

August Shop Talk

Quarter 3 Reporting Updates

Presented by the NHSN Team

Welcome!

Chat to Technical Support if you need assistance

Presented by:

Lori Haas, RN MSN
Health Scientist CDC

August 2023

Audrey Robnett-Brown, MSN, RN
Nurse Consultant, CDC

Donald Chitanda, MPH, CIC

INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. Over the past several years, he worked as an infection preventionist at the hospital- and system-level, where he was part of a task force to ensure the safety of caregivers and patients during the ongoing COVID-19 pandemic. In addition, he was a part of and led several projects to reduce hospital-acquired infections utilizing Lean Six Sigma methodologies. He is also trained in ensuring ongoing facility survey readiness for regulatory agencies such as the CMS and The Joint Commission.

Donald enjoys spending time with family and doing outdoor activities.

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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 and assisting them in reducing healthcare-associated infections across the continuum of care.

Amy enjoys spending time with her family. She loves all the time she can get outdoors camping, bicycling and running.

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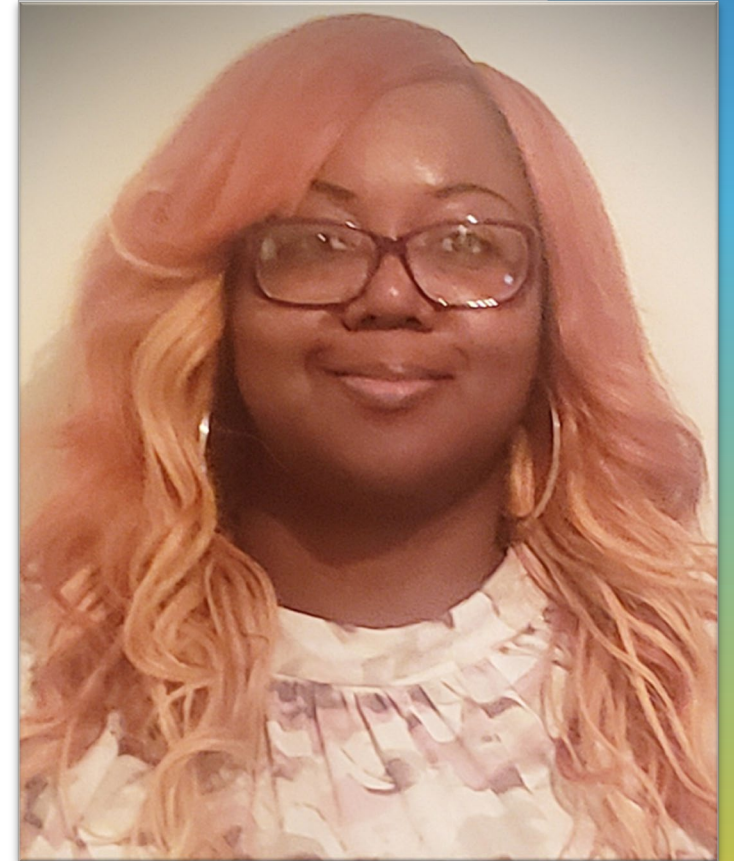
Paula St. Hill, MPH, A-IPC

INFECTION PREVENTION TECHNICAL ADVISOR

Paula is a doctoral student with a diverse background in public health, infection prevention, epidemiology, and microbiology. She has over 10 years of health care experience and enjoys public health and identifying ways to improve health outcomes, specifically those related to healthcare-associated infections.

Paula enjoys spending time with her friends and family.

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Erica Umeakunne, MSN, MPH, APRN, CIC

INFECTION PREVENTION SPECIALIST

Erica Umeakunne is an adult-gerontology nurse practitioner and infection preventionist with experience in primary care, critical care, health care administration and public health.

She was previously the interim hospital epidemiology director for a large health care system in Atlanta and a nurse consultant in the Centers for Disease Control and Prevention's (CDC) Division of Healthcare Quality Promotion. While at the CDC, she served as an infection prevention and control (IPC) subject matter expert for domestic and international IPC initiatives and emergency responses, including Ebola outbreaks and, most recently, the COVID-19 pandemic.

