

HQIC 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!



COLLABORATORS:

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

Hospital Quality Improvement

Welcome from all of us!













Facilitator



Amy Ward, MS, BSN, RN, CIC, FAPIC

Patient Safety Manager

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, run and be outdoors!

Contact: <u>Amy.Ward@Allianthealth.org</u>

Format for IP Chats

- Open forum networking events to:
 - Build knowledge
 - Share experience
 - Provide IP support

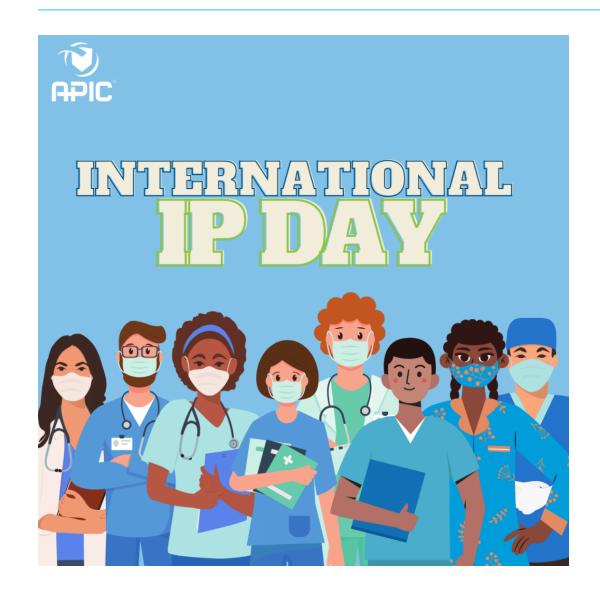


Hello, My Name Is...

- Drop into the chat box
 - Name
 - State
 - Years in IP
 - If you could stay the same age forever, what age would that be and why?



International IP Day – April 7, 2023





World Hand Hygiene Day Is Coming Up!

May 5 is World Hand Hygiene Day!

CDC resources include social media graphics and press kits - Clean Hands Count Campaign | Hand Hygiene | CDC

