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April 17, 2020

Dear Residents, Families, Friends:

We all remain committed to keeping our residents as safe as possible and we need your continued help. That may be difficult to ask of you or even believe for some of you because in certain centers the virus attacked so fast and so aggressively that we didn't have time to speak with you before you heard it through the media. I am sorry. I am sorry that this is happening. I am sorry that nursing homes are being vilified by the media when our one and only purpose is to serve, love and care for those who can no longer care for themselves. This is not a job that we choose; yet it is our answer to a calling so unique, personal, and rewarding that those not in our space just cannot understand "why we do that kind of work." We become the second family to many residents and form a bond that is special for both of us. We minister to the lonely, abandoned, infirm and too often spend the last days, hours or minutes with people before they die; an experience that every time leaves lasting marks on our hearts, reaffirms our commitment to our purpose to serve with human kindness and eases the guilt of family who just couldn't be there. Stories of *our* people, their lifetime commitments to long term care is not being praised or even recognized by *the public* during this pandemic; meanwhile they continue to come to the nursing home and care for our nation's greatest generation and most vulnerable population.

The virus causing Coronavirus Disease 2019 (abbreviated COVID-19) causes outbreaks in nursing homes mainly because of the proximity of resident living and the close contact required during resident care. Many of our residents are elderly and most have medical conditions putting them at high risk of becoming sick, severely ill, or even die with COVID-19. Visitors and healthcare personnel are the most likely sources of introduction of the virus that causes COVID-19 into a facility. No one really knows how long this virus has been on its attack in the US. No one really knows how it is transmitted – droplets or airborne. No one really knows why 60% of persons who test positive don't know they even have it.

Family members, residents, friends, all skilled nursing companies across the country, including Accordius, share the bewilderment of hearing there are *no cases* in the center to 5, 10, 20, 50 all within 24 to 48 to 72 hours. Cases are not popping up because residents are newly exposed to the virus; cases are just now being identified and confirmed by testing; which is finally available to nursing homes. Numbers are not increasing because we are not cleaning, or because we are not wearing PPE, or because "one-time last year a staff member didn't change their gloves" as reported by a local news story found in a

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state survey done prior to Accordius ownership. Pressure at the state and national level has Departments of Health taking a more proactive approach to identifying if and where the virus exists in our communities and nursing homes. In early March, there were simply no test kits available and if there was, results from labs were taking anywhere from 11-14 days to come back. Hospitals and nursing homes had to partner on screening tools for patients to determine the risk of “having it” or “not having it” before they could be transferred. We will continue to see numbers and statistics released based on these new testing strategies throughout the summer. There is no date or projected timeframe to tell when this pandemic will end. Along with diligent work every day, I pray. I pray for our people; your people and everyone impacted by this global health event. The magnitude of impact on unemployment, healthcare, the economy all our lives is beyond profound. Some of our resident’s exhibit symptoms, many do not. Our approach to resident care has mirrored the community standard for care and that is symptom management. There is no cure for COVID-19. Our teams including our medical directors and attending physicians have stayed up to date on the guidance from the World Health Organization, CMS, AMDA, AHCA and other resources. Approaches have and continue to change day to day and hour by hour.

What did we do to plan? Early on I began meeting with our community hospital systems and many medical directors to scenario plan the projected healthcare needs in our major and smaller communities. *Hospitals could exceed their capacity by 150%* so they secured partnerships with nursing homes where they could discharge patients that needed a place to recover or be in quarantine leaving space in the hospital for those who were *really* sick. We developed an Accordius task force. COVID19taskforce@accordiushealth.com. Our group would go on to review policy and procedures and pandemic plans; pathways for care and infection control measures based on the CDC, CMS, SPICE guidance. We had to review our processes for everything; enhanced isolation; staff screening tools; medical equipment and the list goes on. To continue to protect our vulnerable residents, we are following these actions to reduce the risk of COVID-19 in our residents and staff:

We are restricting all visitation.

All visitation has been restricted except for certain compassionate care situations, such as end of life situations. These visitors will first be screened for fever and respiratory symptoms. We know that your presence is important for your loved one but, per guidance from the Centers for Disease Control and Prevention (CDC), this is a necessary action to protect their health. We have introduced alternative methods of

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visitation (such as Skype and FaceTime) so that you can continue to communicate with your loved ones. I would anticipate you not being able to visit the nursing home for at least another 45-60 days. I hear your concerns over the timeliness of calls back or availability for you to speak to your loved one. We are working on center specific plans to make this better. I am sorry.

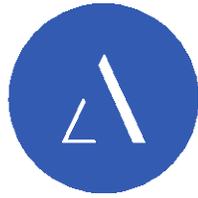
We are monitoring our staff and residents for symptoms of respiratory illness. Staff are actively monitored for fever and symptoms of respiratory infection. Ill staff are asked to stay home. You may see our staff wearing facemasks, eye protection, gowns, and gloves in order to prevent germs from spreading and help keep residents safe. Staff are cleaning their hands frequently. We assess residents several times a day for fevers, symptoms of respiratory infection, GI issues, blood oxygen levels in order to quickly identify ill residents and implement infection prevention activities. When ill residents are identified, they will be monitored closely, moved to a distinct unit in the center, asked to stay in the room.

We are wrapping our heads around what is happening. We review our COVID response plan daily by center and initiate all necessary changes. We recognize we must work harder to better meet your expectations for communication, and I will make that a high priority. Please forgive the delay in hearing from me. I have made our residents, our staff and our centers plan, readiness, response my top priority. When the virus hit our Salisbury and Harrisonburg locations “it was like a freight train.” We literally went from 1 case to 50 in 72 hours. No one did anything wrong to create this. There is still so much scientifically that is unknown about this virus and we, along with the rest of the medical and healthcare community are learning every day. Our hearts are breaking along with yours about how this is impacting our residents and staff. We remain your partners in your loved one’s care; our hearts are heavy; our minds are bewildered; but we are determined to proceed with focus and re-affirm our original commitments to the population we serve in the calling we answered.

We encourage you to review the CDC website for information about COVID-19, including its symptoms, how it spreads, and actions you can take to protect your health: <https://www.cdc.gov/corona-virus/2019-ncov/index.html>. This is a pandemic; one of such magnitude not seen in 100 years. One of such magnitude that it is leaving such profound confusion for everyone; together we will navigate this storm. One of which I

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think will get worse before it gets better. So, once again please be patient, be compassionate, be with us in prayer for those we all love and care for so dearly.

Please stay safe,

Kim Morrow
Chief Operating Officer
Accordius Health

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