

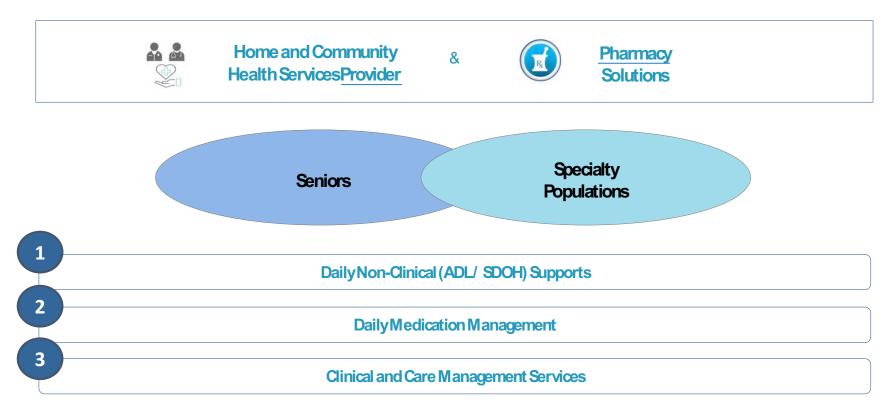
A DATA-DRIVEN APPROACH TO OUTCOMES MEASUREMENT AND COVID-19 MITIGATION IN THE FIELD OF INTELLECTUAL AND DEVELOPMENTAL DISABILITY

KANSAS INTERHAB: POWER UP! CONFERENCE

WILLIAM MILLS, M.D.



Delivering the Three Required Provider and Pharmacy Services to the Highest Cost and Most Complex Populations



Health Services Provider and Pharmacy company delivering clinical services, daily pharmacy, and daily non-clinical services and care management services – all of which are required to support medically complex populations (complementary and required services for the same clients / patients in the same settings)



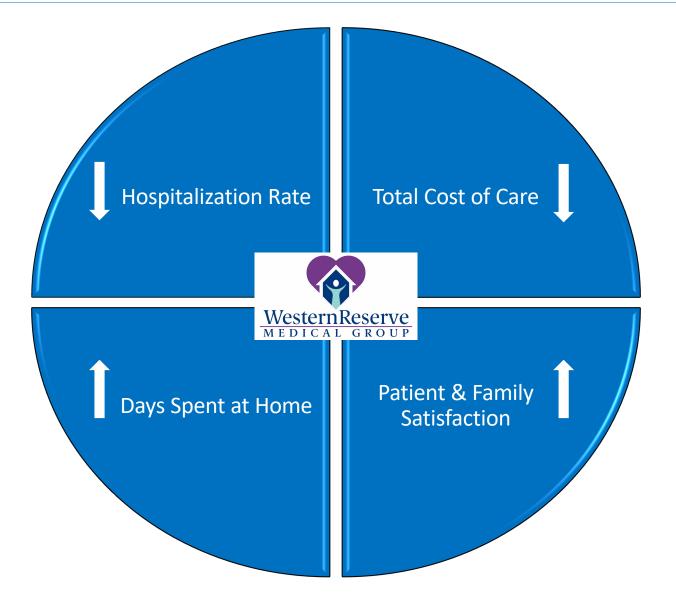
- Western Reserve Medical Group (WRMG), a BrightSpring Health Services company, serves complex patients throughout the state, including several hundred individuals with intellectual and/or developmental disability (IDD) in a highly integrated, novel care model, and has protected vulnerable patients and clients during COVID-19, maintaining an infection rate of less than half of the U.S. rate
- WRMG is currently completing its 5-year participation in an advanced payment model at the end of 2021 (A Centers for Medicare and Medicaid Innovation program called Comprehensive Primary Care Plus (CPC+)), and was recently accepted into the highly selective successor advanced payment model, <u>Primary Care First</u>
- Primary Care First is a value-based care model, emphasizing quality performance and financial risk-sharing to align interests of patients, practices and payers (*see Primary Care First overview attached*)
- In addition to Medicare, <u>Humana, Aetna and Ohio Medicaid have been announced</u> as payers who will adopt a risk-based, capitated payment structure starting in Ohio in January 2022
- A significant opportunity may exist for Ohio Medicaid and WRMG to develop a uniquely integrated care and payment model to benefit Ohioans with IDD and other complex medical and behavioral health conditions



HOME-BASED PRIMARY CARE DELIVERY MODEL *Components* Teams ----- Practice -----**Patients** Patients: Patient Panel: Sustainable Practice: Minimum 1,000-1,500 patients Multi-morbid, high-risk, average cost per capita >\$40,000 per year 500-600 patients per care team **Care Management Team Build Care Coordination** Care Management Team Members and Functions : Care Team is Care Team: Model: Physician + supported by Physician 2-5 NPPs a robust Care Physician Management Chronic Care Care Manager Clinical Administrative Team Coordinator NP/PA NP/PA (Nurse-Care Coordinator-Coordinator (Nurse or Med NP/PA NP/PA Transitions and (Nurse-Triage) (Med. Assistant -Assistant-Risk Acute Care Physicians and non-physician practitioners see Scheduling) Stratification Avoidance) and patients in their homes and in senior living Identification of communities Risk) **Care Management Team Support Structure Build HBPC Practice** Model Supports Growth: Sustainable Practice: Support Model: Minimum Minimum 2-3 Physicians 1 Practice Admin Practice Lead • 4-6 NP/PA • 2 X Car Mgmt. Teams 6. \odot 1 Medical Director **Care Management Team Model** Med. Dir. The Care Team Model enables a predictable platform for outstanding patient care, mitigation of acute care **Physician** Physician use, and practice growth Admin Functions **Practitioners + Care** NP/PA NP/PA NP/PA NP/PA Management Team

