

## COVID-19 SPECIAL ISSUE

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# VNSNY TODAY

NEWS FROM THE VISITING NURSE SERVICE OF NEW YORK

**This Special COVID-19 Issue**  
focuses on how VNSNY has  
supported New Yorkers and met  
the challenges of providing home- and  
community-based health care during  
the COVID-19 pandemic.



# VNSNY TODAY

MEETING THE CHALLENGES OF THE COVID-19 PANDEMIC

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discharged home from the hospital, as well as others who were treated and recovered at home without ever going to the hospital. "In both instances, our ability to take these patients meant a hospital bed was freed up for someone who needed it," says Andria Castellanos, VNSNY's Executive Vice President and Chief of Provider Services.

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## An Interview with VNSNY's President and CEO

*Marki Flannery discusses the key challenges VNSNY has faced during COVID-19.*

To date, VNSNY has cared for nearly 3,000 COVID-19 patients. What has this required?

Delivering care to COVID-19 patients at home—and taking pressure off New York's hospitals in the process—took a dedicated and brave field staff as well as tremendous coordination and communication from across VNSNY. One major challenge was securing enough facemasks, N95 respirators, face shields, gowns and other protective personal equipment to protect our staff when they traveled to and from work and when they went into

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# By Treating COVID-19 Patients at Home, VNSNY Freed Up Critical Beds for Area Hospitals

Since the start of the COVID-19 pandemic, VNSNY Home Care's interdisciplinary teams have successfully cared for several thousand COVID-19-positive patients. These included patients in mid-recovery who were discharged home from the hospital, as well as others who were treated and recovered at home without ever going to the hospital.



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VNSNY Home Care began admitting COVID-19 patients on April 1, and from there its COVID caseload rose steadily over the next two months. This "off-ramp" for COVID-19 cases has been credited as an essential tool in helping New York City's hospitals manage the flood of COVID-19 patients during the pandemic's peak weeks.



*VNSNY Home Care clinicians have cared for several thousand COVID-19-positive patients in their homes—providing an "off-ramp" for local hospitals that enabled them to focus on treating more acutely ill COVID-19 patients.*

Being able to safely treat these patients required intensive preparations, however. "When we started planning for the admission of COVID-19 patients, it was clear that we needed completely new protocols and also had to find a way to obtain significant amounts of protective equipment for our staff, all in a matter of days—so we had to gear up very quickly," explains Castellanos.

The biggest challenge involved securing sufficient facemasks, N95 respirators, face shields, gowns and other personal protective equipment (PPE) to protect VNSNY's field staff from the highly infectious virus—at a time when care providers everywhere were facing a nationwide shortage. "Virtually overnight, we had to become a procurement and distribution company that focused on not only where and how to get PPE, but also how to get it to our employees who needed it," says Salvatore Bastardi, Vice President, Corporate Administrative Services.

VNSNY also had to quickly draft and implement new PPE and clinical care protocols, from how to train staff in PPE use to designing COVID-19 plans of care, all based on ever-shifting official recommendations. "We constantly iterated as the CDC changed its protocols," says Castellanos.

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# Treating COVID-19 Patients at Home

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The transition of VNSNY's office staff in mid-March to working remotely required yet another adjustment, as did the rising number of VNSNY clinicians calling out sick as the pandemic took hold, either because they contracted COVID-19 themselves or because they had potential symptoms that mandated a temporary self-quarantine. Other clinicians had underlying conditions that precluded making clinical visits at all.

To maximize their available clinical staff, VNSNY Home Care devised a care plan model in which clinical managers would "triage" home care patients, identifying those who could be cared for through some combination of in-person and telehealth encounters, thus reducing the overall number of home visits that clinicians had to make while still allowing for close patient monitoring.

As VNSNY's PPE pipeline stabilized and its home care clinicians became familiar with the new protocols (which included scheduling COVID-19 patients as their last visits of the day), what had been an all-out scramble gradually became routine—or as routine as providing care in a pandemic can be.

On April 28, *ABC World News Tonight* featured a video segment on VNSNY Home Care nurse Ruth Caballero in its national broadcast. Matter-of-factly putting on her full PPE in an apartment house hallway, she calmly explained her mission to the camera crew. "I'm now calling on a COVID-positive patient who was discharged from the hospital yesterday," she said.

Then, ready for battle, she walked through the apartment door to nurse yet another pandemic victim back to health.





# An Interview with VNSNY's President and CEO

*Marki Flannery discusses the key challenges VNSNY has faced during COVID-19.*

## **To date, VNSNY has cared for nearly 3,000 COVID-19 patients. What has this required?**

Delivering care to COVID-19 patients at home—and taking pressure off New York's hospitals in the process—took a dedicated and brave field staff as well as tremendous coordination and communication from across VNSNY. One major challenge was securing enough facemasks, N95 respirators, face shields, gowns and other protective personal equipment to protect our staff when they traveled to and from work and when they went into patients' homes. This was a monumental task, since the entire nation faced a PPE shortage in March and April and all available PPE was being directed to hospitals. Our PPE team did an amazing job finding new PPE sources and getting that PPE to our field staff.

## **How quickly were you able to do all this?**

It took a few weeks for the PPE to really start moving through the pipeline. At the same time, our clinical operations team was developing clinical protocols based on CDC guidance. We also set up a Clinical Expertise Response Team, or CERT, to educate staff and answer questions on the protocols and PPE use. With all this in place, we began accepting COVID-19 patients on April 1st. From there, our COVID-19 admissions increased rapidly.

## **What other adjustments did you make?**

Our entire office-based staff shifted to working remotely by March 23, so that was obviously a big undertaking. Since then everyone has been using video conferencing in addition to phone and email to stay connected. I've also been holding weekly conference calls open to all staff, as another way to bring people together, update them, and stay connected. On a leadership level, we established an Emergency Response Team at the very start of the

pandemic, consisting of the heads of all VNSNY businesses and key departments plus our Chief Medical Officer for VNSNY CHOICE, Dr. Jay Dobkin, and our CMO for VNSNY's Provider Services, Dr. Ritchell Dignam. The team started out by meeting daily and, as things became more routine, has continued meeting regularly to share updates and strategize.

