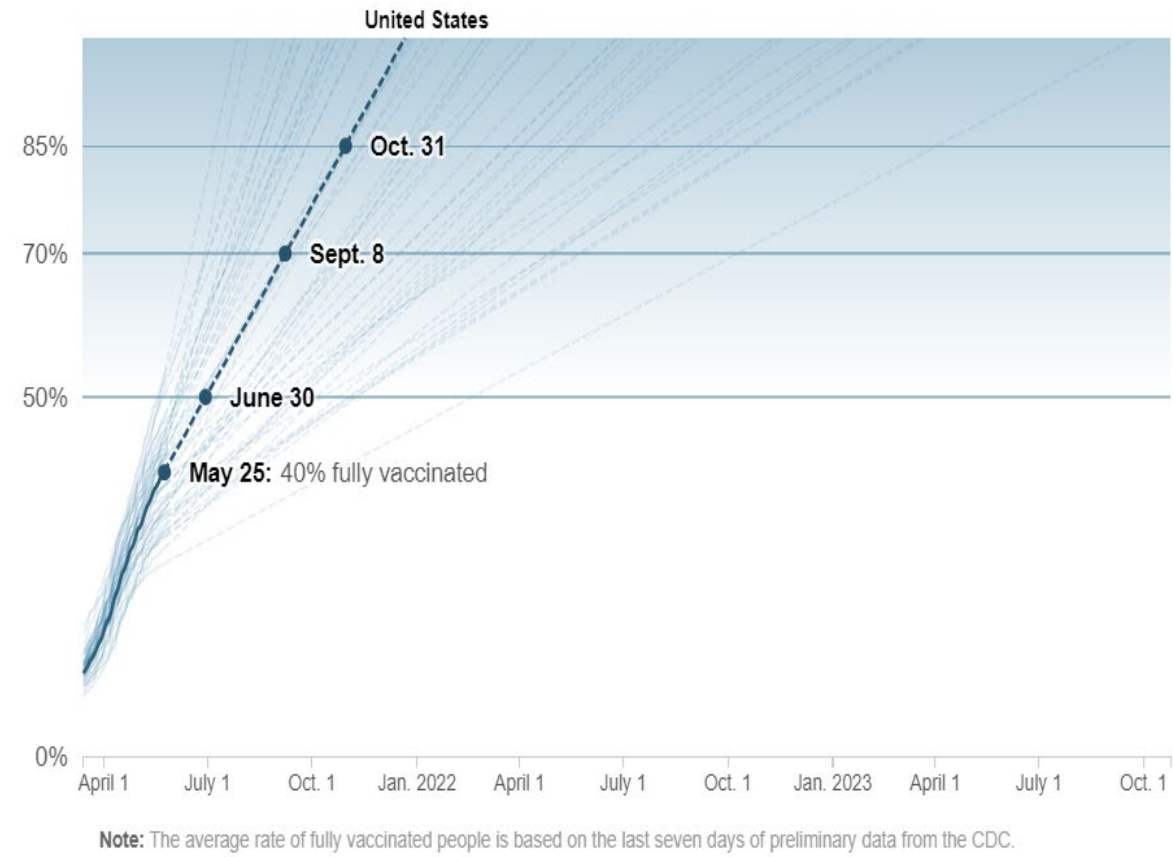
<https://www.npr.org/sections/health-shots/2021/01/28/960901166/how-is-the-covid-19-vaccination-campaign-going-in-your-state>

Percentage of state's population vaccinated as of May 23<sup>rd</sup>.  
Size of circle represents state's population size.  
California is 21<sup>st</sup> Place