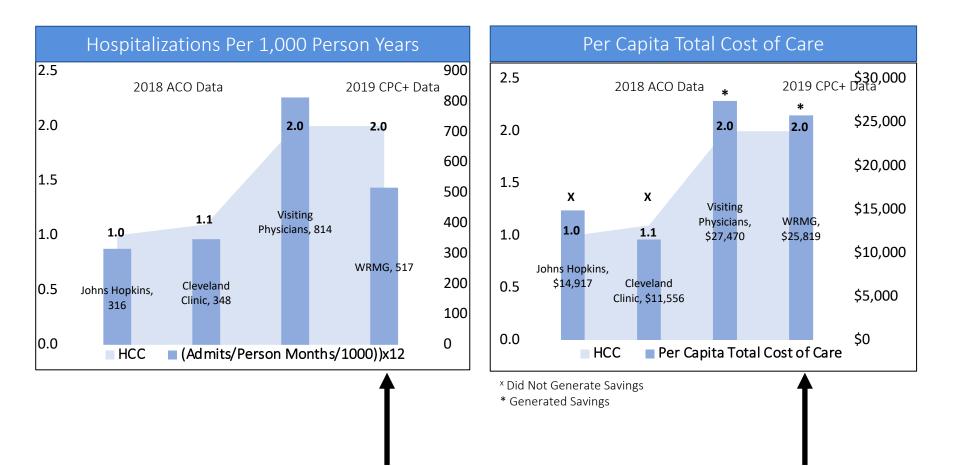
PRIMARY OUTCOME MEASURES: ALIGNING PATIENT, PRACTICE AND PAYER GOALS



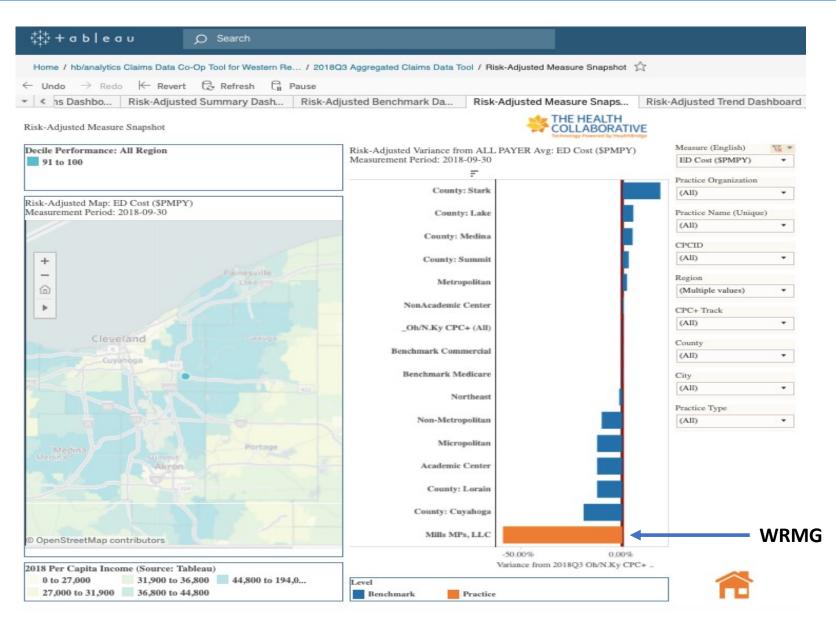


SUCCESS IN REDUCING HOSPITALIZATIONS AND TOTAL COST OF CARE



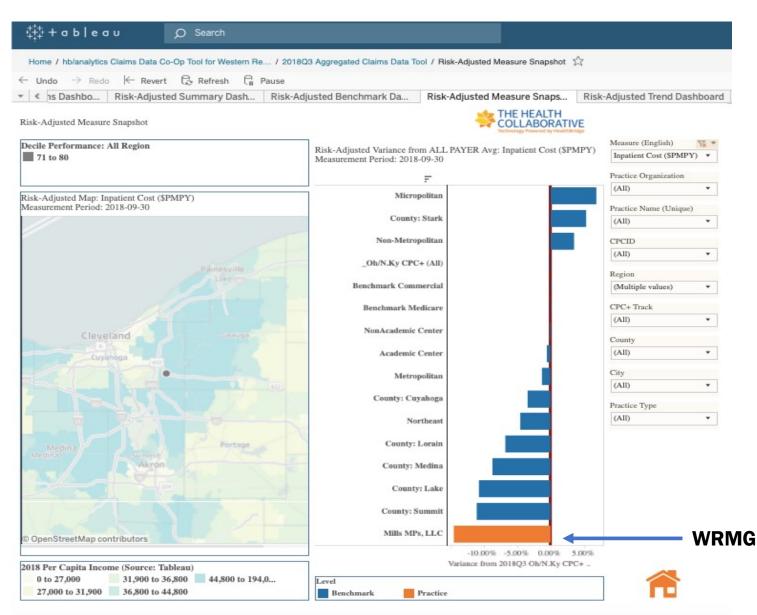






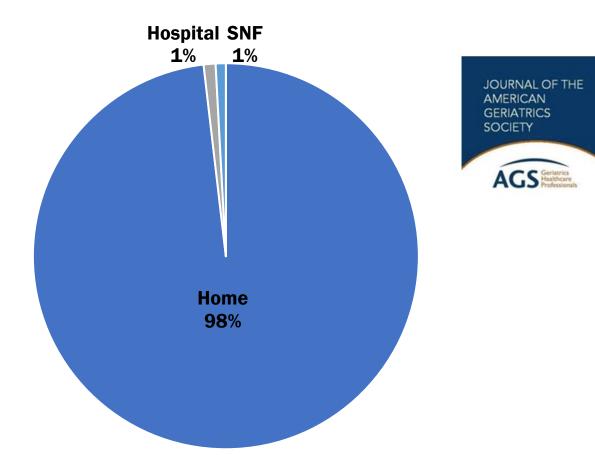
Home-based Primary Care: Lowering Inpatient Hospital Cost





Home-Based Primary Care Delivers More Days Spent At Home For Complex Patients

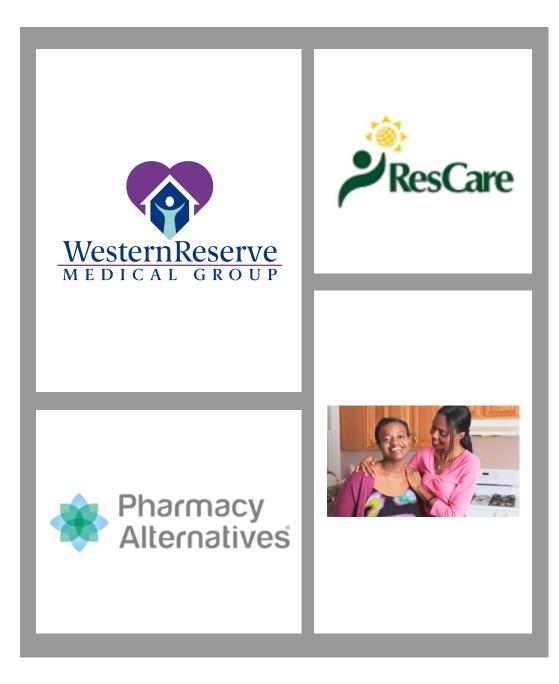
Western Reserve Medical Group is enabling complex, frail populations to spend <u>98% of their days at home</u>, in the community – and outside hospitals and nursing homes



BrightSpring Study Abstract Published in Journal of the American Geriatrics Society

Chief Medical Officer Bill Mills, MD, and members of the Western Reserve Medical Group team (Janet Buccola, Lisa Lemin, Lynn Cappelli, Jamie Roosa, Kathy Lewis and Belinda Schraer) gained attention for their study "Variation in Hospitalization Rates Among Senior Living Communities Served by a Home-Based Primary Care Practice" in the April 2020 issue.







IMPROVING CARE FOR OHIOANS WITH IDD: CARE INTEGRATION MODEL

- Primary Outcome Measures
- Hospitalization Rate
- Days Spent at Home
- Total Cost of Care
- Advance Care Planning
- Readmission Rate
- Medication Adherence
- Satisfaction