## **Has your field staff continued to visit patients?**

To a large extent, yes. The dedication and bravery of our nurses, rehab therapists, social workers and home health aides has been incredible. People were fearful, and understandably so, since each day we were learning new things about the coronavirus. But they put on their PPE and kept going. We added other preventive steps as well, such as pre-screening patients for COVID-19 signs before each home visit, and not sending out staff members who are at high risk of COVID-19 complications. Over time, we also increased our telephonic and video outreach to patients and members, both to stay connected without exposing them to home visits, and to reduce our field staff's risk of exposure to infection—and we did this in spite of the fact that we would not be reimbursed for all the services we provided.

## **What has the pandemic's financial impact been on VNSNY?**

It's been challenging. Besides the expense of relocating our workforce and purchasing additional PPE, our overall referral volume for VNSNY Home Care and Partners in Care dropped significantly during the spring as hospitals stopped doing elective surgeries. That volume is now coming back, but we took a hit. We received some emergency funding from the CARES Act and FEMA, and we continue to advocate for additional funding from Congress. We're also urging CMS to reimburse home care agencies for telehealth care delivered to Medicare patients.



So far, they've declined to do this and we have had reductions in reimbursement as a result. We do have telehealth reimbursement built into our contracts with a number of private insurers, fortunately.

## **How do you see VNSNY's path moving forward?**

Recent challenges notwithstanding, we remain on a very strong course. Our businesses are rebounding and we're now slowly resuming more normal operations, including the return of some staff to our main Manhattan office with social distancing and other safety protocols. Addressing the issues of racism, diversity and inclusion is another key priority for us going forward. As part of this effort, we recently launched an Anti-Racism Employee Advisory Group that has a large number of participating staff members, all of who are very engaged.

## **You recently announced you'll be stepping down as CEO early next year. Was that expected?**

Yes. Over a year ago, the VNSNY Board asked me to extend my CEO term and I agreed to stay on through January 31st, 2021. With that date approaching, the VNSNY Board conducted a search for a new CEO, putting a priority on finding someone internally. I'm delighted they've chosen Dan Savitt, our Executive Vice President and Chief Financial Officer. Dan knows our business extremely well, and he'll be terrific in the CEO position. I've been with VNSNY for close to 40 years and this organization means a great deal to me, so I'm thrilled to know it will be in such good hands.



## VNSNY HEROES OF 2020

# A Visiting Nurse Cares for COVID-19 Patients Across Three Generations

VNSNY Home Care nurse Cidric Trinidad spent this spring making regular visits to the East Elmhurst, Queens home of a multi-generational family hit hard by COVID-19. The family had lost a grandmother to the illness early in the pandemic. Now the grandfather, who had also been hospitalized with COVID-19, was recovering back home. Seven other family members had tested positive for COVID-19 as well, though they remained asymptomatic.

While he was delivering care to the grandfather, Trinidad also spent time with the family, teaching them how to manage the grandfather's supplemental oxygen. He instructed them to alert clinicians immediately if the patient experienced severe shortness of breath or became unusually lethargic or confused, explained how to monitor their own symptoms, and reminded them to wear masks and social distance whenever they left the house to get groceries.

Queens has experienced one of the highest concentrations of COVID-19 cases in New York, due in part to households like

this where the virus can spread readily through multiple generations. "This family is typical of the neighborhood—they're very family-oriented, and the children and grandchildren are very supportive of their older family members," notes Trinidad. "They were all grateful for the information I shared, and I could see they felt better because of it—knowing they are not alone in dealing with this crisis."



# Providing Essential Home Health Aide Services Despite the Lockdown

While the nation's heroic nurses, rehab therapists, social workers, doctors and hospital workers have been the center of attention during the COVID-19 pandemic, hundreds of thousands of home health aides (HHAs) across the U.S. have been doing equally heroic service, heading out daily to assist elderly Americans with basic activities of daily living, from bathing and grooming to buying and preparing food.

"Our key challenge was making sure our home health aides could safely serve those clients who still needed home health aide services during the pandemic," says James Rolla, Senior Vice President for Partners in Care. "This included supplying our HHAs with personal protective equipment [PPE], especially N95 respirators, and educating them on how to properly use this PPE."

Fortunately, VNSNY had launched a robust organization-wide operation in the pandemic's earliest days to source and distribute PPE, which included several mass mailings to the entire HHA workforce. In addition, its specialized Clinical Expertise Response Team (see article, p. 13), established to deal with the COVID-19 crisis, includes a branch devoted to educating HHAs on PPE use.

Partners in Care also had a key communication tool in hand: A mobile phone app called CareConnect, which many of its HHAs already have on their smartphones.

Among other things, the app lets HHAs view and accept potential assignments—an important feature during the pandemic, when there was a scramble to match available HHAs with clients who wanted services.

CareConnect also has a checklist that HHAs use to screen themselves daily for possible signs of COVID-19 (results are submitted automatically, and any red flags are followed up on immediately), and a text function for sending protocol updates, links to training videos and other important messages.

To supplement CareConnect, the Partners in Care supervisory staff enhanced its email outreach to aides, providing another important avenue for sharing important announcements and fielding questions. The agency upgraded its phone support as well, launching a new call center that did one-on-one follow-up with aides around the PPE mailings and other issues. "With our improved communications network, we found we were responding to aides' concerns more quickly than before the pandemic," notes Rolla. Since early April, Partners in Care has also hosted weekly group support calls led by Ben Cirlin, lead social worker for VNSNY Hospice, where home health aides can ask questions and share whatever is on their minds.

Importantly, this has all translated into seamless care during the pandemic for the clients served by Partners in Care's HHAs.



*Despite the challenges of the COVID-19 pandemic, Partners in Care home health aides continued to provide vital daily assistance to thousands of clients throughout New York City, Westchester and Long Island.*

And because the aides are self-screened for COVID-19 signs and supplied with clinical guidance and the appropriate PPE—including special kits for use with COVID-positive clients—the aides and their clients can interact with a high degree of confidence.

"We basically transformed our agency overnight from a business that relied mainly on dealing with home health aides face to face to a virtual, remote operation—and we didn't miss a step in that transition," says Rolla. "Everyone has done a phenomenal job. We've had a steady stream of clients phoning to Partners in Care, thanking us for being there for them during the pandemic. I also can't say enough about our thousands of aides who didn't miss a day or even a shift, and who kept finding new ways to get to where they had to go. They are a truly dedicated and brave group."

