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To All Families of our Skilled Nursing and Adult Care Residents,

**Status Update**

Each week we will provide you with updated information on COVID-testing at all of our campuses.

<b>Testing Tracker: Summary of Employees &amp; Residents Diagnostic Testing</b>								
<b>Employees</b>	To date (since pandemic start)				New Suspected Cases			
	Employees tested	Tests Pending	Employees Positive	Employees Negative	Employees tested	Tests Pending	Employees Positive	Employees Negative
Chase	6	0	0	6	0	0	0	0
GSFH	4	0	1	3	2	1	0	1
GSVE	10	0	1*	9	0	0	0	0
			* last worked 3/29					
<b>Residents</b>	To date (since pandemic start)				New Suspected Cases			
	Residents tested	Tests Pending	Residents Positive	Residents Negative	Residents tested	Tests Pending	Residents Positive	Residents Negative
Chase	5	0	0	5	1*	1	0	0
GSFH	13	0	0	13	3	0	0	3
GSVE	8	0	0	8	2	0	0	2
					* precautionary post hospitalization			
Tested as of 5/20/20					5/21/20-5/27/20			
Please note some testing was purely precautionary as the individual was asymptomatic. Ex: fall led to ER visit and tested.								

We have a daily monitoring system to monitor all residents for signs/symptoms of COVID-19, as well as our daily screening for all staff.

Please note the chart above is for testing conducted for cause only. At this time, it does not include the mass staff twice weekly testing and resident baseline testing discussed below, or staff testing done as part of any pre-op procedures.

**CMS Guidance on Re-opening**

You may have been following coverage on “Re-Opening New York.” While we are all excited, it is important to note that this plan does not include Health Care. For amenities available to our Independent Living residents, such as dining and salon services, we will monitor the NYS phases and plan accordingly.

For health care strategies, we are reviewing CMS guidance issued on 5/18/20 for re-opening nursing homes. But CMS is letting the individual states develop their own plans which may differ to some degree, so NYS may alter some of these recommendations. Also, please note CMS has not addressed post-Phase 3 guidelines but we will look for further directives as they are announced. In addition, these guidelines are constantly evolving and may change. We have noted some areas that require further clarification.

### CMS Recommendations:

- When a community enters phase 1 of Opening Up America Again, nursing homes remain at their highest level of vigilance and mitigation (e.g. visitation restricted except in compassionate care situations). Nursing homes do not begin to de-escalate or relax restrictions until their surrounding community satisfies specific criteria and enters phase 2 of Opening Up America Again. •
- A nursing home should spend a minimum of 14 days in a given phase, with no new nursing home onset of COVID-19 cases, prior to advancing to the next phase. •
- A nursing home may be in different phases than its surrounding community based on the status of COVID-19 inside the facility, and the availability of key elements including, but not limited to PPE availability, testing, and staffing. ***For example, if a facility identifies a new, nursing home onset COVID-19 case in the facility while in any phase, that facility goes back to the highest level of mitigation, and starts over (even if the community is in phase 3).*** •
- States may choose to have a longer waiting period (e.g., 28 days) before relaxing restrictions for facilities that have had a significant outbreak of COVID-19 cases, facilities with a history of noncompliance with infection control requirements, facilities with issues maintaining adequate staffing levels, or any other situations the state believes may warrant additional oversight or duration before being permitted to relax restrictions.

The following tracks some key concerns through the various phases. The actual document from CMS is very detailed, but we will focus on those issues we think would be of most concern to our residents and their families:

	Significant Mitigation and <b>Phase 1</b> of Opening Up America Again : <b>CURRENT PHASE</b>	<b>Phase 2</b> of Reopening nursing homes and Opening Up America Again	<b>Phase 3</b> of Reopening nursing homes and Opening Up America Again
Criteria for Implementation	Highest level of vigilance, regardless of transmission within the local community.	<ul style="list-style-type: none"> <li>• Case status in community has met the criteria for entry into phase 2 (no rebound in cases after 14 days in phase 1).</li> <li>• <b>There have been no new, nursing home onset COVID cases in the nursing home for 14 days.</b></li> <li>• The nursing home is not experiencing staff shortages.</li> <li>• The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection supplies to care for residents.</li> <li>• The nursing home has adequate access to testing for COVID-19.</li> <li>• Referral hospital(s) have bed capacity on wards and intensive care units.</li> </ul>	<ul style="list-style-type: none"> <li>• Community case status meets criteria for entry to phase 3 (no rebound in cases during phase 2).</li> <li>• <b>There have been no new, nursing home onset COVID cases in the nursing home for 28 days (through phases 1 and 2).</b></li> <li>• The nursing home is not experiencing staff shortages.</li> <li>• The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection supplies to care for residents.</li> <li>• The nursing home has adequate access to testing for COVID-19.</li> <li>• Referral hospital(s) have bed capacity on wards and intensive care units.</li> </ul>
Visitation	Visitation <b>generally prohibited</b> , except for compassionate care situations. In those limited situations, visitors are screened and additional precautions are taken, including social distancing, and hand hygiene (e.g., use alcohol-based hand rub upon entry). All visitors must wear a cloth face covering or facemask for the duration of their visit.		Visitation <b>allowed with screening and additional precautions</b> including ensuring social distancing and hand hygiene (e.g., use alcohol-based hand rub upon entry). All visitors must wear a cloth face covering or facemask for the duration of their visit
Entry of non-essential healthcare personnel	<b>Restricted</b> entry of non-essential healthcare personnel	Allow entry of <b>limited</b> numbers of non-essential healthcare personnel/contractors as determined necessary by the facility, with screening and additional precautions including social distancing, hand hygiene, and cloth face covering or facemask	<b>Allow</b> entry of non-essential healthcare personnel/contractors as determined necessary by the facility, with screening and additional precautions including social distancing, hand hygiene, and cloth face covering or facemask.

Communal Dining	Communal dining limited (based on COVID status), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet).		
Non-medically necessary trips outside the facility	Non-medically necessary trips outside the building should be avoided.		
Group Activities	<b>Restrict</b> group activities, but some activities may be conducted (based on COVID status) with social distancing, hand hygiene, and use of a cloth face covering or facemask.	Group activities, including outings, <b>limited</b> (based on COVID status) with <b>no more than 10 people</b> and social distancing among residents, appropriate hand hygiene, and use of a cloth face covering or facemask.	Group activities, including outings, <b>allowed</b> (based on COVID status) with <b>no more than the number of people where social distancing among residents can be maintained</b> , appropriate hand hygiene, and use of a cloth face covering or facemask.
Medically necessary trips away from the facility	The resident must wear a cloth face covering or facemask; and the facility must share the resident's COVID-19 status with the transportation service and entity with whom the resident has the appointment.		

### NYS DOH Voluntary Testing for all Residents

This testing is for Skilled Nursing and Adult Care residents. Independent Living residents who feel they should be tested should follow up with their personal health care provider. Chase and GSFH have their resident testing completed as of yesterday, and GSVE testing is scheduled for 5/29/20. This is baseline testing for all residents, not specifically ordered due to symptoms or exposure. Chase results were all negative, and GSFH's are pending but hopefully available by the end of the week. GSVE's should be available early next week. If we have any positive results, we will notify those directly impacted first, then do the necessary mass notifications.

### NYS DOH Mandatory Testing for all Staff

Last week we began testing all of our staffs as required by NYS Executive Order. Each employee will be tested two times per week. The test is a simple nasal swab, and results are expected within 48 hours. Each campus developed a plan to ensure compliance with this requirement, and despite some logistical challenges, we are now testing Monday through Friday at all our campuses.

Please note testing is different than screening. Screening staff involves staff answering a series of questions about travel, work and symptoms, and having their temperature taken at the start of their shifts and every 12 hours thereafter. Testing is a laboratory test to find out if a person has coronavirus (COVID-19).

Results of Mass Testing (for employees who passed the screening process)

	Tested	Positive	Negative	Inconclusive or Indeterminate
GSFH	197	1	196	0
GSVE	133	1*	132	0
Chase	104	0	104	0

- \*Employee has since tested negative within days of the positive test and has been completely asymptomatic, raising the possibility this was a 'false positive.' However, they will remain self-isolated for the 14 days and then retest per NYS guidelines.

