



Tender Care Actions over Past Week

Minimize interaction – social distancing - March 25, 2020 Larimer County Stay at Home

Supply shortage – predicted to last for months

Personal protective equipment - conserve

Risk assessment and notification – temperature assessment

Home care nursing families (Private Duty Nursing (PDN) homes)

Dynamic workforce – openings on Tiger Text

WORLD UPDATE

The WHO COVID-19 Situation Report for March 25 reported 416,686 confirmed COVID-19 cases and 18,589 deaths globally.

197 countries, areas or territories with cases.





United States Update

- Total cases: 54,453
- Total deaths: 737
- Jurisdictions reporting cases:
 54 (50 states, District of Columbia, Puerto Rico, Guam, and US Virgin Islands)
- March 25 worst day so far
- Expectations for acceleration



Updated 3/25/20 at 4:00 p.m.

1086 cases
147 hospitalized
36 counties
8,064 people tested
19 deaths
9 outbreaks at residential and non-hospital health care facilities

COLORADO UPDATE

Tender Care Pediatrics Update

- Changes in nursing staffing due to client's decision to suspend nursing services temporarily. 4 families have no nursing services at this time. Assigned PDNs have been transferred to other homes during the viral emergency.
- Tiger Text fast track to view open shifts in all homes for PDNs interested in supporting workforce.
- Pre-assignment temperature screening of PDNs has started In 3 homes. Additional thermometers arriving this week to start procedure in remaining homes.
- COVID screening in DeVero
- All PDNs must have on person: Tender Care ID badge and copy of current professional license.
- Telehealth platform Occupational and Physical Therapies; Case management; Leadership; Families





Risk Assessment and Notification

Update - Temperature is being monitored at 3 homes before nurses and therapists have any direct patient care. This procedure will be started at remainder of PDN homes by end of the week. Delay in starting due to lack of temporal thermometers.

- Self-monitoring means HCP should monitor themselves for fever by taking their temperature twice a day and remain alert for respiratory symptoms (e.g., cough, shortness of breath, sore throat). Anyone on self-monitoring should be provided a plan for whom to contact if they develop fever or respiratory symptoms during the self-monitoring period to determine whether medical evaluation is needed.
- Active monitoring means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed people to assess for the presence of fever or respiratory symptoms (e.g., cough, shortness of breath, sore throat) . For HCP with high- or medium-risk exposures, CDC recommends this communication occurs at least once each day. The mode of communication can be determined by the state or local public health authority and may include telephone calls or any electronic or internet-based means of communication.

 https://www.cms.gov/files/document/qso-20-18hha.pdf



Temperature Monitoring at TCPS

Nurses and therapists

After handwashing you will be required to take your temperature and record.

If your temperature is above 99.8 F or 37.6 C you will need to take second reading.

If second reading above 99.8 F or 37.8 C you will not be able to have direct patient contact.

This applies to anyone coming into home.



Gov. Jared Polis <u>issued a mandatory</u> stay-at-home order for all residents of Colorado on Wednesday to take effect Thursday, March 26 at 6 a.m., and to last through April 11 unless rescinded or modified.

Read full Public Health Order

 https://wpcpr.s3.amazonaws.com/uploads/2020 /03/Amended-Public-Health-Order-Authorized-Business-.pdf

Colorado State Stay-at-home order

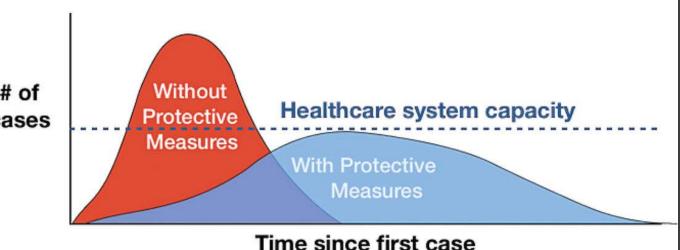


- Effective March 26, 2020 at 5 p.m., Section
 1: All individuals living in Larimer County,
 Colorado, including all cities and towns
 within Larimer County, are ordered to StayAt-Home except for certain essential
 activities and work to provide essential
 business and government services or
 perform essential public infrastructure
 construction, including housing.
- To the extent individuals use shared or outdoor spaces, they must at all times as reasonably possible maintain social distancing of at least six-feet from any other person when they are outside their residence.





