

HHP/HPH COVID-19 Community Webinar Series

Tuesday, September 8, 2020
5:30pm – 6:30pm

Disclaimer:

- The following is intended as information resource only for HHP/HPH providers, clinicians, administrative and clinical leaders.
- Specific areas may not pertain directly to your clinical practice area and/or may not be applicable to your practice based on your existing workflows, infrastructure, software (e.g. EHR), and communications processes.

Webinar Information

- You have been automatically muted. You cannot unmute yourself.
- You will be able to submit questions via the Q&A section.
 - Due to time constraints, any unanswered questions will be addressed this week and posted on the HHP website
- A recording of the meeting will be available tomorrow on the HHP website and intranet.

How to Claim CME Credit

1. Step 1: Confirm your attendance

- You should have completed a brief questionnaire before joining today's live webinar.

2. Step 2: HPH CME team will email you instructions

- Complete and submit evaluation survey that will be emailed to you within one week of the offering.
- Your CE certificate will be immediately available to you upon completion of your evaluation.
- Questions? Email hphcontinuingeduc@hawaiiipacifichealth.org

CME Accreditation Statement

- In support of improving patient care, Hawai'i Pacific Health is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.
- Hawai'i Pacific Health designates this webinar activity for a maximum of 1.0 AMA PRA Category 1 Credit (s) TM for physicians. This activity is assigned 1.0 contact hour for attendance at the entire CE session.



JOINTLY ACCREDITED PROVIDER TM
INTERPROFESSIONAL CONTINUING EDUCATION

Disclosures

- The planners and presenters of this activity report no relationships with companies whose products or services (may) pertain to the subject matter of this meeting

COVID-19 Updates



Melinda Ashton, MD
Executive Vice President
and Chief Quality Officer
Hawai'i Pacific Health



Douglas Kwock, MD
Vice President of
Medical Staff Affairs



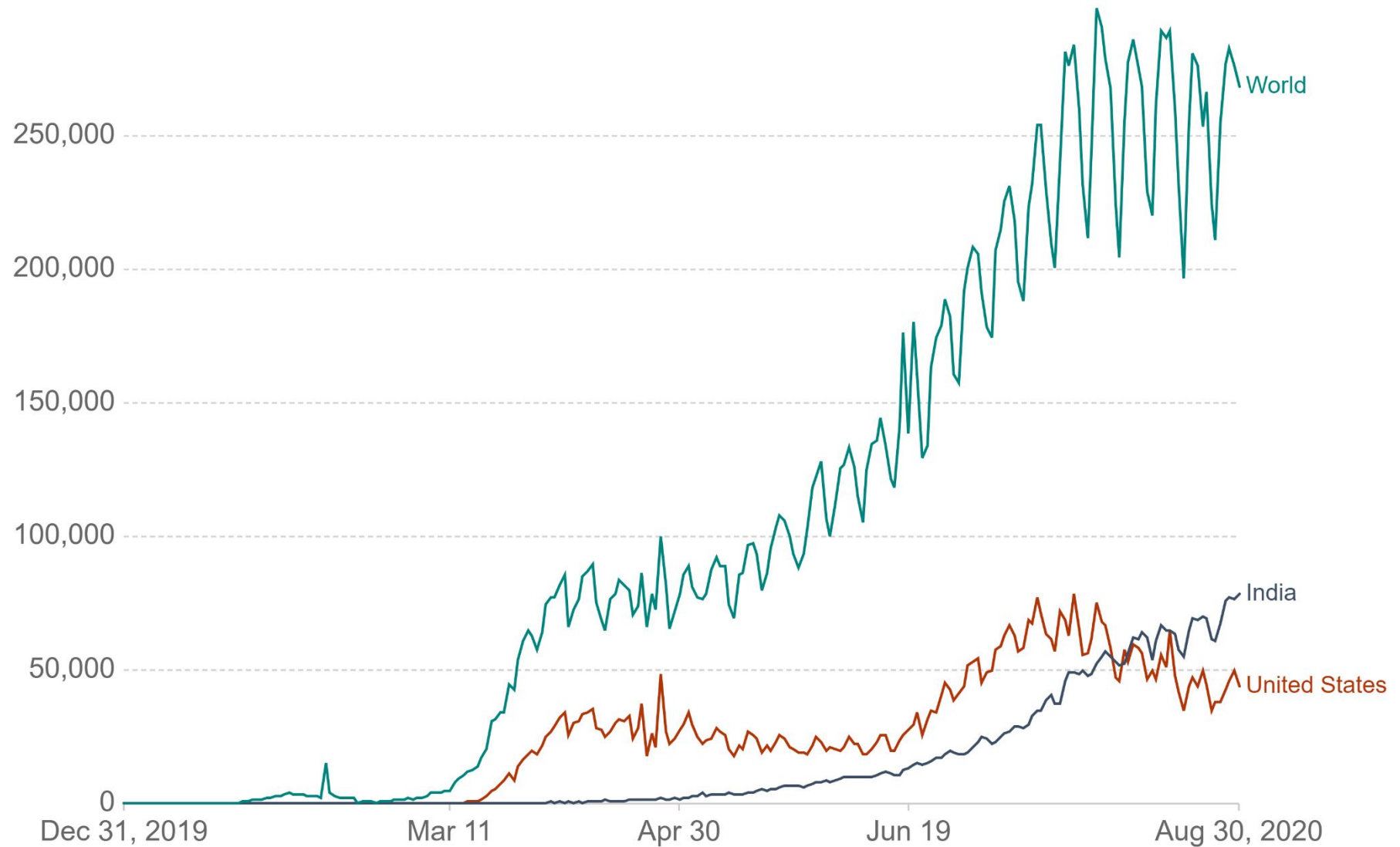
Gerard Livaudais, MD, MPH
Executive Vice President,
Population Health and
Provider Networks
Hawai'i Pacific Health



Shilpa Patel, MD
Pediatric Hospitalist,
Kapi'olani Medical Center
Physician Liaison,
Quality & Patient Safety
Hawai'i Pacific Health

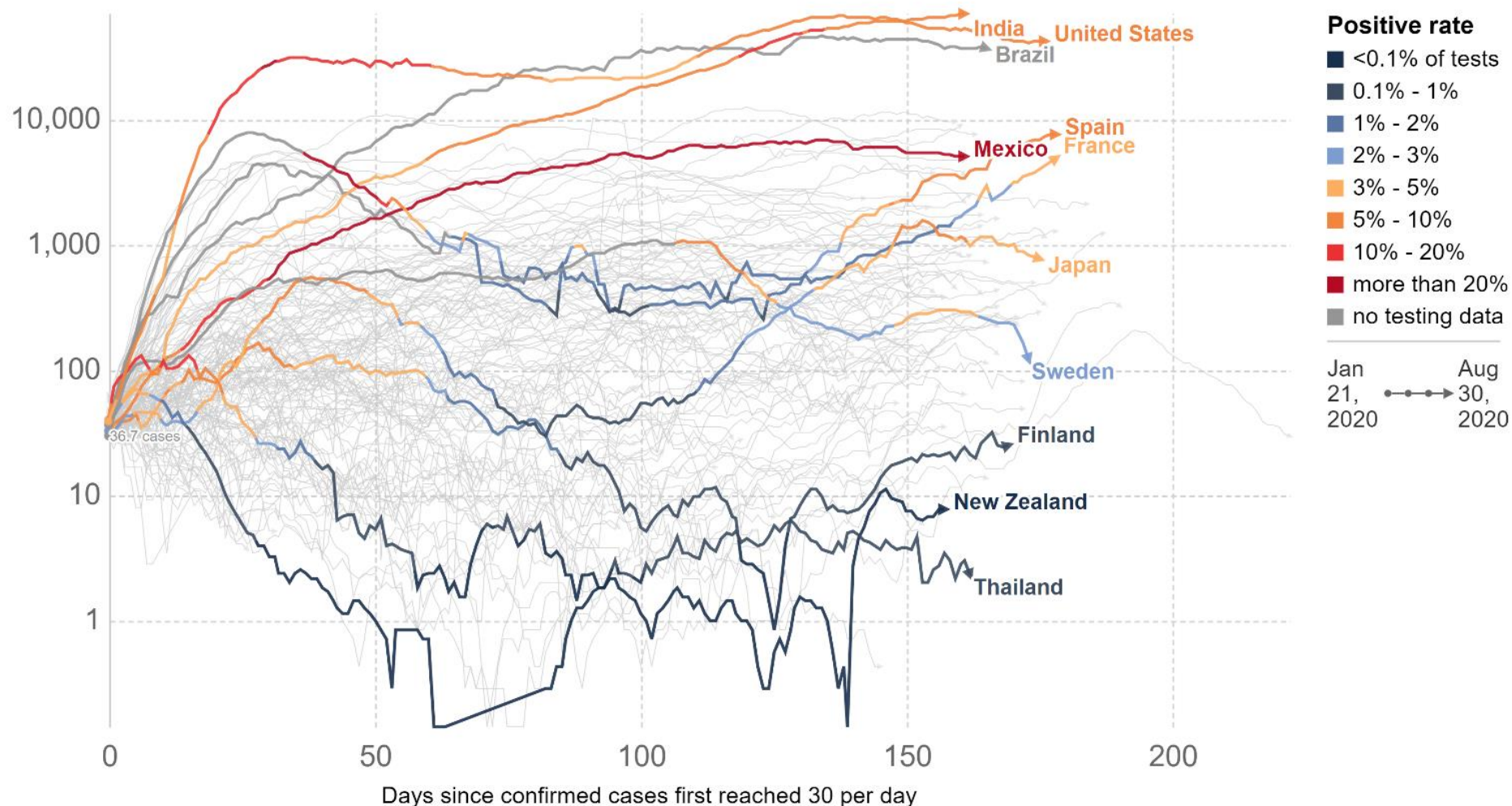
Daily new confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Daily new confirmed COVID-19 cases

