

Overview: In the multi-faceted response to the COVID pandemic, Riverside County created a multi-disciplinary team of healthcare personnel for ongoing outreach to our group care settings. **Challenge:** In our COVID pandemic response Riverside County cultivated groups of stakeholders for sharing best practices, crisis management and resilience building strategies and resources. These stakeholder groups include our skilled nursing facility (SNF) and other long-term care facility (LTCF) leaders. Our SNF patients are often the most vulnerable to disease, and our LTCF provide a congregate setting increasing risk of transmission of communicable disease. **Solution:** With COVID related evacuation at one of our SNFs, we proposed to add a direct response capability. We brought a collaborative of leaders from Behavioral Health (BH), Emergency Management, Emergency Medical Services, the Medical Health Operational Area Coordination (MHOAC) program, RUHS Medical Center Physicians, Community Health Clinic leaders, and Public Health to create a team with multi-disciplinary membership that brings a comprehensive approach of behavioral health support, and emergency preparedness with focused education and training to our SNF and LTCF. Riverside County has 53 SNF's, and hundreds of other group care residential settings. **Innovation:** Thus became the Riverside County S+OS Team, an integrative approach that travels throughout the county to various group care settings to help identify early risk in struggling facilities, provide resources to fill gaps in physical personal protective equipment (PPE), direct mental health support for staff, and ongoing education in best practices from all partners. The initial project goal was to protect our most vulnerable residents by building SNF and LTCF community resilience and supporting our group care settings. The program started with the most vulnerable by completing an individualized risk assessment for SNF and larger sized LTCF to assist with strategies to prevent COVID cases in residents and staff, and to provide management for cases that may already be present. Our MHOAC, Emergency Operations Center and EMS Teams were faced with facilitating an evacuation of a SNF on April 8, 2020. Five days later the S+OS teams were formed, staffed, trained and energized for their first beta deployments: April 13, 2020. Working in the 4th largest county in California,

stretching 7,300 square miles, teams were distributed with four geographic zones. Each team is given an individualized deployment plan with a facility contact, demographic details, and objectives. A COVID Safety Playbook was developed in April to support the facilities, and interpreted into Spanish, along with references for MHOAC and Public health direct contact information. BH staff created a 24/7 anonymous support line (211 calls to date) and shared their mobile chat app (<https://takemyhand.co>). BH provided COVID Safety resources to support mental health for staff/families. BH staff conduct overview and one-on-one sessions w/ SNF staff to teach mental health first aid and self-care to manage stress and stay on the job. **Results:** As of this submission, the S+OS Team has conducted 1,054 visits, with ongoing visits planned. Our teams have expanded beyond SNF and LTCF to include adolescent/pediatric residential care, intermediary care, psychiatric emergency care, and substance abuse recovery center facilities, and housing support programs. Our deployment plans have updated in the months since our project started to integrate new facilities visits and revisits, setting up patterns for SNF visits at a minimum frequency. We provide ongoing training to S+OS team members as guidance and best practices adapt and have dedicated staff who function in this special assignment. The S+OS Teams have been highly regarded, and welcomed by the SNF and LTCF communities, the S+OS team efforts have correlated in a lowered COVID mortality rate for SNF residents. Our current SNF mortality is 25.5% down from 33.1% which translates to at least 100 lives saved. The MHOAC Program and County continue to invest in the S+OS team success. **Replicability:** A collaborative approach with a S+OS Team could be reproduced in neighboring counties with a partnership with public health, behavioral health or general acute care hospital (GACH). Our risk assessments have evolved to engage case management from our GACH's, as the S+OS Teams help with patient cohorts and best practices for COVID driven isolation needs, helping our SNF and LTCF to accept new patients, manage the patients they have in residence, and aid in the decompression our GACH. **Project or Program Contact:** Wendy Hetherington whetherington@ruhealth.org 951-358-5557