





## SYMPTOMS OF STRESS

- Difficulty sleeping
- Stomach pain
- Teeth grinding
- Headaches
- Anger, Outburst
- Restlessness; Fatigue
- Lack of motivation or focus
- Social isolation
- Nausea
- Weight gain or weight loss



- Having stomachaches or diarrhea
- Having headaches and other pains
- Losing your appetite or eating too much
- Sweating or having chills
- Getting tremors or muscle twitches
- Being easily startled
- Sweaty hands or feet
- Heartburn
- Excessive sleeping

## SYMPTOMS OF STRESS

- Difficulty concentrating; thinking clearly
- Obsessive or compulsive behaviors
- Feeling overwhelmed
- Irritability or anger
- Sadness or depression
- Display unwanted/undesired actions
- Irritability;
- Panic attacks
- Having trouble remembering things



- Being anxious or fearful
- Feeling depressed
- Feeling guilty
- Feeling angry
- Feeling heroic, euphoric, or invulnerable
- Not caring about anything
- Feeling overwhelmed by sadness
- Feeling confused
- Having difficulty making decisions

## WHAT IS STRESS MANAGEMENT?

- “set of techniques and programs intended to help people deal more effectively with stress in their lives by analyzing the specific stressors and taking positive actions to minimize their effects” (Gale Encyclopaedia of Medicine, 2008)



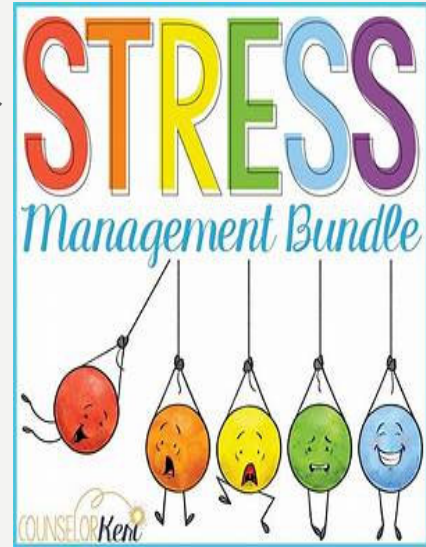
## MANAGING STRESS: STAFF

- Schedule and take brief breaks to care for your basic needs.
- Schedule and take brief relaxation breaks at work. A few minutes of a break during a shift can be calming. Even a 5-minute walk can improve energy and focus.
- Take time each day to do something that brings you joy, even if just for a brief moment.
- Maintain a healthy diet; bring your own meals to work.
- Keep your schedule of daily activities as regular as you can.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.



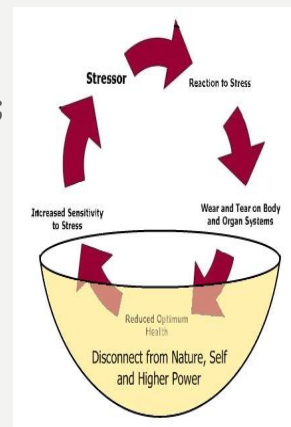
## MANAGING STRESS: STAFF

- Avoid or limit use of alcohol and caffeine.
- Watch for excessive fatigue, irritability, poor focus, or anxiety.
- Pace yourself.
- Take a moment for a slow breath before entering a work area, If a spiritual practice is important to you or has been in the past, work it into your regular routine.
- Get some sunlight.
- Try chair yoga or stretching at work.
- Get regular exercise. Try walking or biking to work if you can.



## MANAGING STRESS FOR STAFF

- **Personal safety and Family safety**
- **Support to work: Transportation and parking; Logging; Meals, Snacks**
- **Communication**
- **Psychological safety; Peer support**
- **Mental health liaisons; Mental health crisis team**
- **Self-care; Retraining**
- **Mentorship; Teamwork**
- **Daily huddles:** time for the staff to provide input and help refine the work as they do the work



## MANAGING STRESS FOR STAFF

- Develop and provide materials that include evidence-informed coping tips and self-care facts
- Direct people to resources
- Promotes social connectedness, calming---rather than fear---and feelings of safety and hope
- Provide guidance about building resilience, including tips for increasing social support, maintaining optimism, setting goals, achieving emotional and social balance, and employing multiple types of problem-solving and coping