Erica enjoys reading, traveling, family time and outdoor activities.

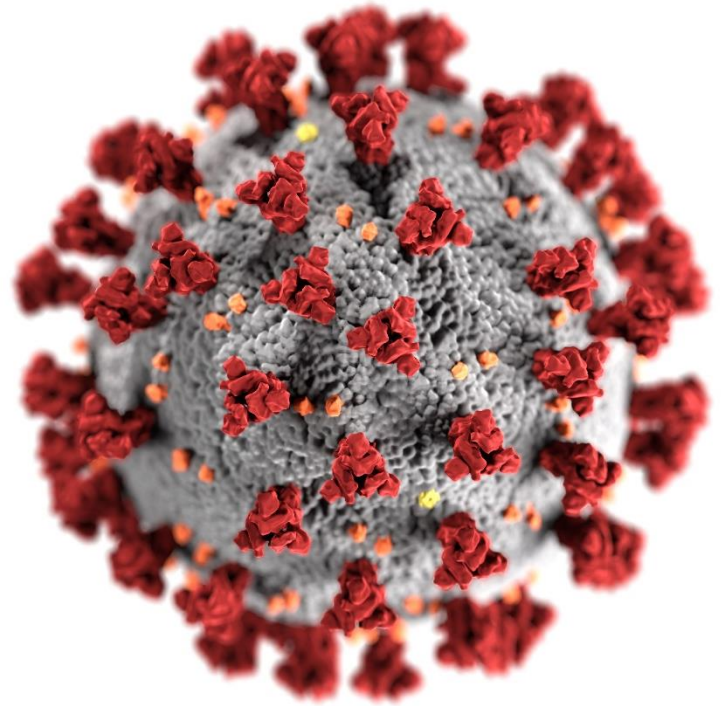
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Updates to Weekly COVID-19 Vaccination Data Reporting: Long-term Care Facilities

Division of Healthcare Quality Promotion
Centers for Disease Control and Prevention (CDC) COVID-19

August 2023



cdc.gov/coronavirus

CMS Reporting Requirements for Long-term care facilities

- **May 11, 2023 - End of COVID-19 Public Health Emergency**
 - Long-term care facilities need to continue to report to the Healthcare Personnel and Resident Weekly LTCF **COVID-19 Vaccination Modules** of the LTCF component on a weekly basis
- **Reminder: Facilities can contact CMS with questions about reporting requirements and quality reporting:**
 - Long-term care facilities weekly reporting requirement questions: DNH_TriageTeam@cms.hhs.gov
 - Skilled nursing facilities quality reporting program questions: SNFQualityQuestions@cms.hhs.gov



Objectives

■ Simplification of the forms!



- Highlight changes to the weekly COVID-19 vaccination reporting forms for LTCF Residents, and Healthcare Personnel

■ Review changes and updates from June 2023:

- Review form changes
- Review up to date definition changes
- Review example scenarios
- Discuss frequently asked questions

Note: These slides are posted to the NHSN COVID-19 Vaccination website



Background for Form Changes

- In April of 2023 [Food and Drug Administration \(FDA\)](#) and the [CDC](#) announced changes to its Emergency Use Authorization for COVID-19 vaccines.
- As of **June 26, 2023** (Q3 2023), residents and healthcare personnel are considered up to date with their COVID-19 vaccinations if they have **received an updated (bivalent) vaccine(s)**.



