

How Loretto and the National Guard Provided Relief to the Central New York Healthcare System During the Coronavirus Pandemic

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The New York State Department of Health sent National Guard members to Loretto in response to Governor Hochul's leadership to provide relief to local hospitals at the height of the COVID-19 Pandemic in December 2021. With additional support from the National Guard members, acting as Certified Nursing Assistants (CNAs), Loretto doubled admissions to its skilled nursing facility in two and a half weeks, providing critical relief to the local health care infrastructure.

Training Model

The 18 National Guard members arrived in early December in two waves – the first on December 3, 2021, and the second on December 6, 2021. There was an initial feeling of shock as many did not know they were coming to this facility until their arrival. However, they were more than willing to jump in, learn, and contribute, which is precisely what they did.

All of the assigned National Guard members had received some basic EMT training or were EMT certified, so each group immediately began the Fast Track Certified Nursing Assistant (CNA) Training, a New York State Department of Health (NYSDOH) program customized by Loretto and approved by the NYSDOH. The training lasted for two days and was administered by Loretto's education department under the oversight of the chief nursing officer.

Once they completed an initial two days of training, floor orientation began. Each National Guard member was assigned to a CNA to shadow and assist. Loretto ensured that members received orientation on several different units during day shift for two to three days.

Then, they began orientation on the floor and shift to which they would be assigned – short-term rehabilitation, evening shift.

Upon completion of the training and floor orientation, National Guard members were equipped to fill the role of a CNA. They updated digital medical records and provided support in all activities of daily living, including, but not limited to:

- personal hygiene (bathing and grooming),
- feeding,
- dressing,
- continence management (toileting),
- determining what equipment to use and how to use it (wheelchairs, cushions),
- transferring (ability to change position and walk independently),
- transportation and shopping,
- mental support and companionship, and
- managing a household.

Deployment

Initial utilization of all 18 National Guard members in the first two weeks focused specifically on short-term rehabilitation – an area with high patient turnover – during the evening shift. After that, Loretto broke the group of 18 into two teams and deployed the members to other areas. Throughout their deployment, they provided support in short-term rehabilitation and long-term care.

Based on insights from the commanding officer, Loretto utilized the buddy system. Two National Guard members were paired together for effectiveness and to provide a greater level of accountability, as is often done in the military. The buddy system provides accountability to prevent issues from arising and a witness if an incident were to occur. This approach offered additional assurances for both the commanding officer and Loretto, as the NYSDOH has an extensive reporting and investigation process for any misconduct allegations.

Loretto coordinated schedules so that the National Guard could break for meals together as much as possible.

Since seventy-five percent of the National Guard members were Army medics, they needed to travel on weekends for drill training. Loretto actively worked to accommodate this training, as well as time off requests.

The military provided for the National Guard members' basic needs – housing, for those who were not local, and meals. Loretto worked with the commanding officer to determine and provide for any uncovered needs. For example, since most lived in a hotel room during deployment, Loretto provided to-go bags with water, snacks, and Loretto branded cups.

During their rounds, Loretto's supervisors also checked in with the National Guard members to ensure they had everything they needed to fulfill their roles. In addition to fulfilling their CNA duties, the commanding officer also had them complete a daily shift report, which reflected timely feedback on their shift experience.

The overall reaction from Loretto employees and residents was positive. National Guard members were seen as team members, which was good for morale, yet they were a distinct pod within Loretto's team. Residents received notice that the members were coming and would be in uniform. While many of the residents had questions, they seemed to perceive that Loretto was doing all it could to provide the highest quality of care. Specifically, the veteran residents really connected with the National Guard members in a special way.

The National Guard members were originally scheduled to be assigned to Loretto for three to four months, which has since been extended.

Results

As a result of integrating the National Guard members directly into the care team, Loretto was able to open 18 previously closed beds and expand capacity.

During the height of the entire Coronavirus Pandemic, during a two-and-a-half-week period when only one other facility in the entire Central New York region was admitting (restricted to two admissions per day), Loretto admitted 128 individuals. And as of April, Loretto has decanted nearly 400 patients from local hospitals.



Unanticipated Challenges

Despite Loretto's preparation, a few areas proved to be challenging.

- Initial shock – For the National Guard members, this assignment is a mandatory activation, and many of them arrived unaware of deployment specifics. Used to going to drill training once per month, now suddenly they were deployed to care for elderly individuals over the winter holidays. It is important to consider their perspective and communicate a mission-based focus so they understand how their deployment provides essential support and relief within a bigger picture. Encouragement and organized, comprehensive training are also vital.
- Fatigues vs. Scrubs – Wearing fatigues is required, so the National Guard members did not blend in. This point is important to note because fatigues could be intimidating to some residents. Loretto requested scrubs, and, over time, National Guard members went from full fatigues to scrub tops and fatigue bottoms to wearing full scrubs and soft shoes (all of which had to be military issued).

- Drill Training – Seventy-five percent of the National Guard members deployed to Loretto needed to attend weekend drill training. (Note: Not all National Guard members have the same training schedules – this was an accommodation specific to our group.) Schedules required adjustments accordingly.
- Community perception – Despite being asked to complete a mission focused on providing relief to the local healthcare system, National Guard involvement created a constant perception that Loretto staffing was in “crisis,” as opposed to Loretto responding to an urgent community need. As a result, Loretto needed to ensure open communication with residents’ families to reassure their families and loved ones they were being cared for, and to manage several media inquiries.
- Media inquiries – The media pressed to get footage of the National Guard members to do stories on them providing care to patients. However, during the height of the Coronavirus Pandemic, Loretto’s focus was on keeping patients safe, so media were not allowed in the facility. Loretto also could not engage in any publicity without the approval of the communications officer in the National Guard. As a result of the media not having access, their perception remains that the National Guard was present due to a staffing shortage.



Conclusion

This has been the purest example of a successful public and private partnership. This collaboration initiated by Governor Hochul is an authentic and creative response to address a community need, and a groundbreaking model for the future that could be replicated in other states and communities nationwide. It represents a frontier model for collaboration on solving a significant crisis.

Loretto’s advice from this experience includes:

- Anticipate and, to the extent possible, plan for bumps in the road. There is often a short turnaround time to prepare, and unforeseen challenges will always be present.
- Proactive communication is essential, especially with several key groups:
 - National Guard commanding officer and members – Officials need to know how their role plays into a bigger picture. In Loretto’s case, level 1 trauma centers could not accept patients. As patients moved to Loretto for rehab, level 1 trauma care could again treat other patients. Bottom line? The National Guard members supported our health care infrastructure in Central New York. Loretto made that clear to the commanding officer, who inspired the members.
 - Union – On the surface, it appeared Loretto was bringing in non-union workers to do union work. Communication was needed to explain Loretto did not request the National Guard members; rather, the NYSDOH asked Loretto to take them so we could expand capacity and “decant” local hospitals.
 - Residents – National Guard members were new faces and looked different since they dressed in fatigues. While veterans appreciated the attire, it can be intimidating to others. Residents need to know how/why National Guard members will be serving.
 - Staff and residents’ families – Messaging in the media gave the impression that Loretto had a staffing shortage and requested the National Guard from the NYSDOH when in reality it was the NYSDOH who recommended their services to Loretto. Understandably, that can cause upset among staff and families of residents who are worried about their workplace or the environment their loved one is living in.
- Preceptor training – Loretto gained flexibility and offered extended preceptor training to National Guard members to build confidence in their caregiving skills. By extending the preceptor timeframe, Loretto was able to cross-train National Guard members to serve in short-term rehabilitation and long-term care.