IDD INTEGRATED CARE MODEL: CASE



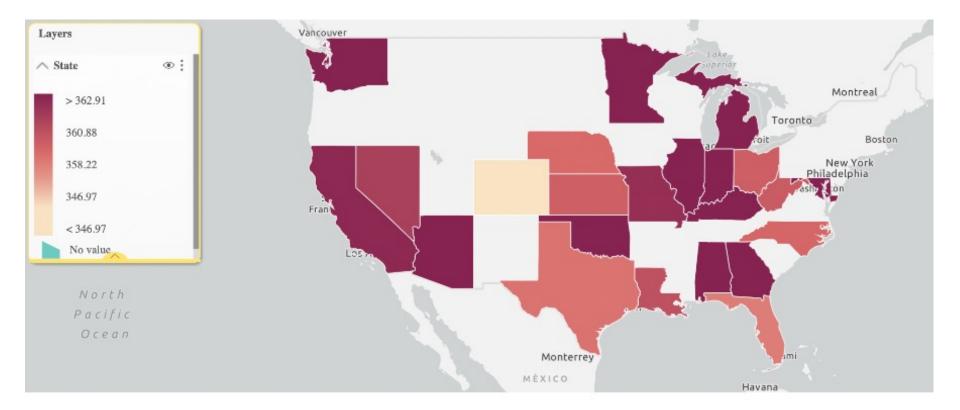
- N.A. at Woodward was having ER visits due to hyperglycemia. MD visited with patient and adjusted treatment plan, most recent Hb A1C 6.8% (down from 10.5% in 3 months).
- Our model is having an NP that has regular contact, high-quality education and communication, and identifies issues that require further management. When we successfully implement this model, we have great outcomes (like N.A.).
- We're aggressively managing cardiovascular risks (HTN, HLD, obesity) to prevent the complications of necessary treatment with psychiatric medications. Recently at Saville Home we coordinated with the psych NP to have all necessary labs and EKG's done and reviewed by primary care in addition to psych NP.
- Quote from ResCare Columbus in reference to the practice's care coordinator, "I know she'll take care of whatever I need done for my patients."
- Quotes from Leader From ResCare Canton Region
- "Jackie always make sure our residents are seen when needed and on a timely basis".
- "Stacie our NP is so wonderful and caring with our residents, we always can count on her to be here when needed".

CLINICAL OUTCOMES: DATA DASHBOARDS



	Power BI Clinical G	Qualit	y &		CL Clinical Outcomes	Data update	d 7/13/21 🗸		Р Se	earch	🌘	
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₽	Goals		Hot Spots - Days	Days At Distinct Ho Home Patients Da 537833 6943	spital Inpatient Days Per Hospital Stays Managed Days H- ys 1000 Per Year 10 9436 1,066.68 691 3228841	ospitalization Rate Per Any ooo Per Year Days 460.86	Kospital Days Bercent Hospitalized Percent Home Mean Days At Home 535 6408 7.71 98.28 358.71		STER CARE			3
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Community Living enabled individuals served to spend an average of 359 days at home / in the community per year

Q2 2021 data annualized



CONCLUSIONS

- Hospitalization rate and days spent at home may be emerging valuebased outcome measures in IDD
- Individuals in residential waiver programs were hospitalized at a rate of 240/1000 per year
- Individuals in residential waiver programs spent an average of 360 days at home per year
- While most individuals were not hospitalized during the year, a subset had long lengths of stay, most of which were related to behavioral diagnoses refractory to routine outpatient treatment

ROAD MAP



FUTURE DIRECTIONS

- Studies of new models of support and care for people with IDD in which augmented outpatient behavioral health supports are available are needed.
- □ These studies should evaluate whether providing more intensive community-based medical and behavioral health resources may decrease hospitalization rate and inpatient days per 1,000.
- Studies of enablers of optimizing hospitalization rate and days spent at home

Access to care

Care management

Medication management

- □ Care coordination
- Hosp. Rate, and days spent at home are simple metrics that may promote provisioning of appropriate resources for IDD waiver programs, as well as for managed care payers.



IDD INNOVATION OPPORTUNITY



USING DATA TO INFORM COVID-19 RESPONSE





CORONAVIRUS · Published January 3, 2020

Mysterious respiratory illness linked to China food market sickens at least 44, officials say

Wuhan, China



Dr. Li Wenliang appeared on social media, warning of a deadly virus long before Chinese authorities disclosed its full threat.

His insistence that an epidemic was coming turned him into a folk hero in China.

Today, he died from coronavirus.



A doctor was arrested for warning China about the coronavirus. Then he died ... Anguish and fury are growing in China, inflamed by an ugly reality: that authorities prioritized saving face over the health and safety of the people. \mathscr{S} latimes.com

Washington State

Alison Grande 🥝 @AlisonKIRO7 · Feb 29

We went to Life Care Center of Kirkland and found these signs outside. There are about 50 people who have symptoms that could indicate Coronavirus, 2 confirmed cases. (One is 70yo patient at Evergreen, one woman in 40s is a center employee now treated at Overlake) @KIRO7Seattle



Snohomish County man has the United States' first known case of the new coronavirus

Jan. 21, 2020 at 10:58 am | Updated March 11, 2020 at 1:08 pm

New York



Toured the Javits Center today where FEMA has started work on a 1,000-bed temporary hospital to open next week.

Equipment from both the state & federal government is being delivered here.

My thanks go to everyone working so hard to make this happen so quickly.



4:08 PM · Mar 23, 2020 · Twitter Web App

f 🔤

KEYS TO BRIGHTSPRING'S RESPONSE



Organization



- Coordination
- Communication
- Support

Education

SITUATION SUMMARY

- The virus has now been named "SARS-CoV-2" and the disease it causes has been named "coronavirus disease 2019" (abbreviated "COVID-19").
- Early on, many of the patients in the COVID-19 outbreak in Wuhan, China, had some link to a large seafood and live animal market, suggesting animal-to-person spread. Later, a growing number of patients reportedly did not have exposure to animal markets, indicating person-to-person spread.
- The complete clinical picture with regard to COVID-19 is not fully understood. Reported illnesses have ranged from mild to severe.

