

Date: June 4, 2020  
To: Genesis Rehab Services Business Partners  
From: Lou Ann Soika, Chief Strategy and Administrative Officer  
Re: COVID-19 Communication – Week of 6/1/2020

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Excerpts from a recent memo by George Hager, Genesis CEO: *“The recent tragic deaths of George Floyd, Breonna Taylor and Ahmaud Arbery remind us that as we continue to wage battle against racial inequity, the wounds in the Black community – our community – remain untended and unhealed. Throughout the United States, the Black community has endured inequality and indignity and remains vulnerable to racism and senseless violence. Hurt, anger and frustration have erupted into protest and unrest. Because #BlackLivesMatter.*

*One of our core values is respect and appreciation for each other. As a healthcare organization, we live that every day: our role is to help, heal and protect, without conditions. We live it with and for each other. Now more than ever, this is so important to remember.*

*So, while there is much to do as we ensure care for residents and patients, we must take the time to look at ourselves critically. We must foster and engage in open, honest conversations about how we can make sure that we do even better in building a culture of inclusion and respect at every level.”*

Please know that we are here to listen, better understand and change as necessary. If you have feedback for us on how we can do better, please contact any one of us.

## REGULATORY UPDATES

**Nursing Home COVID-19 Data and Inspection Results Available on Nursing Home Compare:** This afternoon, CMS posted the first set of COVID-19 nursing home data as well as targeted inspection results announced through the [CMS Press Release](#). The following resources have been made available:

For COVID-19 Nursing Home Data (to be posted on a weekly basis):

- [CMS Quick Overview of Nursing Home COVID-19 Data](#)
- To view the Nursing Home COVID-19 data, click [here](#)
- For the Quality Safety and Oversight (QSO) Group’s memo to State Officials and Nursing Home Stakeholders, click [here](#)

For Targeted Inspection Results (to be updated and posted on a monthly basis):

- To view inspection results, click [here](#)
- For the QSO Group’s memo, click [here](#)

**Survey and Reporting:** On June 1, 2020, the Centers for Medicare and Medicaid Services (CMS) issued a [Quality, Safety, and Oversight Letter \(QSO-20-31-All\)](#) to State Survey Agency Directors focused on the following items:

- Implementation of the new COVID-19 reporting requirements (Note: a 6/1/20 posting of Nursing Home COVID-19 Data is available [here](#))
- Initiation of a performance-based funding requirement for State Survey Agencies relative to the Focused Infection Control surveys

- COVID-19 survey activities
- Enhancement of penalties for infection control deficiencies
- Quality Improvement Organization support

A GRS Regulatory Update titled "CMS Issues Expanded Survey and Enforcement Requirements for Nursing Homes" can be found on our customer portal.

**General Reopening:** Last week we provided the link to "*Nursing Home Reopening Recommendations for State and Local Officials.*" This week, we have attached a summary of that document in the hopes of simplifying this complex guidance. The document provides information on the *phases*, the *elements that remain consistent throughout all phases* and *elements that are fluid throughout the phases*.

The GRS local operator will be working with you to understand which phase each center is in at any given time so that we may collaborate with you to comply with the guidance for that particular phase.

**Gym Reopening:** Additionally, we are working with our teams on successfully reopening the gyms when the time is appropriate. Attached is a one page overview of the steps we have identified necessary to successful reopening of the gym. This document is provided to facilitate collaboration as to the tasks needing completion prior to reopening the gym specific to each center's unique needs. GRS will provide a more comprehensive toolkit in the coming weeks.

**Clarifications for CR and DR Modifiers:** CMS also released a revised MLN Matters article [Medicare Fee-for-Service \(FFS\) Response to the Public Health Emergency on the Coronavirus \(COVID-19\)](#) on June 1st. The revisions include clarification for using the "CR" modifier and "DR" condition code. All other information remains the same.

## INDUSTRY ADVOCACY

According to Argentum, their **grassroots advocacy campaign, Standing With Seniors**, is continuing to make progress. **The next several weeks are going to be critical** to having our voices heard on the urgent needs of PPE, test kits, and financial relief for our communities. To take action, [residents](#), [residents' family members](#), [community staff](#), and [other advocates](#).