## WHAT DO YOU DO FOR YOUR STAFF

- Check in with staff frequently: at least weekly
- Regard how they are doing and feeling, and how their families are doing
- Show your support and care for staff
- Make sure staff are taking care of themselves (e.g. encourage staff to take a five-min mental health break, provide lunch or food to make sure they are eating well)
- Allowing them time to call family during shifts if needed to check on them
- Understand and Identify Burnout
- Recognize Secondary traumatic stress – stress reactions and symptoms resulting from exposure to another individual’s traumatic experiences, rather than from exposure directly to a traumatic event

## WHAT TO DO FOR YOUR STAFF

- Emergency Assistance Programs
- Set up a Quiet Room for Staff
- Ensure Staff Can Access Food and Other Essentials
- Connect staff with resources for childcare.
- Engage appreciation from residents/other staff/families, and appreciation from leadership
- Establish Buddy system
- Provide assistance, help lines



## MANAGING STRESS

- Relax your body often by doing things that work for you—take deep breaths, stretch, meditate, wash your face and hands, or engage in pleasurable hobbies.
- Pace yourself between stressful activities, and do a fun thing after a hard task.
- Use time off to relax—eat a good meal, read, listen to music, take a bath, or talk to family.
- Talk about your feelings to loved ones and friends often.

## CONTACTS-HELPS

- Need help? Know someone who does?
- If you, or someone you care about, are feeling overwhelmed with emotions like sadness, depression, or anxiety, or feel like you want to harm yourself or others
- Call 911
- Visit the [Disaster Distress Helplineexternal icon](#), call 1-800-985-5990, or text TalkWithUs to 66746
- Visit the [National Domestic Violence Hotlineexternal icon](#) or call 1-800-799-7233 and TTY 1-800-787-3224
- SAMHSA Hotlines SAMHSA's Disaster Distress Helpline Toll-Free: 1-800-985-5990 (English and español)
- SAMHSA's National Helpline Toll-Free: 1-800-662-HELP