## VNSNY HEROES OF 2020

### Partners in Care HHAs: Braving the Pandemic to Care for Their Clients



While most of New York was staying home to avoid potential exposure to COVID-19, thousands of home health aides with Partners in Care were donning PPE and bravely going out every day to care for their clients. One of them is Stacey Davidson, who traveled over an hour each way by train from her Bronx home throughout the pandemic to help an 89-year-old Manhattan woman with dementia.

“I made the choice years ago that this is what I wanted to do,” says Davidson. “I know that difficulties come with the job, but I pray each morning before I come out, take the necessary precautions, and leave it at that. What are you going to do, run away? You can’t do that.”

“This pandemic is a moment to reflect, to value our families, be grateful for our elderly, and give more love,” adds Partners in Care aide Candy Pineda (pictured left), who also continued to provide care six days a week to her client in Washington Heights. “Now more than ever, it is important for those of us caring for others to have empathy and compassion—to walk in somebody else’s shoes.”

“In the end, it is the courage and dedication of our home health aides that has kept Partners in Care going through the pandemic, and that keeps our clients safe in their homes,” says Partners in Care Senior Vice President James Rolla. “To me, they are all heroes!”



# Combining In-Person and Virtual Visits to Safely Deliver End-of-Life Care

At a time when most New York City businesses were closing down due to the coronavirus pandemic, VNSNY Hospice was dealing with the opposite issue—its census actually increased as COVID-19 cases peaked. “Due to the strain on the health care system, we were asked to care for a growing number of patients who are at the end of life, either from COVID-19 or other reasons,” says Rosemary Baughn, Senior Vice President of VNSNY Hospice.

At the same time, VNSNY Hospice was struggling with a depleted staff, as hospice nurses, social workers, spiritual care counselors and other staff were forced to stay home either because they had fallen ill or because their daily symptom check had turned up a cough or fever that required them to shelter in place for seven days or more. Like other health care providers, though, the hospice unit was able to use telehealth to stretch its workforce.

“CMS provided a waiver permitting all of our disciplines to consult with patients and their families by phone or video-conferencing, which allowed individual clinicians to cover more ground,” says Bonnie Lauder, Director of Quality Management Services for VNSNY Hospice. That, in turn, freed up VNSNY’s hospice clinicians for critical in-person visits to carry out symptom management and other procedures that families weren’t capable of.

“There were also times when the family was simply in distress, and an in-person visit from one

of our interdisciplinary care team members was essential to relieve their concerns,” Lauder notes. “The bottom line is, our clinicians were committed to making all necessary and important visits.”

Meanwhile, the virtual visit model enabled VNSNY Hospice social workers and spiritual care counselors to connect more readily with patients and families, many of whom were reluctant to allow caregivers into their homes. It also gave the hospice staff a way to connect patients with loved ones who lived at a distance and couldn’t travel to them due to COVID-19 concerns—visits that were often extremely emotional.

“Ultimately our pandemic model worked very well,” says Lauder, “but it required a huge lift. Training staff in the use of PPE, pre-screening patients before each visit, figuring out how to schedule home health aides when they were limited to two hours per patient—we had to develop new protocols for everything, then modify our software systems to document it all. We were literally working 16-hour days for a while.”

At the pandemic’s height, that lift even extended to dealing with patients after they’d passed away. In mid-April, as the COVID-19 fatalities began straining resources, VNSNY’s hospice social workers found themselves filling out death certificates for doctors whose practices were shut down, tracking down available funeral homes where deceased patients could be taken, and



*The expanded use of phone and video consultations during COVID-19 freed up VNSNY Hospice clinicians for critical in-person visits to manage patients’ symptoms and carry out other procedures.*

enlisting the National Guard to help transport the patients’ bodies.

By summer the situation had stabilized. Still, Baughn and Lauder say they won’t forget the spring of 2020 anytime soon. “Hospice is a true interdisciplinary team effort, with medical doctors, social workers, spiritual counselors, nurse practitioners, nurses, and home health aides all playing critical roles,” Lauder explains. “We’ve just lived through several unbelievably difficult months, and the staff not only rose to the challenge—they soared. I know I speak for any number of families as well as everyone at VNSNY in expressing intense gratitude for their tremendous work under the most challenging conditions imaginable.”



*As COVID-19 fatalities began straining resources, VNSNY Hospice social workers helped by filling out death certificates for doctors whose practices were shut down and tracking down available funeral homes where deceased patients could be taken.*

## VNSNY HEROES OF 2020

## VNSNY Hospice Liaisons Link COVID-19 Patients to Their Loved Ones

VNSNY Hospice's nurse liaisons are true connectors—and that skill has never been more important than during the coronavirus pandemic. These nurse liaisons, who are stationed at New York City's major hospitals, have had to find ways to join families with their loved ones dying of COVID-19 in hospital ICUs, despite protocols that prevent face-to-face visits. At the same time, they've also been keeping their patients connected with the palliative care they need to live their final hours comfortably, free of symptoms such as pain and distressed breathing.

"Every step we take at the end of life to give comfort, reduce symptoms, and provide families with emotional support is so important. It's what we do," says Diane Lynch, a VNSNY hospice nurse liaison who was working out of a makeshift trailer behind NYU Langone Hospital-Brooklyn at the pandemic's height.

While VNSNY Hospice usually cares for people in their homes, many acutely ill COVID-19 patients have been deteriorating so rapidly during the illness's end stages that their hospice care has had to be delivered inside the hospital. In these cases, the hospice nurse liaisons become the vital link between their dying patients and the outside world.

"With COVID-19, we are the ones at the bedside, holding the patient's hand and getting family members on the phone to say their goodbyes," says Lynch. "It's a privilege to be present when family members are expressing their love, even if it's over FaceTime. I've witnessed a lot of sad moments, but also a lot of beautiful moments."



