

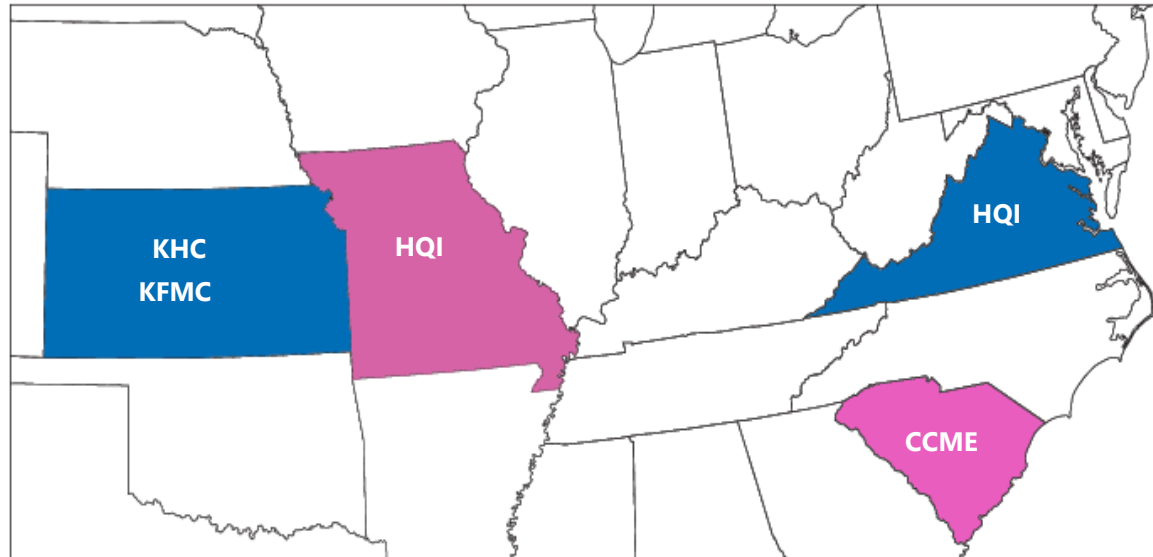


Weekly Dose Office Hours

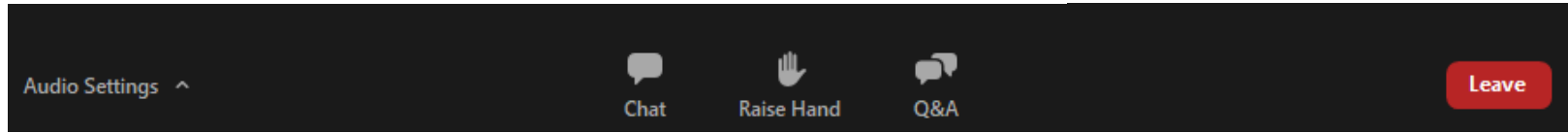
The St. Louis Post-Acute and Long-Term Care Roundtable

4/6/2022

Health Quality Innovation Network



Logistics – Zoom Webinar



To ask a question, click on the **Q&A** icon.

Raise your hand if you want to verbally ask a question.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.

Today's Presenters



**Allison Spangler, BSN,
RN, RAC-CT, QCP**
Quality Improvement
Advisor



Dana Schmitz, BS, MS
Quality Improvement
Advisor



**Charles Crecelius, MD,
PhD, FACP, CMD**
BJC Medical Group
Post-Acute Medical
Director



**Mary Locklin,
MSN, RN, CIC**
Quality Improvement
Advisor-Infection
Prevention

Goals for Weekly Vaccine and Booster Education:

- Improving booster uptake
- Current knowledge updates
- A forum for vaccine and booster questions
- Interactive, peer-to-peer collaboration
- A “safe space” to talk
- Best practices and innovative idea sharing
- Tips for improving resident and staff safety



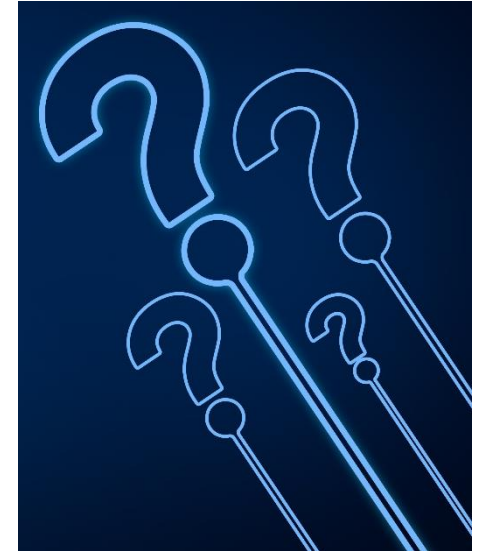
The content presented in this webinar is based on COVID-19 information and guidance as of the date of this session.

