DIAKON SENIOR LIVING SERVICES

Apdate on Cohorting & Testing

any family members rightly want to know what we are doing to protect their loved ones in our health care centers.

From the beginning of the pandemic, we have communicated the many steps we are taking, which include:

- Enhanced cleaning and sanitation practices
- The use of appropriate levels of Personal Protective Equipment (PPE)
- Physical distancing
- Physical barriers
- Changes in dining practices
- Visitation restrictions and
- Monitoring and testing based on CDC and state guidelines.

Many family members, as well as residents, also want to know the steps we take if we do have confirmed cases, particularly in terms of grouping resident accommodations.

Cohorting

Cohorting is a term that refers to grouping individuals, which we are using to strengthen infection control and prevention. In this case, it means we are relocating residents who test positive for the virus that can cause COVID-19 disease to an area of our health care center with other residents who have tested positive. We also are grouping individuals who may have been exposed to the virus.

This step allows us to accomplish several goals:

- Use negative-pressure equipment or areas to reduce airborne transmission of the virus, particularly to those who are healthy. The use of such equipment is done in consultation with our medical authorities.
- Focus on containing the virus to a particular area of the facility.
- Deploy dedicated caregivers to that area wearing the higher level of PPE including face-guards, gloves, gowns and N-95-type respirators. Our staff members are trained on how to don and doff this type of equipment safely.

When residents remain symptom-free for a period of time, as determined in accordance with guidelines from the federal Centers for Disease Control and Prevention and state Department of Health, they are tested—and retested—and if found negative, they can be relocated to the accommodations they regularly enjoy.

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Testing

There have been numerous media reports on testing, leading in some cases to public misunderstanding.

In Maryland, increased testing of nursing care center residents and staff members has been recommended by governor's order and Maryland using National Guard medical personnel to assist with test access, beginning with health care centers that have had the highest number of positive COVID-19 cases.

To date, applicable guidance has indicated a priority be given to symptomatic individuals. The most recent advisory document issued by the Pennsylvania Department of Health does not change that prioritization, and the state's own infection control partner (ECRI) has indicated that the advisory document related to testing is "neither a requirement nor a recommendation." Since issuing the advisory document, the Pennsylvania Secretary of Health has clearly acknowledged that there are not enough testing resources, nor processing capacity, to execute a plan to test all residents and employees in every skilled nursing center in the Commonwealth. It should also be noted that without the ability to test frequently, comprehensively and without significant error rates in test results, over-reliance on testing results can actually create additional exposure for both residents and staff members.

The Pennsylvania Department of Health has just started to communicate directly with all skilled nursing facilities to collect applicable data, including the resources required related to doing an initial test. We expect that we will be provided more updates from the department in the near future, but consider it highly likely that a widespread testing strategy will take time to implement in the more than 700 nursing facilities. Any steps on testing also have to take into consideration the ready availability of reliable testing.

At this point, Diakon tests any residents or staff members who exhibit any of the CDC-recognized symptoms of COVID-19. Further, the organization consistently reviews its infection-control practices and training to make sure we are taking every step possible to limit incidence of the virus. Those steps may involve an expansion of testing for individuals not exhibiting symptoms or considered "Persons Under Investigation" for the virus, such as those who have been in close contact with people who have tested positive, should that process seem prudent and testing is more widely available.

If you have questions about Diakon's efforts, please speak with the executive director of this senior living community.



This is the Way to We!





