

From: pmerryweather@projectpatientcare.org,

To: dg6450pat@aol.com,

Subject: Project Patient Care Newsletter

Date: Mon, Jun 8, 2020 12:56 pm

The logo for Project Patient Care Org, featuring the text "PROJECT PATIENT CARE.ORG" in white, bold, uppercase letters on a dark blue square background.

Black Lives Matter.

As quality and safety improvement advocates, we know that "Every system is perfectly designed to get the results it gets." We need systems changed. We need to be a part of that, in our organization, in our communities, and in our country.

We stand for systemic change NOW!
"The time is always right to do what is right."
Reverend Dr. Martin Luther King, Jr.

Newsletter - May 2020

Dear Project Patient Care Community,

The horrific death of George Floyd has shocked the nation and many have stood up to say 'enough is enough' and Black Lives Matter. Unfortunately there were many incidents before, but the shock of seeing a black man die in front of us, has propelled people into action and calling for change - Now!

The death of George Floyd, Breonna Taylor, Ahmaud Arbery and countless others that have suffered injustices -- it is not just decades but centuries of injustices dating back to 401 years ago. The injustices of slavery over 401 years ago laid the foundation for centuries of injustices.

Two years ago I had the opportunity to chair a Rotary International Conference at Chicago's South Shore Cultural Center with a theme of Peace Through Education. For anyone familiar with Rotary, chairing a Conference means you do everything from program design, speaker engagement, site selection, and raising the funds to put on the program. We had over 500 international and local leaders and simultaneously held a Rotary UN Model Conference for 200 local youth and advisors on teaching conflict resolution and restorative justice in schools. In the videos of the program you will see a backdrop of orange - as the Conference was the same weekend as the National Gun Violence 'Wear Orange' program and only a few miles away from the park where 15 year-old Hadiya Pendleton was killed after school standing with friends.

With a committee, we decided to use the term 'education' broadly and included formal education but also informal education, the type you learn and share through experience. We focused on the "Two Cities of Chicago" - the one tourists see and the other where most Chicagoans live and many in segregated communities.

We decided to open the meeting with a plenary focused on education on social injustices and the systemic and institutionalized racism that prevails in our communities and nation.

Three living legends from Chicago were the presenters and they shared their experience tracing their roots, their road traveled, and the future so that others could learn and make change:

Timuel Black, civil and human rights leader; educator; professor; veteran who has seen the liberation of the Buchenwald prison camp and the storming of the beach at Utah; and 101 years old.

Joseph Harrington, CEO of The Mojo LTD; civil rights activist; and public health and healthcare leader.

Xavier Ramey, CEO of Justice Informed, LLC; civil and human rights activist; award-winning social strategist, noted public speaker, conflict mediator, and effective communicator of possibility versus probability.

Their video presentations are all available at no charge on [Vimeo](#) Please note that when you go to Vimeo you will find about 24 videos from the plenaries at the Conference. The breakout sessions did not have video recordings - there were over 48 local, national, and international speakers.



There are hundreds of studies that have demonstrated the healthcare disparities that exist in our communities, cities, states, and nation. The disparities are ingrained in the social fiber of institutions and organizations - some of it is conscious and some of it is unconscious. We need to move beyond the racial and ethnic biases through open and transparent conversations and systemic change. Change starts with all of us and we are ready to move ahead and make the changes are necessary so we can advance to a just and equal society.

COVID-19 Quality and Regulatory Changes in Nursing Homes

We are still in the midst of the COVID-19 pandemic and at this writing, we have 7 million COVID-19 confirmed cases world-wide with about 2 million cases in the U.S. Of the 7 million cases, there have been a little over 410,000 deaths and 28% of the world's deaths have occurred in the United States.

Recently, nursing homes were required to report information to the Centers for Disease Control and Prevention (CDC) and the Centers for Medicare and Medicaid Services (CMS). While not all nursing homes had reported in the latest release of May 31, 2020, the data submitted indicates that at least 32% of all COVID-19 deaths in the U.S. were nursing home residents - and the percent is expected to rise. In some states, the percent of deaths of nursing home residents was much higher, such as 52% in Illinois; 81% in Minnesota and Rhode Island; and 77% in New Jersey. Keep in mind, other countries also have had higher deaths among nursing home residents, such as 81% of all COVID-19 deaths in Canada among residents in long term care facilities and the WHO estimating that half of all COVID-19 deaths in Europe and the Baltics occur in nursing and care homes.

The CMS and CDC COVID-19 [Nursing Home Data](#) is the most comprehensive information available on nursing home COVID-19 confirmed or suspected resident and

staff cases and deaths. Additionally, for the first time ever, the information includes data on a nursing home's ability to conduct testing at their site; detailed sanitizer and personal protective equipment available for now and one week out (includes masks, gowns, eye protection, gloves); and any shortage of nursing, clinical, aides, or other staff.