## HOW ABOUT HUMOR?

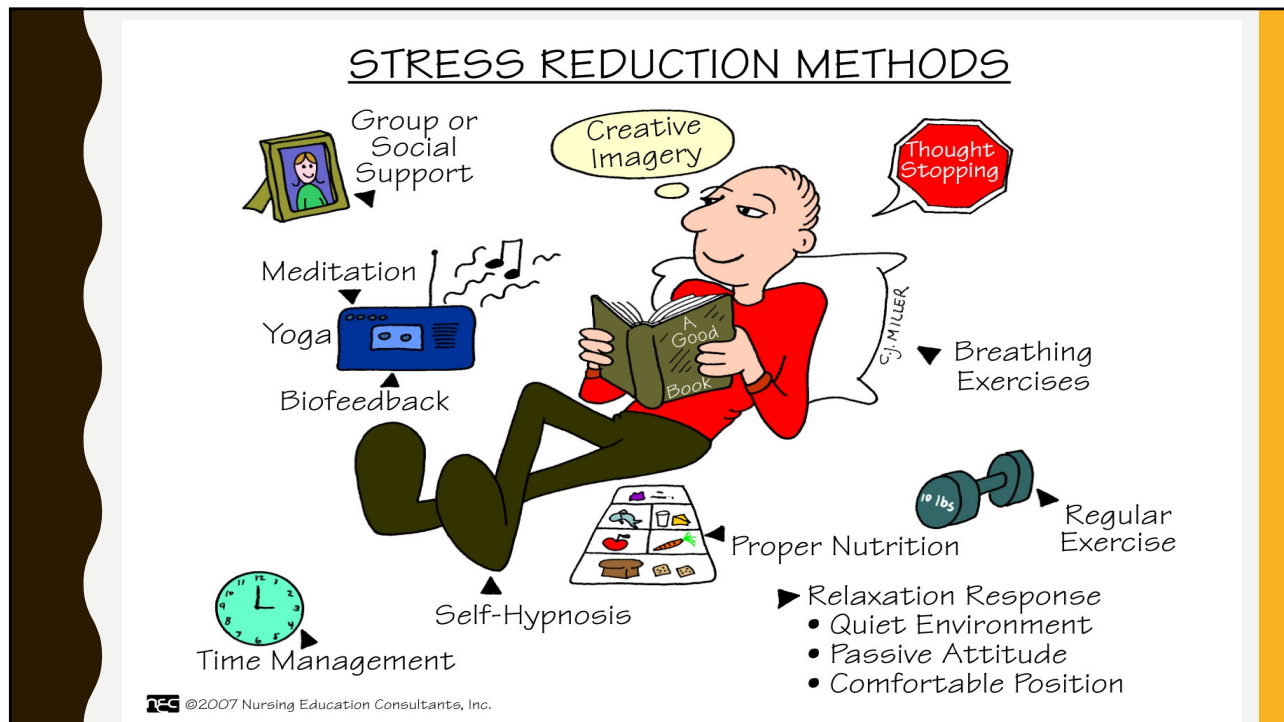


LOL

- Humor is coping mechanism: Manage Stress, Maintain Emotional Well-Being
- Humor helps us take back control *and* connect Relax the fears for a moments
- Help attachments with others and binds people together via laughs
- Help lessening tensions
- Help to resolve conflicts
- Help to relieve setbacks
- Help Alleviate Anxiety and Depression
- Avoid offense humor or mocking pictures, videos and words
- People take humor differently. Ask before “is it ok to joke”







## MANAGING STRESS FOR RESIDENTS

- Meet basic needs: Eating, hydrating, sleeping
- Rest and relaxing activities that meet the social distancing guidelines.
- Help resident to stay connected: Helping residents to give and receive support from family, friends, churches can reduce feelings of isolation.
- \*Inform and update the information to residents and family! Be transparent!
- Monitor for signs of increased stress.
- Talk to a family member, friend, peer or supervisor if needed.
- Recognize residents for their support and cooperation with guidelines and facility's policies during this crisis
- Promote senses of safety

## MANAGING STRESS FOR RESIDENTS

- Education: basic hygiene such as hand-washing and cough etiquette
- Let residents know what you, your office, or your organization is doing to reduce the risk of exposure.
- Limit media exposure. Take a break from media coverage of COVID-19
- Acknowledge signs of distress, and teach residents to recognize the signs of distress, including worry, fear, insomnia, difficulty concentrating, interpersonal problems
- Get some sunlight
- Spiritual practice if applicable
- Support families if resident is infected or passes away
- Reduce boredom and isolation



## MANAGING STRESS FOR RESIDENTS

- **Help connect people with family and loved ones** to help lower distress and feelings of social isolation.
- **Let older adults and people with disabilities know it is common for people to feel distressed during a crisis.** Remind them that asking for and accepting help is a sign of strength.
- **Have a procedure and referrals ready** for anyone who shows severe distress or expresses a desire to hurt him- or herself or someone else.

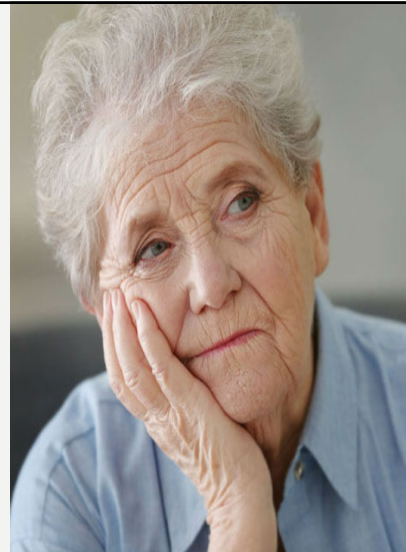
## MANAGING BOREDOM



- Technology: computers, tablets, e-readers, explore virtual activities, games
- Reading: Magazines/Newspapers/Books, etc. Read a book via intercom if applicable
- Radios, music;TV in room
- Arts and Crafts: Crossword puzzles, Sudoku,Adult coloring books
- Knitting , Sewing, Cross Stitch, Needlepoint, Jewelry-making, Macramé , Quilting, Painting – watercolors, finger paints, paint-by-numbers, etc.
- Puzzles – for adults living with dementia, consider large pieces and puzzles with fewer pieces ,
- Scrapbooking – reminiscent pages of their life or favorite things
- Explore more arts and crafts ideas online
- Exercise/Movement/Dancing