- For purposes of this Order, individuals may leave their residence only to perform any of the following "Essential Activities." But people at high risk of severe illness from COVID-19 and people who are sick are urged to stay in their residence to the extent possible except as necessary to seek medical care.
- Essential Business s. Home-based care for seniors, adults, or children
- This Order takes effect at 5 p.m on March 26, 2020 and remains in effect until April 17, 2020, unless otherwise extended in writing



Adapted from CDC / The Economist

Flattening the Curve

- Slowing the spread of Covid-19 across space and time is critical. The health care system cannot sustain a massive influx of infectious cases to emergency departments and hospitals. Patients with mild symptoms should stay home when possible. To facilitate this step, workers should be allowed to telecommute wherever it's feasible to do so. But many lowwage and gig workers cannot afford to stay home. Nor can they handle the economic impact of other social distancing measures that may help to slow transmission.
- On March 13, the House of Representatives, with President Trump's support, took the first step by passing the Families First Coronavirus Response Act, which includes provisions for paid sick leave and unemployment insurance. On March 25, 2020 the bill passed



Coronavirus Aid, Relief, and Economic Security Act or the CARES Act

- Introduced in Senate 03/19/2020, passed 03/25/2020
- This bill addresses
 economic impacts of, and otherwise
 responds to, the COVID 19 (coronavirus) outbreak.
- The package includes an unprecedented injection of loans, tax breaks and direct payments to help the U.S. economy get through an abrupt shutdown as people avoid social interaction and businesses close to keep from spreading the coronavirus. More than 68,000 Americans have been infected with the deadly respiratory disease and some economists warn that unemployment could hit 30%.



- Coronavirus 2 (SARS-CoV-2) was detectable in aerosols for up to 3 hours
- up to 4 hours on copper
- up to 24 hours on cardboard
- up to two to three days on plastic and stainless steel.
- The results provide key information about the stability of SARS-CoV-2, which causes COVID-19 disease, and suggests that people may acquire the virus through the air and after touching contaminated objects.

N van Doremalen, et al. Aerosol and surface stability of HCoV-19 (SARS-CoV-2) compared to SARS-CoV-1. The New England Journal of Medicine. DOI: 10.1056/NEJMc2004973 (2020).

Handwashing and Disinfecting Surfaces

By this point, many of us are familiar with the two numbers that define coronavirus coverage: the reproduction rate and the case fatality rate. In other countries, the coronavirus's reproduction rate has been around 2.5 — that is to say, absent extreme quarantine measures, each infected person transmits the disease to 2.5 people.

The case fatality rate <u>seems to be around 1 percent</u> — about one out of 100 of those infected with the coronavirus die, and those deaths are concentrated among older and immunocompromised people.

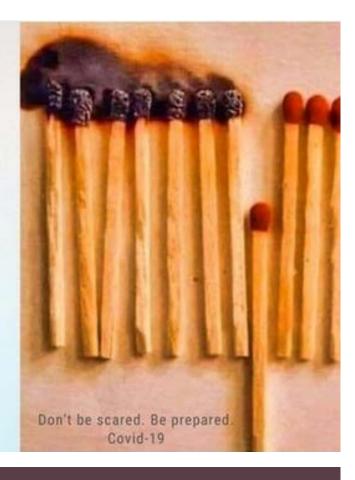


Problems absent social distancing

- In South Korea, a single person led to more than 1,000 infections by refusing testing and going to religious services and brunches.
- The case fatality rate
 multiplies if health systems
 are overwhelmed and falls if
 social distancing and
 quarantine measures keep the
 elderly safe from the disease.
 In Wuhan, China, the World
 Health Organization (WHO)
 found a case fatality rate
 of 3.4 percent a terrifying
 number.