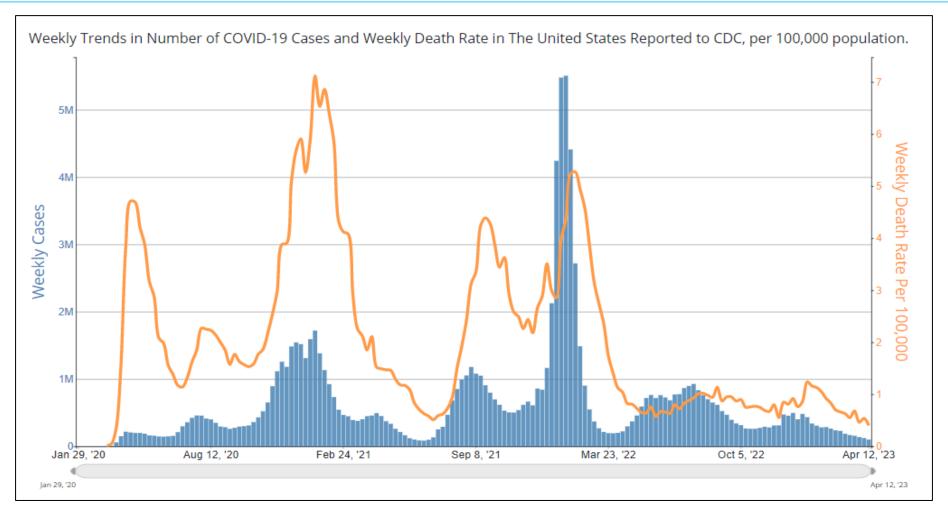




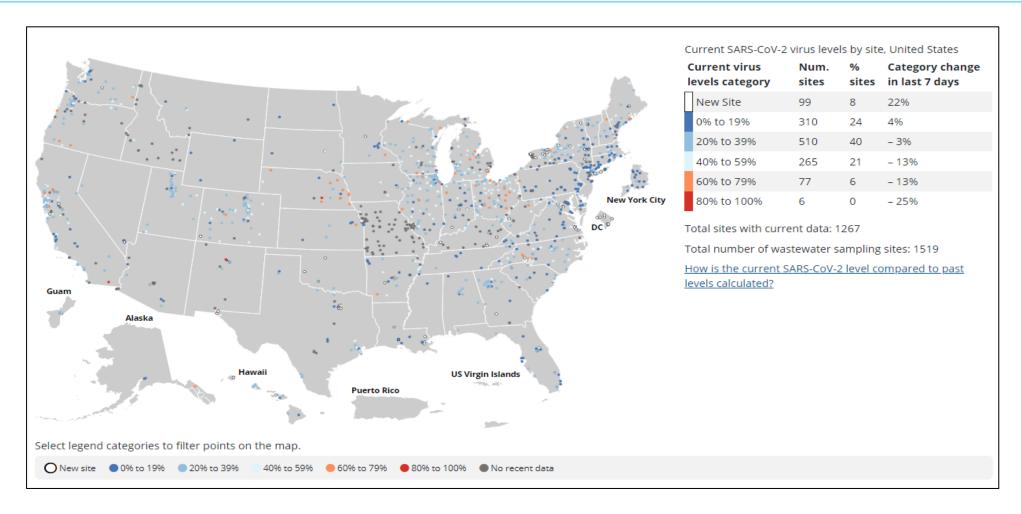
COVID-19 Updates



COVID-19 Cases and Deaths



Wastewater COVID-19 Surveillance





Weighted and Nowcast Estimates in United States for Weeks of 1/8/2023 -Nowcast Estimates in United States 4/15/2023 for 4/9/2023 - 4/15/2023 Hover over (or tap in mobile) any lineage of interest to see the amount of uncertainty in that lineage's estimate. USA Nowcast: Model-based WHO label Lineage # US Class %Total 95%PI Weighted Estimates: Variant proportions based on reported genomic sequencing projected estimates results of variant Omicron XBB.1.5 VOC: 78.0% 73.6-81.8% proportions XBB.1.16 VOC: 7.2% 4.5-11.3% 100% XBB.1.9.1 VOC: 6.5% 4.8-8.8% Ğ. XBB.1.9.2 VOC 2.5% 1.5-4.1% BQ.1.1 BQ.1.1 ä XBB.1.5.1 VOC 2.4% 1.8-3.1% Among Infections FD.2 VOC: 1.7% 0.9-3.2% BQ.1.1 BQ.1.1 BQ.1.1 VOC: 1.0% 0.6-1.5% XBB.1.5 CH.1.1 0.2-0.5% VOC: 0.3% BQ.1.1 XBB.1.5 XBB.1.5 XBB VOC: 0.3% 0.2-0.3% XBB.1.5 XBB.1.5 XBB.15 Viral Lineages 0.1-0.2% XBB.1.5 BQ.1 VOC: 0.1% XBB.1.5 XBB.1.5 BN.1 VOC 0.0% 0.0-0.0% XBB.1.5 XBB.1.5 BA.5 VOC: 0.0% 0.0-0.0% XBB.1.5 BA.2.75 VOC: 0.0% 0.0-0.0% XBB.1.5 20% BF.7 VOC: 0.0% 0.0-0.0% BA.2 VOC: 0.0% 0.0-0.0% BA.1.1 0.0-0.0% VOC: 0.0%

VOC: 0.0%

VOC 0.0%

VOC: 0.0%

VOC: 0.0%

0.1%

0.0-0.0%

0.0-0.0%

0.0-0.0%

0.0-0.1%

BA.5.2.6

B.1.1.529

BF.11

BA.4.6

Other*

Selected Week

Other

2,4733

2711723

2/18/23

2725723

3473

Collection date, week ending

3/11/23

3/18/23

3/25/23

12123

128/23

Public Health Emergency (PHE)

- Initially declared in January 2020
- Ends May 11, 2023
- Coverage, costs, and payment for COVID-19 testing, treatments, and vaccines
- Medicaid coverage and federal match rates
- Telehealth (extended by the Consolidated Appropriations Act until the end of 2024)

