Our understanding of COVID-19 is evolving rapidly.
This presentation is based on our knowledge as of July 9, 2020, 5 PM.
OUTLINE

WHERE WE ARE NOW

UPDATE ON MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN IN NEW YORK CITY

SUPPORTING OLDER ADULTS WHO LIVE AT HOME: CARE AND RESOURCES

REOPENING GUIDANCE

QUESTIONS AND DISCUSSION
WHERE WE ARE NOW

• More than 12 million cases and 550,000 deaths due to COVID-19 confirmed worldwide
• Many U.S. states implementing face covering requirements after seeing increased transmission
• New York City (NYC) began Phase Three of reopening on July 6
• Current response strategy: continue suppression measures and monitor impact of reopening
COVID-19 TRANSMISSION WORLDWIDE

>12 million cases
>550,000 deaths
7/9/20

New York Times. Coronavirus map: tracking the global outbreak
CHANGE IN NUMBER OF NEW CASES IN THE U.S. IN THE PAST TWO WEEKS
7/6/20

CUMULATIVE CASES AND DEATHS, U.S.  
7/9/20

> 3.1 million cases  
(~26% of confirmed global cases)

> 132,963 deaths  
(~24% of reported global deaths)

COVID-19, NYC
7/9/20

Cumulative counts:
• Cases: 214,952
• Hospitalizations: 55,360
• Confirmed deaths: 18,637
• Probable deaths: 4,610

Figures show number of daily COVID-19 cases, hospitalizations, and deaths

• Make COVID-19 testing a part of routine care in all settings
• Report cases diagnosed using a point-of-care (POC) diagnostic test
  • Reporting Central or the Provider Access Line (866) 692-3641
• Tell patients to expect a call from Trace if they test positive
  • Include accurate phone number in lab requisition forms
• Patients with positive result should isolate for 10 days from start of symptoms or from date of positive result if asymptomatic
• Contact tracers will interview cases to elicit close contacts and assess need for services (e.g., hotel, meds)
• Trace is required to maintain patient confidentiality
• Cases and contacts will be monitored daily by phone, text
• Trace program is not a public benefit under public charge test
• See Letter to Providers: COVID-19 Test and Trace Corps
UPDATE ON MULTISYSTEM INFLAMMATORY SYNDROME IN CHILDREN IN NYC

Ellen H. Lee, MD
Medical Director
General Surveillance
Bureau of Communicable Disease Control
NYC Department of Health and Mental Hygiene
Case Definition for Multisystem Inflammatory Syndrome in Children (MIS-C)

- An individual aged <21 years presenting with fever, laboratory evidence of inflammation and evidence of clinically severe illness requiring hospitalization, with multisystem (≥2) organ involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic or neurological); AND
- No alternative plausible diagnoses; AND
- Positive for current or recent SARS-CoV-2 infection by RT-PCR, serology, or antigen test; or COVID-19 exposure within the 4 weeks prior to the onset of symptoms

\(^{i}\)Fever ≥38.0°C for ≥24 hours, or report of subjective fever lasting ≥24 hours

\(^{ii}\)Including, but not limited to, one or more of the following: an elevated C-reactive protein (CRP), erythrocyte sedimentation rate (ESR), fibrinogen, procalcitonin, d-dimer, ferritin, lactic acid dehydrogenase (LDH), or interleukin 6 (IL-6), elevated neutrophils, reduced lymphocytes and low albumin

Additional comments

- Some individuals may fulfill full or partial criteria for Kawasaki disease but should be reported if they meet the case definition for MIS-C
- Consider MIS-C in any pediatric death with evidence of SARS-CoV-2 infection
• NYC Health Department initiates case investigation upon receipt of report
• All data are preliminary and subject to change
• Counted as case if patient meets CDC MIS-C case definition
  • 358 reports of suspected MIS-C have been received
  • 214 have met the CDC case definition for MIS-C
  • 88 did not meet criteria
  • 56 still under investigation
• 1 death reported
MIS-C CASES BY HOSPITALIZATION DATE, NYC 07/06/20
MIS-C CASES BY AGE GROUP, NYC 07/06/20

MIS-C Cases by Age Group

- 0-4 years: 33%
- 5-9 years: 33%
- 10-14 years: 22%
- 15-<21 years: 12%
MIS-C CASES BY BOROUGH, NYC 07/06/20
MIS-C CASES BY RACE/ETHNICITY, NYC 07/06/20
COVID-19 TEST RESULTS AMONG MIS-C CASES, NYC 07/06/20
## Presenting Symptoms for MIS-C Cases in NYC 07/06/20