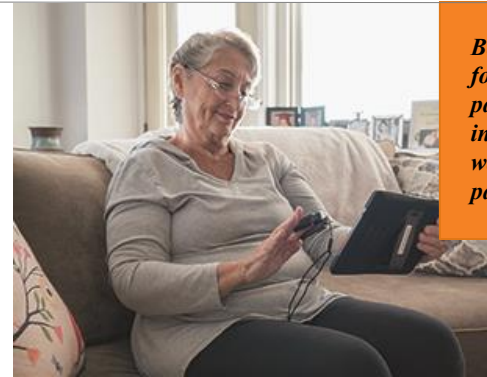
## VNSNY's Care Management Model Proves Ideal for COVID-19

Since its launch in the spring of 2019, VNSNY's care management organization (CMO), VNSNY Care360° Solutions, has proven its ability to help insurers manage the health of their high-need members in a home setting. Through a blend of telephonic and video-conference check-ins by specialized nurses, remote vital sign monitoring, and nurse practitioners and paramedics who can quickly be sent to a client's residence as needed, Care360° Solutions has shown it can keep people with multiple chronic conditions safe and out of the hospital in highly cost-effective fashion.

This March, as COVID-19 spread across the New York City region, the model revealed another important advantage: Because Care360° Solutions follows clients remotely for the most part, using only targeted in-person interventions, it's a perfect fit for a pandemic environment. Non-COVID individuals—who comprised the bulk of the CMO's 4,500-plus client base this spring—could still receive close attention while avoiding the infection risk associated with trips to the doctor or unnecessary visits to emergency rooms or urgent care centers. At the same time, clients recovering from COVID-19 could be monitored at home with minimal exposure risk to care providers.

"Among our long-term clients, who we follow for 18 months at a time, the use of telehealth monitoring tripled during the pandemic," says Rose Madden-Baer, VNSNY's Senior Vice President for Population Health, who heads up Care360° Solutions. "Many of our clients wanted to avoid visiting their doctor because of coronavirus fears, so we managed their health by remotely monitoring their blood oxygenation levels, heart and respiratory rate, blood pressure and other key variables."

The CMO's virtual visits, in which nurses typically confer with clients by video conferencing, also ramped up, says VNSNY's Joan Cassano, Vice President for Clinical Operations Improvement and Care Coordination, who helps manage Care360° Solutions' clinical operations. "We use these visits as a form of urgent care—for example, when our telehealth monitoring indicates that something's wrong," she notes. "Through video consults with our clinical staff, clients can often resolve problems without going to an actual emergency room or urgent care center and risking exposure to COVID-19."



*Because VNSNY Care360° Solutions follows clients remotely for the most part, using only targeted in-person interventions, its care delivery model was a perfect fit for the COVID-19 pandemic.*

Care360° Solutions' care management teams also helped clients access food pantries and medication refills during the pandemic's peak, while the unit's clinical social workers screened clients for depression and anxiety related to social isolation and connected them with appropriate services.

As the pandemic progressed, Care360° Solutions took on a growing number of COVID-19 cases as well, reaching a census of more than 700 COVID-19-positive or presumptive positive individuals at one point. Some of these were long-term clients who developed COVID-19-like symptoms, in which case the unit dispatched a community paramedic to their home to assess the symptoms in person, then alerted the client's physician and helped arrange a COVID-19 test if needed.

Other COVID-19 patients were admitted into Care360° Solutions following their discharge from the hospital to assist with their recovery. These cases "ran the gamut," says Madden-Baer, from mild cases that were treatable outside the hospital, to more severe cases where the client had been hospitalized and was now recuperating at home. "In every case, we closely monitored the client's symptoms through virtual visits and telehealth to watch for exacerbations, based on the clinical protocols VNSNY has put in place," adds Madden-Baer.

Through this combination of approaches, the vast majority of clients receiving care management services from Care360° Solutions have been able to ride out the pandemic's peak at home with no serious issues and with minimal risk of exposure to the coronavirus. "We have a lot of tools that we can use for monitoring people's health from afar," says Cassano, "and with everyone locked down due to COVID-19 over the past few months, this toolbox has worked extremely well."



## VNSNY HEROES OF 2020

## VNSNY's CMO Keeps Non-COVID Patients Safe at Home

Managing patients during the COVID-19 pandemic has also meant protecting non-COVID patients from potential exposure to the virus. When a woman in her nineties who is a member of VNSNY CHOICE Health Plans complained this spring of a low-grade fever and shortness of breath—potential signs of a COVID-19 infection—she was quickly connected to VNSNY nurse practitioner Geralda Pelissier. Pelissier works in VNSNY's care management organization, VNSNY Care360° Solutions, which supports VNSNY CHOICE by monitoring a number of its most vulnerable members.

After reviewing the elderly woman's symptoms with her by phone, Pelissier suspected that they were most likely caused not by COVID-19, but rather by an allergic reaction to her new antibiotic. To make certain, she called in Community Paramedics, a collaborative program between VNSNY and Mount Sinai Health System that provides in-home emergency care to Care360° Solutions clients.

One of the program's paramedics drove immediately to the member's home. Wearing the appropriate PPE, he examined her while keeping Pelissier looped in by phone, and together they determined that the woman was stable. They agreed she could remain at home, provided she used her nebulizer regularly and switched to a different antibiotic—thereby avoiding the infection risk that would have come with a trip to the local emergency room.

Pelissier went on to alert the woman's pharmacy and her primary care provider about her medication allergy, and arranged for her to get a follow-up call from a VNSNY CHOICE nurse. "The whole process was so smooth," says June Stanley, Vice President of Clinical Operations for VNSNY CHOICE. "Thanks to Care360° Solutions, there was perfect coordination of all the care this member needed."



## Clinical Support Group Offers Real-Time Education on Evolving COVID-19 Protocols

In early March, as the scale of the COVID-19 pandemic became gravely clear, VNSNY swiftly brought together a team of experienced nurses from across the organization to form a Clinical Expertise Response Team, or CERT. The team's job is to educate VNSNY staff on the appropriate use of PPE when caring for COVID-19 patients, and to provide real-time guidance, seven days a week, on any COVID-19-related questions or concerns staff members might have. This includes fielding calls from staff and generating a series of online Clinical Advisories spelling out the latest protocols for safely delivering care to COVID-19-positive patients, based on the latest CDC and New York State Department of Health guidance.

"Our CERT team function has been absolutely invaluable," says Tony Dawson, Vice President, Quality and Customer Experience, who heads up the CERT team. "VNSNY clinicians and Partners in Care home health aides can call the CERT hotline seven days a week and get immediate answers on everything from how to safely put on and take off PPE, to protocols for treating a COVID-19 patient who was just discharged from a hospital or skilled nursing facility, to guidance on what to do if they aren't feeling well and have a temperature and a cough."



