HQIC Weekly COVID Office Hours – Infection Prevention Chats

Welcome!

• Please ask any questions in the chat
• Please actively participate in discussions
• Lines will be muted upon entry

We will get started shortly!
Making Health Care Better
Together

Hospital Quality Improvement

Welcome from all of us!

COLLABORATORS:
Alabama Hospital Association
Alliant Health Solutions
Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza
Facilitator

Amy Ward, MS, BSN, RN, CIC

INFECTION PREVENTION SPECIALIST

Amy is a registered nurse with a diverse background in acute care nursing, microbiology, epidemiology and infection control. She is passionate about leading and mentoring new and future infection preventionists in their career paths.

Amy loves to ride bikes and be outdoors!

Contact: Amy.Ward@Allianthealth.org
Format for IP Chats

• Sessions are not recorded and minutes are not taken
  • If you prefer to remain anonymous, please use the call-in option

• Review of updates surrounding COVID-19 regulations and guidelines

• Open forum discussion
  • Survey findings discussion (corrective action/standards referenced, etc.)
  • Current COVID-19 response challenges or barriers to IP practice
  • IP mentoring or support needed
Feedback on IP Chats

CMS is interested in knowing if these sessions are beneficial to you.

Please enter to chat:
1 = Very beneficial
2 = Somewhat beneficial
3 = Neutral
4 = Unbeneficial
5 = Very unbeneficial
Omicron Variant

• Named variant of concern by the World Health Organization on 11/26/2021.
• No cases identified in the United States as of 11/26/2021.
• CDC recommends people follow prevention strategies such as wearing a mask in public indoor settings in areas of substantial or high community transmission, washing their hands frequently and physically distancing from others. The CDC also recommends that everyone 5 years and older protect themselves from COVID-19 by getting fully vaccinated. In addition, the CDC encourages a COVID-19 vaccine booster dose for those who are eligible.
• Travelers to the United States should continue to follow the CDC recommendations for traveling.
• The CDC will provide updates as more information becomes available.
Today, CDC is strengthening its recommendation on booster doses for individuals who are 18 years and older. Everyone ages 18 and older should get a booster shot either when they are 6 months after their initial Pfizer or Moderna series or 2 months after their initial J&J vaccine.

• Testing when sick is encouraged because it will help to identify the Omicron variant.
November 24, 2021

Summary
The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory about increased influenza A(H3N2) activity that could mark the beginning of the 2021-2022 influenza season. The purpose of this HAN Health Advisory is to

1. Remind public health practitioners and clinicians to recommend and offer the current seasonal influenza vaccine to all eligible persons aged six months and older (Flu vaccine and COVID-19 vaccine can be given at the same visit).

2. Remind clinicians to consider testing for both influenza virus and SARS-CoV-2 in patients with influenza-like illness (ILI).

3. Advise clinicians that antiviral treatment is recommended as early as possible for any patient with confirmed or suspected influenza who is: a) hospitalized; b) at higher risk for influenza complications; or c) developing progressive illness. In patients with suspected influenza, decisions about starting antiviral treatment should not wait for laboratory confirmation of influenza, however COVID-19 should be excluded if a rapid assay is available.

4. Remind public health practitioners and clinicians to consider mitigation measures including antiviral post-exposure prophylaxis during influenza outbreaks in institutions (e.g., long-term care facilities, university dormitories) in the setting of co-circulation of SARS-CoV-2.

5. Remind the public to use non-pharmaceutical interventions (NPI) or everyday preventive actions, in addition to getting a flu vaccine. Everyday preventive actions include staying home when sick, covering coughs and sneezes, and washing hands often.
COVID-19 Vaccine Booster Shots

Everyone Ages 18 and Older Should Get a Booster Shot

NEW Everyone ages 18 and older should get a booster shot.