<table>
<thead>
<tr>
<th>Symptom</th>
<th>n (total N=214)</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vomiting</td>
<td>145</td>
<td>68%</td>
</tr>
<tr>
<td>Abdominal pain</td>
<td>131</td>
<td>61%</td>
</tr>
<tr>
<td>Rash</td>
<td>129</td>
<td>60%</td>
</tr>
<tr>
<td>Decreased appetite</td>
<td>109</td>
<td>51%</td>
</tr>
<tr>
<td>Conjunctivitis</td>
<td>107</td>
<td>50%</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>106</td>
<td>50%</td>
</tr>
<tr>
<td>Headache</td>
<td>62</td>
<td>29%</td>
</tr>
<tr>
<td>Cough</td>
<td>59</td>
<td>28%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>53</td>
<td>25%</td>
</tr>
<tr>
<td>Sore throat</td>
<td>53</td>
<td>25%</td>
</tr>
</tbody>
</table>
EVALUATION OF POSSIBLE MIS-C IN AMBULATORY SETTINGS 07/06/20

Step 1 - Assess for severe symptoms (e.g., concern for shock or sepsis [hypotension, tachycardia, and/or hypoperfusion], altered mental status, lethargy, seizures, severe abdominal pain, or otherwise ill-appearing appearance)

- Ill-appearing child
  - Refer immediately to nearest ED*

- Well-appearing child

Step 2 - Consider the diagnosis of Multisystem Inflammatory Syndrome in Children (MIS-C) if FEVER lasting at least 48-72 hours AND signs/symptoms from 2 or more of the following symptom categories:

- GI Symptoms (e.g., nausea, abdominal pain, vomiting, diarrhea)
- Rash (variable in appearance, including but not limited to maculopapular, scarlatiniform)
- Conjunctivitis (e.g., bilateral bulbar conjunctival injection without exudate)
- Oral mucosal changes (e.g., erythema and cracking of lips, strawberry tongue, and/or erythema of oropharyngeal mucosa)
- Extremity changes (e.g., erythema and/or edema of the hands and feet)
- Neurologic or Psychiatric Symptoms (e.g., headache, irritability, cranial nerve palsy)
- Lymphadenitis (neck swelling causing significant pain and/or sore throat)

Fever PLUS signs/symptoms from 2 or more symptom categories?

- Yes
  - Consider MIS-C and alternative diagnoses

- No
  - Consider MIS-C and alternative diagnoses, provide anticipatory guidance, and re-evaluate the next day and repeat Steps 1, 2

*When possible, the patient should be referred to an ED where consultation by pediatric subspecialists is available.
EVALUATION OF POSSIBLE MIS-C IN AMBULATORY SETTINGS 07/06/20

STEP 1 - Assess for severe symptoms
(e.g., concern for shock or sepsis [hypotension, tachycardia, and/or hypoperfusion], altered mental status, lethargy, seizures, severe abdominal pain, or otherwise ill-appearing)

ILL-APPEARING CHILD
REFER IMMEDIATELY TO NEAREST ED *

STEP 2 - Consider the diagnosis of Multisystem Inflammatory Syndrome in Children (MIS-C) if FEVER lasting at least 48-72 hours AND signs/symptoms from 2 or more of the following symptom categories:

- GI Symptoms (e.g., nausea, abdominal pain, vomiting, diarrhea)
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YES Consider MIS-C and alternative diagnoses

NO Consider MIS-C and alternative diagnoses, provide anticipatory guidance, and re-evaluate the next day and repeat Steps 1, 2

STEP 3 – Additional evaluation
If laboratory testing is performed, consider CBC with differential, Comprehensive Metabolic Panel (e.g. “Chem-20”), C-reactive protein (CRP), SARS-CoV-2 serology

Abnormal results on lab testing
Consider ED referral for more extensive evaluation, including additional laboratory testing and subspecialty consultation.

Normal results on lab testing
Re-evaluate the next day, repeat Steps 1, 2, and consider repeat laboratory testing as indicated by clinical course.

Lab testing not performed
Re-evaluate the next day, repeat Steps 1, 2

* When possible, the patient should be referred to an ED where consultation by pediatric subspecialists is available.
REFERENCES

NYC DOHMH Provider page:
https://www1.nyc.gov/site/doh/covid/covid-19-providers.page

https://emergency.cdc.gov/han/2020/han00432.asp
Supporting Older Adults Who Live at Home: Prevention and Preparation

Aarti Agarwal, MD FACP
NYC Department of Health and Mental Hygiene
Impact of COVID-19 on Older Adults in New York City (NYC)

Although persons 65 years and older make up 14.8% of the population in NYC*, as of July 5, 2020, they represent:

- 24% of COVID-19 cases
- 50% of COVID-19 hospitalizations
- 74% of laboratory-confirmed COVID-19 deaths

Adults ages 50 and older are at increased risk for severe illness, with those ages 65 and older at the highest risk

*U.S. Census Bureau, 2018 American Community Survey 1-Year Estimates; Population Division – New York City Department of City Planning (November 2019)
How can providers optimize preventive care for older adults?