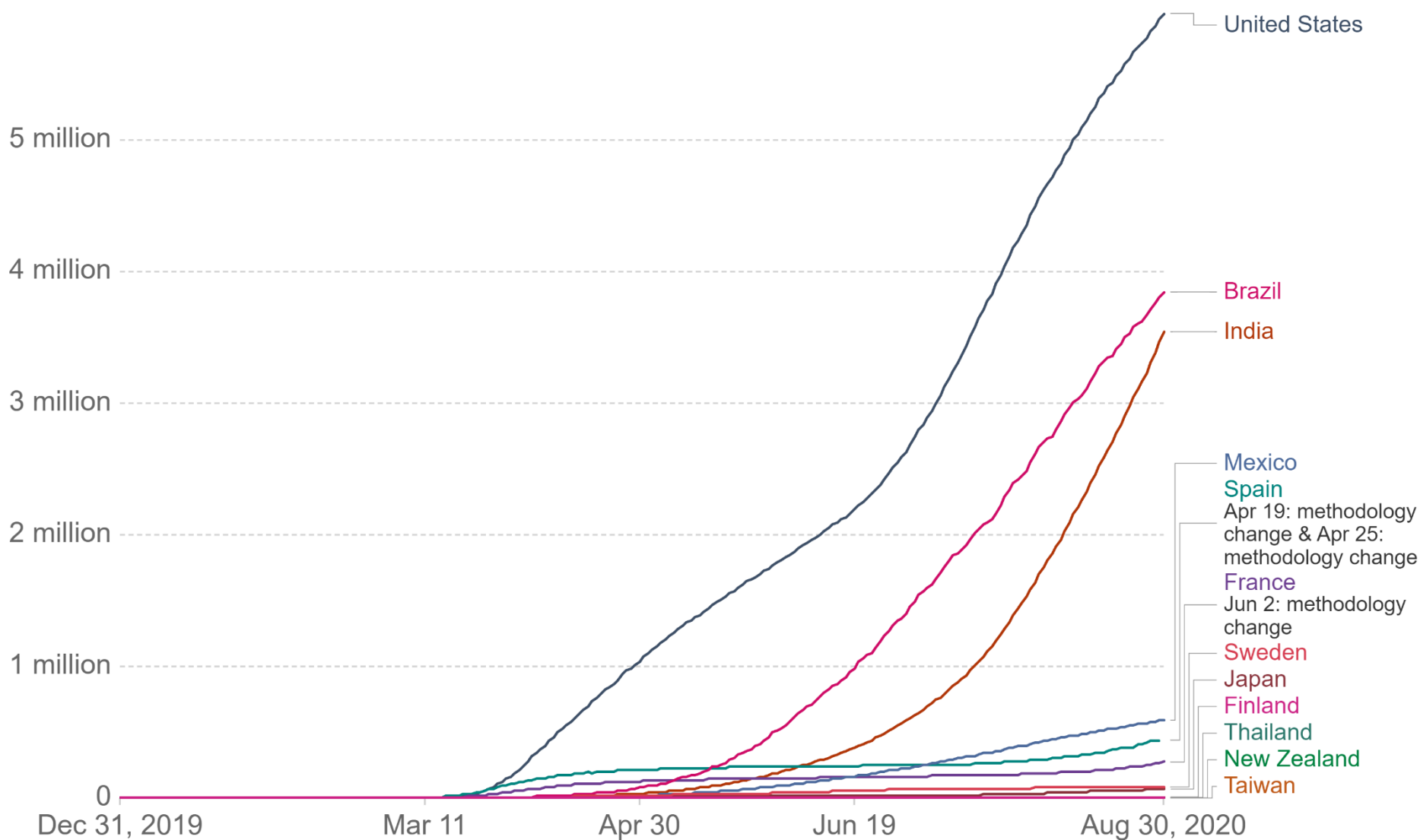
Shown is the rolling 7-day average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Cumulative confirmed COVID-19 cases

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

Our World
in Data

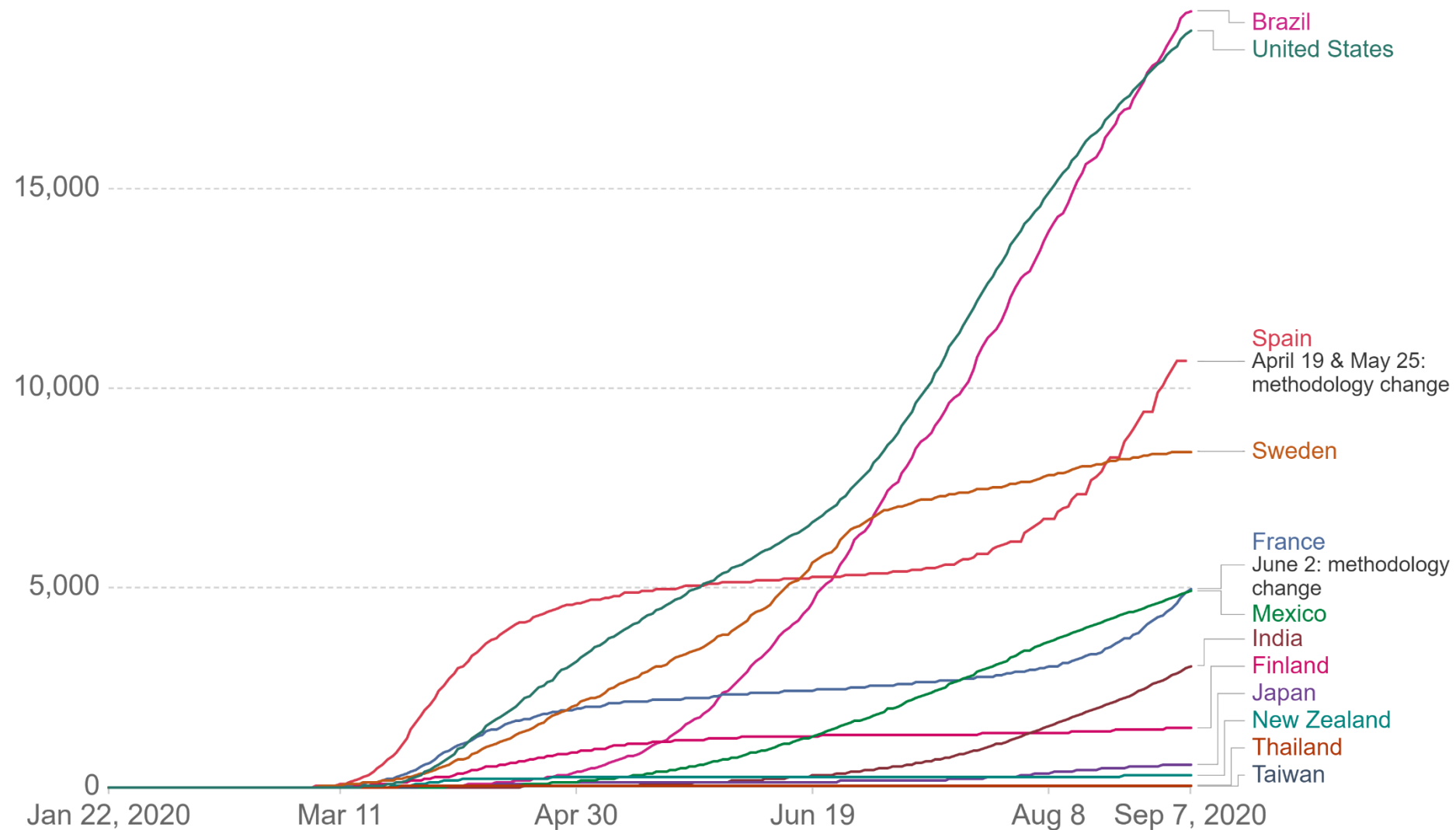


Source: European CDC – Situation Update Worldwide – Last updated 30 August, 10:34 (London time)

CC BY

Total confirmed COVID-19 cases per million people

The number of confirmed cases is lower than the number of total cases. The main reason for this is limited testing.

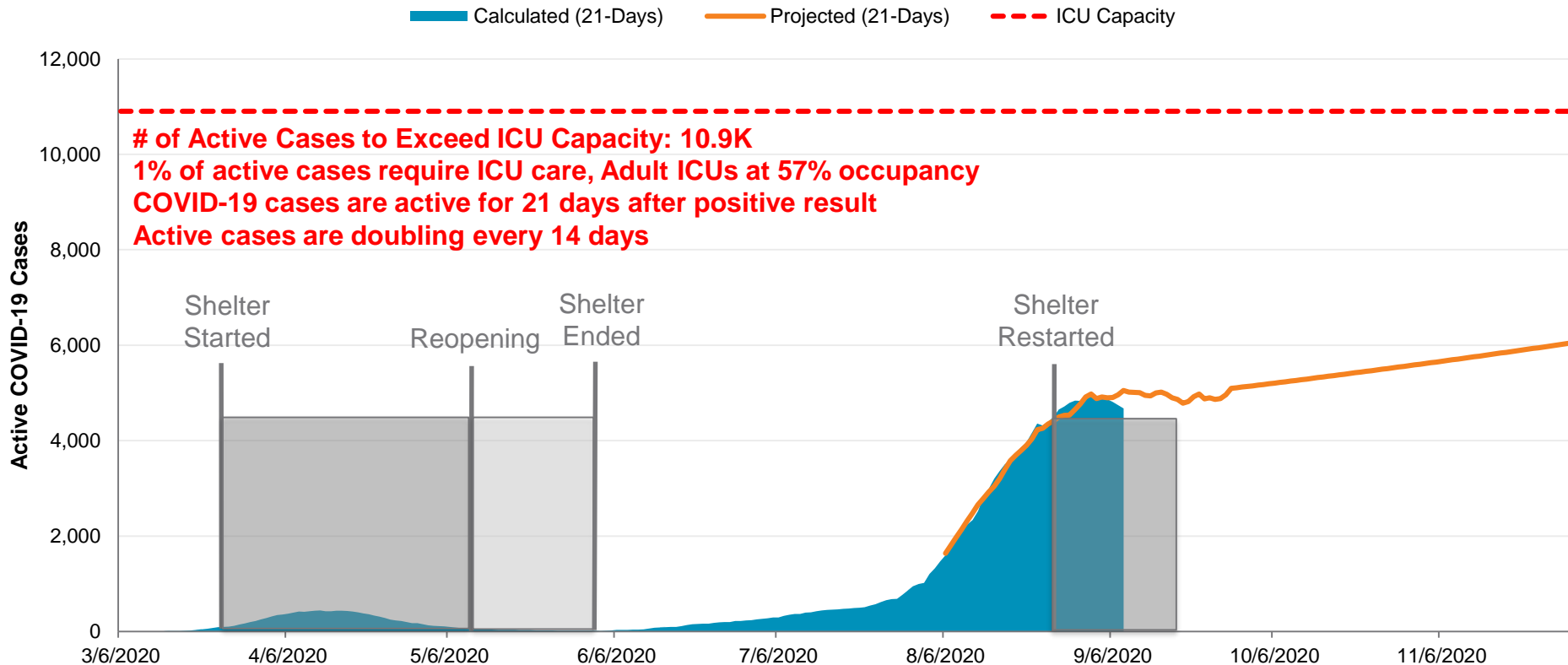


Source: European CDC – Situation Update Worldwide – Last updated 7 September, 09:35 (London time)