Form Simplification

Up to Date definition change as of June 26, 2023



Changes to Weekly COVID-19 Vaccination: Resident Form

| Question | LTCF Resident Form |
|--|--|
| Question 1: Number of residents staying in this facility for at least 1 day during the week of data collection | No change |
| Question 2.1: Only 1 dose of a two-dose primary COVID-19 vaccine series | Remove |
| Question 2.2: Any completed primary COVID-19 vaccine series | Remove |
| Question 3.1: Medical contraindication to COVID-19 vaccine | No change (new variable/definition) |
| Question 3.2: Offered but declined COVID-19 vaccine | No change (new variable/definition) |
| Question 3.3: Unknown COVID-19 vaccination status | No change (new variable/definition) |
| Question 4 Cumulative number of residents with complete primary series vaccine in Question #2 who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021 | Remove |
| Question 4.1 *Cumulative number of residents in Question #4 who have received only one booster dose of COVID-19 vaccine since August 2021 | Remove |
| Question 4.2 4.2 Cumulative number of residents in Question #4 who received two or more booster doses of COVID-19 vaccine, and the most recent dose was received since March 29, <u>2022</u> | Remove |
| Question 5: Individuals in question #2 who are up to date with COVID-19 vaccines | Move & Revise (Will be # Q2) |



Current Weekly COVID-19 Vaccination: Resident Form

Removed

- Primary vaccine series and booster dose questions on question 2 and 4

Kept

- Question 1
- Question 3 – 3.3 (modified definition)
- Question 5
- (moving to question 2)

| | | |
|------------------------|---|--|
| Primary Vaccine Series | 1. *Number of residents staying in this facility for at least 1 day during the week of data collection | |
| | 2. * Cumulative number of residents in Question #1 who have received primary series COVID-19 vaccine in this facility or elsewhere since December 2020: | |
| | 2.1. * Number dose of a two-dose Primary COVID-19 vaccine series | |
| | 2.2. *Any completed Primary COVID-19 vaccine series | |
| | 3. *Cumulative number of residents in Question #1 with other conditions: | |
| | 3.1. *Medical contraindication to COVID-19 vaccine | |
| | 3.2. *Offered but declined COVID-19 vaccine | |
| | 3.3. *Unknown COVID-19 vaccination status | |
| Boosters | 4. *Cumulative number of residents with complete primary series vaccine in Question #2 who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021 | |
| | 4.1. *Cumulative number of residents in Question #4 who have received only one booster dose of COVID-19 vaccine since August 2021 | |
| | 4.2. *Cumulative number of residents in Question #4 who received two or more booster doses of COVID-19 vaccine, and the most recent dose was received since March 29, 2022 | |
| Up to Date | Question 5 asks about individuals who are up to date. Please review the current definition of up to date: https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-May2022-508.pdf | |
| | 5. *Cumulative number of residents in question #2 who are <u>up to date</u> with COVID-19 vaccines | |



Weekly COVID-19 Vaccination: Revised Resident Form

New Version: After removing Primary Series, and Boosters

| | |
|---|--|
| 1. *Number of residents staying in this facility for at least 1 day during the week of data collection | |
| 2. *Cumulative number of residents in Question #1 who are <u>up to date</u> with COVID-19 vaccines. | |
| Please review the current definition of up to date: Key Terms and Up to Date Vaccination | |
| 3. *Cumulative number of residents in Question #1 with other conditions: | |
| 3.1. *Medical contraindication to COVID-19 vaccine | |
| 3.2. *Offered but declined COVID-19 vaccine | |
| 3.3. *Unknown/other COVID-19 vaccination status | |

Weekly COVID-19 Vaccination: Revised Resident Form (Cont.)

Among residents who are NOT up to date:

- Question 3.1 *Medical contraindication to COVID-19 vaccine
- Question 3.2 *Offered but declined COVID-19 vaccine
- Question 3.3 *Unknown/other COVID-19 vaccination status



Changes to Weekly COVID-19 Vaccination: HCP Form

| Question | HCP Form |
|--|-----------|
| Question 1: Individuals eligible to work at the facility | No change |
| Question 2.1: Only 1 dose of a two-dose primary COVID-19 vaccine series 2.2 | Remove |
| Question 2.2: Any completed primary COVID-19 vaccine series | No change |
| Question 3.1: Medical contraindication to COVID-19 vaccine | No change |
| Question 3.2: Offered but declined COVID-19 vaccine | No change |
| Question 3.3: Unknown COVID-19 vaccination status | No change |
| Question 4: Individuals with a complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021 | Remove |
| Question 5: Individuals in question #2 who are up to date with COVID-19 vaccines | No change |