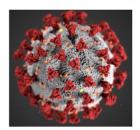
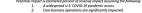


Figure: Ultrastructural morphology exhibited by coronaviruses. Note the spikes that adorn the outer surface of the virus, which impart the look of a corona surrounding the virion, when viewed electron microscopically

Impact Planning POTENTIAL IMPACT OF PANDEMIC COVID-19 ON BUSINESS SEGMENTS





Workforce Svcs

centers but allow continuation of core trainin

remotely.

ns of some (market-based) training





Pharmacy umptions: Preserved drug supply, PPE tection of driver, other functions remote for fever and res

Home Health & Rehab otions: Staff are screened for fever an III staff are excluded from work PPFs are



are screened for fever and respin

those with active infection are exclu participation until they can safely return

January 27, 2020

Dear Colleagues,

helow are critical

optoms when reporting each day and

but at present, there have been five confirmed cases in the U.S.

30 **Behavioral Health** ons: Autism center patients and stat

Formal Outbreak Plan

A BRIGHTSPRING PharMerica

BrightSpring - PharMerica Enterprise Outbreak Preparedness Plan

Version 6: August 1, 2020

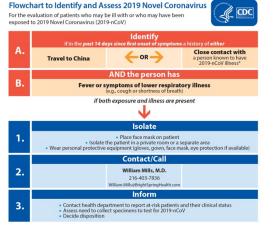
Update: Summary of Our Response

Since the novel Coronavirus 2019 (COVID-19) pandemic began in early 2020, BrightSpring-PharMerica has focused on implementing best practices in infection control, visitor management, employee screening, and streamlined reporting and triage protocols to optimally support clients, patients, employees, families and communities. To date, we have experienced an overall infection rate of less than one percent, and have reported our preparation plan, tactics, experience and data in numerous peer-reviewed research nublications, including the below

- 1. Supporting individuals with intellectual and developmental disability during the first 100 days of the COVID-19 outbreak in the USA. Journal of Intellectual Disability Research 2020, 64: 489-496. https://doi.org/10.1111/jir.12740
- 2. An Outbreak Preparedness and Mitigation Approach in Home Health and Personal Home Care During the COVID-19 Pandemic. Home Health Care Management & Practice 2020. https://doi.org/10.1177/1084822320933567
- 3. Hydroxychloroquine Sulfate Prescribing Trends and Pharmacist-Led Outbreak Preparedness in Long Term Care Pharmacy During COVID-19. Journal of the Medical Directors Association 2020. https://doi.org/10.1016/j.jamda.2020.06.012
- 4. Home Based Primary Care Led-Outbreak Mitigation in Assisted Living Facilities in the First One Hundred Days of COVID-19. Journal of the American Medical Directors Association 2020. https://doi.org/10.1016/i.iamda.2020.06.014

This plan version has been updated to incorporate evolving public health guidance as well as our own experiential best practices as we enter the seventh month of the COVID-19 pandemic

Triage



Corporate Wide Weekly COVID-19 & Infection Control Update

Infection Control & PPE Communication

POLICY A	AND PROCEDU	RE	
PROCEDURE: Isolation Precautions and PPE	SUBJECT: Infection Control		
PERFORMED BY: DSP, LPT, LVN, LPN, RN, All direct care and support	Prepared By: E. Shauen Howard DHA, MSN, RN; VP Clinical Services		
staff	Approved By: Outbreak Preparedness and Action Committee		
	Date Written: February 2019 Last Updated February 29, 2020	Reviewed annually: See below	

GENERAL: When individuals we serve have a known infection, staff must follow specific precautions to reduce the risk of cross contamination to other clients.

World Health Organization-Recommendations for standard precautions 1. Hand hygiene technique

- Hand washing (40–60 sec); Wet hands and apply soap; rub all surfaces; rinse hands with warm water and dry thoroughly with a single use towel; use towel to turn off faucet.
- Hand rubbing (20–30 sec): Apply enough hand sanitizer product to cover all areas of the hands; rub hands until dry.
- Summary indications:
 Before and after direct individual contact and between individuals we serve; whether or
- not gloves are worn mmediately after removing gloves

- Immediately after femolity gurves
 Before handling an invasive device
 Mare fouching blood, body fluids, secretions, excretions, non-intactskin, and
 contarrinate dems, even if warring gloves
 During care, before moving from a contaminated to a clean body site
 After contact with inanimate devices in the immediate vicinity of the individual
 After contact with inanimate devices in the intervice with vicinitiate vicinity of the individual
- 2. Gloves

PPT

- · Wear when touching blood, body fluids, secretions, excretions, mucous membranes, or non-intact skin. Change between tasks and procedures on the same individual, after contact
- Change detWeth takes and proceeders of the same intervalue, and something with potentially infectious material. Remove after use, before touching non-contaminated items and surfaces, and before going to another individual. Perform hand hygiene immediately after removal.
- 3. Facial protection (eyes, nose, and mouth)



Sincerely William Mills, M.D. Susan Sender, RN SVP. Medical Affairs Chief Clinical Officer

William Mills@BrightSpringHealth.com.



