

A Note from Our Continuing Care Administrator, David Gearing

These have truly been unprecedented times in Continuing Care, and I am proud to say that our teams in CC are doing a great job working through the challenges we have faced in our efforts to keep our residents and staff safe and cared for. Every step of the way, our Charlestown Emergency Preparedness team has been instrumental in helping us navigate the ever- changing recommendations that have impacted how we manage skilled and assisted living during these times.

We recognize that while community communications have been timely and thorough, they may not cover the specific questions families have in Continuing Care. Thank you to our Family Council President, Jacqueline McLellan for submitting the questionnaire included in this Newsletter that will hopefully answer any lingering questions you may have. As always you can contact any of our team for further assistance as needed.

COVID-19 Q&A

1. What is the nursing home doing to prevent infections? What precautions are in place for residents who are in private rooms? in common areas?

- Continuing Care at Charlestown has taken a multi-faceted approach relative to precautions for both staff and residents:
- Charlestown employees and approved visitors undergo risk assessment questionnaires before being permitted through the gate onto campus followed by daily temperature checks in the CTS lobby before being allowed to proceed to CC to begin their shift.
- CC employees must wear full Personal Protective Equipment (PPE) (N95 respirator mask, gown, gloves, goggles or face shield) on all resident care areas; meaning they cannot leave the terrace or basement level of the building without being in proper PPE.
- Approved vendors that need to access the floors (such as oxygen provider) also need to be in the same full PPE that we require our employees to wear.
- CC residents' vital signs are checked twice daily to monitor for any signs and symptoms of infections.

- CC Leadership rounds to monitor and reinforce infection control practices such as hand washing between residents, proper use of gloves, sanitation, and disinfection of medical equipment.
- The dining rooms have been closed and group programming has been suspended as required by CMS. Meals are being delivered to the resident's rooms by our nursing staff.
- Residents are currently in their respective rooms, and when some are in common areas, staff are encouraging them to keep social distancing of 6 feet or more.
- Admissions, transfers, and discharges are reviewed to determine if there is any risk of potential infection to residents already residing in continuing care.

Does nursing home staff have the personal protective equipment (PPE)—like masks, face shields, gowns, gloves—that they need to stay safe, and keep their patients safe?

- Yes, we have plenty of PPE gear for our staff. For both the residents' safety and that of our staff, only staff in the full complement of PPE (N95 mask, gown, gloves, goggles or face shield) may be on the floors providing direct care to our residents or providing vital services on our Neighborhoods.
- **3. Have nursing home staff been given specific training on how to use this personal protective equipment?**
- Yes, in order for staff to use the N95 mask, they undergo a fit testing where they are taught how to wear (don) and remove (doff) their PPE properly.
- Staff pick up their Personal Protective Equipment (PPE) daily, and proper donning and doffing are reinforced.

How/Are home visiting health care outside caregivers notified of equipment needed to enter the campus/ nursing facility?

- Charlestown's Emergency Preparedness Planning (EPP) team and CC Leadership has ongoing communication with outside agencies and caregivers to inform them of updates in policy or procedure pertaining to COVID-19 prevention and the required use of PPE.

What is the nursing home doing to help residents stay connected with their families or other loved ones during this time? Does the nursing home help residents call their loved ones by phone or video call? Will the nursing home set up a regular schedule for us to speak with our loved one?

- Yes, video chatting is being coordinated by our Programming Manager, Rob Hunter and his team. Please contact Rob Hunter at 410-737-8838, ext 601-8974 or via email at Rob.Hunter@erickson.com to make an appointment to video chat with resident in Wilton Overlook or RG.
- To virtually visit with residents in Caton Woods, please reach out to Denise Puckett at 410-737-8838, ext 601-8575 or via email at Denise.Puckett@erickson.com

What is the plan for the nursing home to communicate important information to both residents and families on a regular basis*? Will the nursing home be contacting us by phone or email, and when?

Is there some other medium--such as a common e-mail, newsletter, mailed document by USPS?

- As part of our EPP Covid-19 response and communication plan, we have been diligent about providing timely updates to our residents and family via several avenues: hard copies provided to each CC resident, our electronic CC newsletter, and mailed documents to CC family via USPS.
- Additionally, there is a website, www.ericksonliving.com/our-response-to-covid-19 . Check this website frequently for Erickson and Charlestown's most up to date facts and information relative to COVID-19. If you would like to know more or have specific questions, please feel free to contact administration at 410-737-8875.

Is the nursing home currently at full staffing levels for nurses, aides, and other workers? What is the plan to make sure the needs of nursing home residents are met—like bathing, feeding, medication management, social engagement—if the nursing home has staffing shortages?

- CC is currently using a COVID-19 staffing model to meet resident's needs. This staffing model ensures we have staff available, including reserve staff if necessary. All other departments are supporting resident engagement and our clinical team to ensure our resident's needs are met.

What activities, if any, have been adjusted or added to *engage* the residents during this time of extended isolation? Any activities other than TV?

- We are connecting residents with their families via face time and are providing one-to-one with residents for socialization, singing, short stories, conversation, and exercise. We provide residents with activity packets or books.
- Other activities for our memory care areas include: hand spas, talking about the past, walking with residents one at a time in the hallway to get exercise, sitting with residents during with meals, helping residents talk to their family on the phone in their apartments, having celebrations with families through FaceTime and Zoom, playing cards, coloring pictures in residents' apartments, listening to music, dancing and laughing.

What *specific adaptations* had to be made in order for mealtimes to maintain the quality of consistent satisfaction the residents have become accustomed to?

- In order to maintain consistency of quality and satisfaction, recipes, vendors for product and portion size have remained the same.
- Nursing staff are made aware when Dining delivers the food to the pantry for meal delivery to resident's rooms to assist with maintaining food quality and temperatures, and is in contact with the kitchen to ensure any additional items requested by resident's are provided.
- Two carts per floor are set up for food delivery, one for each wing, to allow for quicker delivery and help to maintain food temperatures.
- Heavy duty disposable containers are used to assist with maintaining food temperatures. Food is placed in containers as close to meal times as possible to help maintain quality and temperatures.