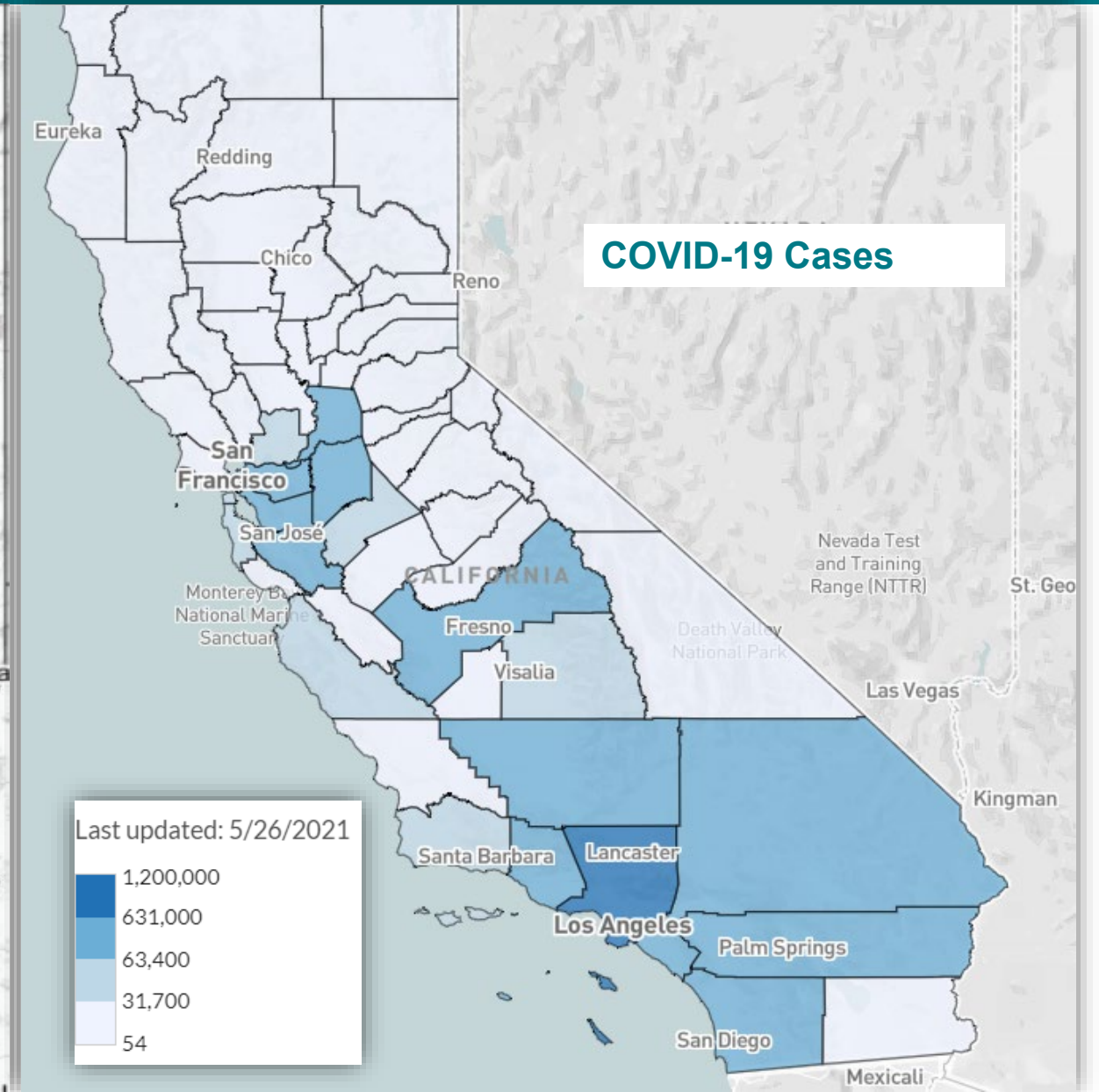
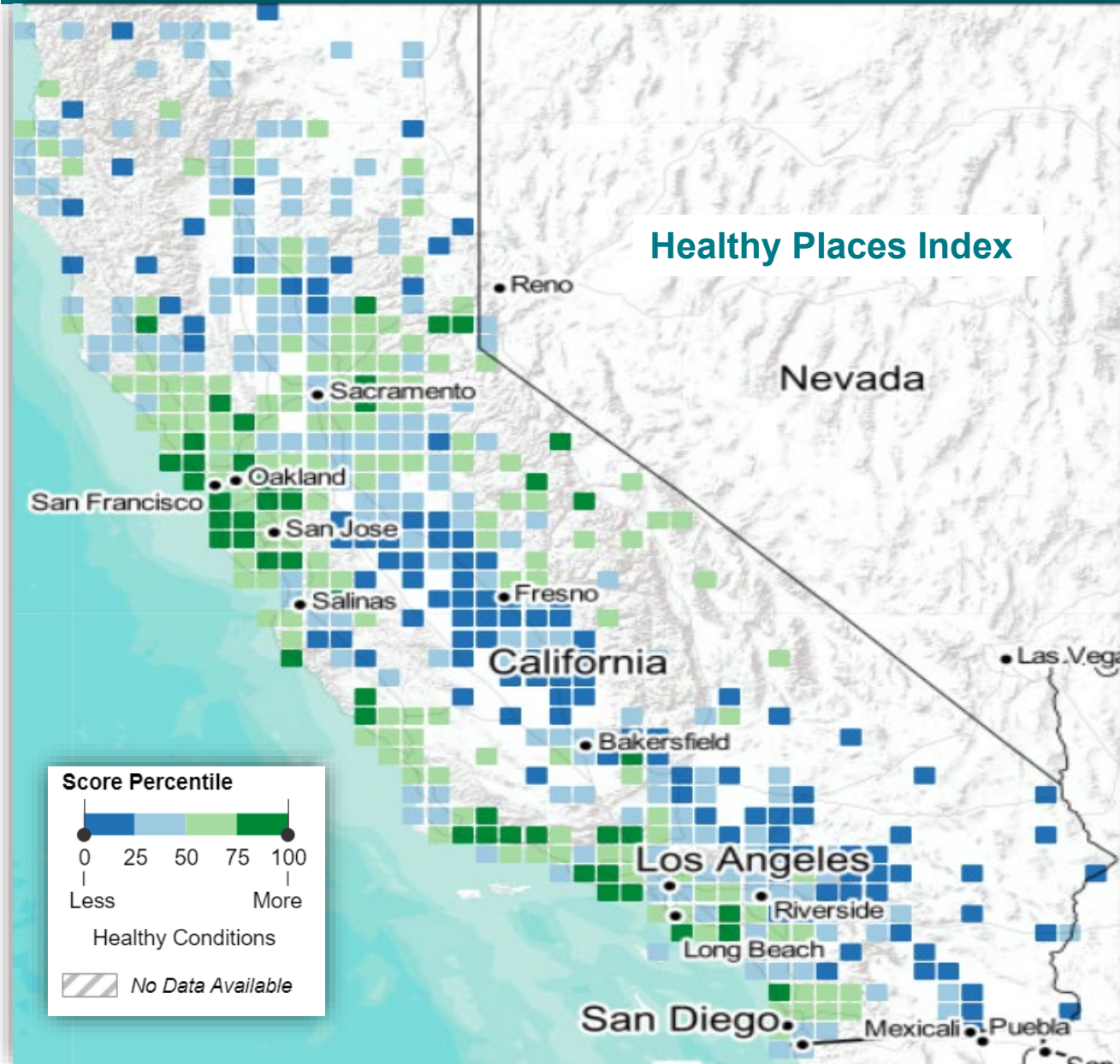
# When Might a Majority of People in California Be Fully Vaccinated?

