

292 Days and Counting!

Yes, it has been 292 Days that many nursing home residents have been on lockdown – unable to have family, friends, chaplains, and volunteers visit with them. They long for the days when they can hug their families and socialize at dinner, activities, and outings with other residents and friends.

The delays in getting COVID-19 vaccines to states, and in turn nursing homes, continues to move the date further back when they can return to a ‘somewhat normal family and community life.’ Many nursing home residents and their families are concerned as they have already experienced the loss of residents while others have fallen ill with COVID-19.

As we are expected to experience another surge in the U.S. following the December holidays, it is hard to believe, but it can be, even worse than the surge following Thanksgiving. In Illinois, the aftermath of COVID-19 deaths and harm struck nursing homes hard with 605 nursing home residents dying in the week ending December 18 and another 5,063 nursing home residents newly diagnosed with COVID-19 that same week.

Hospital and nursing home healthcare workers are exhausted and desperate to see the light at the end of this long tunnel. There are two lights at the end of this tunnel – one is the rapid and successful deployment of COVID-19 vaccines and the other is you and I making sure we adhere to wearing our mask, keeping social distance, and practicing hand hygiene.

The following information is for residents and their loved ones and others to understand the challenges that nursing homes are facing with COVID-19 and the vaccine administration. These are all solvable issues but we need leadership at the highest levels to address many of these and provide a national standard and guideline.

We are receiving many inquiries from families and caregivers as to when their loved one in a nursing home will receive the COVID-19 Vaccine and how is it that some nursing home residents in states are already receiving their vaccines. Ideally one should be hearing about expected dates from nursing homes who should be getting information from their state departments of public health and from their pharmacy if they are participating in the CDC Pharmacy Partnership Program.

The issue of providing COVID-19 vaccinations in nursing homes is a little more complex due to a variety of issues, including:

- Variations by states in terms of prioritizing who receives the vaccines
- Similarities and differences of current COVID-19 vaccines
- Variations by nursing homes administering vaccines themselves or through a CDC agreement with CVS and Walgreens
- Nurse and aide staffing at nursing homes; some nursing homes are staggering vaccinations
- Current PPE challenges
- Responding to nursing home residency hesitancy issues in receiving vaccine
- Immunizing new nursing home residents and staff

Variations by states in terms of prioritizing who receives the vaccines. While the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices made recommendation on the prioritization of those to receive the first COVID vaccines, states make their own decisions as to prioritization within their states. The first deliveries of the Pfizer and Moderna vaccines have been received by states with some states providing all to hospitals for the front line health care workers; other states providing directly to hospitals and nursing homes; and remaining states providing to hospitals, nursing homes, and pharmacies under the CDC’s Pharmacy Partnership for Long-Term Care Program Agreement.

It is expected that in the first week of January, all states will be providing vaccines for some of their front line healthcare workers and nursing home residents and staff. It will be a few weeks, depending upon vaccine supply, for each nursing home within a state to receive the vaccines.

Similarities and differences of current COVID-19 vaccines. The two current COVID-19 vaccines have different storage requirements, 1st and 2nd dosage time spans; approval for different ages; but otherwise are very similar:

Pfizer-BioNTech COVID-19 Vaccine	Moderna COVID-19 Vaccine
No Live Virus	No Live Virus
Uses messenger RNA	Uses messenger RNA
2 doses, 21 days apart	2 doses, 28 days apart
Requires ultra-cold storage; minus 70 degrees Celsius	Requires routine cold storage; 25°C and -15°C in freezer or in refrigerator for 30 days at 2°C and 8°C
95% effective	94.1% effective
Approved for 16 years or older	Approved for 18 years of older

The major difference for nursing homes is the requirement of the deep freezers that are required for the Pfizer vaccine as they are expensive and currently in short supply. Therefore, many nursing homes prefer the Moderna vaccine but are also not willing to delay getting the vaccine for their nursing home residents as one large physician group working with nursing homes has said “Every. Moment. Counts.”

