

COVID-19 SITUATION REPORT # 38

CHAMP ♦ North Central ♦ Northeast Florida Healthcare Coalitions
Thursday, May 14, 2020



Current COVID-19 NUMBERS BY COUNTY (5/14@ 2:00 pm)			
	Total Cases Residents/Non-Residents	Hospitalizations* Residents/Non-Residents	Deaths
Alachua	330 (315/15)	64/2	5
Baker	26	9/0	3
Bradford	49	10/0	2
Clay	306 (304/2)	83/0	22
Columbia	107 (106/1)	9/0	2
Dixie	18	3/0	0
Duval	1,215 (1172/43)	200/8	32
Flagler	148 (144/4)	16/2	4
Gilchrist	7	0	0
Hamilton	134 (133/1)	0	0
Lafayette	5	0	0
Levy	22	2/0	0
Marion	217 (212/5)	30/0	5
Nassau	63 (61/2)	13/0	1
Putnam	127	15/0	3
St. Johns	231 (221/10)	36/3	5
Suwannee	151	35/0	18
Union	14	1	0
Statewide	43,210 (42,038)	7749	1,875

Current COVID-19 TESTING BY COUNTY (5/14@ 2:00 pm)			
	Total Tested	Total Positive	Positive Rate
Alachua	9,967	330	3.3%
Baker	599	26	4.3%
Bradford	1,088	49	4.5%
Clay	5,410	306	5.7%
Columbia	1,834	107	5.8%
Dixie	345	18	5.2%
Duval	35,860	1,215	3.4%
Flagler	2,480	148	6%
Gilchrist	360	7	1.9%
Hamilton	870	86	9.9%
Lafayette	112	5	4.5%
Levy	975	22	2.3%
Marion	7,078	217	3.1%
Nassau	2,154	63	2.9%
Putnam	2,441	127	5.2%
St. Johns	7,170	231	3.2%
Suwannee	1,451	151	10.4%
Union	455	14	3.1%
Statewide	609,574	43,210	7.1%

FDOH updates data daily at a 11:00 am *Hospitalization includes persons that may no longer be hospitalized.

Healthcare Coalition Information

If this report was forwarded to you, join the HCC to receive Situation Reports and more.
[Click here to join the Coalition.](#)

Healthcare Coalition Contacts

(904) 476-0294
Leigh Wilsey lwilsey@NEFRC.org
Eric Anderson eanderson@NEFRC.org

NEW Monitor Current Risks for Florida

[NWS Jax Daily Weather Briefings](#)

[Current Wildfire Conditions](#) *NEW*

NEW [FEMA: COVID-19 Pandemic](#)

[Medical Costs Eligible for Public Assistance](#) *NEW*

All Facilities

Critical Task



Hurricane Season begins in 18 days.

Review your facility's Emergency Management Plan and confirm that the status of your MOAs for host sheltering, transportation, emergency supplies and more have not changed. Consult your county Emergency Management Office if your facility plans have changed because of COVID.

AHCA Emergency Rule 59AER20-1 and Nursing Home Requirements 5/5/2020

[Emergency Rule: Hospital Testing Requirements for Long-term Care Facility Residents](#)

[AHCA Alert: Nursing Home Resident Transfers](#)

[Q&A for 59AER20-1](#)

[Emergency Rule: Requiring Staff COVID-19 Testing at Long-term Care Facilities \(5/10/2020\)](#)

[59AER20-2 Mandatory Entry and Testing for Assisted Living Facilities](#)

[59AER20-3 Mandatory Entry for Testing and Infection Control for Nursing Homes](#)

[Emergency Rule: Hospital COVID-19 Testing Requirements for Long-term Care Facility Residents \(5/5/2020\)](#)

**State-Supported
Testing Sites**



NEW* Telemedicine Video *NEW

[Medicare Coverage & Payment of Virtual Services](#)

NEW* [Wheelchair and Assistive Technology Users ATTENTION: PRECAUTIONS for COVID-19](#) *NEW

[Statewide Conference Call Summaries](#) Calls for Thursday, May 14, 2020.