In mid-April, the CERT was answering over 120 calls a day, notes Dawson. "Since then, the call volume has naturally decreased as our staff grew more familiar with the protocols, and as delivery of care to COVID-19 patients in particular has become more routine."

In addition to phoning in with questions, VNSNY staff are also required to call the CERT immediately if their daily pre-work self-assessment turns up

potential signs of COVID-19, or if they believe they've been exposed to the coronavirus. The team tracks every employee call, and the data trends generated from this dashboard have become another important tool as VNSNY navigates the pandemic.

"The CERT has really been an integral part of VNSNY's response to the pandemic," notes Andria Castellanos, Executive Vice President and Chief of Provider Services for VNSNY, who helped spearhead the team's creation. "Our plan at present is to keep the team up and running for as long as COVID-19 remains a threat in our region."

*The CERT team proactively educates VNSNY field staff on the appropriate use of PPE when caring for COVID-19 patients, and provides real-time guidance on any COVID-19-related questions or concerns that staff might have.*

## VNSNY's Education Team: Training Staff in a Pandemic

As COVID-19 hit the New York metropolitan area last March, VNSNY's Education Department had to find a way to continue its staff training, including COVID-19-specific education, in an environment where social distancing was now paramount. "Having to move on a dime and begin educating virtually in such a short time was a challenge. However, it was a challenge my team and I were well-prepared to execute," says Elizer Cooper-Audain, Director of Education and Professional Development. "Everyone was agile, flexible, and really demonstrated teamwork."

To supplement its virtual approach, the department also crafted new educational content, including a mandatory competency skills tool on how to use PPE correctly when going into patients' homes, as well as a system for communicating COVID-19 updates instantly. "When pediatric inflammatory syndrome was identified, for example, we created a communication cloud so that clinicians knew what to look for and could educate their clients with children," notes Education Manager Peggy Osei-Tutu.

Education around VNSNY's Hospitalization at Home (HAH) collaboration with Mount Sinai Health System and Contessa Health was also expanded as a result of the pandemic. The HAH program trains clinicians to provide intensive home care to patients newly discharged from the

emergency department—a particularly valuable service during COVID-19. Because infusion and other complex skills are required, in-person training remains an important component of HAH despite the pandemic, with the all-day sessions now conducted in small groups at carefully screened locations.

Shifting to virtual orientation for new hires was another priority. "Besides training our orientation presenters to use video-conferencing platforms, connectivity issues had to be resolved and test sessions conducted," notes Rose Madden-Baer, Senior Vice President for Population Health.

At the same time, Partners in Care has adapted its educational program for home health aides to the realities of COVID-19. While some skills are being taught via video-conferencing—bone-marrow-transplant training for a collaboration with Memorial Sloan Kettering, for example—HHA training around the use of PPE and evolving pandemic protocols has been conducted through thousands of individual phone calls.

In-person training is still used for some skills, such as when an aide uses a Hoyer Lift for the first time, but this process has been modified as well. "Now, instead of just dropping in for training, the aides attend scheduled sessions in small groups that allow for social distancing," explains Debbie O'Hehir, Director of Quality Management Services at Partners in Care.



## Coordinating Care for 26,000 Health Plan Members During COVID-19

As COVID-19 began surging into the New York metropolitan area last spring, VNSNY CHOICE Health Plans took its always close engagement with the members of its three health plans to a new level.

“As the scope of the pandemic in New York became evident, our Care Management team phoned all 23,000-plus members of our CHOICE Medicaid Managed Long Term Care plan and our CHOICE Total integrated Medicaid-Medicare plan to review their situation,” says Dr. Hany Abdelaal, President of VNSNY CHOICE. “We do this regularly already, but with COVID-19 looming, we wanted to confirm exactly what each member’s needs were, including what family support they had in place.”

CHOICE’s SelectHealth Medicaid special needs plan, which serves an additional 3,000 New Yorkers, conducted a similar member outreach. Based on this information, CHOICE stratified its entire membership into low-, medium- and high-risk categories, with the highest-risk individuals flagged to receive the most intensive support and monitoring. The CHOICE team then pivoted quickly to constructing an emergency support structure for its members, even as its own staff was transitioning to working remotely.

“Early on, knowing there could be a supply chain disruption, we ordered two months’ worth of key supplies, including oxygen, nebulizers, and nutritional supplements, and delivered these to our plan members,” says Dr. Abdelaal. With the state’s permission, CHOICE also relaxed its requirements for prescription refills, enabling members to receive 90-day supplies of all medications in advance.

Realizing that home health aide (HHA) availability would be limited during the pandemic, CHOICE also worked closely with its contracted HHA agencies, including VNSNY Partners in Care, to direct services to those members most in need of daily care. At the same time, since many members preferred not to have HHAs come into their homes, CHOICE devised a “tele-aide” function where HHAs checked in by phone and provided grocery shopping, medication pickup and other services without directly interfacing with the member.



*To help protect plan members during the COVID-19 pandemic, VNSNY CHOICE mailed facemasks to its entire membership—a total of 1,000,000 masks in all.*

Providing meals for members was another priority. “Many of our members either depend on HHAs to prepare their meals, or get their meals at social adult day care centers—many of which experienced disruption during the pandemic,” explains Lori Ferguson, VNSNY CHOICE Senior Vice President for Long Term and Integrated Care. “To fill this gap, CHOICE arranged for hundreds of members to receive home-delivered meals from organizations like Meals on Wheels.”

As some members became hospitalized with COVID-19, CHOICE also expanded its transportation network to ensure adequate access to appropriate modes of transport back home from the hospital once those members were well enough to be discharged. “Transport of COVID-positive members was an important barrier to overcome quickly,” says Ferguson.

Another important step involved connecting CHOICE members with their care providers through telehealth. “Our members typically get their care through New York City’s large hospital systems, who all have excellent telehealth capabilities—but many of our members hadn’t taken advantage of those services previously,” says Ferguson.

These operational steps were supported by constant work behind the scenes, as the CHOICE office staff continually updated regulatory and credentialing requirements to ensure that providers’ claims would be honored in this new environment. CHOICE also tracked the mental health of its plan members, and ensured they had adequate personal protective equipment by sending 50 facemasks to each member—a mailing of one million masks in total.