OurWorldInData.org/coronavirus • CC BY

Projected Active COVID-19 Cases

Hawaii Actual v. Projected Active COVID-19 Cases Updated 9/8/2020



As of 09/08/20	Total Census	ICU beds occupied	# Ventilators in use	# New Admissions w/ COVID-19 screening	# New Admissions w/ positive COVID-19	# Patients currently hospitalized w/ suspect or confirmed COVID-19	# Patients currently on a ventilator w/ suspect or confirmed COVID-19	# Patients currently in ICU w/ suspect or confirmed COVID-19
KMCWC	139	AICU: 2 NICU: 68 PICU: 6	AICU: 1 NICU: 20 PICU: 4 Wilcox: 0	0	1	S: 1 C: 3	S: 1 C: 0	S: 1 C: 1
PMMC	102	10	8	0	2	S: 1 C: 14	S: 0 C: 3	S: 0 C: 3
SMC	128	17	13	4	3	S: 3 C: 35	S: 0 C: 8	S: 0 C: 10
WMC	28	3	0	1	0	S: 0 C: 0	S: 0 C: 0	S: 0 C: 0

S = Suspected; C= Confirmed

R_t COVID-19

These are up-to-date values for R_t , a key measure of how fast the virus is growing. It's the average number of people who become infected by an infectious person. If R_t is above 1.0, the virus will spread quickly. When R_t is below 1.0, the virus will stop spreading. [Learn More](#).

See details about the spread in **Hawaii**

Data Last Updated: 9/8 at 5:11AM

Latest

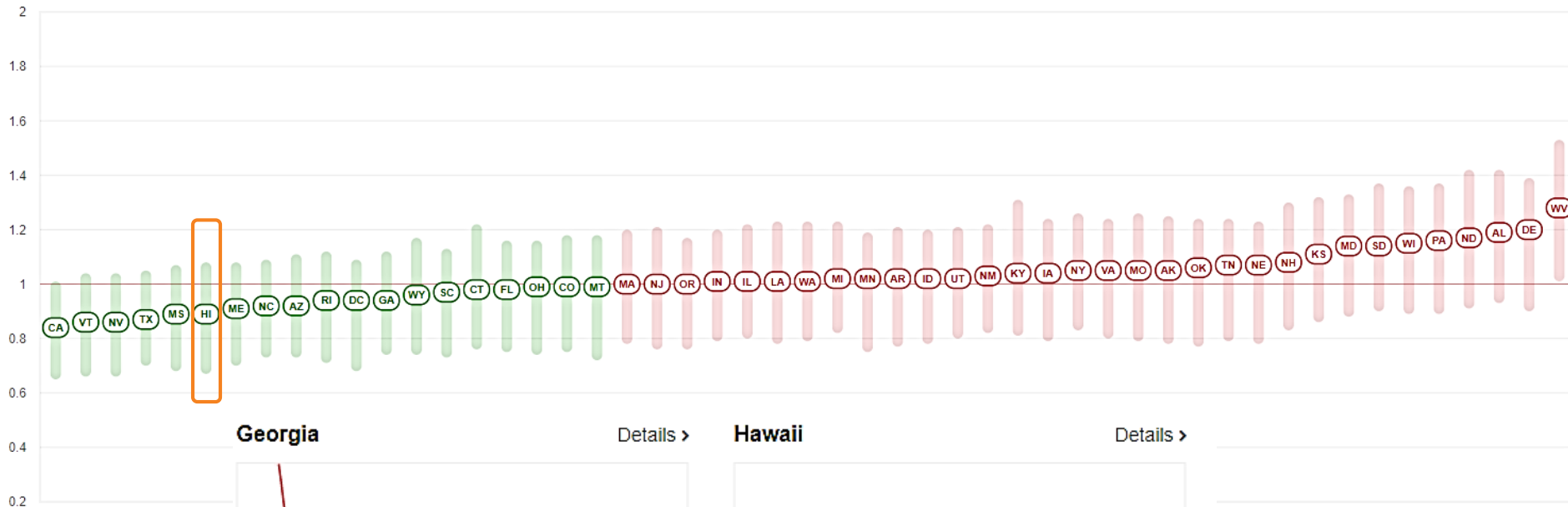
2 Weeks Ago

1 Month Ago

2 Months Ago

3 Months Ago

Filter

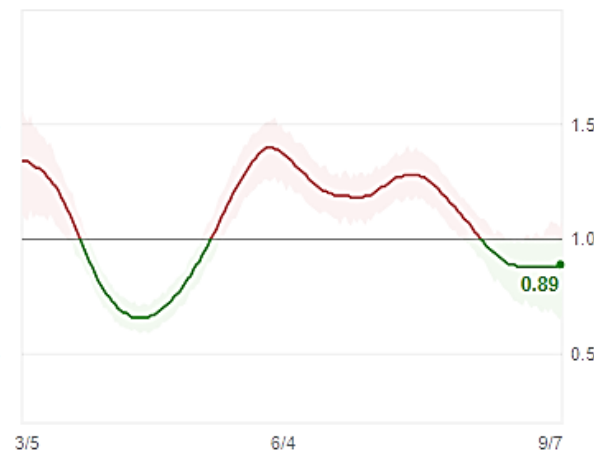
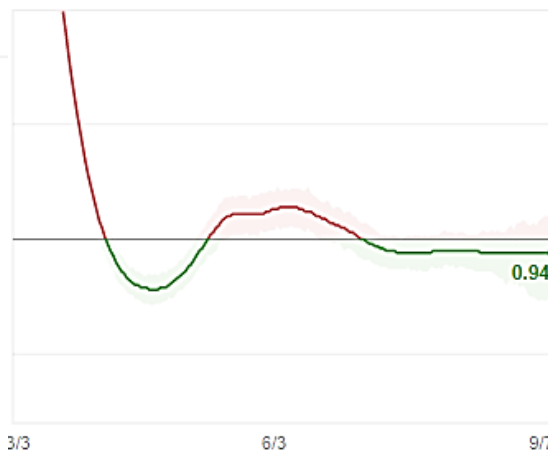


Georgia

Details >

Hawaii

Details >



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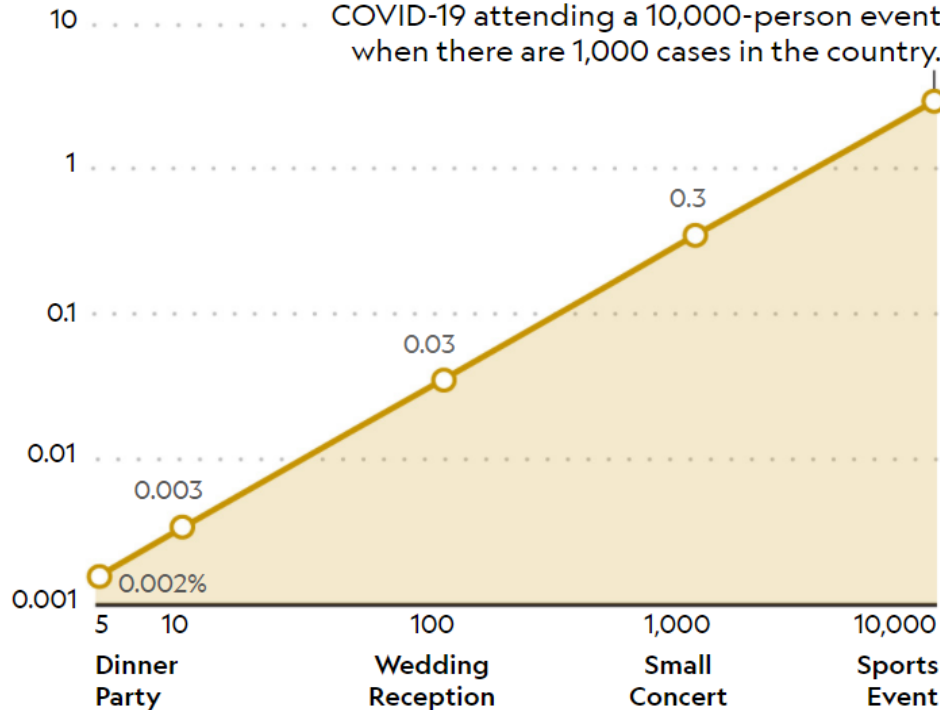
R_t depends on both societal behavior and population immunity