Counsel older adult patients:
- On routine precautions to prevent infection with SARS-CoV-2
- To be prepared for COVID-19 and other emergencies
- To stay well and keep up with routine appointments and preventive care
Administrative Recommendations

- **Conduct outreach** to older adults and other patients at higher risk of illness who are behind on care.

- **Designate specific times for certain types of visits**, such as offering early morning hours for patients at higher risk of illness with non-COVID-19 complaints and dedicated hours for sick visits late in the day.

- **Identify services that need to be in-person** (such as immunizations, labs or vital signs if patients cannot report from home) and consider brief on-site visits, with longer discussions done via telehealth.

- For additional guidance on restarting or expanding services, see [Checklist for Expanding Outpatient Practices During COVID-19: Considerations and Resources](#).
Recommend Continuation of Routine COVID-19 Precautions

• **Consider staying home** to protect yourself, except when obtaining necessary medical care, running essential errands or for solitary exercise.

• Try to work and socialize remotely.

• **Always wear a face covering** when leaving home.

• When possible, ask others with lower risk for severe COVID-19 illness to run essential errands. If not possible, try to shop during hours designated for older adults.

• Whenever possible, **stay at least 6 feet away from others**.

• **Wash hands often** with soap and water for at least 20 seconds, especially on return home, or use hand sanitizer.
Prepare for COVID-19 and Other Emergencies

- Advise patients to **know how to reach health care providers**, including via phone and telehealth portals
- **Counsel on symptoms** of COVID-19, and advise that symptoms in older adults may be atypical:
  - **Most common** are shortness of breath or difficulty breathing, fever, chills, fatigue, muscle pain, headache, sore throat, new loss of taste or smell, congestion or runny nose, nausea, vomiting, diarrhea
  - **Atypical but can occur in older adults** are confusion, disorientation, falls
- Encourage older adults and others at high risk of severe illness from COVID-19 to **contact their provider as soon as they think they have symptoms** (or if symptoms change)
Prepare for COVID-19 and Other Emergencies

• Counsel patients to seek emergency care or call 911 for any severe symptoms:
  • Trouble breathing
  • Persistent pain or pressure in the chest or abdomen
  • New confusion or inability to stay awake
  • Blue lips or face
  • Difficulty speaking
  • Sudden face drooping or numbness in the face, arm, or leg
  • Seizure
  • Any sudden and severe pain
  • Uncontrolled bleeding
  • Severe or persistent vomiting or diarrhea
  • Any other emergency condition
Prepare for COVID-19 and Other Emergencies

- Advise maintaining **complete lists** of prescription and non-prescription **medications** and all **health care providers** (with contact information)

- Counsel on **how to travel** to a health care provider or to a local testing site:
  - Some **transportation services are available for essential medical appointments** for those age 60 and older. **Call Aging Connect at 212-244-6469** for more information.
  - Some insurance providers, including Medicaid, cover **non-emergency transportation**, including provider visits. Patients can contact their health insurance company to find out: (1) what is covered, (2) how to arrange transportation, and (3) if preauthorization is needed.
  - If you do not provide testing at your office, patients can find a testing site near them by **calling 311** or going to **nyc.gov/CovidTest** – many sites are free
Transportation Manager for Medicaid Fee-For-Service (FFS) Patients

• To arrange non-emergency transportation for patients in FFS Medicaid, contact the contracted Transportation Manager for NYC:
  • Medical Answering Services, LLC
  • medanswering.com
  • (844) 666-6270 (24 hours a day, 7 days a week)
Prepare for COVID-19 and Other Emergencies

- Counsel patients to **consider wishes for medical care and choosing a health care proxy**, in case they are unable to speak for themselves. See [NYS resources and forms](#).

- Many older adults are caregivers for children or another adults—**have caregiving plans in place**, for people as well as pets, in case of hospitalization.

- Advise **keeping a thermometer and a supply of non-prescription medications** that are safe to use (e.g., acetaminophen).