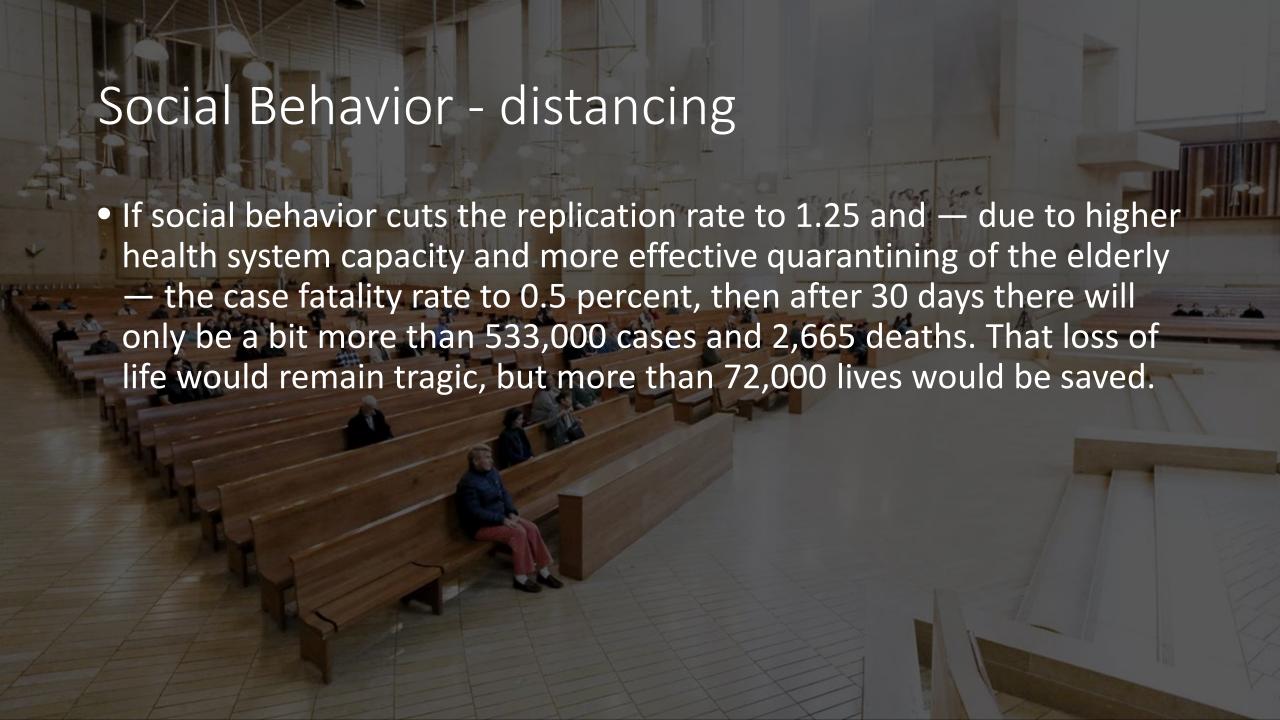
SOCIAL DISTANCING MATTERS

The closer we are, the quicker this spreads. Create a space, slow down the contagion.



Corona Virus versus Social Trust

 Let's play this out. As of Monday afternoon, there were 4,115 confirmed cases in the US, though testing failures ensure the true number is much higher. Still, let's use 4,115 as a base. If you keep the assumption that each case creates 2.5 more cases over 5 days, then after 30 days we'll have 7,564,000 cases. With a 1 percent death rate, that means more than 75,000 deaths — the equivalent of 25 9/11s — in 30 days.