$$R_t = R_0 \times \alpha \times \frac{S}{N}$$

1,000 total cases in the country

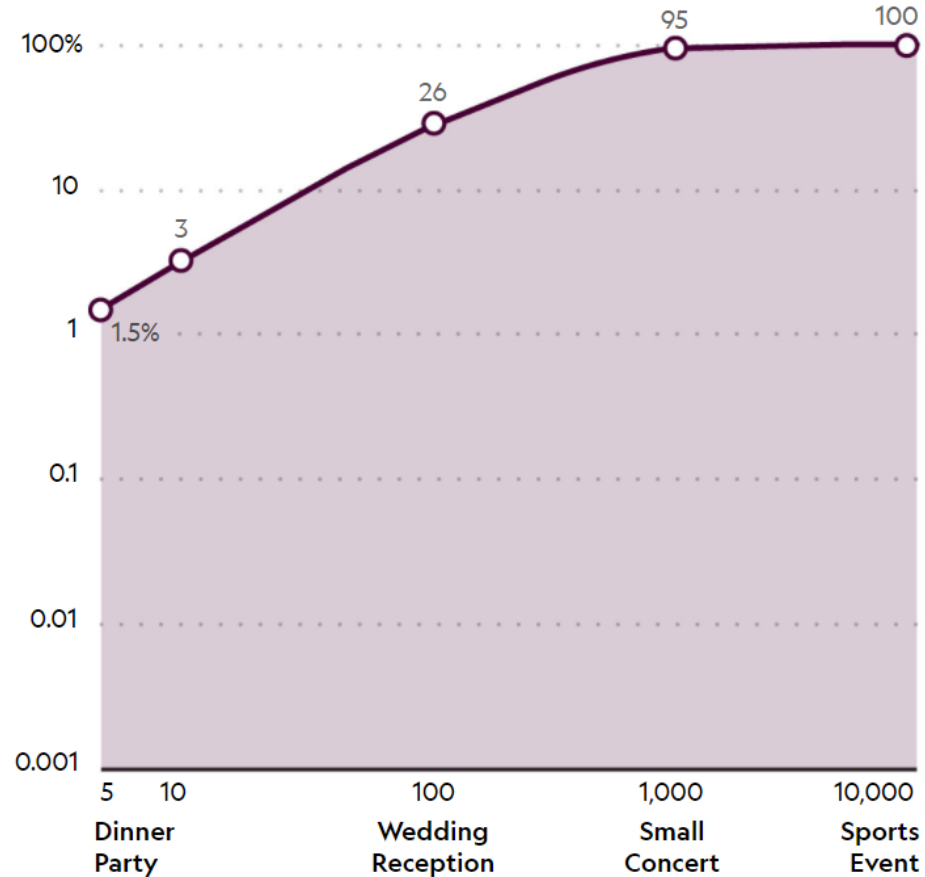
100% chance of infected person attending event (log scale)

There is a **3 percent** chance of someone with COVID-19 attending a 10,000-person event when there are 1,000 cases in the country.



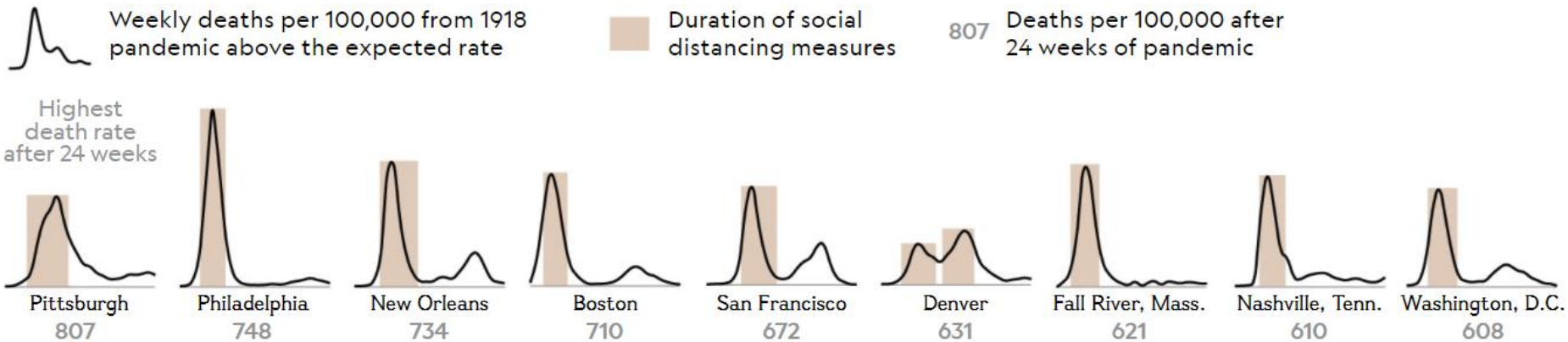
1,000,000 cases

100%

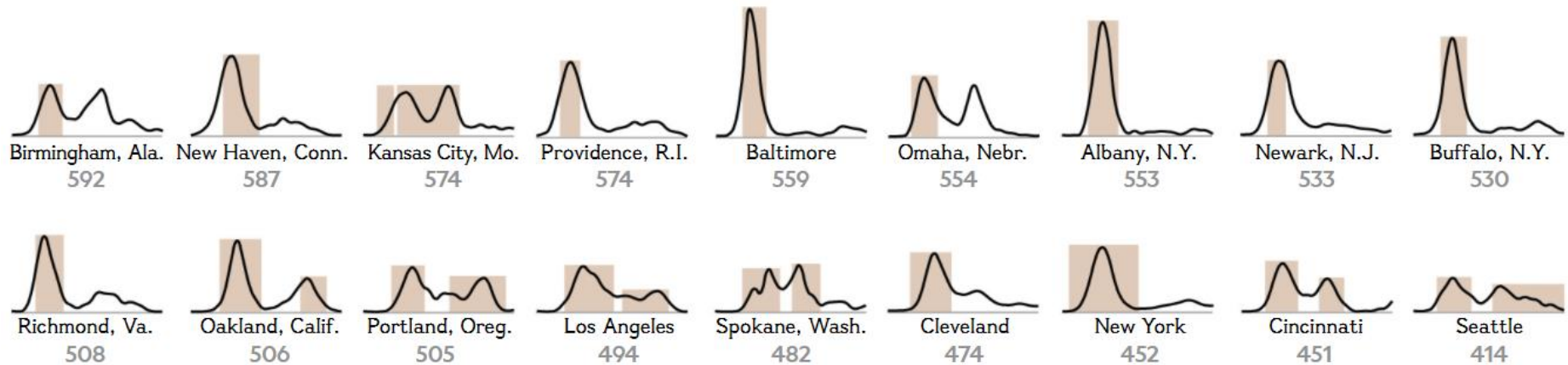


<https://www.nationalgeographic.com/science/2020/03/what-is-safest-gathering-size-coronavirus-wrong-question/>

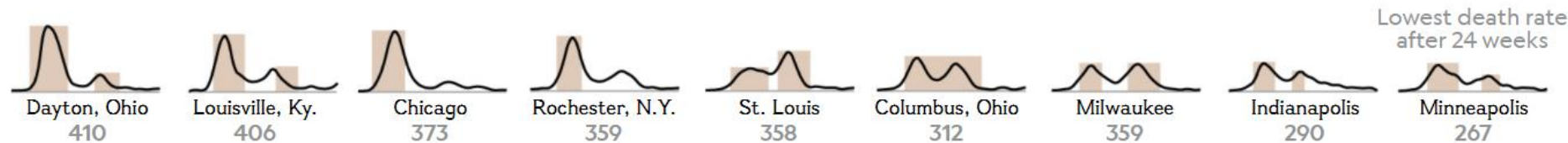
<https://www.nationalgeographic.com/science/2020/03/graphic-see-why-small-groups-are-safer-during-covid-19-coronavirus-pandemic/>



▲ Cities that ordered social distancing measures later and for shorter periods tended to have spikes in deaths and higher overall death rates.



▼ Cities that ordered social distancing measures sooner and for longer periods usually slowed infections and lowered overall death rates.



RILEY D. CHAMPINE, NG STAFF. SOURCE: MARKEL H, LIPMAN HB, NAVARRO JA, ET AL. NONPHARMACEUTICAL INTERVENTIONS IMPLEMENTED BY US CITIES DURING THE 1918-1919 INFLUENZA PANDEMIC. JAMA.

<https://www.nationalgeographic.com/history/2020/03/how-cities-flattened-curve-1918-spanish-flu-pandemic-coronavirus/> accessed 09.07.20

Hawai'i COVID-19 Dashboard (PROTOTYPE)

UPDATED: 9/7/20, 11:00

STAY AT HOME
(Major Disruption)

SAFER AT HOME
(Moderate Disruption)

ACT WITH CARE
(Minor Disruption)

RECOVERY
(Minimal Disruption)

NEW NORMAL
(No Disruption)

PREVENTION AND DETECTION

MASK WEARING:

77%

O'AHU

NEIGHBOR ISLANDS

COMING SOON

MOBILITY:



STATEWIDE TESTING:

1 DAY TEST
TURNAROUND
TIME (TAT):

63% OF TESTS
WEEK OF AUG. 16

73% OF TESTS
WEEK OF AUG. 23

PAST 24 HRS

PAST 72 HRS

TESTS
CONDUCTED

2,109

15,621

% POSITIVE

4.9%

3.1%

LAB
CAPACITY:

2,854

DAILY MAX
TEST CAPACITY

183

LAB STAFF

INBOUND TRAVELERS:

1,897

9/3/20

1,813

7-DAY AVERAGE

853

RESIDENTS,
CURRENT OR
INTENDED

400

OTHER

485

VISITORS

128

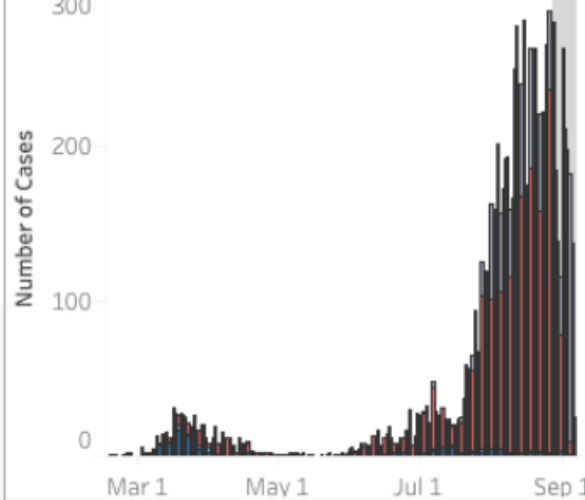
MILITARY

31

STUDENTS

CURRENT SITUATION

EPI CURVE:



NEW
CASES:

105

IN PAST 24 HRS

213

7-DAY AVERAGE

ACTIVE
CASES:

6,845

CUMULATIVE
CASES:

9,959

CONTACT TRACERS BY COUNTY: WEEK OF 8/31

	ACTIVE	RESERVE/TRAINED
ALL HAWAII	211	535
KAUAI	20	41
HONOLULU	130	450
MAUI	14	31
HAWAII	10	50

PERSONAL PROTECTIVE EQUIPMENT (PPE):

HIEMA STOCK:	60 DAY SUPPLY ON STOCK	COMING SOON
BHHSRG RESILIENCE HUBS:	476,000 DONATED UNITS	305,000 UNITS DISTRIBUTED

TREATMENT AND OUTCOMES

HOSPITALS:

*UPDATED 9/4

	% CAPACITY	IN USE	COVID
GENERAL BEDS	65%*	2059*	257
ICU BEDS	60%	147	47
VENTILATORS	18%	82	29

DOH ISOLATION/QUARANTINE FACILITIES:

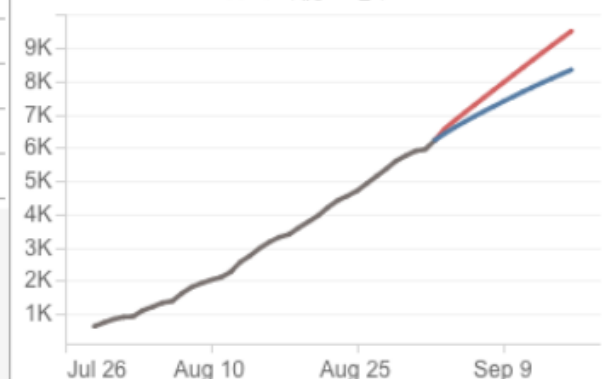
	CURRENTLY	7-DAY AVERAGE
% OCCUPANCY	41%	45%
TOTAL ROOMS	293	293
INDIVIDUALS IN DOH ISOLATION	172	160

FATALITIES:

86 TOTAL	17 DEATHS IN PAST WEEK	0.86% DEATH RATE
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HIPAM FORECAST:

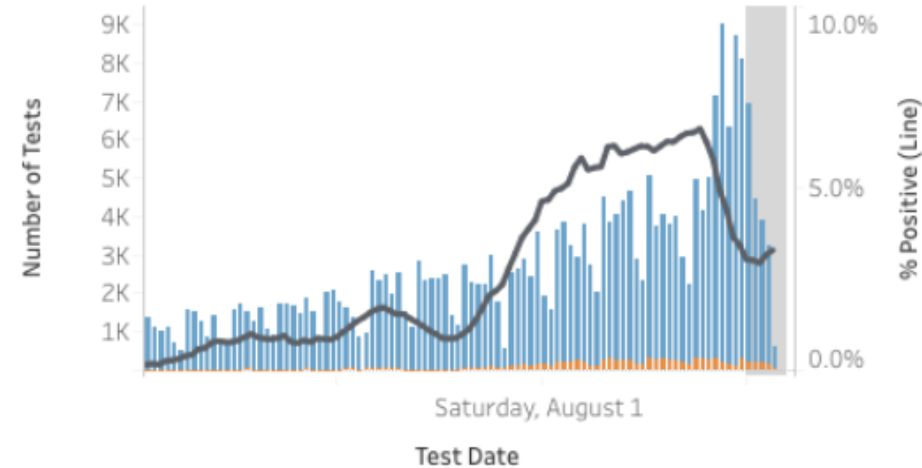
Metric: [A] [B]



DETECTION

Select County: (Note: y-axis scale changes for each county)

(All)



State Testing and % Positivity

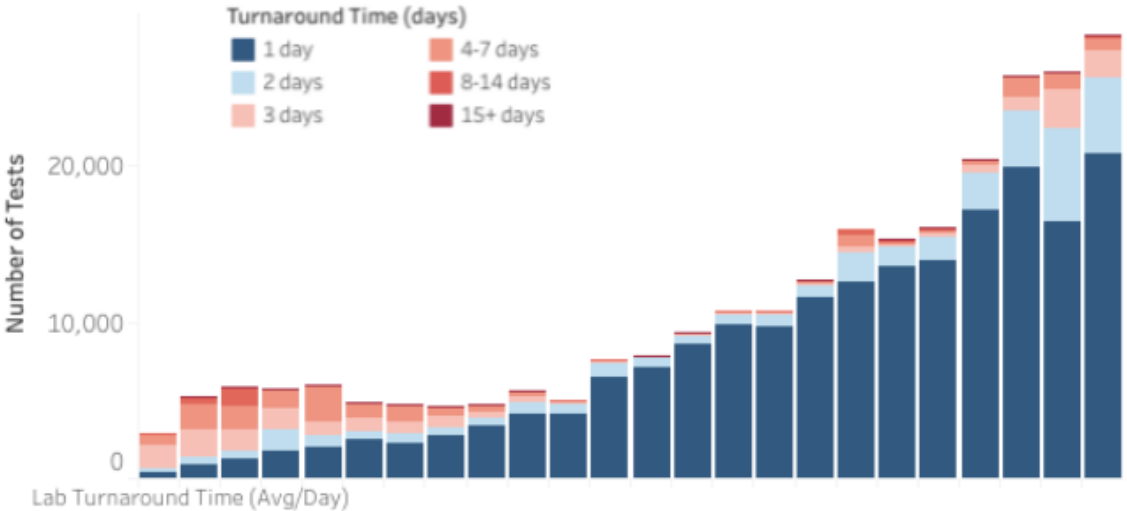
MODE OF TRANSMISSION	CASES	CLUSTERS
UNKNOWN	2918	
COMMUNITY	2302	
TRAVEL/TRAVEL-ASSOCIATED	517	
CONGREGATE LIVING (PRISON, SHELTER, NURSING HOME)	416	30
BAR, CLUB, RESTAURANT	11	8
FIRE STATION	10	3
FUNERAL	75	2+
OFFICE	42	2
AUTO SERVICES	16	1
CONSTRUCTION	10	1
GYM	4	1
SCHOOL	43	1

Clusters under investigation as of 8/27.
Clusters prior to 8/27 are included in the community count.

CONTAINMENT

COMING
SOON

Timeliness of Case and Contact Interviews



SCOTT K. SAIKI
Speaker



HOUSE OF REPRESENTATIVES

STATE OF HAWAII
STATE CAPITOL, ROOM 431
415 SOUTH BERETANIA STREET
HONOLULU, HAWAII 96813

September 1, 2020

MEMORANDUM

TO: Members, House Select Committee on COVID-19 Economic and Financial Preparedness

FROM: Speaker Scott K. Saiki, Co-Chair
Peter Ho, Co-Chair *Scott Saiki*

SUBJECT: COVID-19 Communications and Strategy Subcommittee

We are appointing the following individuals to serve on the Communications and Strategy Subcommittee:

- Raymond Vara, Chair; President & CEO, Hawaii Pacific Health
- Dr. Mark Mugiishi, President & CEO, Hawaii Medical Services Association
- Peter Ho, President & CEO, Bank of Hawaii
- Na'alehu Anthony, Director, Paliku Films
- Micah Kane, President & CEO, Hawaii Community Foundation
- Dr. Jill Hoggard Green, President and CEO, Queen's Health Systems
- Carl Bonham, UHERO Executive Director and Professor of Economics, UHERO
- Elliot Mills, Vice President, Disneyland Resort and Aulani

The purpose of the subcommittee is to develop and deploy a communications strategy that is data-driven and compelling to enable the people of Hawaii to understand the impact of COVID on our community, resources available, and what they can do to impact the recovery.

c: Members, House of Representatives

Phone: (808) 586-6100
Fax: (808) 586-6101

The screenshot shows the Hawaii State Legislature website. At the top, there's a navigation bar with links like 'Home', 'About', 'Legislation', 'Committees', 'Contact', and 'Search'. Below this, the 'COVID-19 Economic and Financial Preparedness Committee' page is displayed. The page has a header with the committee name and a list of members. The main content area is divided into sections: 'Members' (listing committee members and their roles), 'Latest Documents' (listing recent reports and updates), 'Updated Hawaii COVID-19 Public Health Recovery Task Force Presentation' (listing a presentation), 'COVID-19 Health-Based Community Response Matrix' (listing a matrix), 'Show Documents' (a link to show documents), 'Show Committee Reports' (a link to show reports), 'Show Agenda' (a link to show the agenda), and 'Show Notices' (a link to show notices). A red box highlights the 'Show Notices' link.

<https://www.capitol.hawaii.gov/specialcommittee.asp?x?comm=cov&year=2020>

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PACIFIC
HEALTH** | **HAWAII
HEALTH
PARTNERS**

Messaging:

- Wear Masks
- Social Distance
- Hand Hygiene
- Avoid Indoor Gatherings
- Stay Home when Sick

Race of COVID-19 Cases Compared to State Population (N=4,242*)

Last updated September 4, 2020 (updated weekly)



Footnotes: Based on first non-White race listed; **White with no other race listed; †Native Hawaiian as any listed race.