- Employees should have temperatures taken at the beginning of the shift, and only followed up with another temperature check if some is not feeling well.
- Facilities are still seeing PPE deficiencies. Please use your own supply chain to procure PPE but understand there are some supply chain issues. Worst case please contact your local EOC for emergencies.
- Masks are extremely important to reduce the spread of COVID-19.
- Facilities should maintain screening of staff, as well as individuals in your care.
- All individuals on the Incident Management Teams (IMT) who visit facilities go through rigorous COVID testing and are wearing PPE upon entrance to your facility.
- State will be reaching out to you to begin asking some testing questions of your facility. Do you have the capability to test onsite? As well as other questions.
- Return to Work Policy – Reference guidance on FDOH Website
- March and April Quality Assessment payments will not be due until June. It has been frozen.
- ESS Data Collection – couple of changes
 - Added several questions related to facility testing
 - Some questions related to your ability to conduct your own testing at your facility, especially if you are provided the testing kits
- Testing will expand significantly in congregate care facilities over the next three weeks. Frequency of testing is still being determined.
- Emergency Rule for Hospital Discharge – emergency rule applies to patient who has been admitted to hospital. Test should be performed no later than 48 hours before discharge to a LTC facility. Reference the Q&A document (link above).

Statewide Conference Calls

Coalition staff attends the following statewide calls and provides the daily summaries and highlights above.

Hospitals & FHA	Monday 10:00 am	888-585-9008 Code 488 097 156#
Behavioral Health Centers	Tuesday 10:45 am	888-585-9008 Code 208 305 233#
Home Health & Community Providers	Thursday 1:00 pm	888-585-9008 Code 208 305 233#
Nursing Homes & FHCA	Thursday 4:15 pm	866-951-1151 Code 8484844#
Healthcare Providers	Tuesday 6:30 pm	888-585-9008 Code 208 305 233#

After Action Review

Starting your After Action Review Process for COVID-19

Steps your facility/organization should take now, while the COVID response is still ongoing:

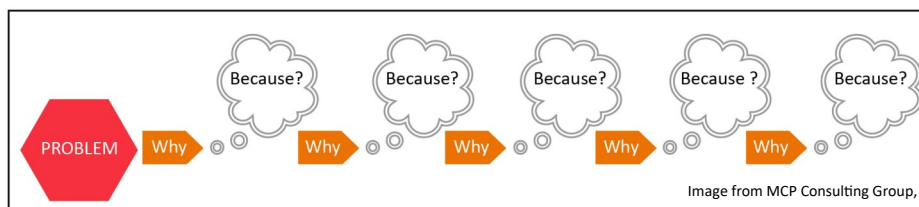
1. Designate a person to lead your organization through the AAR process. If not a senior leader, then someone that has access to the senior leadership. Identify key individuals that will need to be involved and engage them now.
2. Develop an incident timeline. This involves listing your organization's actions in time order, to see what happened when. Consider including major events that impacted your organization as well, such as stay-at-home orders or a ban on elective procedures. Here are two examples from the [WHO](#) (COVID-19) and [CDC](#) (SARS).
3. Take detailed notes on the operational and leadership actions taken during each time segment. Remember, observations are much more reliable than memories. Have key staff keep track of their response actions, outcomes and challenges throughout the response. Some organizations use the [ICS-214 form](#), but any uniform process established to capture activities is important.
4. Develop a process to collect this information regularly. One recommendation is to collect the ICS-214s at the staff sign-out/check-out station. This information will be invaluable to your leadership as you begin to change process, policies and organizational culture.
5. Consider conducting frequent, but brief, AAR sessions. This is a long response and things change over time. In these brief sessions discuss things that are going well and areas that may need improvement. Take detailed notes during these sessions. These brief AAR sessions may assist in making incremental changes to processes or large policy changes to improve the ongoing response.
6. Document everything! Remember this important rule: If it is not written down, then it didn't happen.

Analyzing Response and Root Cause Data This can be done in phases or at the end of the response.

Next in the After Action Review (AAR) process, is evaluating all the information collected during the response, either by phase or the entire event, using the incident timeline.

As you review the information collected, for the actions taken during the response, compare the organization's actual performance with the current processes, policies, goals and objectives.