## MANAGING BOREDOM

- Music Therapy
- Board games/card games : Solitaire or Free cell
- Meditation
- Movies in social distancing
- Bingo Over the Intercom
- Ice Cream Non-Social or in social distancing
- Trivia Question for the Day
- Bird Watching if available
- Journaling – have residents write something new each day, write down what they are thankful for each day



## HELPING STRESS FOR RESIDENT'S FAMILY

- Keep the lines of communication open utilizing phone calls, face time, zoom, skype or other means
- Allow families the opportunity to share concerns, frustrations and/or compliments
- Assign staff as primary contact to families for inbound calls, conduct regular outbound calls to keep families updated
- Host “virtual office hours” with conference calls or webinars where families can call in or log on with facility staff to share activities or happenings within the facility and families may ask questions or make suggestions

## COMMON REACTIONS TO COVID-19

- **Concern about protecting oneself** from the virus because they are at higher risk of serious illness.
- **Concern that regular medical care or community services may be disrupted** due to facility closures or reductions in services and public transport closure.
- **Feeling socially isolated**, especially if they live alone or are in a community setting that is not allowing visitors because of the outbreak.
- **Guilt** if loved ones help them with activities of daily living.
- **Increased levels of distress** if they:
  - Have mental health concerns before the outbreak, such as depression.
  - Live in lower-income households or have language barriers
  - Experience [stigma](#) because of age, race or ethnicity, disability, or perceived likelihood of spreading COVID-19.

(CDC )

# TOOLS AND TIPS

## CMS QSO-20-30-NH MAY 18, 2020

**SUBJECT:** Nursing Home Reopening Recommendations for State and Local Officials

### Memorandum Summary

- CMS is committed to taking critical steps to ensure America's nursing homes are prepared to respond to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE).
- **Recommendations for State and Local Officials:** CMS is providing recommendations to help determine the level of mitigation needed to prevent the transmission of COVID-19 in nursing homes. The recommendations cover the following items:
  - **Criteria for relaxing certain restrictions and mitigating the risk of resurgence:** Factors to inform decisions for relaxing nursing home restrictions through a phased approach.
  - **Visitation and Service Considerations:** Considerations allowing visitation and services in each phase.
  - **Restoration of Survey Activities:** Recommendations for restarting certain surveys in each phase.

## CMS TOOLKIT ON STATE ACTIONS TO MITIGATE COVID-19 PREVALENCE IN NURSING HOMES MAY, 2020

- Reporting/Guidance/ Mandated Reporting Continued
- Missouri (MO) **The Quality Improvement Program for Missouri (QIPMO)** • QIPMO is a cooperative service between the University of Missouri Sinclair School of Nursing and the Missouri Department of Health and Senior Services. It is composed of gerontological nurses who provide education on state actions to improve care delivery and outcomes for nursing home residents
- Resources Continued Missouri (MO) **The Quality Improvement Program for Missouri (QIPMO)** • In addition to an online COVID-19 resource compendium, QIPMO recently developed a **COVID-19 SBAR** (Situation, Background, Appearance/Assessment, Review/Recommendation) tool for nursing homes • The COVID-19 SBAR is used by facilities to document and communicate changes in resident status due to COVID-19 that would require action to be taken such as transfer to acute care  
<https://nursinghomehelp.org/educationcategory/coronavirus-covid-19>  
<https://nursinghomehelp.org/wp-content/uploads/2020/03/SBAR-for-COVID-19.pdf>

## DHSS PPE UPDATE: MAY 15, 2020

- **PPE Updates**
- In an effort to expand the PPE reserves and simplify the PPE process, the state has created a new COVID-19 webpage dedicated to be a one-stop shop for all information related to PPE. The [PPE webpage](#) will provide Missouri's latest information and resources in three categories including how to access PPE, guidance for use and optimization for maintaining your PPE supply for the duration of the COVID-19 epidemic.
- You can use this website to access the PPE marketplace, too.
- Also, **NEW** to this website and to the state is the [State PPE Reserves](#) option.