Polling Question 1

Does your organization participate in a post-acute care forum or workgroup?

A. Yes

B. No



The St. Louis Post-Acute and Long-Term Care Roundtable

Charles Crecelius, MD, PhD, FACP, CMD

BJC Medical Group Post-Acute Medical Director



Disclosures

- Dr. Crecelius has no disclosures

Objectives

- Understand the unique structure of the St. Louis PAC/LTC Roundtable and how this forum enabled rapid response and coordination across the health systems and nursing homes during the pandemic.
- Learn how the Roundtable provides a robust platform for communicating across care settings, addressing local challenges and sharing lessons learned throughout the pandemic.
- Understand how the establishment of the Roundtable has been implemental in improving healthcare outcomes through standardization of processes and communication across the continuum of care.



The Setting in St. Louis 2018

- Four major hospital system organizations (HSOs), each with a risk bearing ACO and most with multistate presence
- Seven major nursing home (NH) chains and multiple independents
- BJC – 12 hospitals, place in about 450 NHs a year. About 150 NHs take one admit or more a month, or 12 a year
- Three HSOs had a preferred network of homes used about 40% of the time, with multiple HSOs often in the same NH
- Our providers were going to NHs where multiple hospitals admit
- Each HSO had its own procedures and protocols, none had a good liaison to the facilities outside of the provider seeing patients

Problems with the Status Quo

- Lack of standardized approaches to patient care
- Lack of capability/venue to address common problems among HSOs and NHs
- HSO leakage – patients switching around systems
- Lack of set expectations for both parties
- Lack of lines of communication
- Poorly designed to handle emergencies (e.g., a pandemic)



Starting a Solution

- Lack of standardized approaches to patient care
- Lack of capability/venue to address common problems among HSOs and NHs
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Starting a Solution, continued

- NH physicians representing the HSO started having conversations about mutual problems
- Involved respective HSO and NH to gauge interest in starting a forum
- Reached out to key independent physicians, QIO
- Held first meeting October 2018
 - Determine if all appropriate parties involved
 - Developed mission statement – duties and responsibilities
 - Arranged for legal to meet and discuss Stark laws, etc.
 - Signed appropriate paperwork
 - Discussed friction points, “low-lying fruit”



St. Louis PAC/LTC Roundtable Pre-COVID

- Developed standard call parameters using INTERACT tools
- Developed standardized skin tear protocols
- Developed SBAR using McGeer Criteria for UTI diagnosis
- For all
 - Find best practices and decide on one for all
 - Nurse training material
 - Metric development and report out
 - PDCA – plan do check act
 - Yearly reinforcement



And Then COVID Hit...

- Quickly switched out goal to ensure safe and smooth flow of patients throughout system while advocating for nursing home needs
- Developed/presented state guidance as came out, helped interpret with medical perspective/assistance of state and local departments of health
- Helped develop a tracker list of available beds (COVID transmissible, COVID recovered, behavioral health, etc.) that the facilities could report on via web-based platform
- Helped mediate difficult cases with hospital case managers
- Helped determine need and lack of need for types of bed and dedicated facilities

Things We Had Difficulty With

- Staffing, staffing and staffing
- Non-Roundtable facilities and physicians
- Direct assistance with PPE (but did identify resources)
- Behavioral health – specialty areas of care
- Continuity of projects with staff turnover
- Engaging as well as we would have liked with hospital medicine



Post-COVID Roundtable (Are We There Yet?)

- Starting to resume previous non-COVID topics
 - AMDA Drive to Deprescribe – targeting multivitamins and supplement using pharmacy for most of the work. Finishing and plan on starting diabetes – simplifying regiments and reducing accuchecks
 - Sepsis program – on hold as less relevant at this time
- Starting new projects
 - Standing orders/protocols
 - Advance care planning



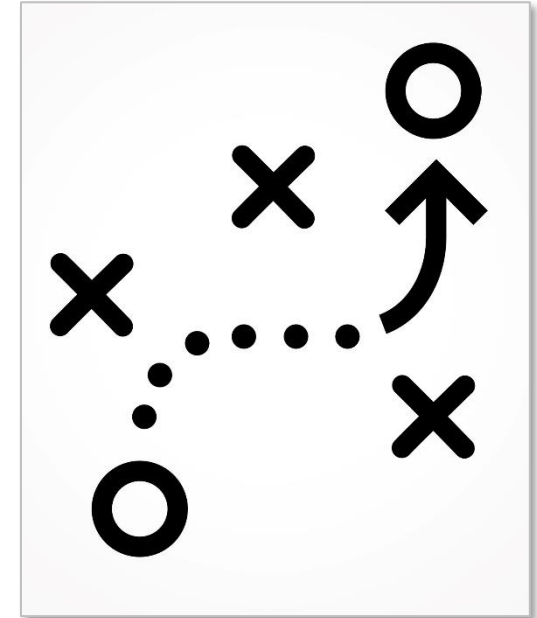
Related Roundtable Activities

- Monthly calls with Missouri Hospital Association, Missouri Health Care Association, LeadingAge, larger nursing home chains and health system physicians
 - COVID issues
 - Difficulties with MA plans and placement
 - Concerns for Medicaid funding
 - NP scope of practice in our state
- Strengthening work of area ACOs in working toward community health



