



Georgia Department of Public Health: GDPH ALF and PCH Office Hours July 2023



Meet the Team



Presenters:

Erica Umeakunne, MSN, MPH, APRN, CIC Infection Prevention Specialist Alliant Health Solutions

Amy Ward, MS, BSN, RN, CIC, FAPIC
Patient Safety Manager
Alliant Health Solutions



Erica Umeakunne, MSN, MPH, APRN, CIC

Infection Prevention Specialist

Alliant Health Solutions

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 Center 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.

Contact: Erica.Umeakunne@allianthealth.org



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 and being outdoors camping, bicycling and running.

Contact: Amy.Ward@AlliantHealth.org





Learning Objectives

- Learners will be able to understand COVID-19 data and use it to inform their IP practice.
- Learners will be able to utilize the APIC guide to long-term care as a reference for policies, procedures and the IP plan.
- Learners will utilize the resources provided regularly in their IP practice.



Although COVID-19 cases and associated hospitalizations have decreased in recent months, COVID-19 remains an ongoing public health challenge

Updated public health tracking* will keep you informed about COVID-19

Emergency department visits



Genomic sequencing





Check COVID.cdc.gov to know when to take action

"To account for changes in available data after the end of the U.S. Public Health Emergency declaration

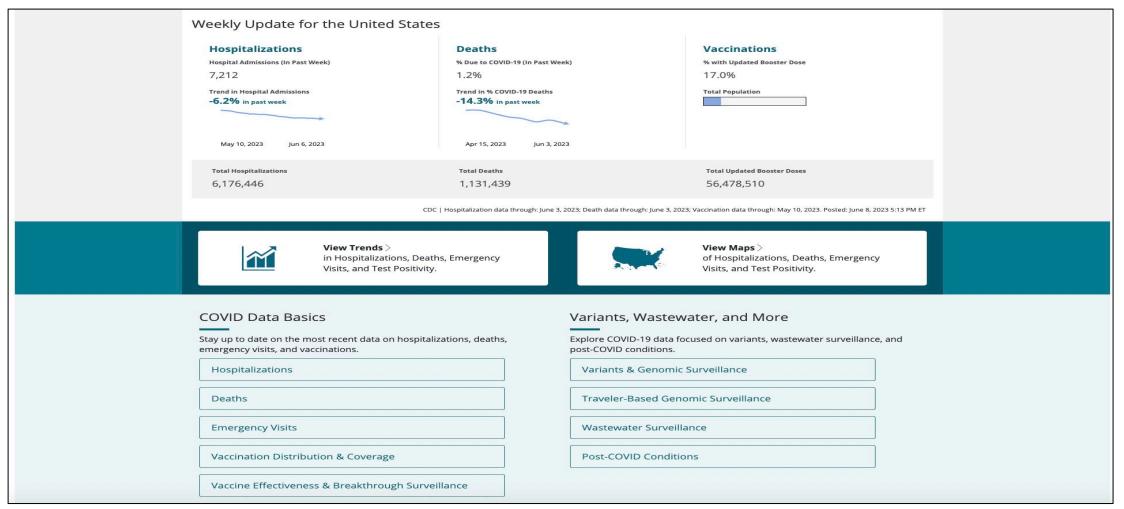
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MAY 5, 2023





CDC COVID-19 Data Tracker





COVID-19 hospital admissions levels in U.S. by county Based on new COVID-19 hospital admissions per 100,000 population ≥ 20.0 0.03% -0.09% 10.0 - 19.9 0.09% -0.09% <10.0 3215 99.88% 0.09% Time Period: New COVID-19 hospital admissions per 100,000 population (7-day total) are calculated using data from the MMWR week (Sun-Sat) ending July 8, 2023. Reported COVID-19 New Hospital Admissions Rate per 100,000 Population in the Past Week, by County - United States Territories

United States COVID-19 Hospitalizations, Deaths, Emergency Department (ED) Visits, and Test Positivity by Geographic Area

Maps, charts, and data provided by CDC, updates weekly for the previous MMWR week (Sunday-Saturday) on Thursdays (Deaths, Emergency Department Visit, Test Positivity) and weekly the following Mondays (Hospitalizations) by 8 pm ET^T