National Emergency Declaration

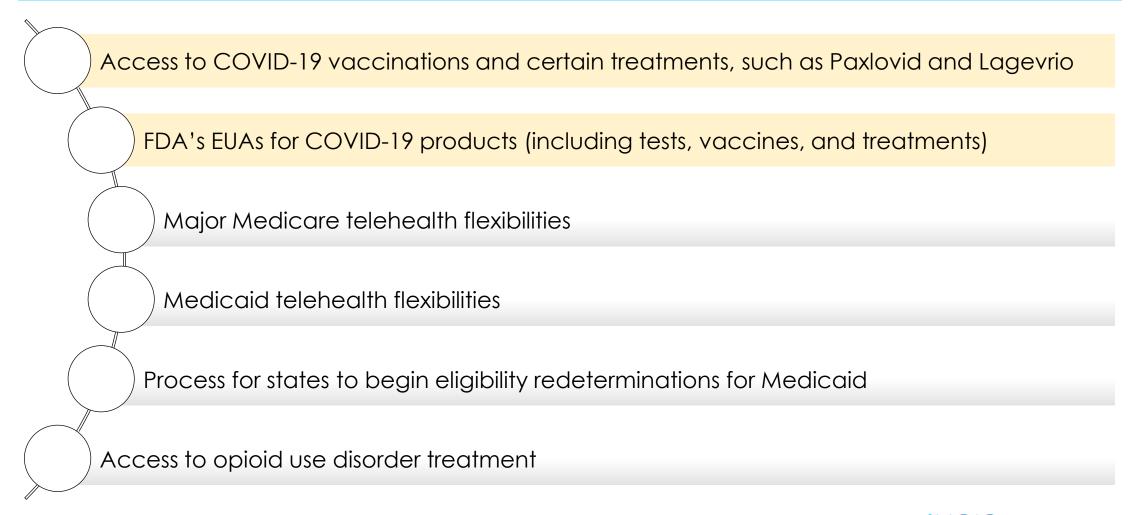
- Issued in March 2020
- Ends May 11, 2023
- Private insurance coverage flexibilities

Emergency Declaration by Health & Human Services

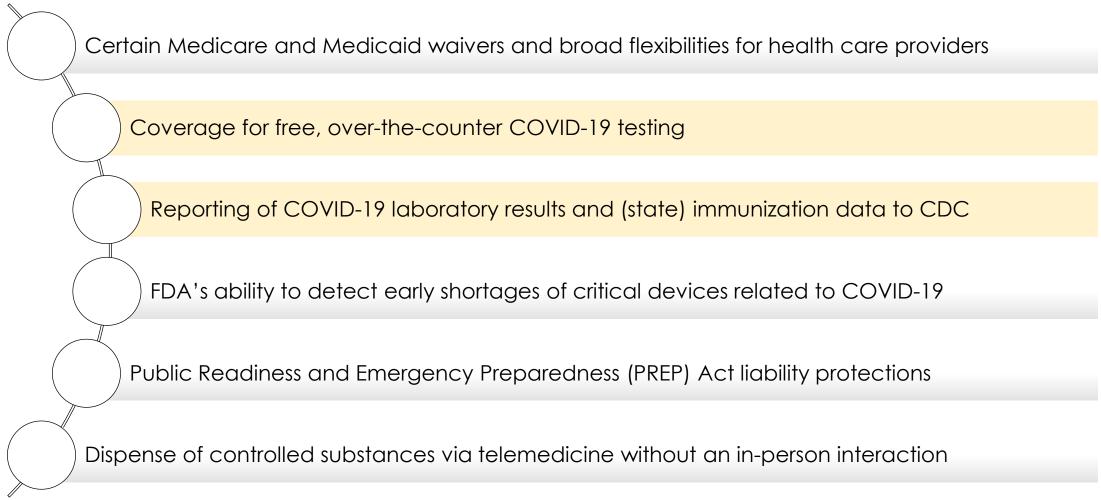
- Initially declared in February 2020
- Allows EUA for medical interventions (vaccines, drugs)
- Stays in effect until terminated by the HHS Secretary; no current end date



COVID-19 Public Health Emergency (PHE): What is NOT Affected



COVID-19 Public Health Emergency (PHE): What IS Affected



What Changes Can We Expect With Data From CDC?

The CDC COVID-19 data tracker was launched in 2020 to create a consolidated, easy to use, data source for state and local public health officials

Over the past three years, the tracker has grown to include county, state, national and global data in more than 70 webpages of COVID-19 pandemic-related information

As the PHE ends, CDC will be transitioning to a more sustainable format for COVID-19 surveillance.

CDC will continue to utilize all available resources to track COVID-19 and monitor long term effects on the US and globally.

CDC will provide a more comprehensive summary of changes on the May 12 weekly review.

— COVID DATA TRACKER WEEKLY REVIEW

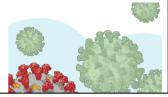
<u>Print</u>

Interpretive Summary for April 14, 2023

Subscribe to the Weekly Review

Moving Forward with COVID-19 Data

CDC launched <u>COVID Data Tracker</u> in 2020 to provide state and local public health officials and communities with the COVID-19 data they need in one consolidated, easy-to-use location. Over the past three years, COVID Data Tracker has grown to incorporate county, state, national, and global data streams into more than 70 webpages of key pandemic-related information.