COVID-19, Employee Reference

March 29, 2021



- Week of March 29th









We are monitoring developments surrounding the respiratory outbreak first detected in Wuhan, China, caused by a new coronavirus (2019-nCoV). This is a rapidly evolving situation,

common cold. The Centers for Disease Control and Prevention and other public health officials

deaths. Symptoms include fever, cough, and trouble breathing, and can appear anywhere from two to 14 days after exposure. Although 2019-nCoV is spreading between people in parts of

Asia, scientists do not yet know how easily it spreads. As such, universal precautions described

In patients with symptoms of fever, cough and trouble breathing, healthcare providers should

have traveled to Wuhan, China, within 14 days of the onset of symptoms, including fever and

respiratory symptoms. When potential cases are reported, laboratory samples are collected

U.S. travel for BrightSpring employees should currently be unaffected by this outbreak, as the

CDC has recommended only that travelers currently avoid traveling to Hubei Province. China.

ncluding Wuhan. We would also like to take this opportunity to remind all BrightSpring and

PharMerica employees that that there are steps everyone should take to prevent respiratory

illness – escalally with the influenza (flu) and respiratory disease season underway across our markets. These include getting a flu vaccine, washing hands with soap and water for at least 20

Thank you for the work you do every day and for your dedication to keeping patients, clients,

please contact Dr. Bill Mills, Senior Vice President, Medical Affairs, at 440.368.6868 or

seconds, staving home when sick, and taking flu antivirals as prescribed

families, and each other as safe and healthy as possible.

ask patients about recent international travel and consider 2019-nCoV infection in patients who

and submitted to the Centers for Disease Control and Prevention for testing. If any BrightSpring patient or client has traveled to Wuhan, China, within 14 days of having these symptoms,

are still learning how this new virus affects people. Some people who have become ill with 2019-CoV have had mild symptoms. Others have had more severe illness, including some

aviruses can cause mild to moderate upper-respiratory tract illness, like the



onal cross-trainin untion of core fund significant numbers of support center



SUMMARY OF BRIGHTSPRING'S COVID-19 RESPONSE

Since the COVID-19 pandemic began in early 2020, BrightSpring-PharMerica has focused on implementing best practices in infection control, visitor management, employee screening, and streamlined reporting and triage protocols to optimally support clients, patients, employees, families and communities.

BrightSpring Numbers of Interest:

- **11,000** potential / actual exposures and cases triaged internally
- \$10M investment in PPE
- 50% lower infection rate than US average
- Over 50 citations of our work by scientific publications
- Over 30 press mentions
- 1 unified enterprise outbreak plan

QUALITY TEAM: 24/7 TRIAGE AND SUPPORT





	2

		🕒 ★ Q. ? 🕒 Hi, William Mills 👻
My Apps COVI	D-19 Case Tracking 😥 New App	
Home Employee Cas	es Patient and Client Cas New Table	
Patient and Client	Cases Tracking > Add Patient or Client Case	Save & close Cancel Q Customize this Form
Date reported	03-20-2020 🚞	
	Pharmacy Case?	
LOCATION_NAME	48902 X +	
Business Segment	VP: WRMG	
State	он	
Last Name	Test	
First Name	Testy	
Patient/Client Case (Narrative)	Mr Test's wife with whom he lives tested positive for COMD-19 yested	
High Risk Exposure? *	None 8	
Medium Risk Exposure?	None 2	
Low Risk Exposure?		
Low Risk Exposure?	None 2	



A dedicated team supported over 11,000 patient and employee exposures in the first year of COVID-19, implementing best practices and leveraging new technology across the enterprise.

PUBLICATIONS & PRESS





Intellectual/Developmental Disability



Journal of Intellectual Disability Research

Supporting Individuals with Intellectual and Developmental Disability During the First One Hundred days of the COVID-19 Outbreak in the U.S

DOI:10.1111/jir.12740

Mills W. R., Sender S., Lichtfeild J., Romano N., Reynolds K., Price M., Phipps J., White L., Howard S., Poltavski D., and Barnes R. (2020) Supporting individuals with intellectual and developmental disability during the first 100 days of the COVID-19 outbreak in the USA, Journal of Intellectual Disability Research, XXX, doi: https://doi.org/10.1111/jit.1224.

* Top 5% of all Research Articles Ever Tracked by Altmetric *

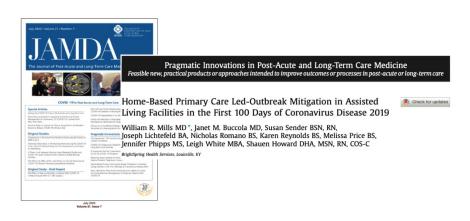


This shows how vulnerable people in #carehomes can and should be protected during

#COVID19 @JIDR_Wiley @psychiatryofid

13 Jun 2020

Primary Care and Assisted Living



Home Health Care/Personal Home Care

Original Article

An Outbreak Preparedness and Mitigation Approach in Home Health and Personal Home Care During the COVID-19 Pandemic