- Share **information on the COVID-19 Hotel Program**. If patients or others at home are sick and unable to safely separate from others, you (or the patient) can call 844-692-4692 to begin the screening process.
Stay Well and Maintain Care

• Counsel patients that it is safe to receive routine care in-person when necessary:
  • Annual check-ups, vaccinations, and health screenings
  • Follow-up visits for chronic conditions (like high blood pressure, diabetes, or heart disease)
  • Follow-up visits or referrals for mental health issues
  • Routine eye exams; ensuring they have a current pair of eyeglasses or contact lenses
  • Routine dental care

• Share infection control measures implemented in your practice, such as increased cleaning and disinfection practices, staggered in-person appointments, and designated office hours for those at high risk for severe illness
Stay Well and Maintain Care: Medications

- **Patients should have a 90-day supply of all necessary prescription medications**
  - Advise contacting prescribing providers for reauthorization of prescriptions a month prior to expiration
  - If patients get medications by mail, request refills at least a week before medications run out

- **For information about pharmacies that deliver:**
  - Patients can visit [nyc.gov/health/COVIDresources](http://nyc.gov/health/COVIDresources) to find local pharmacies that are open near them and details about delivery
  - **Capsule** (646-362-3092) and **Medly** (718-782-7539) are two pharmacy options for delivery, 7 days/week.
  - **Tomorrow Health** (844-402-4344) is a medical supply company option that offers home delivery of supplies like canes, walkers, catheters, respiratory supplies, etc.
Stay Well and Maintain Care:

Vaccines

- **Vaccination is our best defense** against vaccine-preventable diseases
  - Ensure your patients receive all needed vaccines, including flu vaccine (when available later this year), pneumococcal vaccine and zoster vaccine
  - **Strongly recommend these vaccines.** Provider recommendation is the strongest predictor of whether patients receive needed vaccines.
  - **Use evidence-based best practices to improve vaccine coverage** such as using immunization standing orders, reminder-recall systems, and assessing your patients for all needed vaccines
  - **If you do not have vaccines in stock, refer** patients for vaccination services (e.g., to pharmacies)
Stay Well and Maintain Care: Flu Vaccine and Adults 65+ years

• Order enough flu vaccine and ensure you have sufficient supply to vaccinate, including syringes and needles.
• Older adults should receive a flu vaccine every year.
• For patients aged 65 years and older, the NYC Health Department recommends high-dose or adjuvanted flu vaccine.
  • Evidence suggested these vaccines are more effective than standard dose flu vaccine in this population
• This season, both high-dose and adjuvanted vaccines are available in quadrivalent formulation.
• Flu vaccination is especially important this year because COVID-19 infection may occur during flu season
Two pneumococcal vaccines:

- **Pneumococcal Polysaccharide Vaccine (PPSV23)**
  - Single dose for all adults age 65 or older

- **Pneumococcal Conjugate Vaccine (PCV13)**
  - Single dose recommended for all adults age 65 and older, who have not received PCV13 previously and who have an immunocompromising condition, cerebrospinal fluid leak, or cochlear implant
  - Single dose for immunocompetent adults age 65 and older, who have not received PCV13 previously, with *shared clinical decision making*

See [Immunization Information for Providers](#) for additional resources, including pneumococcal vaccine recommendations for adults 19-64 years.
Stay Well and Maintain Care: PPSV23 and Adults 65+ years

- A single dose of PPSV23 is routinely recommended for all adults 65 years and older
- If PCV13 will be given:
  - Administer PCV13 first and wait a minimal interval of 1 year before giving PPSV23
- If PCV13 has been given previously:
  - Wait a minimal interval of 1 year before giving PPSV23
- If PPSV23 was administered prior to age 65 years:
  - Wait a minimal interval of 5 years between PPSV23 doses
Stay Well and Maintain Care: PCV13 and Shared Clinical Decision Making for Adults 65+ years

- Informed by a decision process between the health care provider and the patient
- Considerations include the patient’s risk for exposure to PCV13 serotypes and the risk for pneumococcal disease for that person as a result of underlying medical conditions
- **Potential increased risk of disease:**
  - Persons with chronic heart, lung, or liver disease, diabetes, or alcoholism, and those who smoke cigarettes or who have more than one chronic medical condition
- **Potential increased risk for exposure:**
  - Persons residing in nursing homes or other long-term care facilities
Shingrix® (Recombinant Zoster Vaccine) is the preferred zoster vaccine for preventing shingles and related complications

- Administer Shingrix® to all immunocompetent persons 50+ years as a 2-dose series. Recommended for individuals who:
  - Previously received the shingles vaccine Zostavax®
  - Report a prior episode of herpes zoster
  - Have a chronic medical condition (e.g., chronic renal failure, diabetes mellitus, rheumatoid arthritis, chronic pulmonary disease), unless a contraindication or precaution exists

- **Precautions**: current herpes zoster infection, pregnancy, breastfeeding

- **Provide counseling on expected reactogenicity**, including redness and swelling at site of administration, fever, and headache

Of note, Merck has discontinued manufacturing Zostavax® (Zoster Vaccine Live) – all remaining stock will expire November 2020
Stay Well and Maintain Care: Chronic Disease Management