## DHSS PPE UPDATE

- Missouri has limited PPE reserves to assist in filling these critical needs and will prioritize healthcare providers providing direct care to confirmed or suspected COVID patients. Note requests should only be submitted after all normal supply chains, including the Missouri COVID Supply Solution (aka Missouri PPE Marketplace), have been exhausted and you have a supply of fourteen days or less on hand as the quantities and types of PPE available through the state are limited. Use this [link https://survey123.arcgis.com/share/35c0d11050b04a809028d2caf9fd45fd?portalUrl=http://mop-hep.maps.arcgis.com](https://survey123.arcgis.com/share/35c0d11050b04a809028d2caf9fd45fd?portalUrl=http://mop-hep.maps.arcgis.com) to access the **PPE Request Form**. You will receive an automatically generated email notifying you of receipt of your request. Requests will be evaluated in the order in which they are received. If your request is approved, either in full or partially, you will receive an electronic notification upon shipment. If denied, you will receive an electronic verification of the decision.

## COVID-19 FOCUSED SURVEY FOR NURSING HOMES

### 7. Reporting to Residents, Representatives, and Families

Identify the mechanism(s) the facility is using to inform residents, their representatives, and families (e.g., newsletter, email, website, recorded voice message)

- Did the facility inform all residents, their representatives, and families by 5 PM the next calendar day following the occurrence of a single confirmed COVID-19 infection or of three or more residents or staff with new onset of respiratory symptoms that occurred within 72 hours of each other?

- Did the information include mitigating actions taken by the facility to prevent or reduce the risk of transmission, including if normal operations in the nursing home will be altered (e.g., restrictions to visitation or group activities)?

- Did the information include personally identifiable information?

- Is the facility providing cumulative updates to residents, their representatives, and families at least weekly or by 5 PM the next calendar day following the subsequent occurrence of either: each time a confirmed COVID-19 infection is identified, or whenever three or more residents or staff with new onset of respiratory symptoms occur within 72 hours of each other?

- Interview a resident and a resident representative or family member to determine whether they are receiving timely notifications.

7. Did the facility inform residents, their representatives, and families of suspected or confirmed COVID-19 cases in the facility along with mitigating actions in a timely manner?  Yes  No F885

# COVID-19 FOCUSED SURVEY FOR NURSING HOMES

- V 8. Reporting to the Centers for Disease Control and Prevention (CDC) – Performed Offsite by CMS. For consideration by CMS Federal Surveyors only.
    - Review CDC data files provided to CMS to determine if the facility is reporting at least once a week.
    - Review data files to determine if all data elements required in the National Healthcare Safety Network (NHSN) COVID-19 Module are completed.
8. Did the facility report at least once a week to CDC on all of the data elements required in the NHSN COVID-19 Module?  
 Yes  No F884

Critical Element #8 is only for consideration by CMS Federal Survey staff. Information to determine the facility's compliance at F884 is only reported to each of the 10 CMS locations.

## 5/13/20 CMS CALL WITH NURSING HOMES FEDERAL INFECTION CONTROL SURVEY FINDINGS

Three major areas for improvement:

- Hand hygiene: lack of hand hygiene when moving from Covid to non-Covid resident/room, touching of resident items, observation of no hand hygiene by nursing/housekeeping
- PPE: inappropriate use, Don/Doff incorrectly, mask on incorrectly with nose not covered,
- Signage/Cohorting: Lack of appropriate cohorting of residents and staff lacked awareness of Covid positive residents



## FEDERAL IC SURVEY ADDITIONAL AREAS OF CONCERN

- Inconsistent staff screening
- Physician notification of resident change in condition
- Back up for Infection Preventionist
- N95s not fit tested
- Inadequate cleaning of equipment: BP cuffs, glucometers, pulse oximeters
- Need for more robust monitoring of residents, increase frequency of assessments and documentation
- Ongoing staff education disease spread, PPE use/misuse