View Footnotes and Download Data

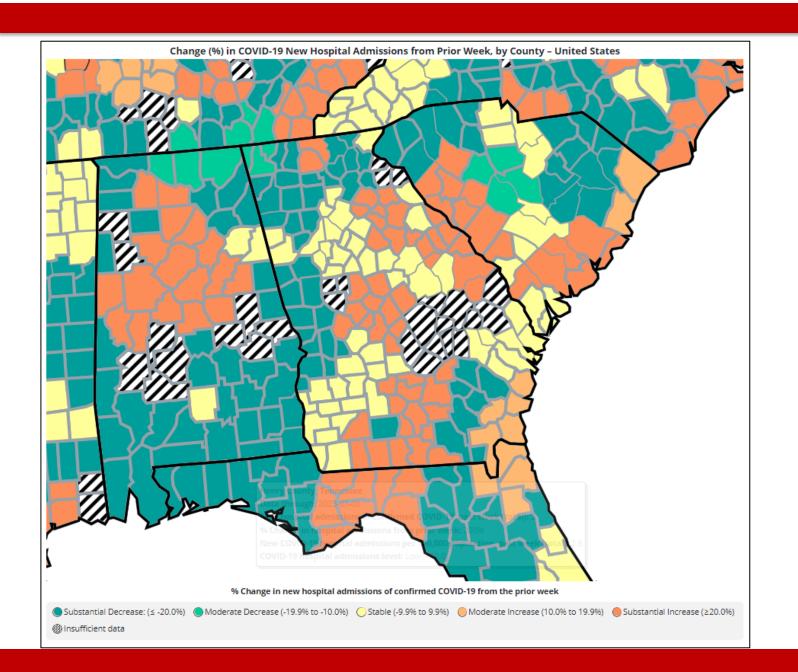
COVID-19 HOSPITAL ADMISSIONS (PAST WEEK)
6,228

% CHANGE IN COVID-19 HOSPITAL ADMISSIONS
(PAST WEEK)
1.88

https://covid.cdc.gov/covid-datatracker/#cases_new-admissionsrate-county

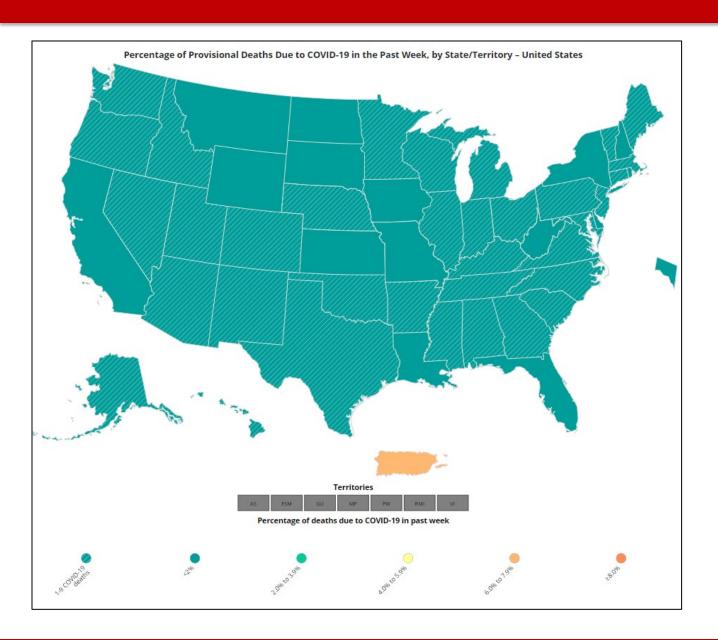
CDC | Data through: July 8, 2023. Posted: July 20, 2023





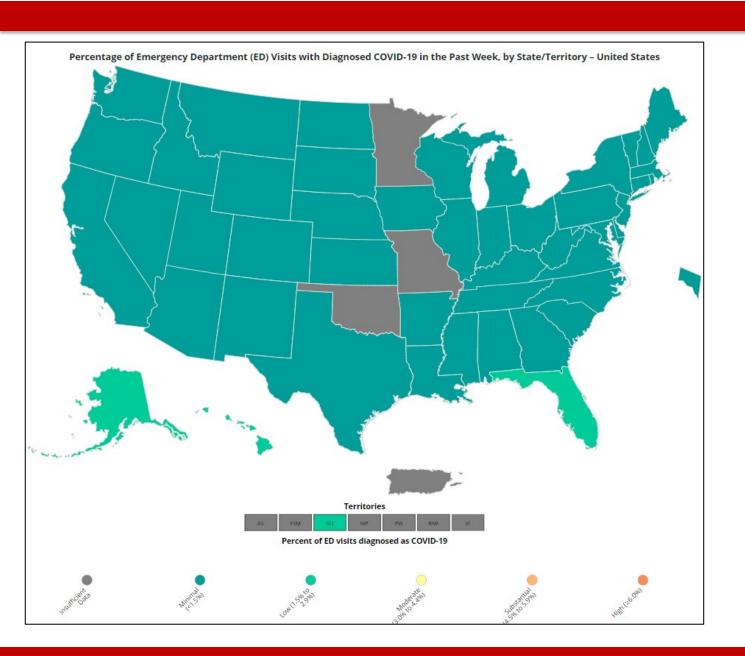
https://covid.cdc.gov/covid-datatracker/#cases_new-admissionspercent-change-county