Current Weekly COVID-19 Vaccination: HCP Form

Removed

- Questions 2.1, 2.2 and 5

Moved

- Up to date from question 5 to question 4

Kept

- Questions 1, 2, and 3 - 3.3

Updated Foot notes

| | | | | | | | |
|------------------------|---|--|--|--|--|--|--|
| | 1. Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection | | | | | | |
| Primary Vaccine Series | 2. Cumulative number of HCP in Question #1 who have received primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020: | | | | | | |
| | 2.1. Use of a two-dose primary COVID-19 vaccine series | | | | | | |
| | 2.2. *Any completed Primary COVID-19 vaccine series | | | | | | |
| | 3. Cumulative number of HCP in Question #1 with other conditions: | | | | | | |
| | 3.1. *Medical contraindication to COVID-19 vaccine | | | | | | |
| | 3.2. *Offered but declined COVID-19 vaccine | | | | | | |
| | 3.3. *Unknown COVID-19 vaccination status | | | | | | |
| Boosters | 4. Cumulative number of HCP with complete primary series vaccine in Question #2 who have received any booster vaccine(s) or additional dose(s) of COVID-19 vaccine since August 2021 | | | | | | |
| Up to Date | Question 5 asks about individuals who are up to date. Please review the current definition of up to date: https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-May2022-508.pdf | | | | | | |
| | 5. * Cumulative number of HCP in question #2 who are <u>up to date</u> with COVID-19 vaccines | | | | | | |



Weekly COVID-19 Vaccination: Revised HCP Form

New Version:

with up to date
changes and
reduction of
questions

| Cumulative Vaccination Coverage | | | | | | |
|---|---------------------------------------|----------------------|---|--|---|--|
| | Healthcare Personnel (HCP) Categories | | | | | |
| | All Core HCP ^a | All HCP ^b | Employee HCP *Employees (staff on facility payroll) ^c | Non-Employee HCP | | |
| | | | | *Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d | *Adult students/ trainees & volunteers ^e | *Other Contract Personnel ^f |
| 1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection | | | | | | |
| 2. *Cumulative number of HCP in Question #1 who have received <u>complete primary series</u> ^g COVID-19 vaccine(s) at this facility or elsewhere since December 2020 | | | | | | |
| 3. *Cumulative number of HCP in Question #1 with other conditions: | | | | | | |
| 3.1. *Medical contraindication to COVID-19 vaccine | | | | | | |
| 3.2. *Offered but declined COVID-19 vaccine | | | | | | |
| 3.3. *Unknown/other COVID-19 vaccination status | | | | | | |
| 4. *Cumulative number of HCP in question #1 who are <u>up to date</u> with COVID-19 vaccines. Please review the current definition of up to date: Key Terms and Up to Date Vaccination | | | | | | |



Weekly COVID-19 Vaccination: Revised HCP Form

Updated primary series definition

- a. Sum of Employees (staff on facility payroll), Licensed independent practitioners: Physicians, advanced practice nurses & physician assistants, and Adult students/trainees & volunteers.
- b. Sum of Employees (staff on facility payroll), Licensed independent practitioners: Physicians, advanced practice nurses & physician assistants, Adult students/trainees & volunteers, and Other contract personnel.
- c. All persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.
- d. Physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category.
- e. Adult students/trainees and volunteers: medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older that are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact.
- f. Persons providing care, treatment, or services at the facility through a contract who do not fall into any other HCP (denominator) categories.
- g. Complete primary series as of June 26, 2023 is defined as receiving a 2-dose series of a monovalent COVID-19 vaccine OR a single dose of Janssen OR a single dose of bivalent vaccine.