• Wall Poster and Card: Questions to Ask Your Doctor and Pharmacist about Your Medicine (PDF)
• How to Take Your Blood Pressure (PDF)
• Blood Pressure Tracking Card (PDF)
• AMA: 6 takeaways doctors should know about the new self-measured blood pressure (SMBP) policy statement
• Guide to Healthy Eating and Active Living in NYC (PDF)
• My Diabetes Checkbook: A Daily Log to Help You Control Your Diabetes (PDF)
• My Plate Planner (PDF)

For other languages, visit nyc.gov/health and search for the item of interest.
Stay Well and Maintain Care: Behavioral Health

- Counsel patients on maintaining routine care for any behavioral health conditions.
- Employ trauma and resilience-informed approaches with patients, who may be experiencing direct complications from COVID-19, but also trauma and psychosocial stressors.
  - Visit NYC Health Department’s COVID-19 Coping and Emotional Well-Being webpage.
  - View recent Dear Colleague Letter, which includes guidance on recognizing and addressing behavioral health concerns.
  - Consider routine mental health and substance use disorder screenings for older adults and other patients at higher risk for severe illness.
Stay Well and Maintain Care: Psychosocial Considerations

- Consider how you can better integrate social, behavioral health and medical services in your practice, including asking about needs and providing referrals and resources for:
  - Mental health challenges, including depression, anxiety, grief, loss, self harm and suicidal thoughts
  - Substance use disorders
  - Domestic and interpersonal violence
  - Isolation (especially among older adults, but affecting all age groups during physical distancing)
  - Social determinants of health including food insecurity, poverty and housing insecurity

See: resources section of Checklist for Expanding Outpatient Practices During COVID-19, Guidance for patients who use alcohol or drugs and NYC Quits page, for available support and resources.
Supporting Older Adults Who Live at Home: Staying Safe and Well at Home

Amita Toprani, MD MPH
NYC Department of Health and Mental Hygiene
Staying Safe and Well at Home: Behavioral Health Resources

- Counsel patients that it is natural to feel overwhelmed, sad, anxious and afraid, or to experience distress, which may result in trouble sleeping or coping with alcohol and other substances.
  - **Recommend staying connected** with friends and loved ones via phone calls, email, video chat, or regular mail.
  - **Recommend staying active safely**, if physically able, including solitary exercise outdoors, while maintaining routine precautions.
  - **Provide mindful drinking strategies and overdose prevention recommendations**.
  - **Recommend** trying to remain positive and reminding oneself of one's strengths.

See: resources section of [Checklist for Expanding Outpatient Practices During COVID-19](#), [Guidance for patients who use alcohol or drugs](#) and [NYC Quits page](#), for available support and resources.
Staying Safe and Well at Home: Behavioral Health Resources

• For patients who are comfortable with apps, the “App Library” at nyc.gov/nycwell has online tools to help manage health and emotional well-being.
  - NYC Well, a free and confidential behavioral health support service, has trained counselors available 24/7 to provide brief counseling and referrals to care. Call 888-NYC-WELL (888-692-9355) or text "WELL" to 65173

• For help with isolation and loneliness, patients can also request free recurring social check-in calls from a volunteer by calling Aging Connect at 212-244-6469

For additional resources, see resource section of Checklist for Expanding Outpatient Practices During COVID-19: Considerations and Resources
Staying Safe and Well at Home: Elder Abuse, Domestic and Gender-Based Violence Resources

- NYC Department for the Aging’s Crime Victims’ Resource Center: 212-442-3103 (9 a.m. to 5 p.m.)
- NYC Family Justice Centers, which provide social services, civil legal, and criminal justice assistance for survivors: (Monday through Friday, 9 a.m. to 5 p.m.)
  - Bronx: 718-508-1220
  - Brooklyn: 718-250-5113
  - Manhattan: 212-602-2800
  - Queens: 718-575-4545
  - Staten Island: 718-697-4300
- NYC Elder Abuse Center Helpline for Concerned Persons: 212-746-6905 (Monday through Friday, 9 a.m. to 5 p.m.)
- NYC’s 24-hour hotline operated by Safe Horizon: 1-800-621-4673 at all other times.
City Health Information: Fall Risk Assessment Algorithm

Figure. Fall Risk Assessment and Intervention

**Ask Key Questions**
1. Have you fallen, slipped, or tripped in the past year? If YES:
   - How many times?
   - How did it happen?
   - Were you injured?
2. Do you have trouble with your balance or walking?
3. Do you avoid any activities because you’re afraid you might fall?