Through it all, the CHOICE care managers checked on their plan members constantly, paying special attention to those members who were most vulnerable. “Our largely elderly, low-income population is inherently at risk for COVID-19, and over the past six months, several hundred of our members did become infected, including some who sadly passed away,” notes Dr. Abdelaal. “Without the measures we put in place, however, it could have been much, much worse.”

## VNSNY HEROES OF 2020

# VNSNY CHOICE MLTC Helps a Member Navigate COVID-19 at Home

When a 73-year-old member of VNSNY CHOICE's Medicaid Managed Long Term Care (MLTC) plan was diagnosed with COVID-19 in his local emergency department, the physicians chose to send him back home rather than admit him. It was a decision based largely on the support he had in place there, which included his wife and daughter, a VNSNY visiting nurse, and Partners in Care home health aides (HHAs), all delivering care under the watchful supervision of the CHOICE MLTC care management team.



Once home, the member's CHOICE nurse care manager arranged to keep critical HHA services in place in order to provide the member with help in bathing, meal preparation and other activities of daily living. The care manager also advised the member's wife and daughter on how they could protect themselves from COVID-19 exposure.

At the same time, the CHOICE MLTC care manager made sure that appointments with the member's visiting physician were made and kept, and that the member's prescribed antibiotic and pain management medications were being taken appropriately. "As a plan, we understand the challenges that everyone is going through," explains Grace McGhee, who supervises care managers for VNSNY CHOICE MLTC. "Our goal is to keep everyone safe."

With the HHAs, the VNSNY nurse and the family all providing ongoing updates to the CHOICE care manager, "the patient has continued to recover safely at home with no subsequent hospitalizations," reports McGhee. In July, he was officially removed from the list of COVID-19 patients.

"Our nurse care managers are the liaisons, ensuring that each plan member's care is coordinated and that everybody is on the same page," adds McGhee. "Collaboration and communication are the keys. We know this is a scary situation for everyone, and we never forget that everyone is a human being with their own needs and concerns."



## Providing Vital Mental Health Care at a Critical Time

COVID-19 has had a psychological effect on everyone, but its impact on isolated New Yorkers, many of whom were already suffering deep depression and anxiety, has been particularly severe. For VNSNY's Community Mental Health Services (CMHS), staying connected with its clients during the COVID-19 public health emergency has been a top priority. "At any given time, we serve up to 6,000 New Yorkers through our various programs," notes Neil Pessin, Vice President, Community Mental Health Services. "These are people who desperately need care, and the fact that we've been able to remain in touch with them during this pandemic has been critical."

Much of this care has been provided remotely, in order to protect both staff and clients from potential exposure to the coronavirus. As COVID-19 cases rose in the New York metropolitan area and New York State granted permission to use telehealth to provide mental health care, CMHS quickly shifted to phone and video visits for the majority of its client visits. These included regular virtual counseling sessions with patients in its geriatric programs for depression and anxiety, the children enrolled in its mental health clinic, and clients who receive an array of mental health, case management and substance misuse services, as well as individuals throughout New York City with other serious psychiatric disorders.

"We've been conducting hundreds of virtual visits each week," says Susan Rabinowitz, Director of Business Strategy, Quality and Compliance at CMHS. "Besides providing traditional care, our staff has been educating our clients around COVID precautions, and in some cases helping them transition out of crowded residences to safer living conditions."

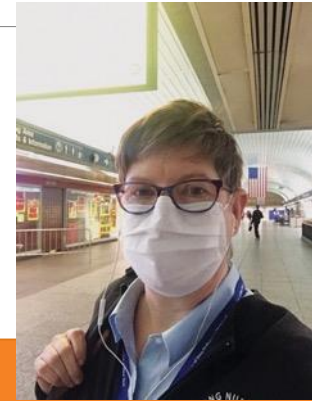
While most of its services are now delivered virtually, CMHS staff has continued making in-person visits to clients with more severe conditions who require regular injections or other forms of supervised treatment. "The staff in our Assertive Community Treatment, Parachute and Pathway Home programs have been out in the trenches, providing hands-on care to clients who would otherwise be at risk of psychiatric hospitalization or worse," says Pessin. "Often this means going into very difficult areas, such as homeless shelters or neighborhoods with high COVID-19 rates."

The division's Mobile Crisis Units have also remained active in the community, delivering on-the-spot care to adults and children in psychological crisis. "At present, we're limiting these in-person interventions to the highest-risk cases," explains Leah Blumberg, CMHS Division Manager. "But it's another example of an essential service that can't be provided remotely. By responding in person, our staff is helping to prevent escalations that could lead to hospitalization."

In addition to caring for clients, CMHS has been providing psychological support to VNSNY's own staff members throughout the pandemic. "We've traditionally held support groups for the public during emergencies, including the two World Trade Center bombings and Superstorm Sandy," says Pessin. "This time, we've been working with our own caregivers, who are under a great deal of strain. Self-care is a central theme of the sessions. Our belief is that you can't effectively care for patients and clients if you don't take care of yourself."

These guided group sessions have included debriefings of VNSNY's CERT team, which advises other staff on PPE usage and COVID-19 protocols, as well as sessions for VNSNY staff with children who are coping with parenting issues during the pandemic, and ongoing support for CMHS staff around topics such as anxiety and maintaining a healthy work-life balance. "The CMHS Brooklyn Mobile Crisis team also conducted six sessions with the staff of the Sheepshead Bay Nursing and Rehabilitation Center, who experienced significant losses at their facility due to COVID-19," adds Blumberg.

"Despite all the challenges of COVID-19, our team has stayed the course," says Pessin. "I have the highest regard not just for their clinical excellence, but also their bravery. Our staff is always devoted to those they care for—and with the current emergency, that commitment is clearer than ever."



*During COVID-19, CMHS's psychiatric social workers have been out in the trenches, providing hands-on care to clients.*

# How VNSNY Is Managing Financially During the Pandemic

With overall costs up due to COVID-19-related expenses and revenues down, as hospitals halted elective procedures, VNSNY's leadership moved quickly and decisively to manage its finances during the public health emergency.