Up to Date Definition Change (Quarter 3 - beginning June 26, 2023)



Definition for Up to Date COVID-19 Vaccination Status

- In April of 2023 [Food and Drug Administration \(FDA\)](#) and the [CDC](#) announced changes to its Emergency Use Authorization for COVID-19 vaccines.
- As of **June 26, 2023** (Q3 2023), residents and healthcare personnel are considered up to date with their COVID-19 vaccinations if they have **received an updated (bivalent) vaccine(s)**.
- An individual is considered up to date once they received 1 updated bivalent Pfizer-BioNTech or bivalent Moderna COVID-19 vaccine. This up to date definition is the same for all individuals, regardless of age and immunocompromised status.



Weekly COVID-19 Vaccination Form: Up to Date

- **Resident Form**: Question 2 pertains to the Up to Date definition

2. *Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines.

Please review the current definition of up to date: [Key Terms and Up to Date Vaccination](#)

- **HCP Form**: Question 4 pertains to the Up to Date definition

4.*Cumulative number of HCP in question #1 who are up to date with COVID-19 vaccines.

Please review the current definition of up to date:
[Key Terms and Up to Date Vaccination](#)

Note: Please refer to the CDC NHSN guidance document that will be posted to the NHSN website with the current definition of up-to-date vaccination. Users should review this document at least once per quarter to check for definition updates. [COVID-19 Vaccination Modules: Understanding Key Terms and Up to Date Vaccination](#)



Scenarios

**These scenarios apply to the Up to Date
definition change (beginning Quarter 3 - June
26, 2023)**



Weekly COVID-19 Vaccination: Revised Resident Form

New Version: After removing Primary Series, and Boosters

| | |
|---|--|
| 1. *Number of residents staying in this facility for at least 1 day during the week of data collection | |
| 2. *Cumulative number of residents in Question #1 who are <u>up to date</u> with COVID-19 vaccines. | |
| Please review the current definition of up to date: Key Terms and Up to Date Vaccination | |
| 3. *Cumulative number of residents in Question #1 with other conditions: | |
| 3.1. *Medical contraindication to COVID-19 vaccine | |
| 3.2. *Offered but declined COVID-19 vaccine | |
| 3.3. *Unknown/other COVID-19 vaccination status | |

Is this individual considered up to date with COVID-19 vaccines for Quarter 3, 2023?

Mary (40 years of age) is a nursing home **resident** who completed her primary COVID-19 vaccine series in May 2021, an original monovalent booster in October 2021, and an updated (bivalent) dose on November 3, 2022.

Answer:

Yes. Mary is considered up to date for weeks during quarter 3 of 2023 since she received an updated (bivalent) vaccine.

Where to document?

Question 2. *Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines.



Is this individual considered up to date with COVID-19 vaccines for Quarter 3, 2023? (Cont.)

Tom, a nursing home **resident**, completed his primary vaccine series on February 1, 2021 and received an original (monovalent) booster dose October 2021 but declined to receive an updated (bivalent) dose.

Answer:

No. Tom is not considered up to date with COVID-19 vaccines for weeks during quarter 3 of 2023 since he did not receive the most recent recommended updated bivalent dose.

Where to document?