*Excludes non-residents and missing (n=699), cases with no race information available (n=5,056), cases with NH/PI unspecified race (n=281), and cases with Asian



Native Hawaiian & Pacific Islander



**HAWAII
COVID-19**

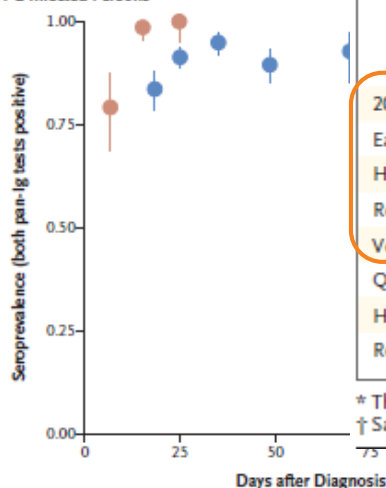
Response Recovery Resilience
TEAM

ORIGINAL ARTICLE

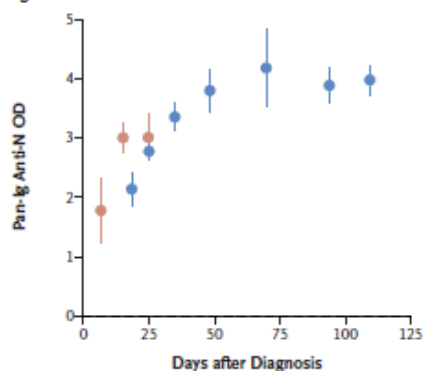
Humoral Immune Response to SARS-CoV-2 in Iceland

D.F. Gudbjartsson, G.L. Norddahl, P. Melsted, K. Gunnarsdottir, H. Holm, E. Eythorsson, B. Thorsteir, M.I. Sigurdsson, A.B. Agustsdottir, M. Gottfredsson, T.R. Gunnars, H. Jonsson, T. K. L.B. Olafsdottir, G. Sveinbjorn, B. Thorbjorn, K.S. Josefsdottir, T. Gudnason,

A Seroprevalence among SARS-CoV-2 Infected Persons



B Pan-Ig Anti-N Titers



C Pan-Ig Anti-S1-RBD Titers

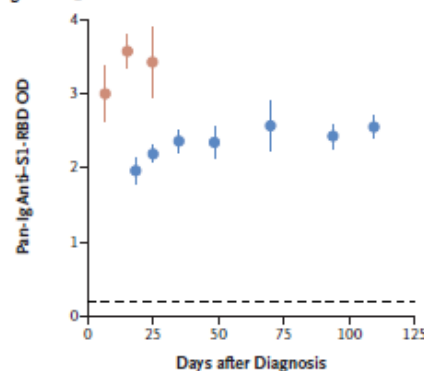


Table 1. Prevalence of SARS-CoV-2 Antibodies by Sample Collection as Measured by Two Pan-Ig Antibody Assays.*

Sample Collection	No. of Persons Tested	Both Pan-Ig Antibody Assays Positive		Either Pan-Ig Antibody Assay Positive	
		No. of Persons	Frequency	No. of Persons	Frequency
			% (95% CI)		% (95% CI)
2017	472	0	0.0 (0.0–0.4)	1	0.2 (0.0–0.9)
Early 2020	470	0	0.0 (0.0–0.4)	4	0.9 (0.3–2.0)
Health care†	18,609	39	0.2 (0.2–0.3)	119	0.6 (0.5–0.8)
Reykjavik†	4,843	21	0.4 (0.3–0.6)	38	0.8 (0.6–1.1)
Vestmannaeyjar†	663	3	0.5 (0.1–1.2)	7	1.1 (0.5–2.0)
Quarantine	4,222	97	2.3 (1.9–2.8)	131	3.1 (2.6–3.7)
Hospitalized	48	45	93.8 (84.6–98.4)	47	97.9 (91.1–99.9)
Recovered	1,215	1,107	91.1 (89.4–92.6)	1,156	95.1 (93.8–96.3)

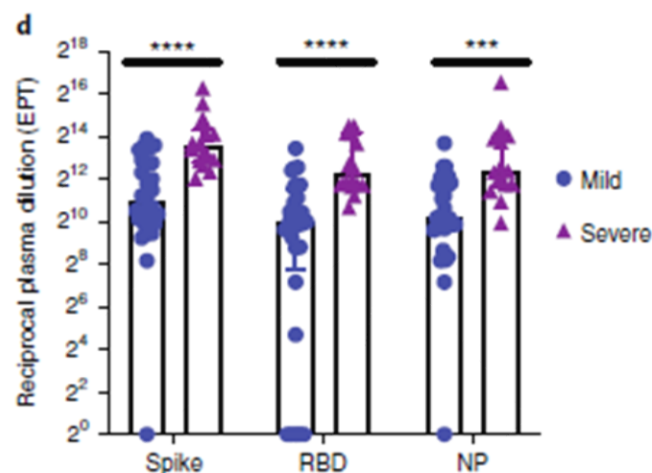
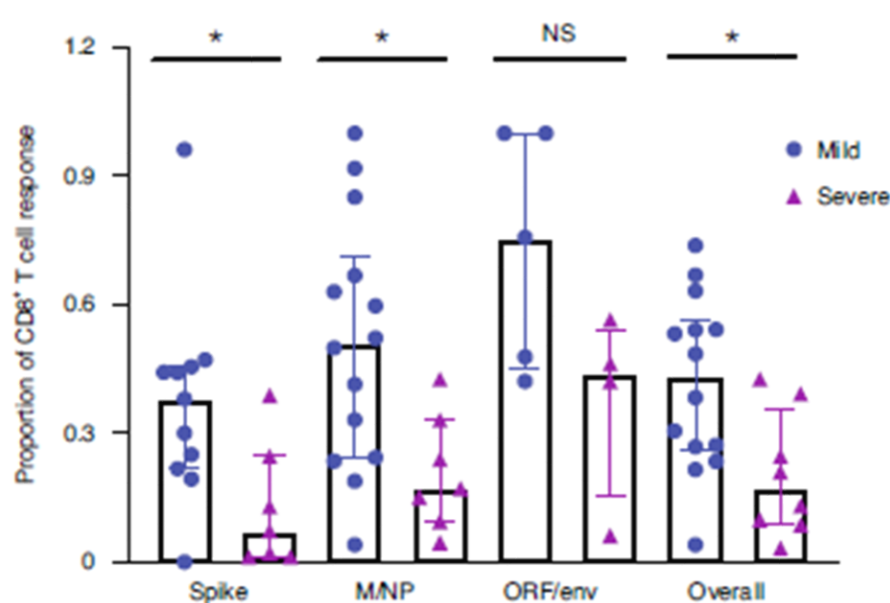
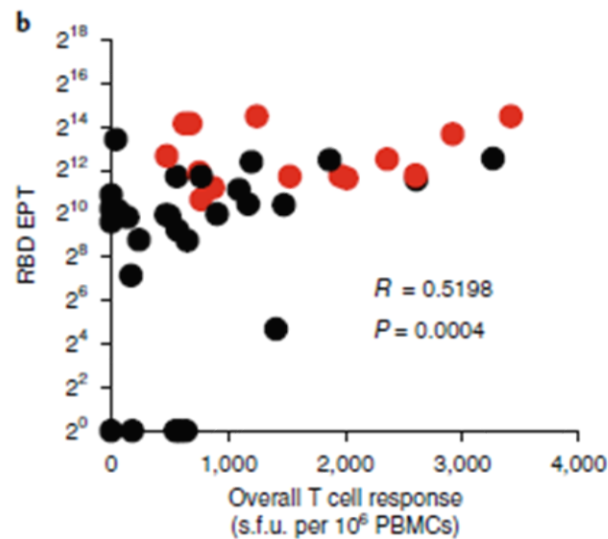
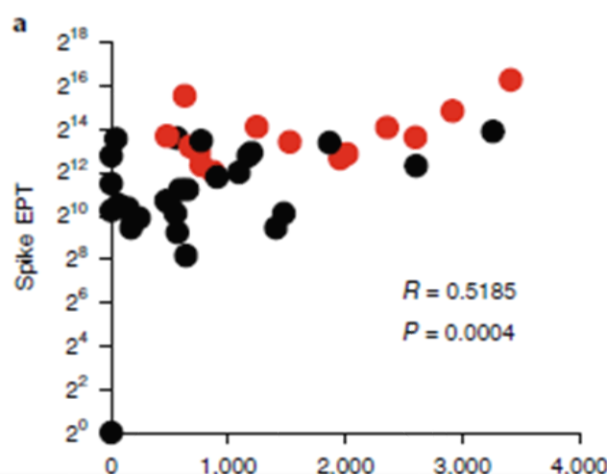
* The pan-Ig antibodies are anti-N and anti-S1-RBD. The latest available sample was used.

† Sampling restricted to persons who had not tested qPCR-positive and who had not been quarantined.



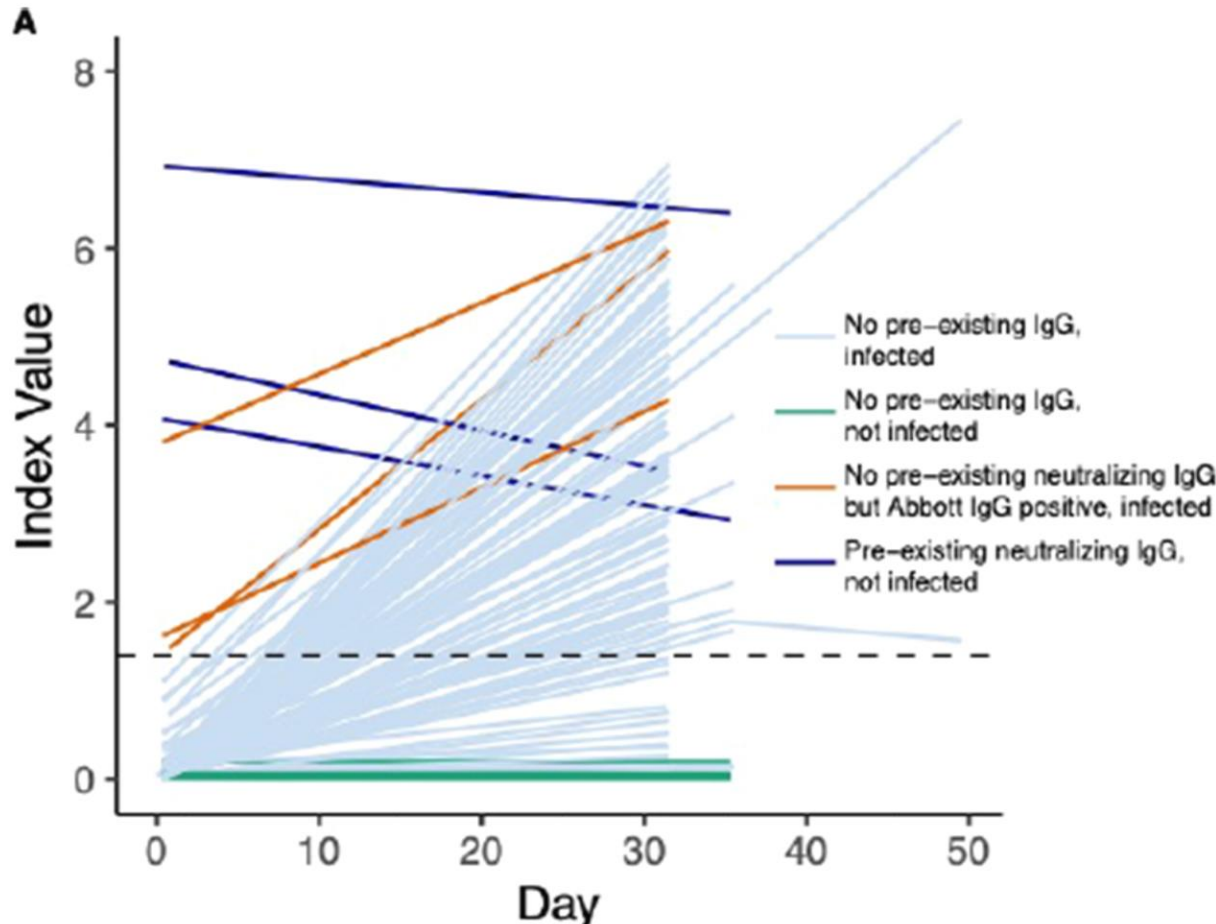
Broad and strong memory T cell responses induced by SARS-CoV-2 in individuals following mild or severe disease