Variations by nursing homes administering vaccines themselves or through a CDC agreement with CVS and Walgreens. There are many variations occurring in administering COVID-19 vaccines to nursing home residents with some nursing homes administering the vaccines themselves. Nursing homes participating in the CDC Pharmacy Partnership for Long-Term Care Program Agreement are working primarily with CVS and Walgreens to have their pharmacists and staff administer the COVID-19 vaccine.

Several nursing homes prefer administering the COVID-19 vaccine themselves, similar to the approach they take in administering flu or pneumonia vaccines. By administering vaccines themselves, the nursing home staff can monitor their residents and stagger vaccines to ensure they have time working with residents and securing their consents after explaining the vaccine.

As the CDC Pharmacy Partnership Program allows for 2 or 3 visits by the CVS and Walgreens pharmacists, nursing homes are concerned that the Program does not allow for more visits.

Additional visits allow the nursing homes to stagger the immunizations and monitor the residents and staff closely after they receive the vaccines.

As nursing home residents have been on lockdown for over 9 months, many residents have had a decline in their mobility and therefore must be immunized and monitored in their room. CDC recommends that everyone be monitored for 15 minutes following the COVID-19 vaccine administration and allot 30 minutes for those residents that are compromised or have a history of allergies.

Nurse and aide staffing at nursing homes; some nursing homes will stagger vaccinations.

In undertaking an immunization program at a nursing home during the COVID-19 pandemic, residents need to be monitored for a couple of days as there are typically mild reactions to the 1st and 2nd doses of the COVID-19 vaccine. The monitoring and support of residents requires more staffing than usually during this time.

As several nursing homes are experiencing nursing and aide shortages, the ability to support and monitor nursing home residents following an immunization is important to the residents' well-being. CDC has identified typical reactions that occur after the 1st and 2nd doses. As COVID-19 vaccines cannot cause COVID-19 virus, it is important to test residents if they are showing symptoms associated with COVID virus after they receive the vaccine. As residents can be asymptomatic of the COVID-19 virus prior to the vaccination, it is important to test for COVID if they are symptomatic. CDC provides a wealth of information on their COVID web site on reactions to COVID-19 and support for symptoms - <https://www.cdc.gov/vaccines/covid-19/toolkits/long-term-care/safety-monitoring-reporting.html>

The Centers for Medicare and Medicaid Services (CMS) collects timely COVID-19 and facility data from nursing homes on a weekly basis that includes information on nurse and aid shortages and PPE shortages for the day and upcoming week. <https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/>

To provide a perspective on how weekly reporting of staffing, PPE, COVID-19 cases is key to being able to administer vaccines safely within nursing homes, an example might help. In Illinois, 50% of COVID-19 deaths are nursing home residents and outbreaks still occur throughout Illinois. With the week ending December 13, 2020, of the 712 nursing homes in Illinois, 20.7% of Illinois nursing homes reported a shortage of nurses with 22% of the nursing homes reporting an aide shortage.

In the midst of the pandemic and a lockdown on nursing homes, staff are spending more time with residents in their room rather than providing congregate meals and activities. Many nursing homes wish to stagger their immunizations of residents which will allow them to monitor the residents and staff closely and provide them with comfort and support should they experience reactions to the vaccines. With the CDC Partnership Program, only 2 or 3 immunization days are allowed as opposed to unlimited days when nursing home staff administer the vaccines.

Current PPE challenges. CDC is urging all persons receiving the COVID-19 vaccine to maintain wearing a mask, keeping a social distance, and practicing hand hygiene --- even for nursing home residents and staff that have received the COVID-19 vaccines.

Personal Protective Equipment (PPE) still is identified as a need in several nursing homes throughout Illinois and the nation. As noted earlier, nursing homes are required to report PPE shortages for that day and for the upcoming week in their weekly reports to CMS.

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg/> All of the information is identified by nursing home name and includes current and historical data on COVID-19 cases, testing, deaths, PPE, and staffing.

