

# Level of Care Transitions: Long-Term Solutions for COVID-19 Problems

**An Acute Care to Post-Acute Care Transition Project Proposal**

**2021 National HCC Conference**

**Project Partners: KS HCCs, HCCP of KS, LLC, KDHE and ASPR**

**Revised: 3/19/2021**

## PROJECT SYNOPSIS

In early August of 2020, the Kansas Department of Health & Environment (KDHE) contracted with Healthcare Coalition Partners of Kansas (HCCP of Ks) to evaluate transitioning patients/residents from Acute Care facilities (hospitals in Kansas) to Post-Acute Care facilities (any setting in Kansas where a patient/resident would receive additional medical care after discharge from a hospital) and to make recommendations that could help resolve the identified difficulties. HCCP of Kansas defined the following plan of action to fulfill the project scope:

### Partnership Engagement

- Immediate hiring of a contracted project-manager.
- Engagement of Critical Project Partners.

These partners include:

- Kansas Department of Health and Environment (KDHE)
- Kansas Department for Aging and Disability Services (KDADS)
- Kansas Hospital Association (KHA)
- LeadingAge Kansas
- Kansas Healthcare Association
- Kansas Adult Care Executives
- Regional HCC Executive Committees and Regional Post-Acute Care Facilities (PAC Teams)
- PAC Team facilitation to include the following tasks:
  - a. Creation of a regional strategy to identify hospital discharge and Post-Acute Care barriers
  - b. Implementation of the strategy.
  - c. Creation of a regional team to serve as the point of contact for any questions regarding the project to resolve issues as they arise.

### From Issues to Solutions

- Creation and distribution of a survey to Acute Care, Public Health and Post-Acute Care to include the following questions:
  - a. Acute Care: General questions identifying any current discharge issues or best practice in relation to Post-Acute Care residents.

- b. Post-Acute Care: Specific questions to identify barriers to housing COVID-19 residents, identification of their COVID-19 information source, identification of facilities that do accept COVID-19 residents and their best practices/policies, etc.
  - c. Public Health: Questions regarding their experience with isolation/quarantine in Post-Acute Care settings and identification of facilities they are working with that could be used for this purpose and/or as a model.
- Sorting and reporting of survey data to all 7 HCC Post- Acute Care (PAC) project teams. Members of these teams include the HCC Executive Committee members as well as Post-Acute Care representatives.
  - PAC Team discussion state-wide survey and identification of Regional specific issues. From these discussions, the following issues and solutions were identified.

Read Plan of Action

### **Project Identification and Implementation Progress**

- **Project 1: Assigned as a combined project between KS Metro and SC HCC Regions**  
Within *Focus 2 (Communications)* of the original document we recommended that “acute and post-acute care facilities be encouraged to work together to determine a COVID-19 patient transition standard.” While *Focus 5 (Resources)* recommends “the creation of a Statewide transition template.” These two (2) action steps have been combined and assigned to the Metro and South-Central HCC. At this point, we have identified tools that are currently in use. In an effort to develop a universal tool. The Metro & South Central RRC’s are discussing the proposed form with AC/PAC professionals involved in transitioning patients. The latest contact that the project manager had with one of the RRC’s was 03/09/21. After a universal tool is developed, a Statewide Pilot Program where PAC & AC facilities will be introduced to the new Transition document so it can be further refine.
- **Project 2: Assigned to SHERT and SE HCC Regions**  
Also, under *Focus 2 (Communications)*, we identified and recommended that “the PAC staff regain access into the Acute Care facilities to evaluate patients/residents across the State.” Because of increased testing and the availability of COVID vaccines we have seen PAC staff members being allowed more access to patients in the Acute Care facilities. This is important for the PAC to ensure that they can meet the needs of the patient before they have transitioned into their facility. This action item was assigned to the Southwest and Southeast HCC Regions.
- **Project 3: Assigned to SHERT and SE HCC Regions**  
Additionally, the Southwest and Southeast Regions have been asked to research the current trends in telemedicine (requirements & the equipment needs) as well as developing and submitting a list of equipment to be utilized to the HCC Clinical Advisors. Telemedicine was been identified under *Focus 4 (Resources & Staffing)* and a recommendation was made “to work with the regional HCC Medical advisors that would establish possible medical priorities and create a Telehealth network where PAC professionals would be educated on best practices.”