Making Social Distancing Possible

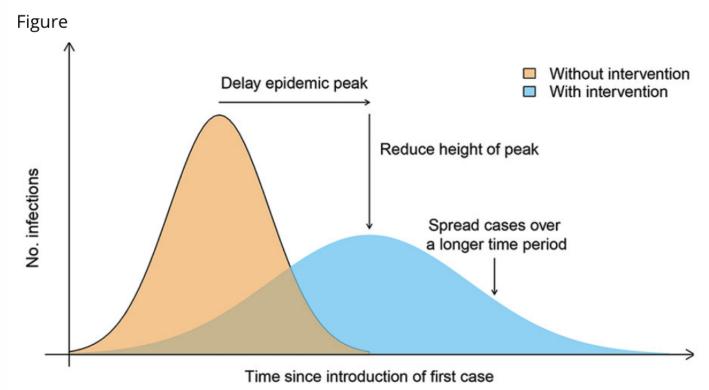


Figure. Intended impact of social distancing measures as nonpharmaceutical interventions for an influenza pandemic. Adapted from similar diagrams in the European Centre for Disease Prevention and Control Technical Report (3) and the Centers for Disease Control and Prevention Guidance Report (4).

 Social distancing is being framed as a moral act: work from home, avoid restaurants, cancel gatherings — or be shamed. But for many, the calculation is more wrenching; the sacrifices they're being asked to make will be painful, even ruinous.



Shortage of Mask Supply

- Centers for Disease Control and Prevention does not recommend that people who are well wear a face mask (including respirators) to protect themselves from respiratory diseases, including COVID-19.
- CDC recommends the use of N95 masks by health care workers at the <u>"highest risk of contracting or experiencing complications of infection."</u>
- US Surgeon General urged people on Twitter to stop buying face masks.

Shortage of Intensive Care Beds



The impact of a COVID-19 pandemic on hospitals is expected to be severe in the best of circumstances.

- The state of Colorado had a combined 1,849 intensive care unit, critical care unit and specialty ICU beds across its hospitals in 2018.
- 46,500 medical ICU beds in the United States and perhaps an equal number of other ICU beds that could be used in a crisis.

http://www.centerforhealthsecurity.org/cbn/2020/cbnreport-02272020.html

Questions

What is the safest way to self-isolate one person within a larger household?

If you can have a separate space for the sick person—a space where they can access the restroom without traveling through commons spaces—that would be best. Those who are caring for loved ones who are sick at home should wash their hands frequently, avoid close contact as much as possible, and have the sick individual wear a surgical or procedure mask to prevent droplets spreading through the air. It is also important to clean frequent- or high-touch surfaces, as well to clean clothes in very hot water. Caregivers should also wear a mask, if possible.

In households that are not able to accommodate these suggestions, what else can be done to limit transmission at home?

 If you're not a caregiver, maintaining six feet of distance and washing your hands frequently are the main steps, along with cleaning surfaces often. If you are a caregiver, it's certainly tougher. You should wear a mask if possible and follow the other guidelines of handwashing and cleaning clothes and surfaces frequently.

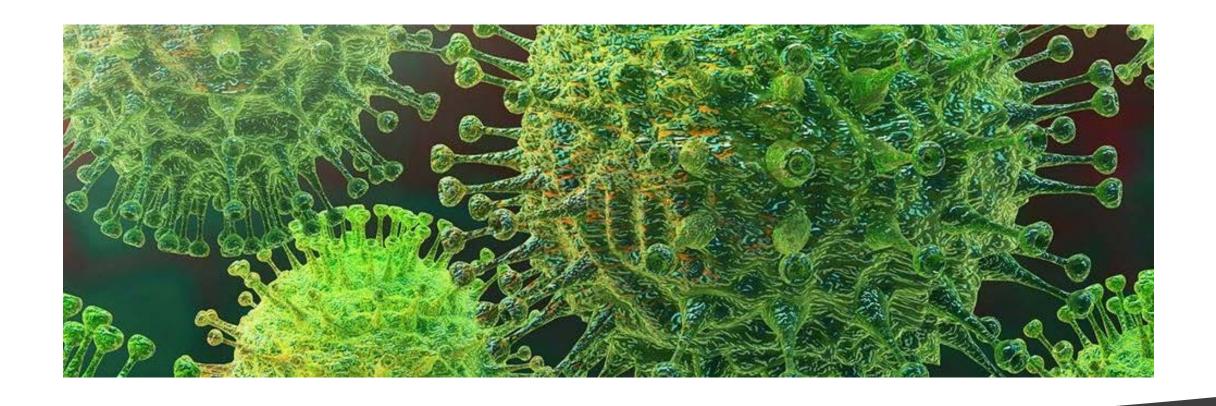
Questions

How can parents and other caregivers help children and dependents who are unable to follow the recommended advice (like washing hands and not touching your face), particularly if they need to be self-isolated?