## NEW REPORTING REQUIREMENTS FOR NURSING HOMES EFFECTIVE MAY 8TH

- CMS released an [interim final rule](#) and [QSO-20-29-NH](#) (dated 05/06/2020) the reporting requirements for long-term care (LTC) facilities to report information related to COVID-19 cases including facility residents and staff. This rule is scheduled to be published on the Federal Register May 8, 2020.
- CMS has indicated that they want the first of the weekly reports to the CDC, via the National Healthcare Safety Network (NHSN) COVID-19 module, to be submitted by **May 8**.
- If you have issues accessing the **NHSN COVID-19** reporting module, it is advised that each facility keep **track of all information beginning May 1** on a separate excel spreadsheet so that information can be entered once the facility has access to the NHSN COVID-19 reporting module.
- [LTCF COVID-19 Module](#)

– MHCA electronic communication 05/05/2020

## QSO-20-29-NH MAY 6, 2020

- **Data Submission:**

- **ALL** Facilities must submit their first set of data by **11:59 p.m. Sunday, May 17, 2020**;
- Reporting should remain consistent with data being submitted on the same day(s) each week;
- The collection period should also remain consistent (e.g., Monday through Sunday);
- **Even if you are at “0” you still have to report “0”.**
- <https://www.cdc.gov/nhsn/ltc/covid19/index.html>

## MDS 3.0 TECHNICAL INFORMATION

- **May 15, 2020**

- In response to State Medicaid Agency and stakeholder requests, CMS has updated the MDS 3.0 item sets (version 1.17.2) and related technical data specifications. These **changes will support the calculation of PDPM payment codes on OBRA assessments when not combined with the 5-day SNF PPS assessment, specifically the OBRA comprehensive (NC) and OBRA quarterly (NQ) assessment item sets**, which was not possible with item set version 1.17.1. This will allow State Medicaid Agencies to collect and compare RUG-III/IV payment codes to PDPM ones and thereby inform their future payment models.
- The changes to the technical data specifications that support these modifications are contained in the Errata v3.00.4 which can be accessed in the file: MDS 3.0 data specs errata (v3.00.4) Final 04-30-2020 in the Downloads section below. Supporting materials including the 1.17.2 Item Change History report and the revised 1.17.2 Item Sets can be accessed in the file: MDS 3.0 Final Item Sets v1.17.2 for October 1 2020 zip also posted in the Downloads section below.
- Please confirm with your State Medicaid Agency if your State will be requiring the calculation of the PDPM payment codes on the OBRA assessments when not combined with a 5-day SNF PPS assessment.
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIMDS30TechnicalInformation>

## MISSOURI BOARD OF NURSING

### Licensed Practical Nurse License Renewals

Licensed Practical Nurse licenses expire May 31, 2020. Renewal reminders were emailed periodically beginning on March 1, 2020.

If you have not received your LPN renewal reminder, follow these steps.

1. Enroll in Nursys e-Notify® at [www.nursys.com/enotify](http://www.nursys.com/enotify). This is required as a condition of license renewal. You will click on Create a Nurse Account.
2. Email the board of nursing at [nursing@pr.mo.gov](mailto:nursing@pr.mo.gov) and request your PIN. Include your name and license number in the email.
3. After your PIN is received, go to <https://apps.dci.mo.gov/pr/renewal> to renew.

There is no grace period to renew. The board's rules require a nurse to renew 3 business days prior to the expiration date.



# LPN'S RENEW LICENSE STILL 7,000 YET TO RENEW BY MAY 31ST

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## SHARING YOUR VICTORY!

- We ask that you share your victory and/or your plan on how you help your staff and residents cope with this crisis?
- Tap to unmute yourself to speak with us



**Nothing  
is permanent.**

Don't stress yourself  
too much because no matter  
how bad the situation is...  
it will change.

## RESOURCES

Reference:

- American Psychiatric Association
- American Medical Association
- National Center for PTSD <https://www.ptsd.va.gov>
- WHO
- AHCA/MHCA
- CDC
- DHSS list serve May 15, 2020
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIMDS30TechnicalInformation>
- <https://www.cms.gov/files/document/nursing-home-reopening-recommendations-state-and-local-officials.pdf>

## EVALUATION

- <https://bit.ly/QIPMOVirtualSG>