

November 20, 2020



Greetings,

Another week has passed and we have another change to announce regarding our sentinel surveillance testing procedures. The state has presented the opportunity for nursing homes to test 100% staff weekly and we will proceed with this increased frequency. This is a significant increase from the 100% once a month and 10% each subsequent week. We will be anticipating testing guidance for the new year.

Beginning Monday we are doubling our family visits during the holiday season. The process will remain the same, visits are scheduled in advance and must be supervised. We are working with our staff to ensure each resident is ready for the visit, please ensure you arrive at the scheduled time to ensure the visit can occur for the specified time. To guarantee all visits occur we unfortunately must maintain a strict end time. I would like to thank the team at St. Vincent's for committing to scheduled timeframes to allow the doubling of the scheduled visits. Next week we will be mailing a letter with a portion to be completed and returned via the self-addressed envelope we will provide. **If you are interested in participating in the raffle for a family visit on Christmas Eve or Christmas Day please ensure you complete and submit the raffle!**

Christmas music has been playing throughout the halls for a few weeks and the holiday spirit is in full-swing with Thanksgiving less than a week away. We will be having a door decorating contest throughout the building, we are encouraging interested residents to participate. We ask you bring items to the building no later than Monday, November 30 to the attention of Sam Bilodeau, Housekeeping Manager. Housekeeping staff have volunteered to assist residents with decorating their doors, please provide notes if you have a specific design. We have many NFPA Life Safety requirements to maintain so if you would like to participate please ensure you adhere to the following: no real evergreen materials, pinecones or other natural combustible materials and the door must shut without interference and with minimal effort.

It is critical for Coos County to maintain or decrease the rate of active cases. Per CMS, active cases of 0-4.99% per 100,000 people means we maintain our current practices with testing, 5%-9.99% means we test all staff once a week which is our current practice, however, 10% or above requires staff testing twice a week and the cancelation of visitations. We have been hovering around the 5% mark and together can encourage actions which help mitigate the transmission. The CDC has provided guidance on how to safely enjoy the holidays which strongly discourages residents from leaving nursing homes to attend family gatherings. If a resident leaves to attend a gathering, for any length of time, our 14 day quarantine procedures will be initiated immediately upon return. Although this may seem like draconian law we cannot stress that activity on the outside of the building is what introduces COVID-19 to our vulnerable residents and staff. I have provided the most recent CMS alert for your review. Please contact me with any questions.

In October we began a monthly series on Dementia to assist with families and friends having a better understanding of the Dementia process. The first letter was about the stigma of Dementia, this week's letter from Kim, Memory Care Director, will discuss why behavioral changes frequently occur for someone living with Dementia.

Thank you,

Jeffrey Lacroix

Administrator

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ALERT

To Nursing Homes, Residents, and Resident Family Member(s)/Representative(s),

The coronavirus disease 2019 (COVID-19) public health emergency (PHE) has been one of our nation's greatest challenges and has especially taken a toll on the nation's nursing home residents. CMS is committed to protecting the health and safety of nursing home residents at all times and especially during the challenges presented by the spread of COVID-19. We understand the emotional impact that separation from loved ones has caused. In September, CMS [provided revised guidance](#) for how residents can safely receive visitors in the nursing home. With the holiday season fast approaching, we understand that residents and their families will want to spend more time together. During the holidays, facilities, residents, and visitors should continue to follow the guidelines for visitation and adhere to the core principles of infection prevention, such as remaining six feet or more apart, wearing a face covering, and limiting the number of visitors in the nursing home at any one time. We also recommend that facilities find innovative ways of celebrating the holidays without having parties or gatherings that could increase the risk of COVID-19 transmission (e.g., virtual parties or visits, provide seasonal music, movies, decorations, etc.).

We also know that some residents may want to leave the nursing home temporarily to visit family and friends for the holidays or other outings. While CMS supports family engagement and a resident's right to leave the nursing home, everyone needs to work together to take extra precautions to help reduce the spread of COVID-19, which can pose an elevated danger to the health of nursing home residents. Therefore, CMS recommends against residents leaving the nursing home during this PHE. With the potential for a safe and effective vaccine on the immediate horizon, extra precautions now are essential to protect nursing home residents until a vaccine becomes available. Leaving the nursing home could increase a resident's risk for exposure to COVID-19. The risk may be further increased by factors such as a resident's health status, the spread of COVID-19 in the community (e.g., cases or positivity rate), or attendance at large gatherings. We encourage residents to discuss these and other risks with their families and nursing home staff. Nursing homes should educate residents and families of the risks of leaving the facility, the steps they should take to reduce the risk of contracting COVID-19, and encourage residents to stay connected with loved ones through alternative means of communication, such as phone and video communication. For examples of ways to connect with residents, refer to memorandum [QSO-20-28-NH](#). Should a resident ultimately choose to leave the nursing home, CMS is providing the following recommendations:

- Limit close contact (maintain physical distancing of six feet or more), keep gatherings as small as possible, and use technology to engage with others remotely;
- Wear facemasks or cloth face covering at all times (including in cars, homes, restaurants, etc.);
- Limit contact with commonly touched surfaces or shared items;
- Keep safe around food and drinks. Avoid communal serving utensils, passing of food, potluck or buffet style food service, and instead opt for individually prepared plates by a single server;
- Perform hand hygiene often (e.g., wash hands with soap and water or alcohol-based hand sanitizer);
- Avoid large gatherings, crowded areas, and high-risk activities such as singing;
- For those attending a gathering, avoid contact with individuals outside of their household for 14 days prior to the gathering;
- Ask anyone who has signs or symptoms of COVID-19, or has been exposed to someone diagnosed with COVID-19, to not attend the gathering;

- If possible, conduct gatherings outdoors. Indoor gatherings should have good ventilation, open windows and doors if possible;
- Verbally greet others instead of shaking hands or giving hugs. Think ahead about how you will manage to prevent physical interactions with loved ones of different ages such as young children; and
- Check local conditions and state requirements for precautions and restrictions, including positivity rates and quarantine requirements, before crossing state lines.