During this analysis, identify the actions that worked well and those that may require improvement. For actions that did not work well, a root cause analysis may assist in determining the underlying reason behind an identified issue or challenge. When conducting a root-cause analysis, you are attempting to trace the origin of each event/issue back to earlier events and their respective causes. It requires asking "why", multiple times, to determine the root cause of an issue or problem. This is not a foreign concept in healthcare, as it is often used in patient safety studies. So if you haven't involved your patient safety folks in the AAR process, now is a great time to do so!



Region 3 Alliance After Action Report-Improvement Plan Template (for non-hospital partners)

[Healthcare Facility \(non hospital\) – After Action Report Improvement Plan Template \(MS Word Template\)](#)

Your organization may use this template to document the response strengths, areas for improvement and the organization's plan for making identified improvements.

NEW [Executive Order 20-007](#) ***NEW***

State Surgeon General Scott Rivkees issued EO 20-007, which allows doctors to continue routine checkups using tele-health instead of face-to-face contact. The order is in place through May 31.

Florida Agencies & Resources

Florida COVID-19 Contacts

[Florida Health COVID-19](#)

COVID-19 Call Center 24/7
(866) 779-6121

COVID-19@FLHealth.gov

[County Emergency Management](#)

AHCA Resources

[AHCA- COVID Alerts](#)

[Healthcare Facility Updates](#)

[Visitor Restrictions Emergency Order](#)

Transfer Forms

[SNF to Hospital](#) [Hospital to SNF](#)

[ESS Resources](#) [ESS Log In Page](#)

[ESS Hospital Bed Availability Dashboard](#)

FDEM Recovery Bureau

[Recovery Questions & Answers](#)

One Blood

One Blood is encouraging healthcare workers and first responders that have recovered from COVID to donate plasma. Go to www.oneblood.org/covid19 or dial 888-9DONATE

Institute for Health Metrics and Evaluation at the University of Washington (IHME)

[COVID-19 Hospital Forecasting](#)

Long-term Care Facilities with COVID-19

<https://floridahealthcovid19.gov/>
Report link under Dashboard link

Florida COVID-19 Resources

[Executive Orders](#) (Governor & State Agencies)

[Florida COVID-19 Daily Report](#)

Click on the **See the Report** link at the bottom of the webpage

[Florida Data & Surveillance Dashboard](#)

Emergency Status System: [ESS](#)

Agency for Healthcare Administration: [AHCA](#)

[AHCA COVID-19 Alerts](#)

FL Healthcare Association: [FHCA](#)

Agency for Persons with Disabilities: [APD Cares](#)

DCF Mental Health Services: [DCF](#)

FL Division of Emergency Management: [DEM](#)

Alternate Care Strategies

[ASPR Strategies](#)

Nebulizer Treatment Guidance

[Nebulizer Treatment for COVID-19 Infected Residents with Severe Respiratory Symptoms](#)

ASPR Workforce Virtual Toolkit

Resources for Healthcare Decision-Makers

<https://asprtracie.hhs.gov/Workforce-Virtual-Toolkit>

N95DECON

[Link to Resources](#)

Three N95 decon approaches

1) Heat and Humidity; 2) UV-C ;

3) Hydrogen Peroxide Vapor

Caution When Reusing N95 Masks

Relieve Stress for Healthcare Workers

[Self-Care Exercise](#)

Federal Agencies & Resources

Administration for Community Living

Supports needs of the aging and disability populations
<https://acl.gov/COVID-19>

FL Department of Elder Affairs

Services for Florida seniors, their families and caregivers
<http://elderaffairs.state.fl.us/>

FHCA Nursing Home & Regulatory Partners

[Statewide Conference Call Recordings](#)

Email for Nursing Home/LTC Questions covid@fhca.org

Community Action Survey (FDOH)

www.StrongerThanC19.com

FEMA Rumor Control

[Coronavirus Rumor Control Q&A](#)

PPE Information

[CDC Personal Protective Equipment Guidance](#)

[NIOSH approved N95s](#)

[PPE Burn Rate Calculator](#)

Guidance on strategies to optimize PPE supplies:

[Eye Protection](#)

[Isolation Gowns](#)

[Facemasks](#)

[N95 Respirators](#)