States also have been collecting variable amounts of data and information, but the CMS and CDC Nursing Home Data is by far the most comprehensive and timely. Nursing homes that fail to report their information to CDC/CMS by the deadlines are subject to CMS fines each week.

While many organizations have started to identify what worked and what did not work during this first wave of COVID-19, very few have specified the need to address the needs of congregate housing - nursing homes, assisted living, veteran homes, and disability homes. The nursing home needs for PPE, test kits, and staffing should be addressed for the second wave, but many in nursing homes are deep into the first wave in trying to meet the resident and staff testing and support needs.

Project Patient Care Guidance on Elective Surgeries for Patients and Caregivers

In case you missed it.....

The **Recommendations for and by Patients, Families, and Caregivers for Elective Surgeries and Invasive Procedures During COVID-19 Pandemic** document includes information for patients, families, and caregivers on how to prepare prior to their surgery or procedure. There is also guidance on how to prepare post-surgery or procedure based upon the location of their recovery at home, at home with home health, or in a post-acute care or rehab care facility.

The **Recommendations for and by Patients, Families, and Caregivers for Elective Surgeries and Invasive Procedures During COVID-19 Pandemic** can be found by clicking [Here](#) and scrolling to April 2020.

Project Patient Care Videos

Project Patient Care has been working with a number of partners to jointly prepare public videos including organizations such as h2pi, CAPS, Maryland Patient Safety Center, Patient Safety Movement Foundation, and Medstar Institute for Quality and Safety.

Videos currently available include:

- Important Role of Telehealth in Mental Health
- Elective Surgeries in Hospitals in COVID-10 Times
- COVID-19: Preparing for a Hospital Visit
- Learning from COVID-19 Patients
- Health Equity During COVID-19

These videos are available free of charge at:

<https://www.youtube.com/channel/UCyLOvldpZ0x9gKEUhdK6INQ>

- Patient and Family Engagement During COVID-19
Maryland Patient Safety Center publicly available:
<https://www.marylandpatientsafety.org/pfacqs.aspx>

COVID-19 Testing

There are two categories of testing for COVID-19: COVID-19 confirmation that one has a current infection and the other is the antibody test that suggests one had a prior COVID-19 infection. The accuracy of the tests have increased significantly since they were first introduced and are now more widely available.

As almost all states have lifted their Stay at Home orders, it is important to still take precautions by wearing a mask in public gatherings and maintaining a social distance.

If one suspects they might have COVID-19, they should isolate themselves, get tested, and monitor their condition. The challenge with COVID-19 is that people can be asymptomatic during or before they show symptoms and during this time, they can spread the infection.

Recently, at the urging of one of my sons, I went for the antibody testing. During late March I had a slight occasional cough and nasal drainage - typical of my annual spring allergies. Knowing that I was not sick enough to get the COVID-19 test during March, I adhered strictly to the Stay at Home orders and only ventured outside to walk my dogs at 5:30 a.m. to avoid any people. The result of the antibody test was positive, confirming I did have COVID-19 and not allergies. Luckily with Stay at Home orders I did not spread to anyone outside of our home.

If you think you might have the Virus, take time and get examined and Isolate yourself - it is a quick and easy test and with the results, you will know if you need to maintain isolation. As this falls under the emergency order for what is often times referred as "essential benefits," you will not have a co-pay, co-insurance, or deductible associated with the test.

Resources

There are many resources readily available from international, national, state, county/city government agencies. Typically resources are centralized with most in state and city departments of public health.

A few links:

World Health Organization - <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

Centers for Disease Control and Prevention (CDC) - www.cdc.gov

Centers for Medicare and Medicaid Services (CMS) - <https://www.medicare.gov/medicare-coronavirus>

State of Illinois - <https://www2.illinois.gov/sites/coronavirus/Pages/default.aspx>

Illinois Department of Public Health - <http://www.dph.illinois.gov/>

City of Chicago - <https://www.chicago.gov/city/en/sites/covid-19/home.html>

National Association for Healthcare Quality (NAHQ) COVID-19 Quality Resources - <https://nahq.org/education/covid-19-resource-center/>

SERVING OTHERS DURING COVID-19 PANDEMIC and BLACK LIVES MATTER

During the COVID-19 Pandemic, Project Patient Care is still doing volunteer work serving locally with neighborhood clean up and justice programs. Pat is also working with Rotary Clubs in Chicago area to distribute more than 220 new iPads in July to Safety Net Hospitals and Nursing Homes.



We Enjoy Hearing from YOU!

Please feel free to contact us at any time as most of the time we are still all working remotely from our homes.

Contact us at:

Telephone: 312-445-6477 (office phone)

Cell Phone: 630-202-5579

E-mail: Pat Merryweather-

Arges pmerryweather@projectpatientcare.org