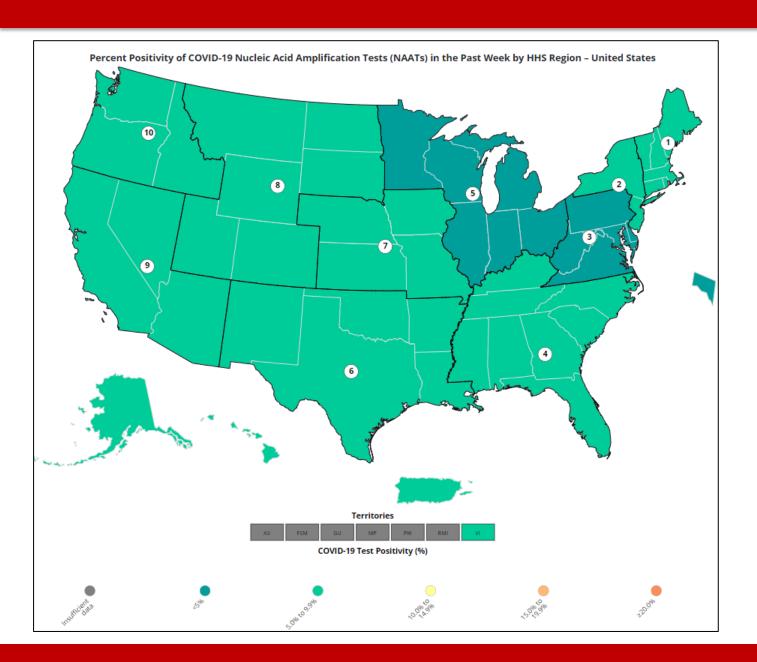
https://covid.cdc.gov/covid-data-tracker/#cases_percent-covid-deaths





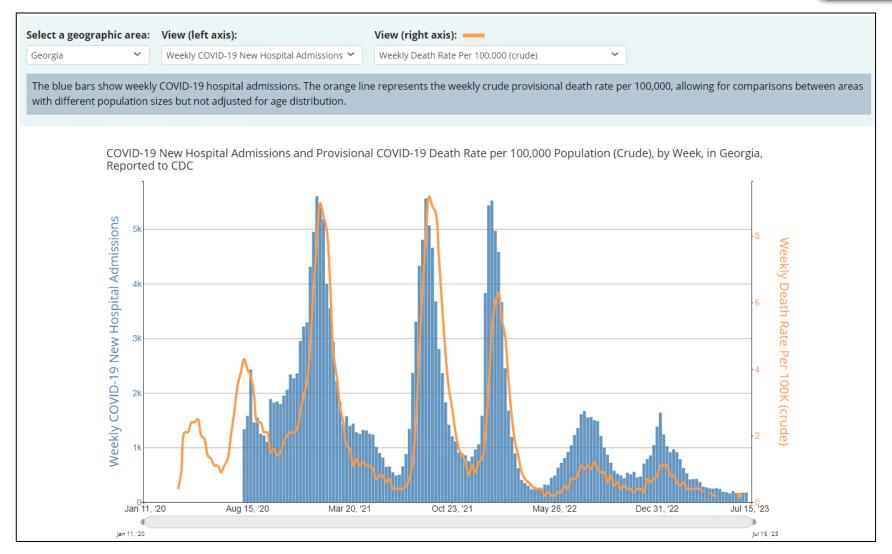
https://covid.cdc.gov/covid-datatracker/#cases percent-covid-ed





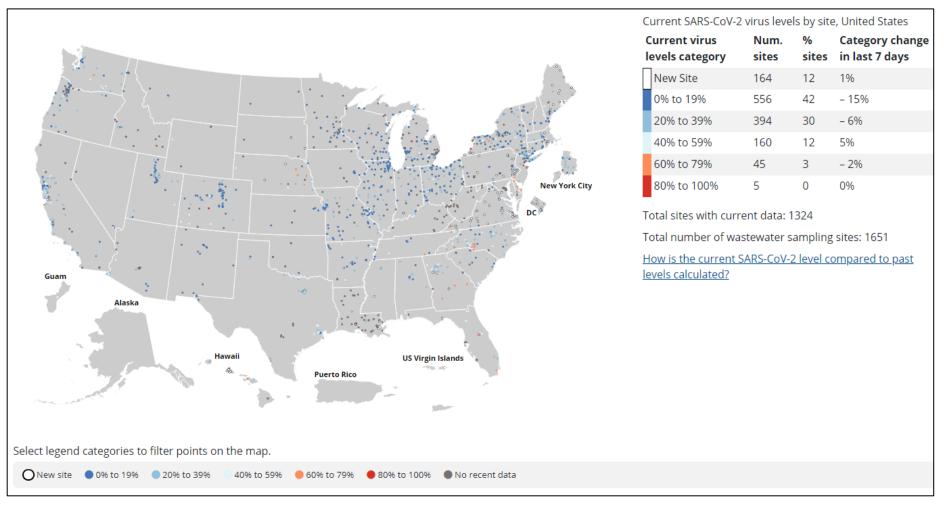
https://covid.cdc.gov/covid-datatracker/#cases positivity-week