Yanchun Peng^{1,2,23}, Alexander J. Mentzer^{1,2,23}, Danning Dong^{2,4,7,23}, Wanwisa Dejnirattitum^{2,4,7,23}, César López-Camacho^{2,4,7,23}, Guido C. Paesen³, Jonathan Doran⁴, Dorothy E. D. P. Hawkins⁴, Krishanthi Subramanian⁴, Peter Simmonds^{10,4}, Thomas G. B. Blackmore^{10,4}, Yi-Ling Chen^{10,1}, Mario C. Zerbini^{10,1}, Benedek J. Krenn^{10,1}, J. Kenneth K. Smith^{10,1}, Susan R. Hens^{10,1}, Teresa M. Cox^{10,1}, Oxford J. Richardson^{10,1}, Richard J. Pebody^{10,1}, Juthathip Juthatip^{10,1} and Tara C. Smith^{10,1}



Neutralizing Ab onboard the American Destiny

medRxiv preprint doi: <https://doi.org/10.1101/2020.08.13.20173161>; this version posted August 14, 2020. The copyright holder for this preprint (which was not certified by peer review) is the author/funder, who has granted medRxiv a license to display the preprint in perpetuity. It is made available under a CC-BY 4.0 International license.



A mechanistic model and therapeutic interventions for COVID-19 involving a RAS-mediated bradykinin storm

Michael R Garvin¹, Christiane Alvarez¹, J Izaak Miller¹, Erica T Prates¹, Angelica M Walker^{1,2}, B Kirtley Amos³, Alan E Mast⁴, Amy Justice⁵, Bruce Aronow^{6,7}, Daniel Jacobson^{1,2,8*}

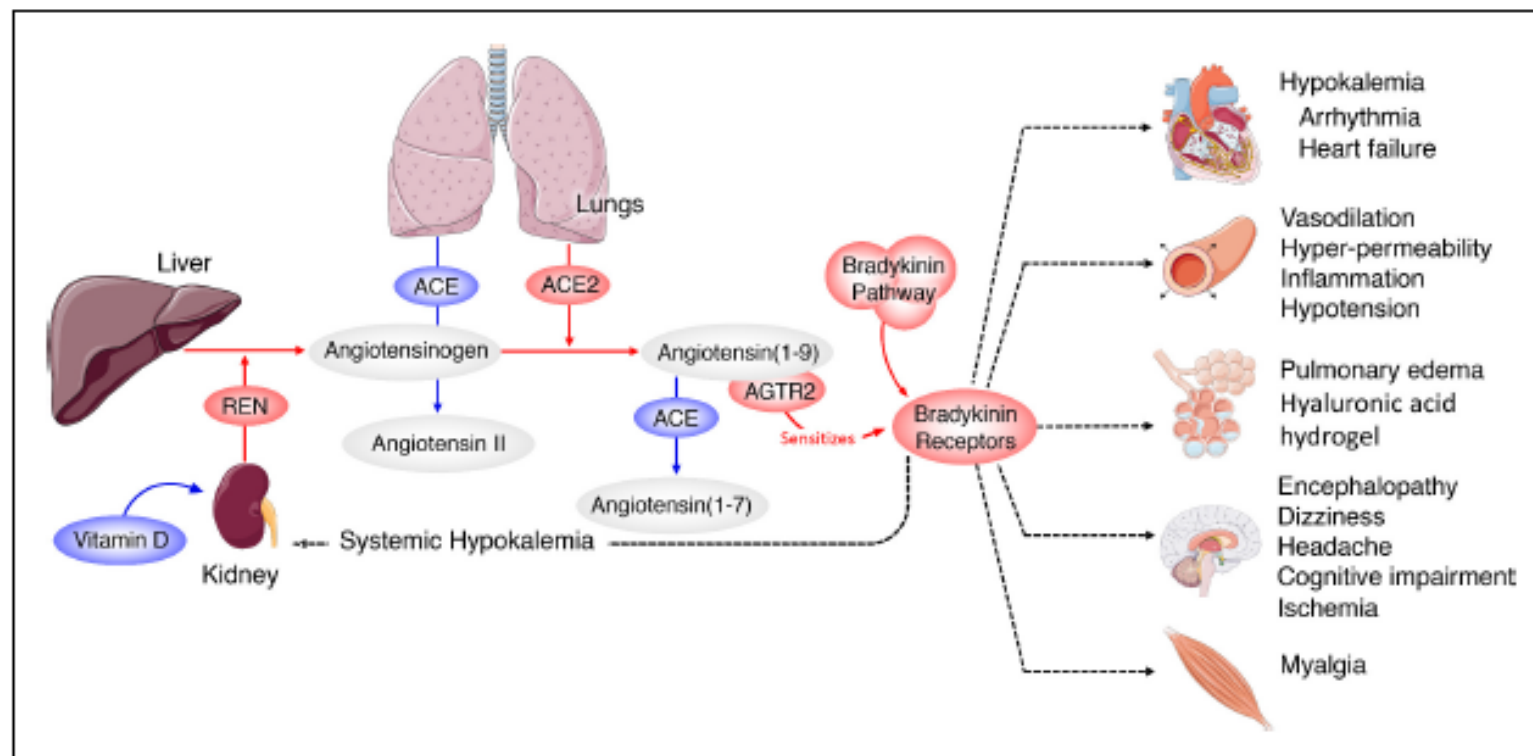
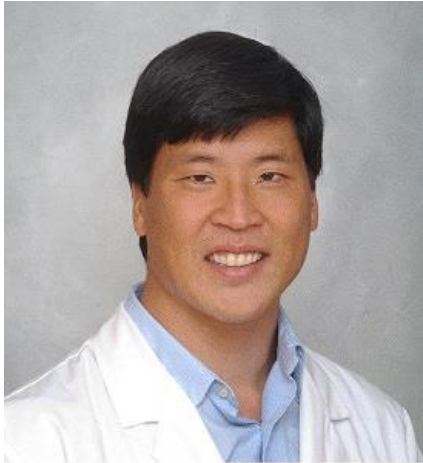


Figure 4. Systemic-level effects of critically imbalanced RAS and BK pathways. The gene expression patterns from COVID BAL samples reveal a RAS that is skewed toward low levels of ACE that result in higher levels of Ang₁₋₉ and BK. High levels of ACE normally present in the lungs are responsible for generating system-wide angiotensin-derived peptides. As detailed in Figure 2, the Bradykinin-Storm is likely to affect major organs that are regulated by angiotensin derivatives. These include altered electrolyte balance from affected kidney and heart tissue, arrhythmia in dysregulated cardiac tissue, neurological disruptions in the brain, myalgia in muscles and severe alterations in oxygen uptake in the lung itself. Red colors indicate upregulation and blue downregulation.



EPIC Updates

James Lin, MD

Vice President, Information Technology

Pediatric Hospitalist, Kapiʻolani Medical Center

External COVID Results – Results Console

Results Console

Defaults:

Result Date:

Result Time:

Provider:

Lab:

Show: ☐ Ref. Ranges

Internal Diabetes Screenings

Diabetic Eye Exam

* Negative

1/23/19

External Colorectal Cancer Screening

Colonoscopy

Flexible Sigmoidoscopy

Fecal Occult Blood T... (See Report) 7/9/18

Cologuard

CT Colonography

External Diabetes Screenings

Diabetic Foot Exam

Diabetic Eye Exam * Positive 7/24/17

Hemoglobin A1c ^ * 7.2 % 6/16/20

Urine Albumin ^ 1,305.9 mg/L 11/20/19

External Diabetes Lipid Screenings

Total Cholesterol

LDL

HDL

Triglycerides

External COVID Transcribed Results

Covid Molecular Result

Covid Antibody Result

Covid Antigen Result

Enter/Edit Results

Results Review

Restore

Close

CREATING A HEALTHIER HAWAII

**HAWAII
PACIFIC
HEALTH** | HAWAII
HEALTH
PARTNERS

External COVID Results – Infection Activity

The screenshot displays the EpicCare interface for a patient named Ambtest, Davin. The top navigation bar includes tabs for SnapShot, Chart Review, Medi..., Results, Review..., Vid..., History, Screen..., Notes, Plan, Wra..., Comm..., and Letters. The 'Vid...' tab is currently selected, showing the 'Video Visit' section. On the left, a sidebar lists various patient review options: Connect, Questionnaires, Chief Complaint, Pt Reported Vitals, Substance & Sex..., Pt Clinic Rev, Allergies, Medication Review, Patient Hx, History, Answer Qnrs, and Vital Signs. The main content area is divided into sections: 'Connect' with a 'Connect to Video' button and a status 'No one is connected'; 'Questionnaires' with a legend indicating 'Triggered a BPA Scoring question'; 'Previous Responses' for a 'Mychart Phq-4' questionnaire; 'Chief Complaint' with a value of 'None'; and 'Patient Reported Vitals'. A dropdown menu is open on the right, listing various clinical actions. The 'Isolations and Infections' option is highlighted with a red box. Other options in the menu include Admin, Advance Care Planning, Allergy Testing, Answer Pt-Qnr, Answer Pt-Qnr (Captive), Chart Request, Demographics, E-Consult, Flowsheet, Images, Implants, MAR, Media Manager, Navigator Switch, Print A/S, Problem List, Quality Metrics Results Console, Questionnaires, References, Schedule, Send Message, Snapshot, Treatment, Write H&P, and Rarely Used.