NHSN Data Reporting Changes

NHSN sent all users an email on 4-24-2023 regarding the end of the PHE

- COVID-19 hospital data reporting changes
 - Hospitals will continue to report on a reduced number of data elements after the conclusion of the PHE, through April 2024
 - Data elements will be reduced from 62 to 44
 - Reporting cadence will change from daily to weekly with values reported for each day of the previous week (Sunday-Saturday) with deadline of Tuesday
- PHE Ends on May 11, 2023, and NHSN will implement these changes in the weeks that follow.



COVID-19 Hospital Data Reporting Changes

Fields that will no longer be required and will be made optional:

- 10a: Total hospitalized pediatric suspected or laboratory-confirmed COVID-19 patients
- 11: Hospitalized and ventilated COVID-19 patients Patients currently hospitalized in an adult, pediatric, or neonatal inpatient bed who have suspected or laboratory-confirmed COVID-19 and are on a mechanical ventilator
- 12a: Total ICU adult suspected or laboratory-confirmed COVID-19 patients
- 13: Hospital onset Total current inpatients with the onset of suspected or laboratory-confirmed COVID-19 fourteen or more days after admission for a condition other than COVID-19
- 17b: Previous day's adult admissions with suspected COVID-19 and breakdown by age bracket:
 - 18-19 20-29 30-39 40-49 50-59 60-69 70-79 80+ •Unknown
- 18b: Previous day's pediatric admissions with suspected COVID-19
- 19: Previous day total ED visits
- 20: Previous day total COVID-19-related ED visits

COVID-19 Guidance for Hospital Reporting and FAQs for Hospitals, Hospital Laboratory, and Acute Care Facility Data Reporting (hhs.gov)



CMS Updates



CMS Proposed Rule FY 2024

Comment period open through June 9

Modification of COVID 19 Vaccination for HCW reporting would change to up-to-date terminology to keep measure relevant to any future changes that may occur

HAC Reduction Program to include validation reconsideration process for hospitals that failed to meet data validation requirements (affecting 2022 discharges for FY 2025)

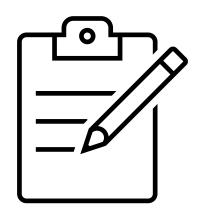
Modify the targeting criteria for validation to include hospitals who received extraordinary circumstances exception during data periods validated beginning with CY 2024 discharges for FY2025

VBP to adopt severe sepsis and septic shock management bundle measure into safety domain beginning with FY 2026



NHSN Data Submission Deadline – May 15, 2023

- Quarter 4 2022 data due to NHSN for CMS QRP by May 15, 2023
 - CAUTI and CLABSI ICU and Medical, surgical, and Med/Surg wards
 - Inpatient COLO and HYST
 - MRSA Bacteremia and C. diff Lab FacWideln and ED and 24-hour observation locations
 - COVID-19 Vaccination among Healthcare Personnel (HCP)
- 2022-2023 HCP Influenza Vaccination Summary
- Alliant's NHSN Survival Guide includes checklists and best practices to ensure data are accurate and of high quality



CDC Issues HAN for Marburg Virus



- Health Alert Network (HAN) -00489 | Marburg Virus Disease Outbreaks in Equatorial Guinea and Tanzania (cdc.gov)
- Equatorial Guinea 14 labconfirmed cases, 71% mortality
- Tanzania 8 lab-confirmed cases, 62.5% mortality

- Recommendations for clinicians:
 - Systematically assess patients for possibility of viral hemorrhagic fever (MVD, EVD, etc.)
 - Develop triage and evaluation process, including travel history
 - Do no defer routine lab testing or other patient care activities due to travel to equatorial Guinea or Tanzania



We want to know....

What can we do to support you?

Drop into chat:

More sessions like this

Specific HAI focused events

More networking

Mentoring

1:1 coaching

Email support

Other



Save the Date

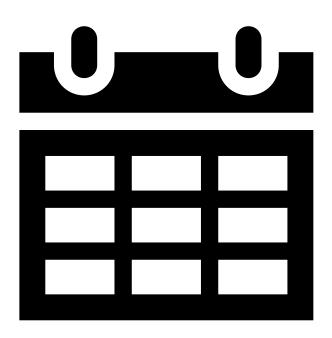
• IP Chats will be held quarterly. Register now for upcoming sessions!

July 26, 2023

October 25, 2023

Register here:

https://allianthealthgroup.webex.com/webappn g/sites/allianthealthgroup/webinar/webinarSeries/ register/a035bbb9d9c0486480baa6944052453c





HQIC Goals



Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optical care for super utilizers
- ✓ Reduce community-based adverse drug events





COLLABORATORS:

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Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza

Hospital Quality Improvement



@alliantaio

Thank you for joining us! How did we do today?





Alliant Health Solutions



@AlliantQIO

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