I think that's a tougher situation. It's very hard to stay away
from kids, especially when they're ill and need care and
comfort. If possible, main caregivers should be those who are
not at high risk from COVID-19, meaning those not over age
sixty or with underlying health issues. Other than that, it's
important to take the normal precautions in terms of
handwashing and cleaning, but it is much more difficult with
children.

How much can caregivers rely on childcare alternatives (relatives, neighbors, babysitters) in this moment?

• In general, it's important to keep the circle smaller. At the moment, not exposing yourself to many additional people is best. Healthcare workers, people with critical jobs, and hourly employees who have to work will need to rely on childcare providers. In those situations, you may ask someone you know and trust, and who is reliable in taking the social distancing rules seriously. If possible, childcare providers should not be in a group that's at high-risk for COVID.



NIH Link to Resources

 https://www.nih.gov/?fbclid=IwAR1AJ2NWkdhWlFuH3Cg2CK2 miJ- 9q6NLlzj v9UN7SrDØLgs4OjKZKFLAQ



Nurses are tough

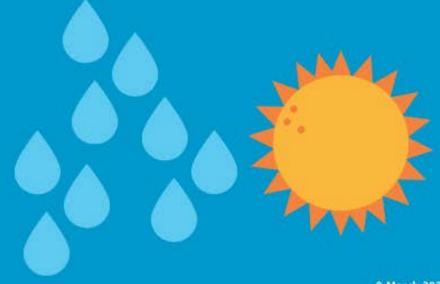
The New York Times detailed some of the overwhelming situations that nurses in China experienced and the details are frightening: nurses being forced to work, forced to shave their heads completely off for hygiene purposes, or dealing with a lack of supplies, like not enough masks to go around. After working mandated shifts, nurses are then being quarantined away from their families for the two-week incubation period to ensure they aren't passing the virus on.

From the evidence so far, the new coronavirus can be transmitted in ALL AREAS, including areas with hot and humid weather.

Regardless of climate, adopt protective measures if you live in, or travel to an area reporting COVID-19.

The best way to protect yourself against COVID-19 is by frequently cleaning your hands. Eliminate viruses that may be on your hands and avoid infection that could occur by then touching your eyes, mouth, and nose.







#Coronavirus

#COVID19

9 March 2020

Taking a hot bath will not prevent you from catching COVID-19. Your normal body temperature remains around 36.5°C to 37°C, regardless of the temperature of your bath or shower. Actually, taking a hot bath with extremely hot water can be harmful, as it can burn you.

The best way to protect yourself against COVID-19 is by frequently cleaning your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur by then touching your eyes, mouth, and nose.

FACT: Taking a hot bath does not prevent the new coronavirus disease





#Coronavirus #COVID19



Learning gives you new dots. Wisdom connects them.



CDC Coronavirus Disease 2019 (COVID-19): steps to prevent illness.

https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html Date accessed: March 17, 2020

- https://web.csg.org/covid19/state-covid-19-websites-and-related-resources
- Dong Y, Mo X, Hu Y, et al. Epidemiological characteristics of 2143 pediatric patients with 2019 coronavirus disease in China. Pediatrics. 2020; doi: 10.1542/peds.2020-0702
- Centers for Disease Control and Prevention. (2018). Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Facepiece Respirators in Healthcare Settings. Retrieved from https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html

World Health Organization. (2020). Rational use of personal protective equipment for coronavirus disease 2019 (COVID-19). Retrieved from https://apps.who.int/iris/bitstream/handle/10665/331215/WHO-2019-nCov-IPCPPE use-2020.1-eng.pdf

 https://www.aap.org/en-us/advocacy-and-policy/aap-healthinitiatives/Children-and-Disasters/Documents/PedPreparednessChecklist1b.pdf