## GRS WELLNESS RESOURCES

**Classes:** GRS continues to offer our live **virtual wellness classes** each week to assist with improving **resident mobility**. Week of June 8th schedule of classes is below

- 11am Eastern, 10am Central, 9am Mountain, 8am Pacific
- To access the Zoom link: [Click Here](#)
- Classes: Functional Strength on Tuesdays; Maximizing your Memory on Wednesdays; Meditation and Mindfulness on Thursdays; and Seated Tai Chi on Fridays

**Vitality Wellness Seminars:** GRS also has created 11 different Vitality Wellness Seminars on demand at <http://site-964540.bcvp0rtal.com/>. Please see attached for more information.

## Overview of the CMS [“Nursing Home Reopening Recommendations for State and Local Officials”](#) document.

### KEY NOTES

- *“Nursing homes should not advance through any phases of reopening or relax any restrictions until all residents and staff have received a base-line test, and the appropriate actions are taken based on the results;*
- *States should survey those nursing homes that experienced a significant COVID-19 outbreak prior to reopening to ensure the facility is adequately preventing transmission of COVID=19; and*
- *Nursing homes should remain in the current state of highest mitigation while the community is in Phase 1 of Opening Up America Again (in other words, a nursing home’s reopening should lag behind the general community’s reopening by 14 days).”*

### PHASES

CMS has directed these phased recommendations to state and local officials. GRS leaders will follow business partners’ leads for all reopening efforts and be active participants in the collaborative effort. There are three (3) phases of the reopening plan. Below is a summary of the status as well as criteria for implementation:

Status	Criteria for Implementation
Current state: Significant Mitigation and Phase 1 of Opening Up America Again	“Most facilities are in a posture that can be described as their highest level of vigilance, regardless of transmission within their communities.”
Phase 2 of Reopening Nursing Homes and Opening Up America Again	<ul style="list-style-type: none"> <li>● “Case status in community has met the criteria for entry into phase 2 (no rebound in cases after 14 days in phase 1).</li> <li>● There have been no new, nursing home onset COVID cases in the nursing home for 14 days.</li> <li>● The nursing home is not experiencing staff shortages.</li> <li>● The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection supplies to care for residents.</li> <li>● The nursing home has adequate access to testing for COVID-19.</li> <li>● Referral hospital(s) have bed capacity on wards and intensive care units”</li> </ul>
Phase 3 of Reopening Nursing Homes and Opening Up America Again	<ul style="list-style-type: none"> <li>● “Community case status meets criteria for entry to phase 3 (no rebound in cases during phase 2).</li> <li>● There have been no new, nursing home onset COVID cases in the nursing home for 28 days (through phases 1 and 2).</li> <li>● The nursing home is not experiencing staff shortages.</li> <li>● The nursing home has adequate supplies of personal protective equipment and essential cleaning and disinfection. supplies to care for residents.</li> <li>● The nursing home has adequate access to testing for COVID-19.</li> <li>● Referral hospital(s) have bed capacity on wards and intensive care units.”</li> </ul>

## CONSISTENT PROCESSES

There are multiple processes that must be considered by each center with regard to the reopening process. The following visitation and service considerations essentially remain the same throughout the reopening process and include:

Topic	Consideration
Communal Dining	Limited (for COVID-19 negative or asymptomatic residents only), but residents may eat in the same room with social distancing (limited number of people at tables and spaced by at least 6 feet).
Medically necessary trips away from the facility	<ul style="list-style-type: none"> <li>● The resident must wear a cloth face covering or facemask; and</li> <li>● The facility must share the resident's COVID-19 status with the transportation service and entity with whom the resident has the appointment</li> </ul>
Screening of all persons entering the facility and all staff at the beginning of each shift	<ul style="list-style-type: none"> <li>● Temperature checks</li> <li>● Ensure all outside persons entering building have cloth face covering or facemask.</li> <li>● Questionnaire about symptoms and potential exposure</li> <li>● Observation of any signs or symptoms</li> </ul>
Resident screening	At least daily <ul style="list-style-type: none"> <li>● Temperature checks</li> <li>● Questions about and observation for other signs or symptoms of COVID-19</li> </ul>
Universal source control	Residents to wear cloth face covering or facemask
PPE	All staff wear appropriate PPE when indicated
Staff and resident COVID-19 testing	Test all staff weekly. Test all residents upon identification of an individual with symptoms consistent with COVID-19, or if staff have tested positive for COVID-19. Weekly testing continues until all residents test negative
Space for cohorting and managing care	Dedicated space in facility for cohorting and managing care for residents with COVID-19; plan to manage new/readmissions with an unknown COVID19 status and residents who develop symptoms.