[Summary List](#) for Healthcare Facilities

Counterfeit Respirator [Information](#)

National Resources

[CDC COVID-19 Main Page](#)

[CDC Situation Summary](#)

[CDC Testing Priorities](#)

[CDC Testing Information](#)

[ASPR Tracie Planning Resources](#)

[FAQs about COVID-19](#)

[CMS Partner Toolkit](#)

CMS: [Hospitals Without Walls](#)

[FEMA's Rumor Control](#)

[Travel Advisories](#) US Dept of State

[Senior Medicare Patrol \(SMP\)](#)

[Southeast ADA Center](#)

[COVID-19 Fraud Alerts](#)

CDC Cloth Face Coverings

[How to make & wear cloth face coverings](#)

USDA Food & Nutrition Services

[Guidance on Human Pandemic Response](#)

CDC Mental Health Resources

[Taking Care of your Emotional Health](#)

[Helping Children Cope](#)

Critical Infrastructure Workers

[Guidance](#) for critical infrastructure workers that may have been exposed to COVID-19

CDC Decontamination & Reuse of Filtering Facepiece Respirators

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/decontamination-reuse-respirators.html>

National Emerging Special Pathogen Training & Education Center

[Past Recordings & Upcoming Webinars](#)

COVID-19 Printable Materials

[CDC Communications](#) and [FL DOH Materials](#)

Battelle PPE Decontamination Unit SOG Located in Miami-Dade County

Battelle has deployed a decontamination unit in coordination with FEMA and Defense Logistics Agency at no cost to the entities in the State of Florida. This unit can decontaminate **non-cellulose N95 masks only**.

Respirators (N95s) can be decontaminated up to 20 times, however they must not be visibly soiled (free of blood, mucus, makeup, lip balm, etc.) or damaged. If N95s are visibly soiled or damaged, they will be discarded.

Below are instructions in order participate in this process:

Hospitals	
Defined as	Hospitals within the State of Florida
Mandatory First Step: Signup Process	Hospitals must Sign a Service Agreement. These services are provided at no cost. Navigate to the link below to begin this signup process: https://www.battelle.org/inquiry/offerings-and-services/covid-response
	After signing the service agreement, a three-digit code will be assigned to your facility. After signup, Cardinal Health will also follow-up with hospitals to coordinate N95 mask pickup.
Sending N95s to be decontaminated	<ol style="list-style-type: none"> 1. Identify N95s to be decontaminated and write the three-digit code assigned to your facility on the masks. 2. Pack N95s in a plastic bag (this does not need to be a biohazard bag). Place in another plastic bag to double bag the masks. Clean the outside of the external bag with disinfectant. 3. Put the bag in the box and label the box with the three-digit code and a biohazard sticker (to be provided by the entity it is being picked up from). 4. Cardinal Health Courier Service will pick up items and take them to be decontaminated. 5. Items will be decontaminated and is expected to be curried back to the facility within 72 hours. When they are returned to your facility, Battelle will write a tally on the masks to track how many times they have been decontaminated.

Government Entities	
Defined as	Non-hospital entities within the county, to include law enforcement, fire rescue, EMS, etc.
Mandatory First Step: Signup Process	Each entity must Sign a Service Agreement. These services are provided at no cost. Navigate to the link below to begin this signup process: https://www.battelle.org/inquiry/offerings-and-services/covid-response
	After signing the service agreement, a three-digit code will be assigned to your facility. You will need to designate a point of contact for your facility.
Sending N95s to be decontaminated	<ol style="list-style-type: none"> 1. Identify N95s to be decontaminated and write the three-digit code assigned to your facility on the masks. 2. Pack N95s in a plastic bag (this does not need to be a biohazard bag). Place in another plastic bag to double bag the masks. Clean the outside of the external bag with disinfectant. 3. Put the bag in the shipping box and label the box with the three-digit code. 4. Your designated point of contact for your facility will receive prepaid FedEx and Biohazard labels from Battelle, that must be taped to the box in order to ship masks. 5. Send via FedEx. 6. Items will be decontaminated and shipped back to the facility within 72 hours. When they are returned to your facility, Battelle will have written a tally on the masks to track how many times they have been decontaminated.