"Fortunately, thanks to our strategic planning, we were in a good financial position going into the pandemic," reports Dan Savitt, Executive Vice President and Chief Financial Officer of VNSNY. "Our goal has always been to maintain a strong balance sheet so that we could weather an unforeseen storm—which is exactly what occurred." As COVID-19 began to spread in the New York City area, "We made a number of definitive decisions very quickly," adds Savitt. "These actions gave us the financial flexibility to appropriately navigate the worst of the pandemic."

One early step involved rapidly assembling a cross-functional team to secure emergency aid. "We brought together a very skilled group to identify and apply for available monies, including CARES Act and FEMA funding," says Savitt. "To date, we've received about \$16.5 million from these sources, and we anticipate getting additional funds in the near future. We've also raised nearly \$3 million in donations through our VNSNY Coronavirus Response Fund, which is being used to purchase PPE. All of this has helped mitigate the pandemic's financial impact on our organization."

In addition, VNSNY made the difficult decision to temporarily furlough more than 200 employees (most of whom have since been reinstated). "We worked to make the process as staff-friendly as possible," Savitt explains. "All furloughed staff retained their health benefits throughout the furlough period, and could use their paid

time



*VNSNY's strong operational response to the COVID-19 pandemic is supporting the growth of its business moving forward. Left: A VNSNY Home Care occupational therapist works with a patient.*

time off before applying for unemployment. We also set up a fund in which other staff could donate their unused time off to furloughed staff members." In another cost-saving measure, VNSNY elected to delay a scheduled merit pay increase for non-union personnel by several months and to scale the increase back slightly. "These were all tough decisions, but they ultimately saved us a significant amount of money," notes Savitt.

With caseloads in VNSNY's home care and home health aide divisions now reaching pre-pandemic levels, the organization continues to maintain fiscal discipline. "At the same time, VNSNY's strong operational response to the pandemic should help fuel the growth of our businesses moving forward," says Savitt, who will take over as VNSNY's President and CEO in February, 2021.



## Updating Government Officials and Overseeing Regulatory Changes During COVID-19

Since the start of the pandemic, the VNSNY Government Affairs Department has been advocating for critical policies and resources—including funding, PPE, parking permits and telehealth—that have enabled VNSNY to continue serving its patients and plan members effectively while also preventing COVID-19 infections. The Government Affairs team has also provided monthly updates to government officials about VNSNY’s role during the public health emergency, and has collaborated closely with VNSNY’s Compliance Department and other departments to track ongoing COVID-19-related regulatory changes and advocate for other needed changes.

In addition, VNSNY’s Compliance, Risk, and Legal teams—which, like Government Affairs, are led by EVP, General Counsel and Chief Risk Officer Kerry Parker—have reviewed and summarized over 170 pieces of COVID-19 regulatory guidance that directly impacted VNSNY business lines, updated close to 70 internal policies and procedures, and advised the organization on key risks. Compliance and Internal Audit continue to conduct weekly probe audits of VNSNY’s COVID-19 compliance and provide trainings and other support to staff, which includes ensuring that VNSNY is following best practices for managing community spread of COVID-19.



## Donors Contribute Over \$3 Million Toward PPE and Other COVID-19 Costs

VNSNY's ability to care safely for COVID-19 patients and others during the coronavirus pandemic has depended on securing enough personal protective equipment (PPE) to equip and train its entire field staff—a monumental task that required not only manpower and ingenuity, but also millions of dollars. In addition to the unexpected PPE expense, the organization faced mounting costs due to lack of reimbursement for critical telehealth visits and the overnight remote deployment of thousands of support staff.

In March, to help meet these extraordinary needs, VNSNY established the VNSNY Coronavirus Response Fund. Since then, the fund has raised over \$3 million in donations from foundations and individual donors. “The response has been tremendous,” says Michael Bernstein, VNSNY’s Executive Vice President and Chief Administrative Officer. “It’s really gratifying to see this level of community support for the important work being done by our clinicians and home health aides.”

More than 900 individuals have contributed to the fund, including numerous VNSNY employees and Board members, notes Catherine Callaway, Vice President for Marketing and Development at VNSNY. “We’ve also had great support from our philanthropic partners,” she notes.



That support includes sizeable grants from the Mother Cabrini Health Foundation, which contributed \$1 million to the fund, as well as Cartier Philanthropy, the Estate of Claire B. Benenson, Robin Hood, the Barry A. & Deedee Wigmore Foundation, a matching gift campaign from Book of the Month, and others.

“All fund donations go directly to cover the cost of delivering care safely with clinical excellence,” adds Callaway. “When it comes to fighting this pandemic, I can’t think of a better cause. We thank each of our donors, including members of the healthcare community who continue to support VNSNY and those we serve.”



## VNSNY's COVID-19 Role Highlighted in Over 800 News Articles



*An ABC World News Tonight segment, showing VNSNY nurse Ruth Caballero calling on a COVID-19 patient, reached 20 million Americans—conveying to the country what VNSNY frontline workers go through every day.*

In late April, television viewers nationwide and newspaper readers and online news consumers around the world got a firsthand look at what it's like working on the frontlines of home care during the coronavirus pandemic, as both *ABC World News Tonight* and the Associated Press (AP) featured VNSNY Home Care nurse Ruth Caballero making her rounds of COVID-19 patients in Upper Manhattan.

"You made it out of the hospital, so you are a miracle. Now let's keep you out of the hospital," Caballero told one COVID-19 patient, newly back in his apartment after three weeks in the hospital. Her quote, captured by the AP, was shared with 1,700 newspapers and 5,000 radio and television outlets in the United States as well as AP subscribers across the globe.



Meanwhile, the *ABC World News* segment, showing Caballero putting on full PPE and then calling on a COVID-19 patient, reached another 20 million Americans—dramatically conveying to the country what VNSNY frontline workers go through every day.

These national media appearances were just two of the more than 850 stories about VNSNY's role in the COVID-19 crisis that appeared during the first half of 2020. New

York affiliates of all the major TV networks featured VNSNY field staff caring for patients during the pandemic's peak, as did print publications throughout the New York metropolitan area.

"This widespread coverage showcased VNSNY's critical role on the frontlines of the fight against COVID-19," notes Dan Savitt, VNSNY Executive Vice President and Chief Financial Officer, who was also quoted in the AP article. "At the same time, it's provided a chance to help educate the public about the coronavirus and protective measures people can take to avoid exposure."