In Illinois, of the 712 nursing homes reporting for the week ending December 13, 2020, 19 reported N95 shortages for that day and 56 reported N95 shortages for the upcoming week. As gowns are also an item routinely in short supply in nursing homes; 11 reported having no gowns for the day of reporting and 34 with expected shortage for the upcoming week.

In order to protect both residents and staff that may not have received the COVID-19 vaccine, it is important to continue best PPE practices by all residents and staff.

Consent by residents, families, or guardians There seems to be wide variation among states and within states as to the type of consent needed. Some pharmacies are using extensive forms that ask many questions that cannot be answered by most people and have consent sections in such small fonts that no one can read them as they are not 508 compliant.

Some pharmacies are requiring the presentation of current Medicare or other insurance cards for the CDC Pharmacy Partnership Program and refusing to immunize the nursing home resident if the card is not current. Nursing home administrators can assist the resident and pharmacies by reviewing their administrative records and information and providing the current Medicare identification number.

Responding to nursing home residency hesitancy issues in receiving vaccine. While some nursing home residents and staff will respond right away and want to get the vaccine as soon as it is available, some residents will want to discuss the value and risks of the vaccine.

It is important to have open and honest dialogue with staff and residents on the COVID-19 vaccines. There are many vaccine issues or objections that are often raised by persons on receiving the COVID-19 or other vaccines. It is probably best to review prior flu immunization history and discuss the advantages of the vaccine with those residents and staff that are supportive and those that are hesitant.

CDC has information to help providers, nursing home residents, families, and guardians to better understand the COVID-19 vaccine and its value in protecting people from getting COVID-19 <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html>

Polio. Many nursing home residents will probably remember the polio epidemic as the number of new polio cases rose in 1952 when there were 57,879 new infections and 3,145 deaths. Many of the infected were paralyzed or spent weeks and months in iron lungs helping them breathe. Swimming pools, theaters, gatherings, school, and more were closed as parents lived in fear of their children contracting polio.

The sharing of their polio experience by nursing home residents quickly leads them down the path when the vaccine became available in 1954 and children lined up at sites to receive the

polio vaccine. The number of polio deaths and infections dropped quickly and dramatically as a result of the vaccine.

Polio fear gripped the nation in the early 1950's and yet in the highest year in that decade, there were 3,145 deaths as opposed to current COVID-19 deaths of nursing home residents of over 113,000. COVID-19 nursing home resident deaths in the past 9 months is 35 times higher than an entire year of Polio deaths in 1952.

The same population that were children during the Polio epidemic is the same population now hit hardest by COVID-19 nursing home and senior deaths.

Immunizing new nursing home residents and staff. Most nursing homes expect to continue to receive new residents for short and long term stays. Most often, short term stays are for residents that have been transferred from a hospital for post-acute care and rehab support.

It will be important to obtain records of their COVID-19 immunization. If they have been immunized, one needs to know which vaccine they received and if they have received both doses. If the new resident has received the first dose of the COVID-19 vaccine, they should receive the second dose in a timely manner. As one must use the same vaccine for the second dose as the first dose, it is important to make those arrangements with a pharmacy if the nursing home does not already have the vaccine. One cannot mix the manufacturer of the vaccines (Pfizer and Moderna) for a person --- they must retain the same manufacturer for the 2nd dose as they had for the 1st dose.

As staff turnover in nursing homes can be high and several staff work at more than one nursing home, it is important to ensure the new staff are immunized either prior to their employment or they get immunized either at nursing home or through their local pharmacy.

Just remember.....the goal is to have most, if not all, residents and staff immunized. As the number of residents receiving the second dose of the COVID-19 vaccine increases, many residents and their families will be counting the days until they can hug and embrace each other in person.

We need to end the avoidable early deaths of nursing home residents and end the 292 Day lockdown that has led to isolation, depression, and physical and mobility declines – the only way we can do this is by stopping COVID-19 and protecting ourselves and others from COVID-19 through COVID-19 vaccines and following public health guidance.

Pat Merryweather-Arges
Project Patient Care
pmerryweather@projectpatientcare.org
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