## FLUID PROCESSES

The following processes require enhanced collaboration and communication by GRS leadership with business partners with regard to the reopening of a facility.

Topic	Considerations
Visitation	Initially visitation generally prohibited, except for compassionate care situations and transitions to visitation allowed. However, all visits require screening along with social distancing, hand hygiene and masks/face coverings. GRS impact on face to face family education/observation of rehab sessions.
Non-essential healthcare personnel/contractors entry	Restricted in phase 1 and progresses to “as determined necessary by the facility” in phase 3. Includes the continued requirements of screening, social distancing, hand hygiene and masks/face coverings. GRS impact on student programming and recruitment (on-site interviews)
Group activities	Phase 1: “Restrict group activities, but some activities may be conducted ... with social distancing, hand hygiene, and use of cloth face covering or facemask.” Phase 2: includes “outings” with no more than 10 people Phase 3: “with no more than the number of people where social distancing among residents can be maintained” NOTE: Through all 3 phases, this applies to “asymptomatic or COVID-19 negative residents only”, social distancing must be maintained, appropriate hand hygiene and use of face masks/covering required. GRS impact on resumption of therapy in the rehab department as well as group and concurrent therapy. (e.g., space considerations and clinical programming)
Medically necessary trips outside of the facility	Although this item is addressed on page 2, consideration needs to be made with the center regarding rehab treatments outside of the facility. GRS impact on intervention for car transfers, negotiating outdoor surfaces, home evaluations, etc.

GRS workgroups are in place for an interprofessional approach to develop reopening options for leadership for their collaborative efforts with business partners. All functional business lines within GRS have a role in the reopening process. In addition, there may be state, local as well as facility-specific timeframes and processes utilized for reopening efforts. Collaboration and communication between business partners and GRS leaders will be essential as all continue to navigate through this uncharted territory for the safe and effective reopening of nursing homes.

## STEPS

- ✓ Inventory of current equipment.
- ✓ Declutter and remove unnecessary large equipment, tables, and supplies to facilitate the ease of cleaning.
- ✓ Consider repurposing existing office spaces, kitchens, bedrooms, etc.
- ✓ Establish designated entrance and exit points when possible.
  - Include STOP signs before entrance.
  - Designate a station to properly screen employees and residents.
  - Ensure appropriate PPE upon entrance to gym.
  - Include area for PPE donning and doffing.
  - Ensure adequate bio-hazard and waste receptacles are available and accessible.
- ✓ Establish treatment zones in 6-foot increments.
  - Number your zones.
  - Display zone numbers.
- ✓ Establish traffic patterns within your gym to support social distancing guidelines.
  - Use Tape, arrows, footprints, etc.
- ✓ Provide treatment carts, kits, or stations in each zone or to each therapist to include PPE and Essential Items for example Pulse Ox, BP Cuff, spray, wipes, gloves, etc.

## TIPS

Often, getting organized is an afterthought, or something only addressed out of necessity after reaching a certain point of disorganized chaos. The benefits of organization and being efficient have the potential to make a positive impact on your therapy department: Having a handle on your physical space, documents, schedule and staff utilization can free your time so you can spend more time with the residents and also free up the gym treatment space. An efficient therapy gym was always a necessity, but now is a requirement for success to better attend to our pandemic and post-pandemic rehabilitation needs. This Space Design-Tip focuses on how we can make our therapy gym closet space more efficient:

-  Shelving & Wall Rack- often the top part of closet are under-utilized, by adding an additional shelf or two will assist in organization.
  -  Please note current regulation requires 18 inches of clearance from ceiling.
-  Declutter- Don't wait for spring cleaning, if a particular item or piece of equipment is not functionally based and does not meet the needs of the resident, remove the item from department.
  -  If a piece of equipment hasn't been used in a year, time to pitch it or offer to a sister facility that could utilize equipment.
-  Closet wall space- Take advantage of under-utilized space & additionally adhesive plastic wall hooks can be attached without even getting out the toolbox for commonly used items.
-  Shelf Dividers-These dividers attach to existing shelves and are easy to install. They don't actually create more space but they'll add to the order in your closet, which creates a feeling of spaciousness. The dividers allow you to store equipment in separate sections on your shelves, for example leg rests.

# Vitality Wellness Senior Seminars

The path to Vitality is through our health and wellness programs. Genesis Rehab Services is pleased to offer our customers on-demand access to our Vitality Wellness Senior Seminars. These 10 to 30-minute presentations cover many aspects of wellness and the benefits of a fit and healthy lifestyle.



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