As of March 12, 2021, requirements and equipment needs have been identified and submitted to the HCC Clinical Advisors for approval. At this point, we are preparing a cover letter and Mini-grant

application to be sent to the PAC facilities in the Southwest & Southeast Regions. In addition to the items already completed we will need to Identify an approval/award process for the mini-grant applications and identify a process to transfer equipment or reimburse grant awardees for the equipment purchased.

- **Project 4: Assigned to the NE HCC Region**

The Northeast HCC Region is working with KDADS (Kansas Department for Aging and Disability Services) and KDHE (Kansas Department Health and Environment) to update EM Resources to include PAC facilities which hold a current certification from KDADS. Additionally, a basic user training program for PAC Staff members will be developed and placed on EM Resources as a tutorial. This action item is under *Focus 3 (Resources)* where we recommended “to update EM Resources to include PAC current Facilities and develop a Basic User Training for PAC Staff members.” On 01/14/21 we have received a current listing of all certified LTC & Assisted Living facilities from KDADS. Currently we are working with KDHE staff to develop an Acute/Post-Acute Transition Tab on EM Resources and to upload the current data into EM Resources. The latest discussion with KDHE staff about uploading the data was on the morning of 03/16/21.

- **Project 5: Assigned as a combined project of the NC and NW HCC Regions:**

Focus 5 (Resources) recommendation “the creation of Infection Control Training program on Personal Protective Equipment (PPE).” With the help of the Northwest and North-Central Regions a questionnaire was developed and sent to the regional representatives asking what PPE they were using. This questionnaire was completed on 01/29/21. Currently HCC representatives are reviewing existing online videos to develop as resource list for providers and make those videos available on the HCC websites where they are available for professionals across the State for employee training as needed.

- **Project 6: Combined project between all HCCs, KDHE and KDADS**

The final action step encourages all Associations, HCC Regions & Partner State Agencies “to provide a Common Communications source & develop an information sharing platform.” This is addressed in Focus 1 & 6 (Communications). On 02/04/21, KDHE (Dennis Kelly) & KDADS (Scott Brunner) were encouraged to promote the KDHE and KDADS partnership – as “we are all in this together and we depend on each other” type of statement on the KDHE website with a link to whatever page KDADS is keeping up to date with LTC facility COVID-19 information.

Questions?????



Plan of Action						
<i>*Target dates are goals to reach for; they are <b>not</b> set in stone and can be changed as needed. Please include an actual date*</i>						
Focus Area	Observation	Corrective Steps	Key Element • Resource • Communication • Staffing	Primary Responsible Party	Project #	Target Completion Date
One	PAC team discussions identified acute and post-acute facilities were utilizing and prioritizing different sources of COVID-19 information regarding patient discharge and care. In addition, some acute care visitor policies currently restrict post-acute care staff from entering the facility to perform in-person, pre-admission assessments of their residents.	To facilitate timely/appropriate patient placement and care the acute care and post-acute Care facilities should work together to identify a common patient transition model that incorporates the following: <ul style="list-style-type: none"> <li>• Prioritization of a common communication source for Covid-19 care and discharge planning information.</li> <li>• Review of common communication sources to identify common infection control practices which may encourage pre-discharge, in person assessments of patients in an</li> </ul>	<input type="checkbox"/> Resources <input checked="" type="checkbox"/> Communication <input type="checkbox"/> Staffing	All Associations, HCC Regions & State Agencies	Projects #5 and #6	6/30/2021

		acute care setting by post-acute care staff.				
Two	PAC teams identified a need for post-acute care facilities to know a resident's COVID-19 status prior to admission. facilities.	<p>Post-acute care facilities admit residents to different areas of their facilities based upon COVID-19 status. Currently, the post-acute care resident's COVID-19 status is determined through testing upon entering the post-acute care facility. At that point, the facility makes the decision as to which unit the resident should reside (COVID-19 positive unit, Isolation Unit, etc.) Determination of the patient's COVID-19 status prior to admission would allow for post-acute care facilities pro-actively plan for unit staffing and resources</p> <ul style="list-style-type: none"> <li>We encourage acute and post-acute care facilities to work together to determine a COVID-19 patient transition standard. An initial</li> </ul>	<input type="checkbox"/> Resources <input checked="" type="checkbox"/> Communication <input type="checkbox"/> Staffing	HCCs: Metro, Southwest, South-Central & Southeast	Project #1 and Project #2	6/30/2021