Future Hurdles

- Engaging non-Roundtable NH and healthcare providers
- Possibly engaging home care
- Maintaining progress
- Maintaining and implementing latest clinical standards
- Helping to respond positively to current CMS plans regarding nursing homes

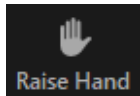


So How Do We Do This?

- Need champion(s) – the vision
- Need strong persons with ties to both HSO and NH – the moderator
- Need participants – HSO, NH, QIO, university reps, others as needed (case managers, department of health, surveyors, etc.)
 - Regional NH nursing representatives seemed best for NH
 - HSO – NH Physicians in our case have been moderators
- Need venue (rotate site)
- Need to express the need and deliverables – the payoff



Questions? Comments? Share What is Working or What is Difficult for Your Team!




Raise your hand to verbally ask a question



Type a question by clicking the **Q&A** icon

*Don't hesitate to ask a question after the webinar is over.
Email LTC@hqi.solutions or your HQIN Quality Improvement Advisor.*

Did YOU Get Your Weekly Dose?



The Weekly Dose

The latest guidance, resources, and updates for nursing home staff on COVID-19 vaccines and boosters.

HQIN
Health Quality Innovation Network

The *Weekly Dose* is a brief bulletin that provides you with the latest guidance and information to support vaccine uptake. As your Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO), our team of nursing home experts at the [Health Quality Innovation Network \(HQIN\)](#) is dedicated to helping you increase your vaccination rates. Please [contact us](#) with questions.


OFFICE HOURS: Highlighting Best Practices: St. Louis Roundtable Platform Optimizes Coordination Across Care Settings | Wednesday, April 6 at 2 p.m. ET / 1 p.m. CT

In this session, attendees will hear how the St. Louis Post-Acute Care/Long Term Care Roundtable established a solid structure to provide coordination across health systems and nursing homes during the pandemic.

All nursing homes are encouraged to attend to learn how this best practice may apply to their initiatives.

Want to submit questions in advance of this session? Email LTC@hqin.solutions.

NOTE: The registration link will allow you to sign up for the next Office Hours as well as upcoming sessions.



[Register Now!](#)

The Centers for Disease Control and Prevention (CDC) has provided options for long-term care administrators and managers to consider when [coordinating access to COVID-19 vaccines](#) for residents and staff.

Learn about the state and local immunization programs available in your area that can assist you with vaccine administration in the community or on-site.

[Visit CDC's COVID-19 Access in LTC Setting Webpage](#)

Building On Your Resources

HQIN Resources

- [Nursing Home COVID-19 Vaccination Booster Action Plan and Resources](#)
- [Vaccine Administration Process Guide](#)
- [COVID-19 Vaccination & Booster Tracking Tool](#)
- [COVID-19 Vaccine Educational Resources for Long Term Care Facilities](#)
- [Simple Strategies for Encouraging Staff to Receive the Influenza Vaccine](#)
- [COVID-19: Best Practices for Patient Communication](#)
- [Staff Mental Health Wellbeing Action Plan Template](#)
- [Simple Strategies – Staff Mental Health](#)
- [Staff Mental Health and Wellbeing Resources](#)
- [Pause for Prevention Module 8: Caring for Yourself During an Infectious Disease Outbreak or Pandemic](#)
- [COVID-19: Best Practices for Patient Communication Fishbone Diagram \(hqin.org\)](#)



Additional Resources

- [V-safe Poster](#)
- [COVID-19 Vaccine Booster Shots](#)
- [Booster Clinics Pharmacy Partnerships](#)
- [ACIP Vaccine Recommendations and Guidelines](#)
- [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States](#)
- [Summary Document for Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States](#)
- [Vaccinations and Older Adults | National Institute on Aging \(nih.gov\)](#)
- [Well-Being Concepts | HRQOL | CDC](#)
- [qapiataglace.pdf | CMS](#)



Next Session:

COVID-19 Booster Vaccines: Using Data and Science to Guide Messaging

Wednesday, April 13

2:00 p.m. EST | 1:00 p.m. CST



FOR MORE INFORMATION

Call 877.731.4746 or visit www.hqin.org

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From HQIN:

To all essential care giving teams
supporting residents and families,

Thank you for attending