**NO to all 3 Key Questions**

**Recommend**
- Individual/group exercise with strength, balance, and aerobic elements

**Actions in Box A plus Evaluate**
- Gait
- Balance
- Postural hypotension
- Medications
- Home hazards
- Cognitive impairment

**Recommend**
- Medication change
- Home hazard correction
- Vitamin D

**if abnormal gait or balance screen**

**Actions in Boxes A and B, plus (based on history evaluate)**
- Functional status (ADLs)*
- Lower and upper extremity strength*
- Fear and footwear
- Vision and hearing

**Recommend**
- Secure footwear
- Assistive device(s)
- Refer to
  - PT/Ot
  - Certified home health agency
  - Other, as needed

*If a complete evaluation is not possible at the initial visit, assess gait and balance, postural hypotension, functional status, and strength if these assessments are indicated. Prioritize other assessments over several visits according to the patient’s history.

ADLs, activities of daily living; PT, physical therapy; OT, occupational therapy.

Based on Centers for Disease Control and Prevention, Stopping Elderly Accidents, Deaths & Injuries. www.cdc.gov/steadii.
# Materials for Healthcare Providers

As a healthcare provider, you are already aware that falls are a serious threat to the health and well-being of your older patients. You play an important role in caring for older adults, and you can help reduce these devastating injuries.

The CDC's STEADI initiative offers a coordinated approach to implementing the American and British Geriatrics Societies' clinical practice guideline for fall prevention. STEADI consists of three core elements: Screen, Assess, and Intervene to reduce fall risk by giving older adults tailored interventions.

Educational materials specifically designed for older adults, their friends, and family are also included. See the list of materials included in the STEADI Toolkit.

Download materials below, or order hard copies from [CDC-INFO on Demand](https://www.cdc.gov/steadi).

<table>
<thead>
<tr>
<th>STEADI Basics</th>
<th>Clinical Tools</th>
<th>Functional Assessments</th>
<th>Medication Review</th>
<th>Fact Sheets</th>
<th>Graphics</th>
</tr>
</thead>
</table>

## Algorithm for Fall Risk Screening, Assessment, and Intervention

This tool walks healthcare providers through assessing a patient's fall risk, educating patients, selecting interventions, and following up.

**Download**
- [Algorithm for Fall Risk Screening, Assessment & Intervention](https://www.cdc.gov/steadi) [552KB]

## Preventing Falls in Older Patients: Provider Pocket Guide

This small, easy-to-use tool walks healthcare providers through key points of fall prevention.

**Download**
- [Preventing Falls in Older Patients: Provider Pocket Guide](https://www.cdc.gov/steadi) [632KB]

[www.cdc.gov/steadi](https://www.cdc.gov/steadi)
Staying Safe and Well at Home: Preventing Older Adult Falls

Preventing Falls in Older Adults

COVID-19 and Preventing Falls: Staying Safe While Staying Home

One in three older New Yorkers experiences a fall, and most of these falls happen at home. Prepare to safely stay inside during the COVID-19 response with these fall prevention tips:

- **Home Safety**: Find and fix trip and fall hazards in your home. If you are working from home, be careful of computer and electrical wires. Open the wires next to the wall and tape them down if you can.
- **Use our Home Safety Checklist (PDF)**
- **Physical Activity**: Be active. Physical activity is a great way to prevent falls and there are many exercises that can be done at home.
- **Care for Your Feet**: Wear the proper footwear, even at home. Learn more about how to keep your feet healthy.
- **Medicine Safety**: Continue your medicine routine. It is important to manage your medications and take all your prescriptions. Pharmacies remain open and many are offering free delivery. Call your pharmacist to discuss refills and possible delivery options.

Every year, one in three Americans aged 65 and older experiences a fall. In New York City, falls are the leading cause of injury-related death and hospitalization for older adults. In addition to serious injuries and deaths, falls can affect the quality of life for older adults, sometimes making it harder for them to live independently. Although falls are common, they do not need to be a normal part of aging. Falls are preventable and everyone can help older adults avoid them.

Preventing falls for seniors is a priority for a number of city-wide initiatives including OneNYC, Take Care New York 2020 and Age-friendly NYC. Learn more about the Health of Older Adults in New York City (PDF).

Tips and Strategies

Falls can happen for many reasons. The main factors that can lead to falls include:

- Muscle weakness
- Trouble with mobility or balance
- Side effects of medications
- Fear of falling

You can prevent falls by:

- Getting regular Physical Activity.
- Making your home safer, as most falls occur in the home. For more information on reducing fall hazards from your home, read:
  - How to Prevent Falls: A Home Safety Checklist (PDF)
- Evaluate your risk: Use tools like the CDC’s Falls Risk Assessment Tool (PDF).
- Caring for Your Feet
- Reducing Fear of Falling

Learn how you can protect yourself and gain confidence in Case of a Fall.

Caregivers and Providers

If you are taking care of an older adult, check out the Department of Health's tips and resources for new and experienced caregivers.