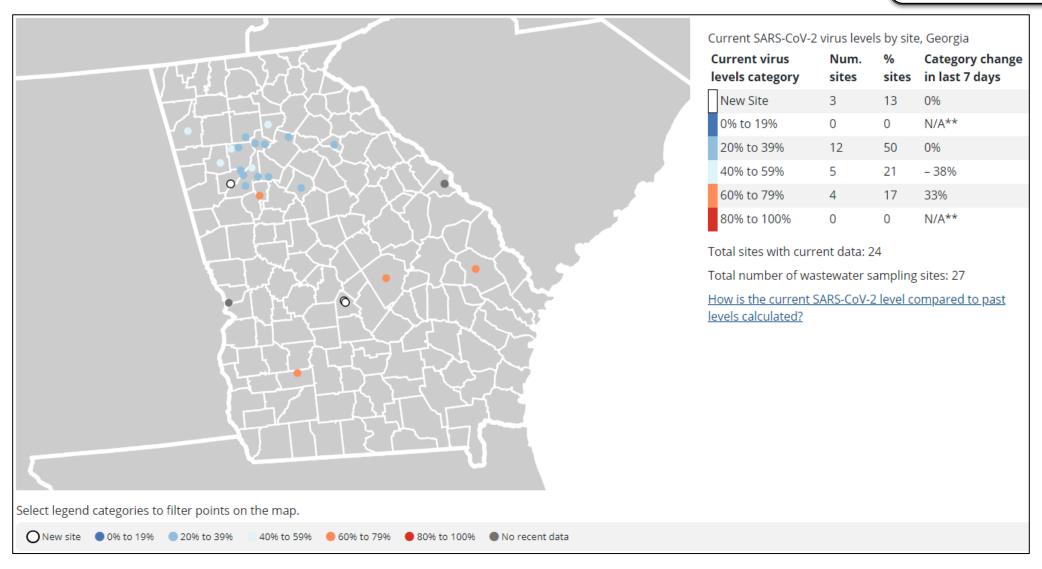




Wastewater Surveillance





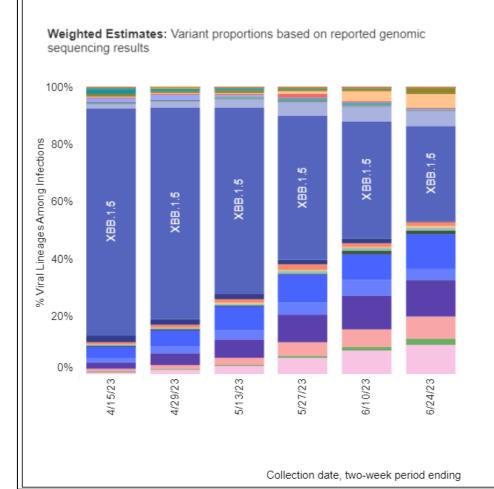




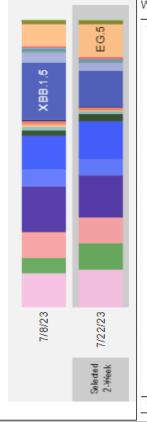
Weighted and Nowcast Estimates in United States for 2-Week Periods in 4/2/2023 – 7/22/2023

R

Hover over (or tap in mobile) any lineage of interest to see the amount of uncertainty in that lineage's estimate.