Home Health Care Management & Practice 1-5 © The Auchor(s) 2020 Control Control Control Control Control Control Article reuse guidelines: sageoub.com/journais-permissions Doi: 10.1177/104622220933567 Journais-ageoub.com/home/hhc CSACE

William R. Mills, MD¹, Susan Sender, BSN, RN¹, Karen Reynolds, BS¹, Joseph Lichtefeld, BA¹, Nicholas Romano, BS¹, Melissa Price, BS¹, Jennifer Phipps, MS¹, Leigh White, MBA¹, Shauen Howard, DHA, MSN, RN, COS-C¹, and Rexanne Domico, BA¹

* #2 Most Read Article in the Journal in the last 6 mo *



Pharmacy and Long-Term Care

Hydroxychloroquine Sulfate Prescribing Trends and Pharmacist-Led Outbreak Preparedness in Long-Term Care Pharmacy during Coronavirus Disease 2019

PharMerica A BrightSpring Health Services Company Louisville Kentucky

Stephen M. Creasy, PharmD Susan Sender, BSN, RN Joseph Lichtefeld, BA Nicholas Romano, BS Karen Reynolds, BS Melissa Price, BS Jennifer Phipps, MS Leigh White, MBA Shauen Howard, DHA, MSN, RN, COS-C PharMerica, BrightSpring Health Services, Louisville, KY

William R. Mills, MD



July 2020 Volume 21. Issue 7

A PARTIAL LIST OF SOURCES THAT HAVE CITED OUR COVID-19 WORK





THE LONDON SCHOOL OF ECONOMICS AND POLITICAL SCIENCE



Preventing and managing COVID-19 across long-term care services





Coronavirus disease 2019 (COVID-19) and individuals with intellectual and developmental disabilities in Nigeria

Ogochukwu Ann Ijezie, Hilary Izuchukwu Okagbue, Olufemi Adebari Oloyede, Vanessa Heaslip, Philip Davies, Jane Healy 2021, Journal of Public Affairs - Article

This article chronicles the present situation of coronavirus disease 2019 (COVID-19) on individuals with intellectual and developmental disabilities (IDD) in Nigeria. A systematic search was conducted... more

▶ View PDF =+ Add to Library

COVID-19 and intellectual disability/autism spectrum disorder with high and very high support needs: issues of physical and mental vulnerability

Elisabetta F. Buonaguro, Marco O. Bertelli

2021, Advances in Mental Health and Intellectual Disabilities - Article

Purpose The COVID-19 outbreak has profoundly plagued the world, and current health efforts are focused on providing prevention and ensuring access to intensive services for people with the most sever... more

=+ Add to Library

Transition to virtual clinic: Experience in a multidisciplinary clinic for Down syndrome

Stephanie L. Santoro, Karen Donelan, Kelsey Haugen, Nicolas M. Oreskovic, Amy Torres, Brian G. Skotko 2021, American Journal of Medical Genetics Part C Seminars in Medical Genetics - Article

The COVID-19 pandemic necessitated a rapid transition from in-person office visits to virtual visits in the Down syndrome specialty program at Massachusetts General Hospital (MGH DSP). We describe the... more

=+ Add to Library

Dying at home of Covid-19: Meeting the need for home-based care

Cara Kiernan Fallon, Madison K Kilbride

2020, Preventive Medicine - Article

Despite the increased burden of Covid-19 on older adults, ethical and public health frameworks lack adequate guidance for elderly patients who manage severe, even fatal, illness at home. The U.S. Cent... more

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Community Supports and COVID-19: Self-Determination in a Pandemic.

David A Ervin, Donyale Hobson-Garcia

2020, Intellectual and Developmental Disabilities - Article

The coronavirus disease 2019 (COVID-19) is impacting people with intellectual and developmental disabilities (IDD) significantly. Early data on the impact of COVID-19 suggests that people with IDD are... more



An international survey on the impact of COVID-19 in individuals with Down syndrome.

Anke Hüls, Alberto C S Costa, Mara Dierssen, R Asaad Baksh, Stefania Bargagna, Nicole T Baumer, Ana Claudia Brandão, Ang...

2020, medRxiv - Preprint

Background: Health conditions and immune dysfunction associated with trisomy 21 (Down syndrome, DS) may impact the clinical course of COVID-19 once infected by SARS-CoV-2. Methods: The T21RS COVID-19 ... more



The Impact of COVID-19 on Individuals With Intellectual and Developmental Disabilities: Clinical and Scientific Priorities

John N Constantino, Mustafa Sahin, Joseph Piven, Rylin Rodgers, John Tschida

2020, American Journal of Psychiatry - Article

24 July 2020

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Citations 3 Altmetric 146 🖸 Open Access =+ Add to Library
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People with Disabilities and Other Forms of Vulnerability to the COVID-19 Pandemic: Study Protocol for a Scoping Review and Thematic Analysis

Tiago S. Jesus, Sureshkumar Kamalakannan, Sutanuka Bhattacharjya, Yelena Bogdanova, Juan Carlos Arango-Lasprilla, Jac... 2020. Archives of Rehabilitation Research and Clinical Translation - Article