New York City Falls Prevention Coalition

The New York City Falls Prevention Coalition brings together partners from across different sectors to leverage information and resources to reduce the incidence and burden of falls among vulnerable populations. For more information, contact the Falls Prevention Coalition at fallsprevention@health.nyc.gov.

Additional Resources

- City Health Information: Preventing Falls in Older Adults (PDF)
- NYC Vital Signs: Falls among Older Adults in New York City (PDF)
- NYC Epi Data Brief: Falls among Adults Aged 65 Years and Older in New York City (PDF)
- NYC Epi Data Brief Supplemental Tables (PDF)
- NYC Environmental Health Data Portal: Falls among Older Adults
- CDC's STEADI (Stopping Elderly Accidents, Deaths & Injuries) Tool Kit for Health Care Providers
- NYC Department for the Aging Senior Centers

More Information

- Healthy Aging: Programs and Services for Older Adults
- Physical Activity
- Manage Your Medicine
- Manage Chronic Conditions
- Vision and Hearing in Older Adults
- Caring for Your Feet
- Reduce Fear of Falling
- In Case of a Fall

To get free falls prevention documents by mail, call 311.
Staying Safe and Well at Home: Preventing Older Adult Falls

Home Safety Checklist

How to Prevent Falls: A Home Safety Checklist

Falls can cause serious injury. Fortunately, most falls can be prevented. Use this checklist to find and fix fall hazards in your home.

<table>
<thead>
<tr>
<th>STAIRS (IF ANY)</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there trip hazards on the stairs?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Clear the stairs of objects.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Secure any loose sections of carpet on the stairs.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Fix loose hand rails.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>BATHROOM</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the tub or shower slippery?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Place a nonslip mat or self-stick strips in the bathtub and on the shower floor.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Install grab bars near the tub and toilet.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Use a shower chair, bath bench and/or raised toilet seat.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>KITCHEN AND STORAGE</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you struggle to reach items you use often?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Keep items you use often in an easy-to-reach place.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- If you must stand (reaching out of reach), use a step stool with a support bar. Never stand on a chair.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
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<tr>
<th>FLOORS</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are there throw rugs, objects you might trip ever or uneven flooring?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Got rid of throw rugs or secure them with double-sided tape.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Coil or tape electrical cords next to the wall.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Clear objects from the floor (for example, cases, books, shoes).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Fix uneven floors and replace missing tiles.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FLOOR slippery?</th>
<th>No</th>
<th>Yes</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Clean up spills right away.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>- Avoid waxing your floors.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

Free or Low-Cost Home Maintenance and Repair Programs

- Met Council's Project Network: For renters, homeowners or qualified condominium or co-op owners. Call 212-453-9562 or email homeservices@metcouncil.org
- New York Foundation for Seniors Citizens: For homeowners or qualified condominium or co-op owners. Call 212-692-7656
- The Campaign Foundation's Senior Citizen Homeware Assistance Program (SCHIP): No- and low-interest loans and extensive technical assistance for qualified senior citizen homeowners. Call 212-431-9702, ext. 300
- New York's Accessible Voucher Program: For low-income older adults or disabled residents. Call 718-489-6680
- Homeowner's Home Improvement Program: Loans to homeowners for moderate repairs. Call 212-691-2690
- BronxWorks Minor Repair Program: Minor home repairs for seniors in the Bronx. Call 718-933-5300
- New York City Housing Authority (NYCHA): Customer Contact Center for residents of NYCHA housing. Call 718-707-7777
- New York City Mayor's Office for People with Disabilities - Housing Resources: Housing programs and resources for people with disabilities. Call 311

For more information, visit nyc.gov and search preventing falls.
Staying Safe and Well at Home: Clinicians Can Address Risk Factors for Falls!

- Make **annual screening for risk of falls a priority** with all older patients
- Review and update medications
- Promote **home modifications** to prevent falls
- **Make referrals** for vision/hearing, PT/OT, footcare, physical activity
- Strengthen delivery of **falls prevention messages at ED or hospitalization discharge** (e.g., provide NYC DOHMH [Home Safety Checklist](https://www1.nyc.gov/site/doh/cd/case-management/home-safety-checklist.page))
Staying Safe and Well at Home: Heat-Related Illness and COVID-19

- Heat-related illnesses are a concern each summer in NYC
- Most hyperthermia victims are overcome in their homes and do not have or do not use air conditioning
- Staying home/indoors to avoid COVID-19 exposure may increase risk of heat-related illness if air conditioning is unavailable
- Financial strain related to COVID-19 may add concern about using air conditioning

For more information and guidance, see NYC Health Alert #19: https://www1.nyc.gov/assets/doh/downloads/pdf/han/alert/2020/covid-19-heat-illness-prevention.pdf
Staying Safe and Well at Home: NY STATE Home Energy Assistance Program (HEAP)

- Provides funds to purchase and install air conditioner
- People who meet income and other criteria can apply
- Provide patients with written documentation of increased risk for heat-related illness
- Advise them to call 311 to request a HEAP air conditioner application

For more information and guidance, see NYC Health Alert #19: https://www1.nyc.gov/assets/doh/downloads/pdf/han/alert/2020/covid-19-heat-illness-prevention.pdf
Staying Safe and Well at Home: Food and Meals Resources

- Department of Education meal hub sites provide 3 meals a day, Monday through Friday.
  - No registration or identification is required. Advise having a household member or friend at lower risk for severe illness pick up the meals.
  - Visit nyc.gov/getfood or call 311 to find meal hub site locations.

