

Live Your	l ife™	Date	Timetable
Live rour	Live Iour Life		First case of COVID-19 in MN/Temporary Closure of Schools
MN Timetable		3/16/20	Closure of bars, restaurants and places of public accommodations. Facilities start prohibiting ANY essential staff from entering.
		3/21/20	First fatality
		3/27/20 - 4/10/20	Stay Home Order implemented. Critical sectors include those who ensure the health, safety & security of Minnesotans. Healthcare and public health workers listed in the CISA Guidance (which lists us a profession and home care setting). Non-essential services all closed. Most ALFs & Group Homes informed us that MDH had notified them that only COVID cases get essential services and insist on telehealth.
		3/29/20	Social distancing
		4/8/20- 5/3/20	Stay Home Order extended with the same restrictions as above 2

Live Your Life™				
	1.	Shared our Governor's Executive Order (SEE DOCUMENT PROVIDED) which lists us as essential/critical – references CISA which lists home care and PT/OT/ST/etc https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce - this is huge since legally we all as citizens of the state need to comply with these orders		
Efforts to Combat the Challenges of Not Getting Access to our Patients	2. 3.	Contacted MN Home Care Association for resources. They advised to contact MDH (MN Dept of Health Called MDH and requested COVID line which led to the Health care providers line. Document listing us as essential was created as result of myself and other health care providers contacting them. (SEE DOCUMENT PROVIDED)		
	4.	Called State Emergency Operations Center within Dept of Public Safety – they have been put in charge of enforcing the Governor's EO – If you suspect your patient is being abused, neglected, discriminated due to COVID, they can take action. They can also enforce that you are an essential service.		
	5.	Called the county offices where my patients live and receiving county waivers and requested to connect with their social workers. They have been huge advocates sharing the EO and MDH document enforcing we are essential staff. They have the ability to put pressure on the facilities by threatening to stop funding services if necessary, care (physicians, nursing, and therapy services) is not being provided.		
	6.	Contacted some of our patients' physicians/NPs/PAs and asked them to submit an order that our services are essential for the patient. This has been very successful in several facilities.		
	7.	Contacted my state Senator who invited me to a tele-townhall for healthcare providers who are having issues related to COVID. As a result of my statement and many other health care providers, we were told they will utilize these statements to enforce EO and also add language to prevent unnecessary deaths, neglect, abuse, discrimination, etc. in the next MN COVID Relief Package.		
	8.	We set up meetings with the leadership of some of the group homes. We educated them on the value of our services using the Home Health Section's Value statement document found on the website, explained that telehealth is not a covered service for Medicare part A beneficiaries, and shared a letter to help facilities know we have best practices in place in the use of PPE and to prevent transmission.		