Objectives: To develop a protocol for a scoping review mapping as well as thematically analyzing the literature on the effect of, and responses to, the coronavirus disease 2019 (COVID-19) pandemic, fo... more



Hydroxychloroquine Sulfate Prescribing Trends and Pharmacist-Led Outbreak Preparedness in Long Term Care Pharmacy During COVID-19

William R Mills, Stephen M Creasy, Susan Sender, Joseph Lichtefeld, Nicholas Romano, Karen Reynolds, Melissa Price, Jennif... 2020. Journal of the American Medical Directors Association - Article

xmlns:ali="http://www.niso.org/schemas/ali/1.0/" xmlns:mml=... more

Citations 1 Altmetric 1 Open Access =+ Add to Library

COVID-19 related mortality and spread of disease in long-term care: a living systematic review of emerging evidence

Maximilian Salcher-Konrad, Arnoupe Jhass, Huseyin Naci, Marselia Tan, Yousef El-Tawil, Adelina Comas-Herrera 2020, medRxiv - Preprint

Abstract Background Policy responses to mitigate the impact of the COVID-19 pandemic on long-term care (LTC) require robust and timely evidence on mortality and spread of the disease in these setting... more



COVID-19-RELATED POSITIVE PRESS



Home Health Care News

BrightSpring CEO: COVID-19 Has Reinforced the **Importance of Patient** Access

Modern Healthcare



McKnight's LONG-TERM CARE NEWS

October 1, 2020

Pandemic sparking concern over med supply, availability

Waiting on the vaccine

Meanwhile, when a COVID-19 vaccine will be available remains unclear BrightSpring T.J. Griffin, senior vice president, LTC Operations and chief pharmacy officer for PharMerica, said all but

Health Services

SAFETY & QUALITY

Susan

Sender

Chief clinical

officer.



one vaccine developer could produce two-dose applications either 21 or 28 days apart, raising critical timing issues. Long-term care residents will be prioritized. Worz said ASCP was asked to provide a representative on Operation Time Warp (Griffin) William Mills, M.D., senior vice president for Medical Affairs, BrightSpring Health Services, was

ontimistic

"With multiple COVID-19 Phase III clinical trials now underway, I think it is a time to be very hopeful that more than one safe and effective vaccine will emerge in the next several months, he said. "Until then, we all need to do our very best to maintain nonpharmacologic mitigation measures.



The New Normal: Day in the Life of BrightSpring's Home Health Leader Amid COVID-19

By Bailey Bryant | April 22, 2020

By Andrew Donlan | October 5, 2020



COVID-19 Resources: Dashboard, and Reports on Impact on I/DD Sector, **Health Access, Family Caregivers**

the benefit of our reader



on four major issues that need at





MINEWS CORONAVIRUS GOVERNMENT RESPONSE

Medicare and Medicaid patients get temporary access to telemedicine amid coronavirus crisis, but challenges remain

CMS expands telehealth policy, but does not allow therapy services by phone.

ENABLING ONGOING ORGANIZATIONAL SUCCESS





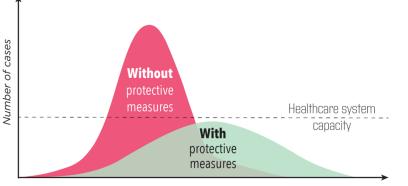
1. Educate / Ongoing Infection Control



LPN Linda Poore administers the COVID-19 vaccine to Sacred Journey Hospice CNA Evelyn Turnley who wants "to live to go on vacation."



2. Vaccinate



Time since the first case

Adapted from the CDC by Unbound Medicine

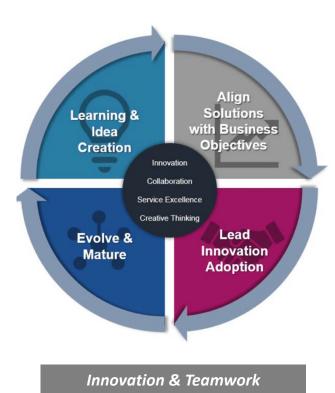
3. Keep cases low



4. Enable continued quality & growth

"It's not enough that we do our best; sometimes we have to do what's required." -Winston Churchill-





Outbreak Impacts Expected to Have Longer Term Benefits to BrightSpring

- Interdisciplinary team quickly developed strategy and executed on tactics to suppress virus transmission
- Intranet education and My Policies built out (over 150 resources)
- Enhanced Enterprise wide-infection control policy, live, cross country education roll out
- Consolidated Crisis Communications
- Tracking of Enterprise-wide average daily census of cases
- Development of a Central Supply function and mass procurement and distribution of scarce PPE supplies
- Agile, rapid development and launch of three new technologies within four weeks (COVID-19 tracking, Employee Screening app, Enterprise "War Room" Business Intelligence dashboard), vaccine tracking app
- Enterprise location map
- Development of Point of Care Diagnostic Testing Capabilities
- Telehealth offerings expedited
- Use of Novel Predictive Modeling (community-based thermometers to predict outbreak clusters, hospital utilization models, etc)
- Pharmacy / Service business partnerships expedited

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