Nowcast: Model-based projected estimates of variant proportions



Nowcast Estimates in United States for 7/9/2023 – 7/22/2023

USA

NHO label	Lineage #	%Total	95%PI					
Omicron	XBB.1.16	14.8%	12.2-17.8%					
	XBB.1.9.1	13.2%	8.3-20.3%					
	XBB.2.3	13.0%	10.4-16.1%					
	XBB.1.5	12.3%	10.2-14.7%					
	EG.5	11.4%	8.3-15.3%					
	XBB.1.16.6	9.3%	5.4-15.4%					
	XBB.1.16.1	8.8%	7.4-10.4%					
	XBB.1.9.2	5.6%	4.0-7.8%					
	XBB	3.0%	1.8-4.9%					
	XBB.1.5.72	2.2%	1.2-3.9%					
	CH.1.1	1.7%	0.8-3.6%					
	FE.1.1	1.1%	0.6-2.0%					
	XBB.1.5.68	1.0%	0.6-1.7%					
	XBB.1.5.10	1.0%	0.6-1.6%					
	EU.1.1	0.6%	0.3-1.0%					
	XBB.1.5.59	0.4%	0.2-1.0%					
	XBB.1.5.1	0.3%	0.2-0.5%					
	FD.2	0.0%	0.0-0.1%					
	BA.2	0.0%	0.0-0.0%					
	BN.1	0.0%	0.0-0.0%					
	BQ.1.1	0.0%	0.0-0.0%					
	BA.5	0.0%	0.0-0.0%					
	BQ.1	0.0%	0.0-0.0%					
	BA.2.75	0.0%	0.0-0.0%					
Other	Other*	0.1%	0.0-0.1%					

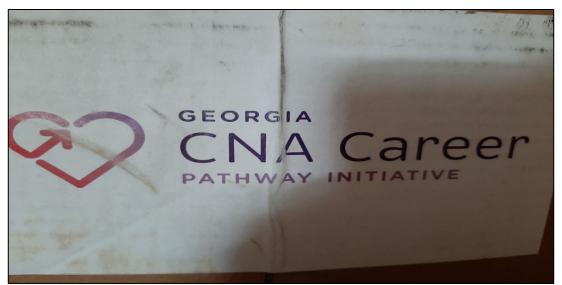
https://covid.cdc.gov/covi d-data-tracker/#variantproportions





Infection Prevention Resource Box

 Arriving to your facility from Georgia Certified Nursing Assistant (CNA) Career Pathway Initiative





Polling Question

- Have you received your resource box?
 - Yes
 - No



Infection Prevention Resource Box

Contents:

- USB drive with files
- APIC Infection Prevention Guide to Long-Term Care
- APIC Ready Reference for Microbes
- Glo Germ Kit
- Printed Signage





Jump Drive Contents

- Antibiotic Stewardship
- Cleaning and Disinfection
- Hand Hygiene
- Infection Control Signs and Education
- NHSN
- Outbreak Management
- Personal Protective Equipment (PPE)
- Professional Assistance
- Refrigerator Maintenance
- Risk Assessment





Jump Drive – Antibiotic Stewardship

- Antibiotic Stewardship Document
 - List of references and resources helpful in the development and review of the antibiotic stewardship program
 - Clinical staff education resources, including new hire information
 - Free continuing education opportunities for clinicians





Jump Drive - Cleaning and Disinfection

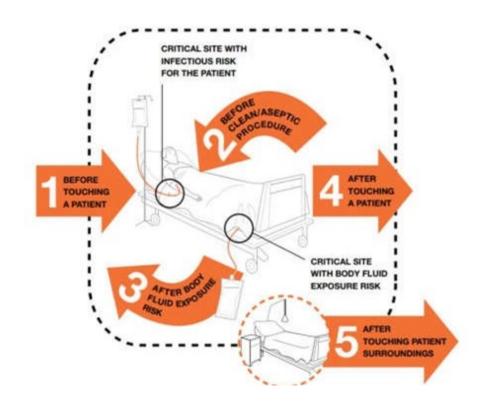
- EPA Approved Disinfectants for Healthcare
- Environmental Services (EVS) APIC Toolkit Resource
- EVS Cleaning
- Audit tool
- Housekeeping Checklist
- How to read a disinfectant label
- Infection prevention environmental rounds checklist
- STRIVE Environmental Services Training Module
- Water Management
 - CDC Water Management Toolkit
 - Guidance commissioning of water systems after prolonged shutdown or disruption of services





Jump Drive – Hand Hygiene

- Five Moments of HH Graphic
- GDPH Audit Log for HH
- Hand Hygiene Informational Resources
- WHO and CDC HH Resources





Jump Drive – Infection Control Precautions

- Ready to Print Signage
 - Contact
 - Contact Enteric
 - Droplet
 - Airborne Contact
 - Aerosol Contact
 - Enhanced Barrier
- Resident and Family Educational Flyers for each type of precautions
- LTCF Transmission Based Precautions and Recommendations in Healthcare Settings
 - · Table of requirements according to the route of transmission
 - Supply cart stocking list example

RESIDENT, FAMILY, AND VISITORS

Contact Enteric Precautions



You or your loved one is in Contact Enteric Precautions. These precautions prevent spread of infection between residents in LTCFs. This type of infection is spread by directly touching the resident or something they have touched.

A light brown sign saying "Contact Enteric Precautions" is outside the room letting staff, families, and visitors know what they can do to help keep safe.