<https://www.npr.org/sections/health-shots/2021/01/28/960901166/how-is-the-covid-19-vaccination-campaign-going-in-your-state>



# Race to Vaccinate: California Healthy Places Index

<https://covid19.healthyplacesindex.org/California>



# The Ongoing Journey of Post-Traumatic Growth

<https://youtu.be/1FDPP3risnc>

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## **POLL: Which grounding ideas would be most impactful in your safety plan? (choose all that apply)**

- Rapid bursts of movements (e.g., jumping jacks, running stairs)
- Gentle movement (e.g., wiggling in chair)
- Hold ice cube in hand and watch it melt
- Breath work, elicit a yawn
- Laughter, jokes, silliness, fun
- Music
- Mantras (e.g., “a hard moment does not mean a hard rest of the day”)
- Compassionate self-talk
- Other (please enter in the chat)

# Mindfulness Moment: Box Breathing

<https://youtu.be/n6RbW2LtdFs>

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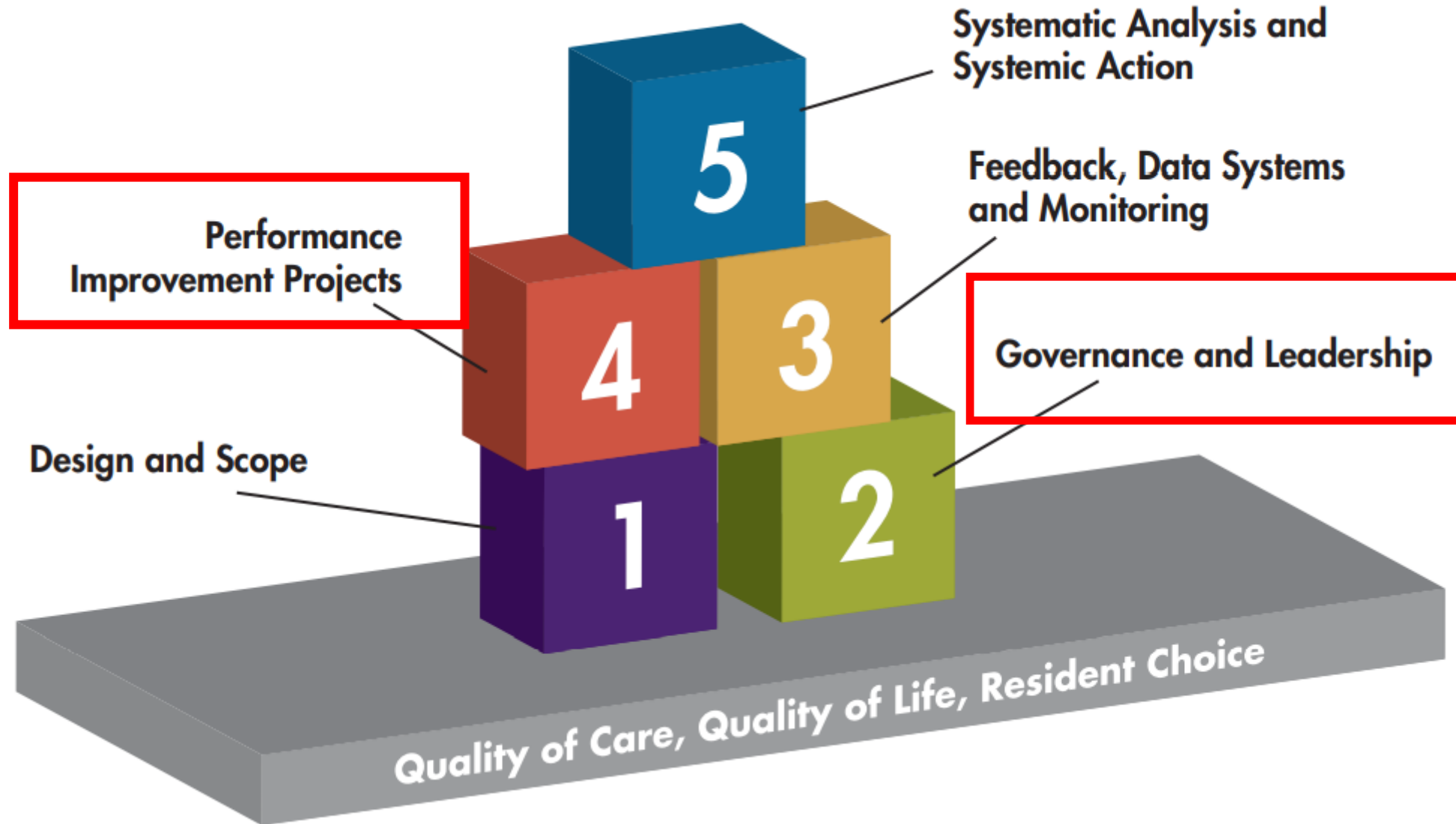


# Quality Improvement Corner: QAPI Governance and Leadership

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# The Importance of Your QAPI Plan

- The QAPI plan guides your facility's overall performance improvement. It is a living document that the facility will continue to refine and revisit.

