


Stay Calm
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CALTCM.org

Webinar Series
COVID-19: CALTCM Weekly Rounds


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**Crisis Management:
Effective NH Leadership
During the COVID-19 Crisis**

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Webinar Faculty & Moderator

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Geriatrician, President, CALTCM,
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Webinar Faculty

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Webinar Faculty

Dolly Greene RN, BSN, CIC
Infection Prevention & Control Resources
Expert Stewardship



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Guest Panelists

Michael Schrieber
Managing Member and VP of Strategic Planning
Cassena Care, New York

Dr. Samar Raza, MD, FACP, SFHM
Corporate Medical Director
Cassena Care, New York



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Do NOT ACCEPT COVID19 +, Unless:

They have two negative tests that are 24 hours apart
OR 10 Days after admission AND no fever for 72 hours, per Centers for Disease Control and Prevention (CDC) and Los Angeles County Department of Public Health (LAC DPH) guidelines

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Objectives

- SPECIAL THANKS TO JOCELYN MONTGOMERY, WHO PREPPED ME FOR THIS PRESENTATION!
- Understand key leadership principles in a crisis
- Understand that nursing homes are ground zero for COVID-19's greatest impact
- Know how to assemble your Incident Command Team (IFLOP)
- Understand key functionality in this crisis



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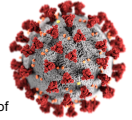
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Crisis

Intense difficulty that requires swift but sound decisions for the intensity of the moment, that when evaluated, become the turning points for actions in the future

Crisis are:

- Quite common – we always think the current time is the worst
 - 1918 – Flu – one million people died every week
 - Crisis every couple of years since forever – remember Y2K
 - We have survived and thrived following each crisis – why? Because of what we learned and changed
- Distracting – interferes with positive traction moving forward
 - In a matter of weeks, seemingly out of the blue in the midst of good times, thousands have died / millions are at risk
 - No time for hand-wringing – fix this problem while preparing for the next
- Magnifiers / exaggerators of everything – reveal what's already inside of us



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In the midst of a crisis, great leaders:



- Know the way, show the way and go the way – implement the plan that you have trained for – you do train on this stuff don't you?
- Instill confidence / put fear into perspective – change what we can, mitigate what we can't, know the difference.
- Put the people first – its never about you.

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In the midst of a crisis, great leaders:




- Protect / direct and grow your people – make them better
- Get the facts / gain perspective / provide wisdom & guidance
- Are flexible / adaptable – especially with undefined parameters – during a crisis, things can change in an instant

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In the midst of a crisis, great leaders:

- Leverage the team – get multiple perspectives / skill sets / delegate
- Communicate judiciously – give the right information to the right people at the right time – don't overload them – help them focus
- Are available – listen / care / help / encourage



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In the midst of a crisis, great leaders:

- Are authentic – see the big picture, manage yourself, tell the truth
- Be the light keeper – provide realistic hope for the future – the sky has never actually fallen
- Evaluate when we are done so we do better during the next one



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Kirkland SNF was Ground Zero


- Best thing for our country!
- Sounded the alarm
- Nursing homes and assisted facilities essentially locked down
- Focused on Infection Control
- Is it enough?
- No



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Nursing Home Staff: Thank You!


- **YOU ARE AMAZING HUMAN BEINGS!!**
- **You can move mountains**
- **You are trying your hardest!**
- There's a Difference between **Working hard and working smart!**
In a crisis, we must DO BOTH!



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Nursing Home Milieu


- Nursing homes are the most complex, large small businesses, in the history of mankind!
- Caring for the MOST vulnerable and frail population ever!
- Less than optimum staffing and resources



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Emergency Preparedness Status

- How prepared are you for an emergency?
- Everyone has an emergency response plan
- Everyone has had drills
 - Generally last about 20 minutes



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How Many Of You Have Been Through an Actual Disaster?

- Fires?
- Earthquakes?
- Blizzards?
- Hurricanes?
- Floods?



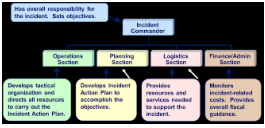
WE'VE NEVER LIVED THROUGH A PANDEMIC!
How prepared are you to put together your incident command team?




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IFLOP: Your Incident Command Team



Incident Commander: Usually the NHA
Finance/Admin: Human Resources/Business (NHA?)
Logistics: Central Supply, Business/Finance, procurement, track inventory (BOM)
Operations: The shit that needs to get done: Resident Care Services, Nursing, Housekeeping and Dietary (DON)
Planning: Keep an eye on where things are going, predict where you'll be in 12 hours, what do you need to do to stay ahead of the curve. Situational awareness. Latest guidance (NHA)

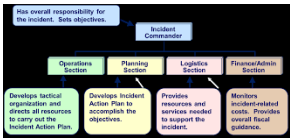



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IFLOP: Your Incident Command Team

- **Advisors:**
- **Safety Officer/Infection Preventionist**
- **Clinical Specialist**
 - Medical Director
 - Consultant Pharmacist
 - Health department






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Functionality in a Crisis


- Incident commander has ultimate authority
- Incident commander briefed by key leaders
- **FUNCTION LIKE A PYRAMID**
- **DRAW ORG CHART/CHAIN OF COMMAND: EVERYONE KNOWS WHAT THEY NEED TO DO!**
- Break people into their lanes
- Set clear objectives
- Prioritize: Hierarchy/Priorities
- Review every 12 hours


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Functionality in a Crisis



- Don't feed information through a fire hose
- Use a clear operational footprint, by org chart
- Monitor latest advice
- Checklists can help
- Understand flexibility
- Support activities: Logistics, finance, planning




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Functionality in a Crisis

- Every nursing home, as of 2017, has a comprehensive emergency operation plan, including an infectious disease outbreak.
- CAHF has a template that is incident command friendly. (A lot of folks have used it.)
- **ACTIVATE INFECTIOUS DISEASE PLAN**
- Have someone documenting what you're doing



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

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**BE PREPARED
SAVE A LIFE!**



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