Another consistent theme has been the steady courage, dedication and empathy of VNSNY's frontline staff. As Caballero told the AP, providing care in a pandemic "is a challenge. This disease has taken so many lives." But, she added, "I'm so blessed and so honored and so grateful that these patients are coming home."



# VNSNY Leaders Share COVID-19 Expertise in Nationwide Presentations

In mid-April and again in early August, members of VNSNY's leadership team were the featured presenters on two national Town Hall webinars hosted by the National Association for Home Care & Hospice (NAHC). The two webinars were held with the aim of helping other American home care and hospice organizations benefit from VNSNY's experience in dealing with the COVID-19 pandemic.

In the webinars, which drew attendees from across the nation, the heads of VNSNY's various business units walked through key steps VNSNY has taken during the pandemic as well as lessons learned along the way.

The April presentation focused on VNSNY's wide-ranging measures to protect staff and patients throughout the pandemic while continuing to deliver care. These included the organization's intensive push to procure

PPE; shifts to remote working and virtual patient visits where appropriate; Human Resource policy initiatives to support employees; and advocacy efforts around regulatory relief.



**VNSNY has posted key COVID-19 "Lessons Learned" on its website for other health professionals to benefit from. These can be seen at: [www.vnsny.org/coronavirus-covid-19/covid-19-professional-resources/](http://www.vnsny.org/coronavirus-covid-19/covid-19-professional-resources/)**

"By mid-April, our organization had faced the peak of the public health emergency, when the New York City area had some of the highest rates of COVID-19 cases, hospitalizations and deaths in the world," notes David Rosales, Executive Vice President and Chief Strategy Officer at VNSNY. "The home care industry understood that other parts of the country were likely to encounter similar challenges in the months ahead—so this was a timely opportunity to share what we had done to adapt to the COVID-19 crisis."

Similarly, the August webinar focused on VNSNY's ongoing responses to the pandemic, including the creation of a Clinical Expertise Response Team (CERT) to advise staff on PPE usage and COVID-19 protocols, and VNSNY's in-house development of a cutting-edge COVID-19 contact-tracing app (see article on p. 21).

In addition to the NAHC webinars, VNSNY has shared its COVID-19 experience with industry colleagues in other venues over the past several months, including:

- a COVID-19-related webinar hosted in mid-April by *Home Health Care News*
- a webinar in late April on issues related to discharging COVID-19 patients from acute care, hosted by the Patient-Centered Outcomes Research Institute
- a webinar on communication strategies for infection control in late May, coordinated by IPRO
- and a virtual panel discussion on maintaining quality care during a pandemic, held in June and moderated by the Home Care Association of New York State (HCA-NYS).

***Regularly updated Clinical and Business Advisories have been an important tool for keeping VNSNY's staff informed on the latest COVID-19 guidelines and protocols.***

**COVID-19 Update**

VNSNY Clinical Advisory #3: March 24, 2020

**INTRODUCING THE VNSNY CLINICAL EXPERTS RESPONSE TEAM (CERT)**

We know our CHHA and Hospice clinical staff are very much on the front lines, doing your very best to answer patient and family caregiver questions about COVID-19 in real time. To assist you, if you are in the field and you have questions about COVID-19 related to yourself or the patient and family you are seeing, we encourage you to call this HOTLINE phone number between 9 am and 5pm - **212-216-9970**.

Your phone call will be connected to a member of our newly formed Clinical Experts Response Team (CERT) and the members of that team will do their best to immediately answer your question.

If you need to reach the CERT team after 5pm, please call this same HOTLINE number - **212-216-9970** - and leave a message with your call-back number. You will receive a reply as quickly as possible.

Thanks so much. Be safe!



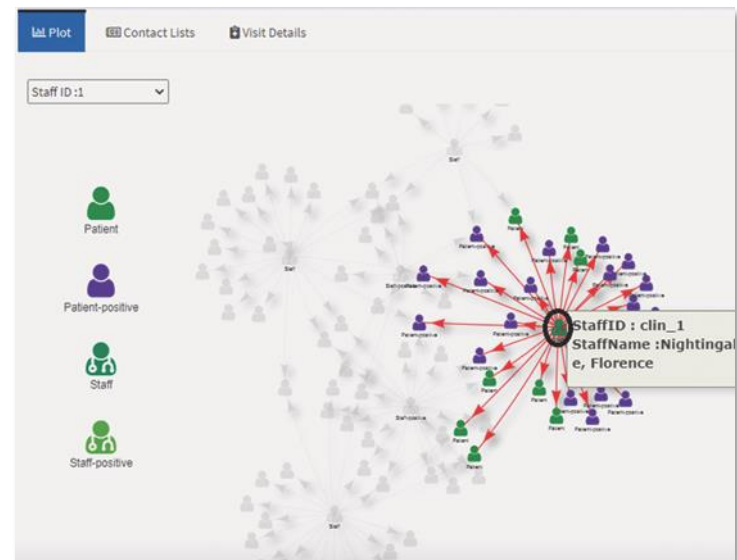
# VNSNY Creates Innovative COVID-19 Contact-Tracing Tool

The VNSNY Data Science team has developed a new contact-tracing tool designed to help community-based health care agencies limit the spread of COVID-19, as new cases continue to emerge nationwide.

The application, VisitContactTrace, is an open-source application that can be utilized at no charge by organizations that, like VNSNY, deliver community-based health care. The application lets users upload their own clinical-visit data to see which patients or care providers their COVID-19-positive patients or staff have interacted with, and who this exposed group interacted with in turn. With this information in hand, the organization can work to mitigate the potential spread of infection by notifying any patients or staff who might have been exposed.

Instructions on how to install and use the application are available on the tool's GitHub site, which can be found by doing an online search for "VisitContactTrace."

"Our objective is to enhance efforts to contain the spread of COVID-19 and other infectious diseases," explains Carlin Brickner, who heads VNSNY's Data Science team. "This is why we are making the VisitContactTrace application available to the open-source community. Anyone in the world can access the application for free, and then use it by simply importing the data that they already collect in their day-to-day operations."



***VNSNY's contact-tracing tool, VisitContactTrace, is an open-source application that can be utilized at no charge by other organizations.***