Everyone Ages 18 and Older Should Get a Booster Shot

**IF YOU RECEIVED**

Pfizer-BioNTech or Moderna

**Who should get a booster:**
Everyone 18 years or older

**When to get a booster:**
At least 6 months after completing your primary COVID-19 vaccination series.

**Which booster should you get?**
[Link to Any of the COVID-19 vaccines authorized in the United States.]

**IF YOU RECEIVED**

Johnson & Johnson’s Janssen

**Who should get a booster:**
Everyone 18 years or older

**When to get a booster:**
At least 2 months after completing your primary COVID-19 vaccination.

**Which booster should you get?**
[Link to Any of the COVID-19 vaccines authorized in the United States.]
CIC Practice Question

Interpret the following Hepatitis B serology result:

- HBsAg - positive
- Anti-HBc - positive
- Anti-Hbs - negative
- IgM anti-HBc - positive

a. Immune due to Hepatitis B vaccination
b. Susceptible
c. Acutely infected
d. Chronically infected
Interpret the following Hepatitis B serology result:

- HBsAg - positive
- Anti-HBc - positive
- Anti-Hbs - negative
- IgM anti-HBc - positive

a. Immune due to Hepatitis B Vaccination
b. Susceptible
c. Acutely Infected
d. Chronically Infected

Rationale:

HBsAg (Hepatitis B Surface antigen can be detected during acute or chronic infection) indicates person is infectious.

Anti-HBc (Hepatitis B core antibody appears at the onset of symptoms in acute hepatitis B and remains for life.) indicates previous or ongoing infection in undefined timeframe.

Anti-HBs (Heptatis B surface antibody) indicates recovery and immunity from Hepatitis B infection.

IgM anti-HBc (IgM antibody to Hepatitis B core antigen) indicates recent infection within six months; presence indicates acute infection.

Domain: Identification of Infectious Disease Processes

CDC Serological Chart
NHSN Updates – New Quick Learns Available

Quick Learn #1
• Need guidance with completing the FacWideIn Denominator Data Entry form in the MDRO/CDI Module? Watch this video for step-by-step instructions on how to locate and use the form in NHSN.
  • How to Complete FacWideIn Denominator Data Entry in the MDRO/CDI Module - clarifies how to accurately complete the updated MDRO and CDI Monthly Denominator form for both internal and CMS inpatient quality reporting purposes.
  • Click MDRO & CDI Training | PSC | NHSN | CDC to view our short video and learn how to locate the MDRO/CDI Denominator form in the NHSN application and calculate the FacWideIn data to enter on the form.
  • You can locate the video under Patient Safety Component Training in the MDRO & CDI Quick Learns section.

Quick Learn #2
• Ever wondered how to make custom fields and use them to conduct your data analysis? Then this is the training for you!
  • Add and Analyze Custom Fields on Procedure Records for PSC and OPC in NHSN – provides the steps to add and analyze custom fields on the Procedure form in NHSN. Click Outpatient Procedure Component Training | NHSN | CDC to view and learn how to create custom fields in the NHSN application and conduct analysis using the custom fields you create.

Contact NHSNTrain@cdc.gov with any questions regarding NHSN training activities.
Resources

• **Alliant Quality HQIC Website**
  - HQIC IP Chats | Nov. 17, 2021 - NQIIC (allianthealth.org)
  - HQIC IP Chats | Nov. 10, 2021 - NQIIC (allianthealth.org)
  - HQIC IP Chats | 11.3.21 - NQIIC (allianthealth.org)

• **Infection Prevention (HQIC) Archives - NQIIC (alliantquality.org)**
## HQIC Goals

<table>
<thead>
<tr>
<th>Behavioral Health Outcomes &amp; Opioid Misuse</th>
<th>Patient Safety</th>
<th>Quality of Care Transitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Promote opioid best practices</td>
<td>✓ Reduce risky medication combinations</td>
<td>✓ Convene community coalitions</td>
</tr>
<tr>
<td>✓ Decrease high dose opioid prescribing and opioid adverse events in all settings</td>
<td>✓ Reduce adverse drug events</td>
<td>✓ Identify and promote optical care for super utilizers</td>
</tr>
<tr>
<td>✓ Increase access to behavioral health services</td>
<td>✓ Reduce C. diff in all settings</td>
<td>✓ Reduce community-based adverse drug events</td>
</tr>
</tbody>
</table>
Thank you for joining us!
How did we do today?