

Surviving to Thriving:

Preparing for COVID, Flu & Monkeypox in Your Community



The COVID-19 pandemic permanently changed how healthcare is delivered inside our nation's senior care communities. Yet, the knowledge we've gained over the last two and half years has given us the tools we need to save lives as we move into the fall and winter. We know that herd immunity cannot be obtained or sustained with current vaccines, so COVID-19 will remain present throughout the United States for the foreseeable future. Rapid, complete testing is the most important action we can take not only to create safe work environments but also to allow our nation's seniors access to care.



KEY TAKEAWAYS

- The number of fungal infections and multi-drug resistant bacterial infections is increasing as people have significant recovery times from long-term hospitalizations.
- The majority of people over the age of 60 are experiencing *Paxlovid* rebound. If you are seeing a rebound in your community, consider a ten-day course for your seniors, as this increases the risk for antiviral resistance.
- It will be critical to know if you have a flu outbreak or a COVID-19 outbreak in your senior care community this year. Ensure you have flu-COVID combination tests available.
- For the first time during this pandemic, we've seen a real decrease in ICU usage and the number of fatalities. This has much to do with *Paxlovid* and the rapid access to antivirals.

WHAT TO EXPECT THIS FALL

- Approximately **450–500 Americans** are still dying each day. Hospitalizations are being driven by continuous community spread. Testing does **decrease community spread**, particularly among young adults.
- No matter the age, over **50% of people have no protection** against infection and reinfection, despite full vaccination **after 5 months**.
- There's a potential for staff and visitors to bring in **Monkeypox**, which can be more deadly among the elderly.
- During a surge, test residents a minimum of two times a week to **catch infections early**. *Paxlovid* will be key to lowering hospitalizations and fatalities.
- As of June 2022, **1 in 13** adults in the U.S. have reported **Long COVID** symptoms (defined as symptoms lasting three or more months after first contracting the virus). Less likely in older adults, but more prevalent in women, it can significantly raise the risk of depression and disability.



Tell Our Stories

For more information, please visit
tellourstories.com/survivingtothriving

COVID-19 BY AGE

<35 Years

- Biggest employee risk is **Long COVID** which increases with repeated infections.
- Biggest workplace risk is asymptomatic transmission to others.
- Severe disease is rare and linked to significant underlying conditions.

35–60 Years

- Symptomatic to severe disease based on comorbidities.
- Hospitalization and death can be prevented by vaccine boosters and antiviral medication *Paxlovid*.
- Biggest employee risk is **Long COVID** with a rising disability threat to employers.

>60 Years

- Significant threat of severe disease, hospitalizations, and death.
- Significant risk of late post-infection findings of new-onset diabetes, cardiovascular events, and persistent brain fog.
- Substantial risk of *Paxlovid* rebound (new positive test).



UNIQUE ISSUES FOR RURAL AREAS

- Statistically, **rural Americans are older** and have higher levels of comorbidities due to less access to care, resulting in more hospitalizations and deaths from COVID-19.
- The daily peak of Omicron infections was three times higher than the peak of Delta. This led to higher rates of death in rural counties where unvaccinated people were more than **twice as likely to die** from COVID-19 as vaccinated patients.
- Rural counties face a higher probability of developing chronic illness from **Long COVID**.

YOUR STORY MATTERS

The COVID-19 pandemic has disproportionately affected seniors and the staff who care for them – spotlighting the vulnerability of this population and exposing the need for immediate legislative action to protect this community. **Your story can help correct this injustice.**

Tell Our Stories seeks to humanize the lack of funding and heavy regulatory burden on senior care providers by capturing images and stories of the individuals directly affected by these policies. From frontline workers, nurses, and facility managers to residents and families, we want to hear about your story at senior care communities across the U.S.

Help us save senior care by sharing your story!

You can submit stories directly at tellourstories.com/tell-your-story/ or by using #SeniorVoices when posting stories on [Facebook](#) (@TellOurStoriesAdvocacy) or [Twitter](#) (@TOSSeniorCare).

For additional questions, please contact seniorlivingadvocacy@directsupply.com