As you are aware, we have had two asymptomatic staff members test positive for COVID-19 as part of this mass testing. One was at GSVE in dietary and the other in an Administrative capacity at GFSH. Both are in self-isolation for 14 days. Per Department of Health recommendations, we interviewed these people extensively to identify anyone that they were potentially in close contact with during the 48 hours prior to being tested on Wednesday. Close contact is defined as contact within 6 feet for a period of at least 10 minutes. Those people were notified and instructed to Self-Quarantine for

14 days. Self-Quarantine is defined as self-monitoring for symptoms and staying at home, with the exception of reporting to work. Those considered in close contact were all staff members. No resident was identified as having close contact with this individual during the look-back period.

As previously stated, our team is monitoring the situation in collaboration with both the NYS Department of Health and our local health department and will follow all their recommendations.

Please remember we are testing over 500 staff members twice per week between all of our campuses. With this type of wide-spread testing, it is highly probable that we will have some additional positive results. We will continue to follow appropriate infection control protocols to protect our residents and staff, and will continue to conduct the twice weekly staff testing, and will alert you to any positive results.

### **Good Shepherd Fairview Home ACF Staff Member: Positive for COVID-19 UPDATE**

This individual continues to self-isolate. Good Shepherd Fairview Home Administration, ACF Management, and HR Wellness are monitoring the situation in collaboration with both the NYS Department of Health and our local department of health and will follow all their recommendations as reported last week. And as previously noted all residents of GSFH have been tested as part of our baseline testing program.

*Please note there are no residents that are exhibiting symptoms of illness (COVID-19) at this time.*

**FAQs:** We received multiple individual emails with questions. Rather than respond individually to multiple individuals asking the same or similar questions, we will be add a FAQs section each week. Please note we have an obligation to maintain the privacy of the health information of our employees and cannot provide information which could potentially identify them.

*Q: Why are Self Quarantined Staff who have had close contact with a COVID positive individual but who have not themselves tested positive for COVID-19 allowed to work?*

A: This is in accordance with CDC, NYS DOH and local health departments' guidance for protocols for **essential** personnel to return to work following a potential COVID-19 exposure. Our understanding is that, when issuing these guidelines to facilities, concerns regarding infection control and ensuring adequate staffing levels to ensure quality care were both carefully considered.

When working, these staff members follow all Infection Control protocols such as proper hand hygiene, wearing a mask, and social distancing when possible, and are immediately sent home if they become symptomatic. **Most importantly, they should avoid close contact with any resident or staff member if possible.** Obviously, the ability to avoid close contact varies by the position.

*Q: Are Self Quarantined Staff who have had close contact with a COVID positive individual but who have not themselves tested positive for COVID-19 allowed to prepare and/or serve food?*

The simple answer is yes, but employees do follow all infection control protocols such as wearing masks and gloves and disinfecting their gloves between residents when delivery meals. The CDC website offers this FAQ providing some background:

### Can the virus that causes COVID-19 be spread through food, including restaurant take out, refrigerated or frozen packaged food?

Coronaviruses are generally thought to be spread from person to person through respiratory droplets. Currently, there is no evidence to support transmission of COVID-19 associated with food. Before preparing or eating food it is important to always wash your hands with soap and water for at least 20 seconds for general food safety. Throughout the day use a tissue to cover your coughing or sneezing, and wash your hands after blowing your nose, coughing or sneezing, or going to the bathroom.

It may be possible that a person can get COVID-19 by touching a surface or object, like a packaging container, that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

In general, because of poor survivability of these coronaviruses on surfaces, there is likely very low risk of spread from food products or packaging.

## Donations

Thank you to the following individuals or groups for their generous donations of Personal Protective Equipment or other support to our staff and residents:

- Large Flower donation for GSFH's outdoor gardens from Schaefer's Gardens and Wholesale Growers in Chenango Forks, courtesy of the Decker family in honor of Fran Decker.
- The family of Bob Decker sent goodies for the GSVE skilled nursing unit
- The family of Kathleen Hall provided meals for all GSVE ALR staff



Please visit our website for ongoing coverage of our response to COVID.

Thank you all for your patience during this difficult time. If you are feeling unusually high levels of stress, there are a number of resources available.

- Office of Mental Health Emotional Support Helpline: 1-844-863-9314 \*  
The Emotional Support Helpline provides free and confidential support, helping callers experiencing increased anxiety due to the coronavirus emergency. The Helpline is staffed by volunteers, including mental health professionals, who have received training in crisis counseling.
- CDC Resources : <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/managing-stress-anxiety.html>

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