As a resident, family, or visitor you must help by:

- Cleaning hands with soap and water when you enter and leave the
- Family and visitors should not eat in room.
- Limiting where you go outside the room unless given permission by the nurse so that germs are not spread to other residents, visitors,
- Asking doctors and staff to wash their hands as they enter and leave the room even if they are using gloves.
- · Limiting visitors to close contacts only.

You will see doctors and staff doing the following:

Hand Hyglene

 Cleaning hands before and after caring for the resident

Gloves, Gowns, Masks, Goggles

- They must wear gloves and gown while in the room and remove them before leaving.
- They might also wear mask and goggles.

Transportation

- If the resident needs to go out of the room, staff will help resident to wear a clean
- Staff will clean their hands.

If you have additional questions about Contact Enteric Precautions, ask your nurse.









Jump Drive

- NHSN
 - Resources
 - Revised McGeer Criteria Checklist
- Outbreak Management
 - Example Outbreak Management policy
 - Notifiable Diseases and Conditions
 - Print and hang at your desk for easy reference

NOTIFIABLE DISEASE CONDITION REPORTING All Georgia physicians, laboratories, and other health care providers are required by law to report patients with the following conditions -anti-HCW+) or HCV RNA To Report Immediately | Call: District Health Office acute flaccid myeliti detected children ages or 1-866-PUB-HLTH (1-866-782-4584) hepatitis D (Delta virus aseptic meningitis blood lead level (all) acute and chronic campylobacteriosi hepatitis E (acute) novel respiratory viruse Carbapenem-resistani influenza-associated death (all ages) Enterobacter species. legionellosis leptospirosis and Klebsiella species listeriosis*** leprosy or Hansen's diseas horcellosis Chlamydia trachomatis (Mycobacterium leorae) (genital infection) Lyme disease ► plague Creutzfeldt-Jakob Diseas diphtheria (CJD), suspected cases, under age 55 maternal deaths E. coli 0157 O fever (during pregnancy or within cryptosporidiosis rables (human & animal) ehrlichiosis mumps Rocky Mountain spotted feve gonorrhea IIV infections rubella (including congenital) Perinatal HIV exposure salmonellosis MIC > 4ug/ml hearing impairment (permanent under age 5) streptococcal disease syphilis (adult) epatitis B Group A or B (invasive)* syphilis during pregnancy - acute hepatitis B Streptococcus pneumonia chronic HBsAg(+) or HBV measles (rubeola) DNA detected infections report with antibiotic latent TB infection i HBsAg(+) pregnant womer resistance information Perinatal HBV exposure hepatitis C (past or present) tetanus toxic shock syndrome children<5 years old anti-HCV(+) HCV RNA detected Varicella (Chickenpox) viral hemorrhagic fever Vibrio infections anti-HCV(+) or HCV RNA versiniosis at dph.georgia.gov/birth-defects-reporting to CMS via NHSN, Report in accordance with the NHSN protocol, Reporting requi ents and information available at dph.georgia.gov/notifiable-hai-reporting EPORTING FOR OTHER CONDITION www.dph.ga.gov/disease-reporting



Jump Drive – PPE

- PPE Audit Tool
- PPE Resources
- Respiratory Protection Program (RPP)
 - One-stop shop to create RPP documentation binder
- RPP Resources
 - OSHA Fit testing process and requirements
 - User seal check instructions
 - Video demonstrations





Jump Drive – Professional Assistance

- Contact information
 - APIC
 - Georgia DPH IP Team
 - Georgia Project Firstline
 - Georgia Infection Prevention Network (GIPN)
 - Long Term Care Certification (LTC-CIP)





Jump Drive – Refrigerator Maintenance

 Medication refrigerator and freezer temperature log



- Nourishment refrigerator and freezer temperature log
- Cleaning and monitoring of refrigerators, freezers, and ice machines example policy



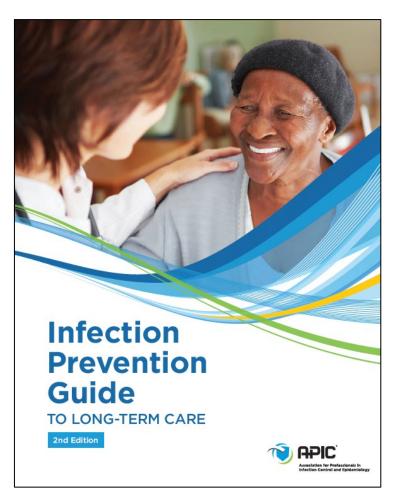
Jump Drive – Risk Assessment

 Fillable Infection Prevention Risk Assessment with risk ranking for prioritization