3.2. *Offered but declined COVID-19 vaccine



Weekly COVID-19 Vaccination: Revised HCP Form

New Version:
with up to date
changes and
reduction of
questions

| Cumulative Vaccination Coverage | | | | | | |
|--|---------------------------------------|----------------------|---|--|--|--|
| | Healthcare Personnel (HCP) Categories | | | | | |
| | All Core HCP ^a | All HCP ^b | Employee HCP *Employees (staff on facility payroll) ^c | Non-Employee HCP | | |
| | | | | *Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d | *Adult students/trainees & volunteers ^e | *Other Contract Personnel ^f |
| 1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection | | | | | | |
| 2. *Cumulative number of HCP in Question #1 who have received <u>complete primary series</u> ^g COVID-19 vaccine(s) at this facility or elsewhere since December 2020 | | | | | | |
| 3. *Cumulative number of HCP in Question #1 with other conditions: | | | | | | |
| 3.1. *Medical contraindication to COVID-19 vaccine | | | | | | |
| 3.2. *Offered but declined COVID-19 vaccine | | | | | | |
| 3.3. *Unknown/other COVID-19 vaccination status | | | | | | |
| 4. *Cumulative number of HCP in question #1 who are <u>up to date</u> with COVID-19 vaccines. Please review the current definition of up to date: <u>Key Terms and Up to Date Vaccination</u> | | | | | | |



Is this individual considered up to date with COVID-19 vaccines for Quarter 3, 2023 ? (Cont.)

Healthcare worker Marc completed his primary vaccine series on January 18, 2021 and received an additional dose in June 2021 and an updated (bivalent) dose in October 2022.

Answer:

Yes. He is considered up to date with COVID-19 vaccines for weeks during quarter 3 of 2023 since he has received the most recent recommended updated bivalent dose.

Where to document?

2. *Cumulative number of HCP in Question #1 who have received complete primary series^g COVID-19 vaccine(s) at this facility or elsewhere since December 2020
- 4.*Cumulative number of HCP in question #1 who are up to date with COVID-19 vaccines.



Is this individual considered up to date with COVID-19 vaccines for Quarter 3, 2023? (Cont.)

Healthcare worker Jessica did not complete her primary vaccine series but chose to receive an updated (bivalent) dose in May of 2023.

Answer:

Yes. She is considered up to date with COVID-19 vaccines for weeks during quarter 3 of 2023 since she has received the most recent recommended updated bivalent dose.

Where to document?

- 2.*Cumulative number of HCP in Question #1 who have received complete primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020
- 4.*Cumulative number of HCP in question #1 who are up to date with COVID-19 vaccines.



Is this individual considered up to date with COVID-19 vaccines for Quarter 3, 2023? (Cont.)

Healthcare worker Harry received one dose of the primary vaccine in February of 2021 and then received an updated (bivalent) dose in June 2023.

Answer:

Yes. He is considered up to date with COVID-19 vaccines **for weeks during quarter 3 of 2023** since he has received the most recent recommended updated bivalent dose.

Where to document?

2.*Cumulative number of HCP in Question #1 who have received complete primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020

4.*Cumulative number of HCP in question #1 who are **up to date** with COVID-19 vaccines.



Frequently Asked Questions



Question #1

When did the form changes take effect?

- The new weekly summary form changes took effect on June 26, 2023 (Q3 2023),
- At this time, please use the new [up to date](#) definition when reporting COVID-19 vaccination data through NHSN



Question #2

Is a 66-year-old who has received a recommended bivalent dose in September of 2022, but no other bivalent doses, considered up to date?

- Yes, this individual is considered up to date

Note: Individuals who are 65 years of age and older or immunocompromised are eligible to receive additional COVID-19 vaccine doses because of the clinical benefit but it is not mandatory. Whether or not the individual receives additional updated bivalent doses, they are still up to date after receiving a single (updated) bivalent dose.



Question #3

Where do I document a Healthcare Worker who only received partial primary series (a single dose of original monovalent Moderna or Pfizer)?

- On the simplified HCP form, this Health Care Worker would be documented in Question #3.3: Unknown/other COVID-19 vaccination status
- Reminder: partial primary series (formerly question #2.2) was removed from the HCP form



Question #4

Why do I keep getting the Quality Alert? I am now unable to pass quality assurance.