Video Visit

PATIENT REVIEW

- Connect
- Questionnaires
- Chief Complaint
- Pt Reported Vitals
- Substance & Sex...
- Pt Clinic Rev
- Allergies
- Medication Review
- Patient Hx
- History
- Answer Qnrs
- Vital Signs

Connect

Connect to Video

No one is connected.

If you need help call Epic Support.

Questionnaires

Legend:

Triggered a BPA Scoring question

Previous Responses

Mychart Phq-4

Question	7/28/2020 3:02 PM HST
Over the last 2 weeks, how often have you had little interest or pleasure in doing things?	Not at all
Over the last 2 weeks, how often have you been feeling down, depressed or hopeless?	Not at all
In the past 2 weeks, have you been feeling nervous, anxious or on edge?	Not at all
In the past 2 weeks, have you felt like you are not able to stop or control worrying?	Not at all

Chief Complaint

None

Patient Reported Vitals

Admin

Advance Care Planning

Allergy Testing

Answer Pt-Qnr

Answer Pt-Qnr (Captive)

Chart Request

Demographics

E-Consult

Flowsheet

Images

Implants

Isolations and Infections

MAR

Media Manager

Navigator Switch

Print A/S

Problem List

Quality Metrics Results Console

Questionnaires

References

Schedule

Send Message

Snapshot

Treatment

Write H&P

Rarely Used

“External COVID-19” Infection

- A new Infection added to indicate positive COVID-19 results not in Epic
 - Non-Epic providers
 - Community testing
- A copy of the results should be scanned into the chart asap (within 24 hrs for hospital patients)

“External COVID-19” Infection Display

- Infection Activity to add “External COVID-19” infection

Iphtest, Covid P.
Male, 30 yr old, 9/8/1990 🎂
MRN: 33042003
HAR: 393129507
Room/Bed: 0504-01
Code: Not on file (no ACP docs)

Infection: External COVID-19

🔄 👤 🖨️ 📄

✖ Patient Infection Status
None to display

▼ Patient Iso
None to display

Test, COVID Two

Infection:

Comment: ↶ ↷ ⌂ ⚙️ +

- Storyboard with infection displayed



COVID-19 and Nursing Home Care

Seabrook Mow, MD

Geriatric Medicine

Hawai'i Pacific Health

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PARTNERS

Hawaii Pacific Health

Geriatric/Post-Acute Long Term Care (PALTC)

- Attendings
 - Dr. Seabrook Mow
 - Dr. Shirley Hirata
 - Dr. Al Yazawa
 - Dr. Lester Yim
- Nurse Practitioners
 - Veronica Hoffman – Lead
 - Marisa Shimotsu
 - Jessica Nishikawa
 - Tanya Kim
 - Shaunan Reyes
 - Donita Valdez

HPH Geriatric/ Post-Acute Long Term Care

- Care for Skilled Nursing Facility (SNF)/Intermediate Care Facility (ICF) Level of Care patients
 - HPH partnering hospitals
 - HPH outpatient providers
- Goals
 - Improve patient outcomes
 - Improve patient and family satisfaction
 - Prevent hospitalizations and re-admissions
 - Decrease length of stay

Facilities

- Ann Pearl Rehabilitation and Healthcare
- Avalon Care Center- Honolulu
- Care Center of Honolulu
- Hale Nani Rehabilitation and Nursing Center
- Hale Ola Kino at One Kalakua
- Islands Nursing Home
- Ka Punawai Ola
- Maunalani Nursing and Rehabilitation Center
- Puuwai O Makaha Nursing Home
- The Villas

Nursing Homes

- Policies and procedures - Facility dependent
 - Not streamlined/No clear guidelines
- All facilities accepting COVID-19 negative
- Minority accepting COVID-19 recovered

Nursing Home Challenges

- Keeping patients/staff safe
- Preventing outbreaks
- Continue providing medical and therapy care despite:
 - Staff shortages
 - Staff sharing (staff employed by multiple facilities)
 - PPE shortages
 - Financial loss
- Family not wanting their loved ones to reside in a nursing home
- Increased patient morbidity

Nursing Home Challenges

- Require negative COVID-19 test x 2 within 24hrs prior to D/C to NH
- Require no fevers or PRN antipyretic use 24hrs prior to D/C to NH
- Off isolation
- Quarantine to a room or cohorted on a floor for 14 days → allowed to join general population
- HD patients or patients with outside appointments → remain quarantine to a room or cohorted on a floor
- Vitals checked/monitored for S/Sx 3x/day

Nursing Home Challenges, continued

- Recommend patients wear mask whenever outside their room
- Limited group activities and dining
- Social distancing
- Personal hygiene
- CMS testing (9/2) per infectious rate
 - Currently testing staff 1 x week

Nursing Home COVID-19 Positive Patient

- Department of Health
- Designated rooms/floor/wing
- Isolation – droplet/contact precautions
- Designated staff
- PPE
- Released from quarantine 10 days plus 24 hour watch after symptoms onset, no fevers, and no S/Sx

Nursing Home Care Telehealth

- Evolving
- 100% bedside rounding
- (6/29) Hybrid rounding of bedside rounding at one designated facility and “telehealthing” at other facilities
- (8/10) 100% telehealth rounding
 - May still bedside round if determined necessary

Telehealth Challenges

- By nature providers are meant to bedside round in person
- Scheduling appointments
 - 24-48 hrs advanced notification
 - Long waits. Average ~ 30mins - > 90mins
 - Competing among other providers within and outside
 - ~ > 30 visits
- Someone at the facility has to accept to make a connection
 - Staff – DON, managing RN, floor RN, and UC
 - Additional work
 - Taking away from their actual duty - provide care/medications
 - Provider/assistant dependent

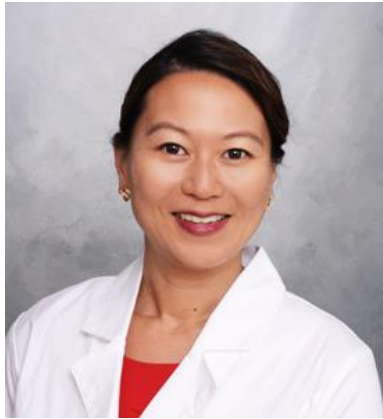
Telehealth Challenges, continued

- Physical exam is limited and dependent on facility staff member
- Technical issues
 - Poor connection/lags/glitches
 - Picture/sound quality issues
- Majority of our population is >65
 - Multiple co-morbidities
 - Cognitive/Memory issues
 - Visual and auditory issues
- Inferior quality of history and physical exam → inferior assessments

Telehealth Platforms

- Doxy.me
- Google Meet
- Zoom
- Skype
- Telephone calls

Long-Term Care and COVID-19



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Hospice & Palliative Medicine
Geriatric Medicine
Hawai'i Pacific Health Medical Group



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Department of Geriatrics, Straub Medical Center
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What is Long-Term Care? SNF/ICF

- Skilled Nursing Facilities (SNF/ICF) – 48
 - Oahu 2880 beds (31)
 - Kauai 372 beds (5 + swing beds)
 - E. Hawaii 632 beds (5 + swing beds)
 - W. Hawaii 199 beds (3 + swing beds)
 - Maui 487 beds (3 + swing beds)

Total: approx. 4570 beds in State.

What is Long-Term Care? ALF

- Assisted Living Facilities (ALF) – 20
 - Oahu 2379 beds (15)
 - East Hawaii 0
 - West Hawaii 129 beds (1)
 - Kauai 100 beds (1)
 - Maui 144 beds (1)

Total: 2752 beds

What is Long-Term Care? Foster Homes

- Community Care Foster Family Homes (CCFFH) – 1223
 - Oahu 2612 beds (1021)
 - E Hawaii 271 beds (99)
 - W Hawaii 69 beds (26)
 - Kauai 44 beds (19)
 - Maui 149 beds (58)

Total: 3145 beds

What is Long-Term Care? Care Homes

- Adult Residential Care Homes (Type I and Type II, Expanded)
 - Oahu 2155 beds (378)
 - E Hawaii 148 beds (33)
 - W Hawaii 42 beds (9)
 - Kauai 26 beds (6)
 - Maui 72 beds (12)

Total: 2443 beds

LTC Bed space - why this matters?

- Total 1729 Facilities with 12876 beds statewide
 - Oahu 9990 beds
- ARCH (2443)+ CCFFH (3145) = 5588 beds >> 4570 beds SNF
 - Oahu: ARCH (2115) + CCFFH (2612) = 4727 beds >> 2880 beds SNF

Specific to community dwelling elders in ARCH/CCFFH:

- Why is this a vulnerable population?
- Where do they go if they are sick with COVID?
- Or the Caregivers become sick with COVID?
- How do we keep them in the community and not in our hospitals?

Q&A

CREATING A HEALTHIER HAWAI'I

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Thank you!

- A recording of the meeting will be available afterwards.
- Unanswered question?
 - Contact us at Covid19Bulletin@hawaiipacifichealth.org