- For patients that cannot go out to get food or use private delivery options, NYC emergency meal delivery is available.
  - Visit nyc.gov/getfood or call 311 to learn more.

GetFood NYC
COVID-19 Emergency Food Distribution
Staying Safe and Well at Home: Financial, Housing, and Other Resources

• Information on City services and support for older adults, including finances and consumer protection, housing and utilities: nyc.gov/agingcovid.

• Information about local resources by neighborhood, including primary care, pharmacies, grocery stores and food pantries, and financial or housing help: nyc.gov/health/COVIDresources.

• To apply for HRA services, including SNAP and cash assistance, patients can visit nyc.gov/accesshra, or download the ACCESS HRA mobile app.

• Those who cannot access the website or mobile app can call 311.
Jennie Sutcliffe, MSc
Senior Healthcare Policy Analyst
Reopening Guidance Taskforce
NYC: WHO’S DOING WHAT?

• NYC Department of Health and Mental Hygiene:
  • Public health guidance and tools for reopening NYC to support implementation NY Forward requirements

• NYC Department of Consumer and Worker Protection:
  • Education and enforcement of worker health and safety mandates
  • Worker protection hotline

• Small Business Services: hotline, tools and marketplace

• Mayor’s Office of Special Enforcement: coordinates citywide, multiagency enforcement

• NYC Department of Transportation: opens streets, sidewalks, plazas for pedestrians, bicycling and businesses to operate outdoors
THE CORE FOUR: KEY TO REOPENING

Stay home if sick
Only leave for essential medical care and or other essential errands.

Keep physical distance
Stay at least 6 feet away from other people.

Keep your hands clean
Wash your hands often with soap and water. Use hand sanitizer if soap and water are not available.

Wear a face covering
You can be contagious without symptoms. Protect those around you by wearing a face covering.
• Visit **nyc.gov/health**

• Guidance for specific businesses: looking to NY Forward and providing best practices and recommendations for the Core Four

• Businesses:
  • FAQ
  • Signs, posters and flyers
  • Tools (such as model logs and health screenings)
  • Guidance on returning to a space that has been vacant

• Guides for the public: diners, having fun outdoors and shopping

• Information on face coverings and COVID-19 testing

• Updates and adds resources regularly
FLYERS AND POSTERS

Prevent the Spread
Keep Your Distance
Wash Your Hands
Cover Your Cough

These flyers and posters are available to order by calling 311 or print https://www1.nyc.gov/site/doh/covid/covid-19-posters-and-flyers.page
Checklist for Expanding Outpatient Practices During COVID-19: Considerations and Resources

• General considerations
• Operations management
• Optimizing EHR processes
• Access to care
• Special considerations to support patients and staff
• Thinking ahead
• Financial concerns
• Resources
CONCLUSION

• Tailor the Core Four to your workplace, employees and activities
  • The concepts are simple
  • Implementation is hard
  • Requires thinking through every operational detail of an activity
• Be flexible and prepared to change
  • As we continue to learn about COVID-19, recommendations will change
  • Lessons are coming in from NYC and around the world about reopening best practices and mistakes
• Employees may have feedback on ways to improve health and safety measures
  • Communicate regularly
  • Be ready to adjust operations in response to their feedback
ADDITIONAL RESOURCES ON COVID-19

NYC Health Department
- Provider page: https://www1.nyc.gov/site/doh/covid/covid-19-providers.page
- Data page: https://www1.nyc.gov/site/doh/covid/covid-19-data.page
- Weekly webinars: Fridays, 2 p.m. (sign up on provider page)
- Dear Colleague COVID-19 newsletters (sign up for City Health Information subscription at: nyc.gov/health/register)
- NYC Health Alert Network (sign up at https://www1.nyc.gov/site/doh/providers/resources/health-alert-network.page)
- Provider Access Line: 866-692-3641
- Neighborhood resource snapshots: https://www1.nyc.gov/site/doh/covid/covid-19-communities.page

NYC COVID-19 Citywide Information Portal
- Includes information on > 150 testing sites in NYC: NYC.gov/covidtest

Other sources