		test at the acute-care facility could serve as notification to the post-acute care facility of probable staff and resource needs. It is understood the resident would be tested again upon arrival at the post-acute care facility to confirm the previous status.				
Three	Acute care and post-acute care facilities should have access and view rights into both an acute and post-acute care bed availability system/program in order to have coordinate patient placement with real-time data In such, the PAC teams recommend the completion of post-acute care facility data in EMResource. Recommended tasks are as follows: <ul style="list-style-type: none"> <li>Analyze the Long-Term Care (LTC) and Assisted Living (AL) template in EMResource for applicable facility information to be used for COVID-19</li> </ul>	<input checked="" type="checkbox"/> Resources <input type="checkbox"/> Communication <input type="checkbox"/> Staffing	HCC: Northeast	Project #4	6/30/2021	



		<p>patient movement.</p> <ul style="list-style-type: none"> <li>• Identification and Contracting of an LTC/AL EMResource Administrator.</li> <li>• Creation and provision of training on implementation of the LTC and AL templates.</li> <li>• Creation and distribution training to acute care facility discharge staff and post-acute care facility intake staff regarding the available Hospital, LTC and AL information within EMResource.</li> </ul>				
Four	PAC teams identified the need for a review of telehealth services which are currently being utilized within post-acute care facilities. This goal of this review and potential new practices is to	Using telehealth, many acute-care facilities in Kansas are now offering expanded services within the post-acute care setting. This practice is maximizing staffing levels within the facilities as well as keeping acute care beds open for patients who cannot be treated outside of the acute care walls.	<input checked="" type="checkbox"/> Resources <input type="checkbox"/> Communication <input checked="" type="checkbox"/> Staffing	HCCs: Southeast & Southwest	Project #3	6/30/2021

	<p>identify traditional acute-care services which can be offered in the post-acute care setting, reduce the amount of staff time and resources needed move patients between facilities and reduce potential resident COVID-19 exposure risks.</p>	<ul style="list-style-type: none"> <li>Explore acute and post-acute care partnerships to deliver non-traditional healthcare services in the post-acute care setting.</li> </ul>				
Five	<p>The various transition team disciplines receive infection control and PPE training from various resources. This leads to the</p>	<p>The potential risk of infection control practice variations could be reduced with common knowledge as well as standardized transition team protocols. To address this risk, the PAC team recommends:</p>	<p><input checked="" type="checkbox"/> Resources  <input type="checkbox"/> Communication  <input type="checkbox"/> Staffing</p>	<p>HCC: Metro, South-Central, Northwest &amp; North-Central</p>	<p>Project #1 and Project #5</p>	<p>6/30/2021</p>

	potential of a variation in practice between the team members.	<ul style="list-style-type: none"> <li>• Creation and distribution of an infection control training package to all transition team disciplines.</li> <li>• Identification and utilization of an electronic system for housing and maintaining the new training package.</li> <li>• Development of a Chain of Custody Form to document patient specific care and infection control protocols throughout the transition process.</li> </ul>				
Six	New adaptive best-practices for COVID-19	Post-acute care facilities throughout the State are responding to new rules,	<input type="checkbox"/> Resources <input checked="" type="checkbox"/> Communication	All Associations,	Project #6	6/30/2021

	<p>response measures in the acute-care setting are abundant. However, post-acute care facilities in Kansas do not have a way to share these practices with one another as they are created. A common best practice sharing platform is needed for the post-acute Care facilities.</p>	<p>regulations, and practices daily, all while managing patient care with critically short staffing levels. They simply do not have the time to research COVID-19 response and hospital transition best practices from their peers. To maximize their resources available, it is critical they receive access to innovative practices implemented from their peers.</p> <ul style="list-style-type: none"> <li>An electronic platform will be identified, and access granted to interested post-acute Care facilities to facilitate this best practice sharing. This platform will always be open for input and review.</li> </ul>	<p><input type="checkbox"/> Staffing</p>	<p>HCC Regions &amp; State Agencies</p>		
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