COVID-19

An End Stage Renal Disease (ESRD) National Coordinating Center (NCC) Professional Education Webinar

March 24, 2021

COVID-19 = Coronavirus Disease 2019
Agenda

• What is this call about?
• Today’s speaker:
  ▪ Tara Millson, DNP, RN, CIC, FAPIC
    – Director of Infection Prevention,
      George Washington University Hospital
• Topic: Avoiding COVID Complacency
• Questions and answers (Q&As) from chat and Q&A panels
What Is This Call About?

• Hear from stakeholders and peers in the ESRD community who are adapting to COVID-19.
• Share examples and provide real-world strategies for facilities to use.
• Engage in bi-monthly calls on varying topics.
Avoiding COVID Complacency

Tara Millson, DNP, RN, CIC, FAPIC
March 24, 2021
Objectives

The presenter will:

• Review key reasons for continued vigilance during the pandemic.

• Describe signs of complacency in self and others.

• Outline measures to maintain preventive and protective focus during this stage of the pandemic.
Incredible Scientific Achievement

In the past ~12 months, researchers have:

• Characterized a novel illness.
• Sequenced a new virus’s genome.
• Developed diagnostics.
• Created treatment protocols.
• Established the efficacy of medications.
• Produced vaccines.
Still Much to Learn

• Will COVID become endemic?
• Are re-infections possible?
• Does the vaccine protect against variants?
• What is the length of the immune response?
• What about “long-haulers”? 
• Will COVID be seasonal? Or will we have periods of low activity followed by re-emergence?
• How does immunity vary by age, gender, and race?
COVID-19 and Kidney Disease

• COVID-19 is disproportionately severe in patients on dialysis.
• High prevalence, particularly in patients receiving in-center dialysis.
• COVID-19 may lead to ESRD in some patients.
Vaccine—A Light at the End of the Tunnel?
Access to Vaccine Is Limited

• Priority groups
  ▪ Healthcare personnel, residents of LTCF
  ▪ Frontline essential workers, extreme elderly
  ▪ Adults ages 65–74, adults ages 16–64 with underlying medical condition

• No vaccine
  ▪ Children
  ▪ Vaccine-hesitant
  ▪ Those with contraindications

LTCF = long-term care facilities
Variants in the United States

Risk of “re-opening” too early
Vaccine-Hesitancy Continuum

Refusal  Passive Acceptance  Demand

Source: Tara Millson
Vaccine Hesitancy Among Healthcare Workers

• American Nursing Foundation survey (October 2020)
  ▪ 63% somewhat or very confident that the vaccine would be safe and effective.
  ▪ 34% would voluntarily receive COVID-19 vaccine.

• The Centers of Disease Control and prevention (CDC) web survey of healthcare providers (September/October 2020)
  ▪ 63% would voluntarily get a COVID-19 vaccine.

Black Americans and COVID

• Disease and death from COVID-19 disproportionately affects Black U.S. adults.

• Life expectancy decreased by 2.7 years for Black Americans compared to an average of 1 year for other groups.

• Black Americans suffer from kidney disease at a significantly higher rate than Caucasians.
Three C’s Model of Vaccine Hesitancy

Confidence

Complacency

Convenience

Pandemic Behavior Response

Panic  Rational Response  “It won’t happen to me”

Source: Tara Millson
Pandemic Fatigue

Demotivation to follow recommended protective behaviors
  • Perceived threat of virus is lessened over time.
  • Perceived loss (economic, social) increases over time.
  • Inherent urge for control and self-determination.
  • Circumstances are normalized over long periods of time.

End Result = Complacency
“When anyone asks me how I can best describe my experiences of nearly 40 years at sea, I merely say ‘uneventful.’ I have never been in an accident of any sort worth speaking about. I never saw a wreck and have never been wrecked, nor was I ever in any predicament that threatened to end in disaster of any sort.”

—Captain Edward Smith, 1907
Complacency Culture
Risk Becomes Acceptable
Why It Is Hard to Stick with Precautions

• Recommendations change frequently.
• Sustained behavior change is HARD.
• Risk may not seem real.
• Thrill from reckless behavior/no consequences.
Behavior Change and COVID-19

Based on the Capability, Opportunity, Motivation, Behavior (COM-B) Model of Behavior

Source: Tara Millson
Policies: Changing Behavior of Patients and Staff

Harsh  Gentle  Liberal

Source: Tara Millson
Key Strategy: Understand People

- Understand who is experiencing demotivation and what motivates them.
- Identify groups experiencing increased transmission.
- Take what is learned to understand emerging perceptions.
- Acknowledge hardships.
- Focus on communication quality, not quantity.
- Target key groups.

Demotivation results from various barriers that people experience across cultural and personal contexts, and that requires different kinds of support.
Key Strategy: Engage People in Solutions

• Humans have a need to feel in control.
• Engagement increases the sense that people are in control.
• Focus on those who follow behaviors; health gains from collective efforts.
• Positive deviance
• Listen to people, understand their needs.
• People are more likely to listen if information matters to them.

“We control the pandemic with our behaviors.”
Key Strategy: Allow People to Live Their Lives, but With Reduced Risk

• Long-term strategies should allow people to return to something that resembles normal life.
• Think in terms of harm reduction.
• Help differentiate between higher risk and lower risk activities.
• Ensure support for lower risk activities while reducing the risk of transmission.

Shift the message from “do not” to “do differently.”
Work on Habits

• Complacency can lead to behavior defaults, auto-pilot.
• Visual reminders
• Role modeling
• Pay attention to close calls.
• Positive deviance
## Reinvigorate Vigilance

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<thead>
<tr>
<th>Make</th>
<th>Make a commitment</th>
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<tbody>
<tr>
<td>Stay</td>
<td>Stay flexible as recommendations change</td>
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<tr>
<td>Practice</td>
<td>Practice precautions until they are second nature</td>
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<tr>
<td>Keep</td>
<td>Keep supplies handy—make it easy to do the right thing</td>
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<tr>
<td>Use</td>
<td>Use stories to understand risk and consequence</td>
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<tr>
<td>Give</td>
<td>Give choices where you can</td>
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Source: Tara Millson
It Ain’t Over Yet

• Continue to screen and test patients AND employees.
• Wear a mask.
• Socially distance during breaks.
• Maintain distance in waiting area.
• Perform hand hygiene.
• Clean and disinfect high-touch surfaces.
• Stay home if you feel sick.
Thank You!

Questions?
Let Us Hear From You

• Q&As from chat and Q&A panels
Flu Vaccination Toolkit

Influenza toolkit for providers featuring:
• Flu facts and taglines
• Social media content
• Flu videos
• Print-ready materials
• On-demand training and educational events

Visit esrdncc.org/flu today!
Inspirational Posters

- Evidence-based 12” x 18” posters
- PDF format for on-demand printing
- Focus on psychological/physical health, emergency preparedness, and COVID-19

To view, visit https://esrdncc.org/professionals/inspirational-posters/.
The Kidney Hub

• The Kidney Hub—Mobile-friendly web tool created by patients, for patients.
• Links to new videos and helpful resources added.
• Visit [www.TheKidneyHub.org](http://www.TheKidneyHub.org) today!
Our Next COVID-19 Webinar Events

- Provider-focused event: April 7, 2021, 3 p.m. ET
- Patient-focused event: April 13, 2021, 4 p.m. ET

Visit kidneyCOVIDinfocenter.com to register.
Thank You!

NCCinfo@hsag.com
844.472.4250
813.865.3545
www.esrdncc.org

Additional COVID-19 resources for patients and providers:


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