- The alerts are not impacting a facility's ability to enter, update, save, or analyze data.
- Related to NHSN no longer collecting partial or complete primary series for residents

Summary of Updates and Changes

- **Simplification of the forms!**
 - Highlighted changes to the weekly COVID-19 vaccination reporting forms for LTCF residents, and Healthcare Personnel
- Reviewed recent changes and updates:
 - Up to date definition change for both residents and HCP
 - Example scenarios
 - Discussed frequently asked questions



Future changes

- **Quarter 4, 2023** (Beginning the week of September 25, 2023)
 - Possible change to up to date definition pending release of Fall 2023 COVID-19 vaccine
 - At the moment, there is no updated guidance or criteria
 - We will continue to communicate once the newest UTD definition is released
- Reminder to refer to the [CDC NHSN Key Terms and Up to Date Vaccination document](#)
 - Has the current definition of up to date
 - Should be reviewed once per quarter for definition updates



Resources



REMINDER

- **August 15, 2023** was the CMS deadline for the quality measure for quarterly reporting of COVID-19 vaccine coverage among Healthcare Personnel
- LTCF who are already reporting COVID-19 vaccination data on healthcare personnel and residents each week do not need to take any further action to meet the CMS requirement to report these data on a quarterly basis



Resource: The NHSN Website

- [Weekly HCP & Resident COVID-19 Vaccination | LTCF | NHSN | CDC](#)
 - Training Slides
 - Quick Reference Guides
 - FAQs
 - Data Collection Forms
 - .CSV
 - Person – Level Forms

Weekly HCP & Resident COVID-19 Vaccination

[Print](#)

Long-term care facilities can track weekly COVID-19 vaccination data for residents and healthcare personnel (HCP) through NHSN.

On This Page

[Protocol](#)

[Training](#)

[Data Collection Forms and Instructions](#)

[Weekly COVID-19 Vaccination Summary Data - CSV Data Import](#)

[Person-Level COVID-19 Vaccination Forms - Instructions and Guidance Documents](#)

[Person-Level COVID-19 Vaccination Data - CSV Data Import](#)

[Resources](#)

[Retired Quick Reference Guides](#)

[Nursing Home COVID-19 Vaccination Data Dashboard](#)

[FAQs on Reporting COVID-19 Vaccination Data](#)



Questions or Need Help?

E-mail user support at: NHSN@cdc.gov

Subject Line: Please write '*Weekly COVID-19 Vaccination*' along with your facility type for a faster reply

For more information, please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636) / TTY: 1-888-232-6348

E-mail: cdcinfo@cdc.gov Web: www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.



Thank You for Your Time!

Contact the Patient Safety Team

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Mark Your Calendar!



Shop Talk

3rd Thursdays at 2 p.m. ET

Registration Link

Visit our website for more info:

<https://quality.allianthealth.org/topic/shop-talks/>

Nursing Home and Partnership for Community Health: CMS 12th SOW GOALS



OPIOID UTILIZATION AND MISUSE

- Promote opioid best practices
-
- Reduce opioid adverse drug events in all settings



PATIENT SAFETY

- Reduce hospitalizations due to c. diff
-
- Reduce adverse drug events
-
- Reduce facility acquired infections



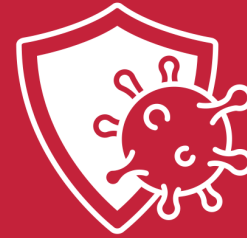
CHRONIC DISEASE SELF- MANAGEMENT

- Increase instances of adequately diagnosed and controlled hypertension
-
- Increase use of cardiac rehabilitation programs
-
- Reduce instances of uncontrolled diabetes
-
- Identify patients at high-risk for kidney disease and improve outcomes



CARE COORDINATION

- Convene community coalitions
-
- Reduce avoidable readmissions, admissions to hospitals and preventable emergency department visits
-
- Identify and promote optimal care for super utilizers



COVID-19

- Support nursing homes by establishing a safe visitor policy and cohort plan
-
- Provide virtual events to support infection control and prevention
-
- Support nursing homes and community coalitions with emergency preparedness plans



IMMUNIZATION

- Increase influenza, pneumococcal, and COVID-19 vaccination rates



TRAINING

- Encourage completion of infection control and prevention trainings by front line clinical and management staff

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