EVENT					Impact on Resident/Staff			Capacity to Detect			Readiness to Prevent					
Score	High		Low	None	Threat ening	Harm	Temp Harm	None			Low	None		Fair	Good	YEAR: 20 RISK LEVEL Add rankings (score of 8 or >are considered highest priority for improvement efforts)
	3	2	1	0	3	2	1	0	3	2	1	0	3	2	1	
Sample Lack Hand Hygiene Compliance	3				3					2				2		10
External Factors (Community, Demographics) Identify other risk factors in the community based on geographic location (coast, mountains etc.)																
	entity	otner n	sk tact	ors in t	ne com	imunity	based	on ge	ograpn	ic local	ion (cc	ast, mo	ountain	s etc.)		
Risk of TB in the community																0
Risk of emerging infectious disease in the community																0
Other (specify):																0
Facility Related Factos																
Facility Associated Infection(s)																
Symptomatic urinary tract infection (SUTI)																0
Influenza like illness																0
Pneumonia																0



APIC Guide to Long-Term Care



- Included in IP Resource Box that will be arriving at skilled nursing facilities throughout Georgia.
- Intended to aid in developing an evidencebased infection prevention and control program.
- Complete with sample policies, signage, audit tools and more.



Chapters

- Infection Prevention in Long Term Care
- Regulatory Compliance
- Surveillance, Epidemiology, and Reporting
- Antimicrobial Stewardship
- Standard and Transmission Based Precautions
- Medical Needs and Treatment Modalities
- Vaccinations
- Occupational Health
- Environmental Services
- Water Management Program
- Emergency and Disaster Preparedness
- Interdisciplinary and Support Services
- Appendix



Development of Policies and Procedures

- Policies should be based on current scientific evidence, best practice guidelines and expert consensus documents.
 - Utilize APIC Guide to LTC chapters and references in policy development.
- Policies and procedures (P&P) should be reviewed annually and revised as needed.
- Documentation must reflect the review process.
- Infection preventionist should review policies and procedures involving direct resident care, placement or manipulation of medical devices, etc.



Policies and Procedures

- Infection Prevention-owned policies
 - IP manual or individual policies
 - Infection prevention plan
 - Surveillance system to identify infectious and communicable diseases
 - Process for reporting incidents of communicable diseases
 - Employee health to include a process for restricting staff when necessary and respiratory protection program
 - Staff training in IP core practices
 - IP Practices such as hand hygiene
- IP should review policies owned by other departments to ensure evidence-based
 - Environmental cleaning and disinfection
 - Nursing care policies (catheter care, central line maintenance and infusion, etc.)

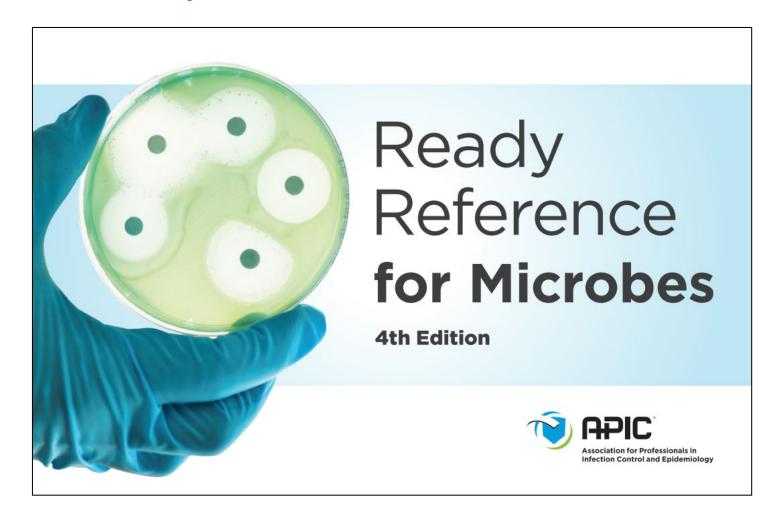


Infection Prevention Risk Assessment

- Tools:
 - CDC
 - Jump Drive
- Completion of Risk Assessment
- Complete annually and when events or situations dictate
 - Multidisciplinary
 - Include: EVS, Maintenance/Facilities, DON, Administrator, therapy, medical director
 - Gather data to inform preparedness and likelihood
 - Surveillance data
 - Risk Events (flooding, safety events, outbreaks)
 - Policies and Procedures
 - Audit data



Ready Reference for Microbes



This quick reference guide is intended to provide straightforward information for IPs.

Quick Facts are available for common pathogens such as C. diff. and influenza.



Chapters

- Bacteria
- Common commensals
- Fungi
- Parasites
- Viruses
- Bioterrorism agents
- Antimicrobial therapies



Case Study – Using the Ready Reference For Microbes

- You receive a new laboratory report for Mr.
 Jones, a facility resident. He has a new urine
 culture that grew out >100k cfu/ml
 of Alcaligenes faecalis.
- You realize this is a bacteria you are unfamiliar with and would like to learn more.