CMS has collaborated with the Centers for Disease Control and Prevention (CDC) on these recommendations, and we encourage you to review CDC's [webpage on holiday celebrations](#), which has more suggestions for preventing the spread of COVID-19.

Note to nursing home staff: Staff should also use extra caution, especially during the holidays. Staff should follow the same recommendations for residents and families regarding gathering with their families and friends outside of work to protect the vulnerable residents they care for.

Additionally, while the above actions can greatly reduce the risk of spreading COVID-19, due to the highly contagious nature of the virus, we recommend nursing homes take the following actions when residents return to the nursing home:

- Screen and increase monitoring for signs and symptoms.
- Test a resident for COVID-19 if signs or symptoms are present or if a resident or their family reports possible exposure to COVID-19 while outside the nursing home. A nursing home may also opt to test residents without signs or symptoms if they leave the nursing home frequently or for a prolonged length of time, such as over 24 hours. For more information on testing guidelines see [CMS memorandum QSO-20-38-NH](#).
- Place the resident on transmission-based precautions (TBP) if the resident or family member reports possible exposure to COVID-19 while outside of the nursing home, or if the resident has signs or symptoms of COVID-19 upon return. Please note that residents and loved ones should report to the nursing home staff if they have had any exposure to COVID-19 while outside of the nursing home.
- Consider placing residents on TBP if they were away from the nursing homes for more than 24 hours.

As we progress through these challenging times, we express our sincere gratitude for everyone doing what they can to help protect nursing home residents. CMS' mission is to safeguard the health, safety, and quality of life for America's nursing home residents. While this year's holiday celebrations will undoubtedly be different than previous years, together we can still find safe ways residents can enjoy the holidays with family and friends.



CMS Administrator

This alert is prepared as a service to the public and is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

Why is My Loved One with Dementia Changing?

One of the questions I am often asked is “Why is my loved one changing? They have had Dementia for years and were always about the same but now they are different, why is that?”

The easiest and shortest answer is their brain is dying. Sometimes this can happen quickly other times it can take several years. Our brains are made up of neurons which are information messengers. They use electrical impulses and chemical signals to transmit information between different areas of the brain and the nervous system. Unfortunately, dementia attacks these neurons and kills them. This will often cause behavioral or personality changes.

Each part of the brain has its own function. When the neurons are attacked in that area, we will see changes in their behavior or personality.

Let’s take a look at the different parts of the brain and what they are responsible for:

Frontal Lobe: Thinking, memory, behavior and movement. **Temporal Lobe:** Hearing, learning and feeling. **Brain Stem:** Breathing, heart rate and temperature. **Parietal Lobe:** Language and touch. **Cerebellum:** Balance and coordination.

When the Frontal and Parietal lobes become damaged those individuals are often unable to find the words they once knew and cannot explain to us what they need. This often manifests into anger and frustration causing them to become easily annoyed. Reasons for this could be: A person with dementia may feel the need to “go” somewhere and wander. They could start searching angrily for something, maybe a restroom. They may be hungry, or in pain. Why does this create behavioral issues? Imagine if in your mind you knew you had to be somewhere and you could not identify a way to get there, where it was or if you were going to be late? How would you feel if you had the urge to use the restroom but could not remember what a restroom was? What about if you were hungry but didn’t remember what hunger felt like but had the hunger pains and did not know what they were. Typically, we become irritated when we lose an item but we understand we placed it in the wrong spot and in most cases find it. People with dementia do not understand the concept of misplacing an item because in their mind it was right where they always put it so, someone **MUST** have stolen the item. This is caused by brain death in the Frontal Lobe.

Dementia also affects how that individual responds to their environment. When overstimulated people with dementia may be more forgetful and have trouble following conversations especially when there is a lot of noise, multiple conversations or in large crowds. This often results in frustration.

What are some other changes we see?

Falls: How does dementia make your loved one fall? Balance and coordination which are vital in the ability to walk are controlled by the Frontal Lobe and the Cerebellum. When these parts of the brain are affected walking is not as easy as it once was. They may require a cane, walker, someone to walk with them or even a wheelchair; often forgetting to use their assistive device.

The ability to care for themselves: Caring for oneself changes as Dementia progresses. You might notice your loved one no longer changes their clothes or bathes as routinely. Although this person may have always been “neat and clean” personal care becomes very confusing and frustrating since it requires multiple aspects of the brain working together.

Sleep: “My loved one is always sleeping, why?” Sleeping is a common in late stage dementia. As the disease progresses damage to the brain becomes more extensive. As a result, your loved one with dementia may find it quite exhausting to complete everyday tasks such as communicating, eating or trying to understand what is going on around them. This can make the person sleep more during the day as their symptoms become more severe. Think of their brains as a battery and sleep is recharging the battery.

A person with dementia may become more outgoing than they once were. They may be more talkative and affectionate with anyone they see. The ability to form proper sentences will most likely decrease as the disease progresses but they will continue to “tell stories” and be very happy while telling them. You may notice them being more “touchy feely” as well. You may notice them wanting to hold hands, rub your arms or even hug and kiss everyone they meet. Due to changes in the brain a person with Dementia cannot adjust their actions and behaviors, we must change. Dementia is a brain disease that may change personality and behavior. If you try to change their behavior, it will most likely only result in frustration for you and the other individual.

Written by: Kim Reardon, Memory Care Manager, Certified Dementia Practitioner, Certified Dementia Care Specialist