<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/downloads/QAPIPurpose.pdf>



## Guide for Developing Purpose, Guiding Principles, and Scope for QAPI

Directions: Use this tool to establish the purpose, guiding principles and scope for QAPI in your organization. The team completing this worksheet should include senior leadership. Taking time to articulate the purpose, develop guiding principles, and define the scope will help you to understand how QAPI will be used and integrated into your organization. This information will also help your organization to develop a written QAPI plan. Use these step-by-step instructions to create a separate document that may be used as a preamble to your QAPI plan.

### STEP 1. LOCATE OR DEVELOP YOUR ORGANIZATION'S VISION STATEMENT

A **vision statement** is sometimes called a picture of your organization in the future; it is your inspiration and the framework for your strategic planning. Consider involving staff in the development of your vision statement. Post it for everyone to view.

For example, the vision of the Good Samaritan Society is to create an environment where people are loved, valued and at peace.

### STEP 2. LOCATE OR DEVELOP YOUR ORGANIZATION'S MISSION STATEMENT

A **mission statement** describes the purpose of your organization. The mission statement should guide the actions of the organization, spell out its overall goal, provide a path, and guide decision-making. It provides the framework or context within which the company's strategies are formulated. As above, get caregivers involved in establishing your organization's mission.

For example, Meadowlark Hills is each resident's home. We are committed to enhancing quality of life by nurturing individuality and independence. We are growing a value-driven community while leading the way in honoring inherent senior rights and building strong and meaningful relationships with all whose lives we touch.

### STEP 3. DEVELOP A PURPOSE STATEMENT FOR QAPI

A **purpose statement** describes how QAPI will support the overall vision and mission of the organization. If your organization does not have a vision or mission statement, the purpose statement can still be written and would state what your organization intends to accomplish through QAPI.

For example, the purpose of QAPI in our organization is to take a proactive approach to continually improving the way we care for and engage with our residents, caregivers and other partners so that we may realize our vision to [reference aspects of vision statement here]. To do this, all employees will participate in ongoing QAPI efforts which support our mission by [reference aspects of mission statement here].

# Use HSAG's Example QAPI Plan as a Benchmark



## [Year] Quality Assurance & Performance Improvement (QAPI) Plan for [Name of Facility]

[https://www.hsag.com/contentassets/cf3caa92784541d287d94da0ae266697/nhqcc\\_sample-qapi-work-plan\\_2016\\_template.docx](https://www.hsag.com/contentassets/cf3caa92784541d287d94da0ae266697/nhqcc_sample-qapi-work-plan_2016_template.docx)

### Vision

A vision statement provides a “picture” of your organization in the future; it is your inspiration and the framework for your strategic planning.

**Example:** The vision of the Good Samaritan Society is to create an environment where people are loved, valued, and at peace.

### Mission

A mission statement describes the purpose of your organization. The mission statement should guide the actions of the organization, spell out its overall goal, provide a path, and guide decision-making. It provides the framework or context within which the company’s strategies are formulated.

**Example:** Meadowlark Hills is each resident’s home. We are committed to enhancing quality of life by nurturing individuality and independence. We are growing a value-driven community while leading the way in honoring inherent senior rights and building strong and meaningful relationships with all whose lives we touch.

# Waterfall Question

Why is a mission/vision statement important?



# Purpose. Mission. Vision. Values. What's the difference?

What is mission, vision, purpose

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# Where does Governance and Leadership Fit In?

- Mission – **How** do we get there, on our path to fulfill our purpose?
- Vision – **What** will it look like when we fulfill our purpose?
- Purpose of our Organization – **Why** do we exist?
- Purpose of the QAPI – The QAPI plan supports the **How, What and Why** of our organization, which is the mission, vision, and organizational purpose.
- Governance and Leadership – Supports all the above by developing and supporting a **culture and values** that seeks input from staff and residents, by assuring adequate resources (money, time, equipment, staff, and training).

# General Q&A

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