Alcaligenes faecalis

 You review the index of Ready Reference for Microbes and find this bacteria on page 5.

Index

Chapter 1: Bacteria Introduction, 1–3

Achromobacter, 4

Acinetobacter, 4

Actinomadura, 4

Actinomyces, 4

Aerococcus, 5
Aeromonas, 5

teromonas,) 16... 5

Afipia, 5

Aggregatibacter, 5

Agrobacterium. See Rhizobium

Alcaligenes, 5

Chlamydia, 10

Chromobacterium, 11

Chryseobacterium, 11

Citrobacter, 11

Clostridium, 12-13

Coagulase-negative Staphylococcus, 13

Corynebacterium, 13

Coxiella, 13

Edwardsiella, 14

Ehrlichia, 14

Eikenella, 14

Elizabethkingia, 15



Alcaligenes faecalis

- Gram-negative rod found in the environment (soil, water)
- Healthcare-associated infections include septicemia, bacteremia, ocular or ear infections, pancreatic abscesses, pneumonia and urinary tract infection (UTI)
- Modes of transmission
 - Environmental contact
 - Contaminated solutions or instruments



Actions to Take

- Isolation precautions?
 - Review the <u>2007 Guideline for Isolation</u>
 Precautions
- Root cause analysis
 - Review for recent urological procedures or instrumentation
 - If recent hospitalization or urology visit, communicate findings with the provider or hospital IP





Glow Germ Kit

- Hand hygiene
- Aseptic technique
- Environmental surface cleaning
- Cross contamination
- Food preparation





Hand Hygiene Training



https://youtu.be/h-O279tiR3s



Environmental Cleaning Training with Glo Germ

- Apply a small amount of glo-germ powder or lotion to hightouch surface(s)
 - Ensure the surface is non-porous
- Use UV light to verify simulated germs are visible and note the areas of application
- Allow for staff to clean and disinfect the area as they normally would
- Use UV light to review areas where simulated germs were applied to visualize how effective the cleaning techniques were



Respiratory Protection Resource Box

- Contents
- 3M FT-30 Fit Test Apparatus
 - Hood with collar
 - Nebulizers and solutions
 - Laminated user instructions from the manufacturer
 - GDPH pocket guides with OSHA regulations
- N-95 Fit Testing
- Annual N-95 fit testing is still necessary despite the end of the public health emergency, so facilities are prepared to manage respiratory threats safely.



Use These Resources to Study for Your Certification

Certification options:

- A-IPC
- LTC-CIP
- CIC
- Learn more about the requirements for each here





Questions?





Alliant Health Solutions Resources





https://quality.allianthealth.org/topic/georgia-department-of-public-health/

https://quality.allianthealth.org/topic/infection-control/



Thank you! Consult with the DPH Team! We are here to help!

State Region/Districts	Contact Information
North (Rome, Dalton, Gainesville, Athens) Districts 1-1, 1-2, 2, 10	Sue.bunnell@dph.ga.gov (404-967-0582)
Atlanta Metro (Cobb-Douglas, Fulton, Clayton, Lawrenceville, DeKalb, LaGrange) Districts 3-1, 3-2, 3-3, 3-4, 3-5, 4	<u>Teresa.Fox@dph.ga.gov</u> (256-293-9994) <u>Renee.Miller@dph.ga.gov</u> (678-357-4797)
Central (Dublin, Macon, Augusta, & Columbus) Districts 5-1, 5-2, 6, 7	Theresa.Metro-Lewis@dph.ga.gov (404-967-0589) Karen.Williams13@dph.ga.gov (404-596-1732)
Southwest (Albany, Valdosta) Districts 8-1, 8-2	Connie.Stanfill1@dph.ga.gov (404-596-1940)
Southeast (Savannah, Waycross) Districts 9-1, 9-2	<u>Lynn.Reynolds@dph.ga.gov</u> (804-514-8756)
Backup/Nights/Weekends	Joanna.Wagner@dph.ga.gov (404-430-6316)



Thank You for Your Time! Contact the AHS Patient Safety Team Patientsafety@allianthealth.org



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Save the Date

SNF and Medical Directors Office Hours:

August 18, 2023 | 11 a.m. ET

ALF and PCH

August 25, 2023 | 11 a.m. ET



Thanks Again...

- Georgia Department of Public Health
- University of Georgia





Making Health Care Better









Alliant Health Solutions



This material was prepared by Alliant Health Solutions, under contract with the Georgia Department of Public Health as made possible through the American Rescue Plan Act of 2021. GA DPH--4191-07/28/23