



Georgia Department of Public Health:
GDPH Office Hours for ALFs & PCHs
September 22, 2023

Meet the Team



Presenters:

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

Donald Chitanda, MPH, CIC, LTC-CIP
Infection Prevention Technical Advisor
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



Donald Chitanda, MPH, CIC, LTC-CIP

Infection Prevention Technical Advisor Alliant Health Solutions

Donald is a health professional with experience in public health epidemiology and infection prevention. For 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 part of and led several projects to reduce hospital-acquired infections using 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.

Contact: Donald.Chitanda@AlliantHealth.org



Thank You to Our Partners

- Georgia Department of Public Health
- University of Georgia

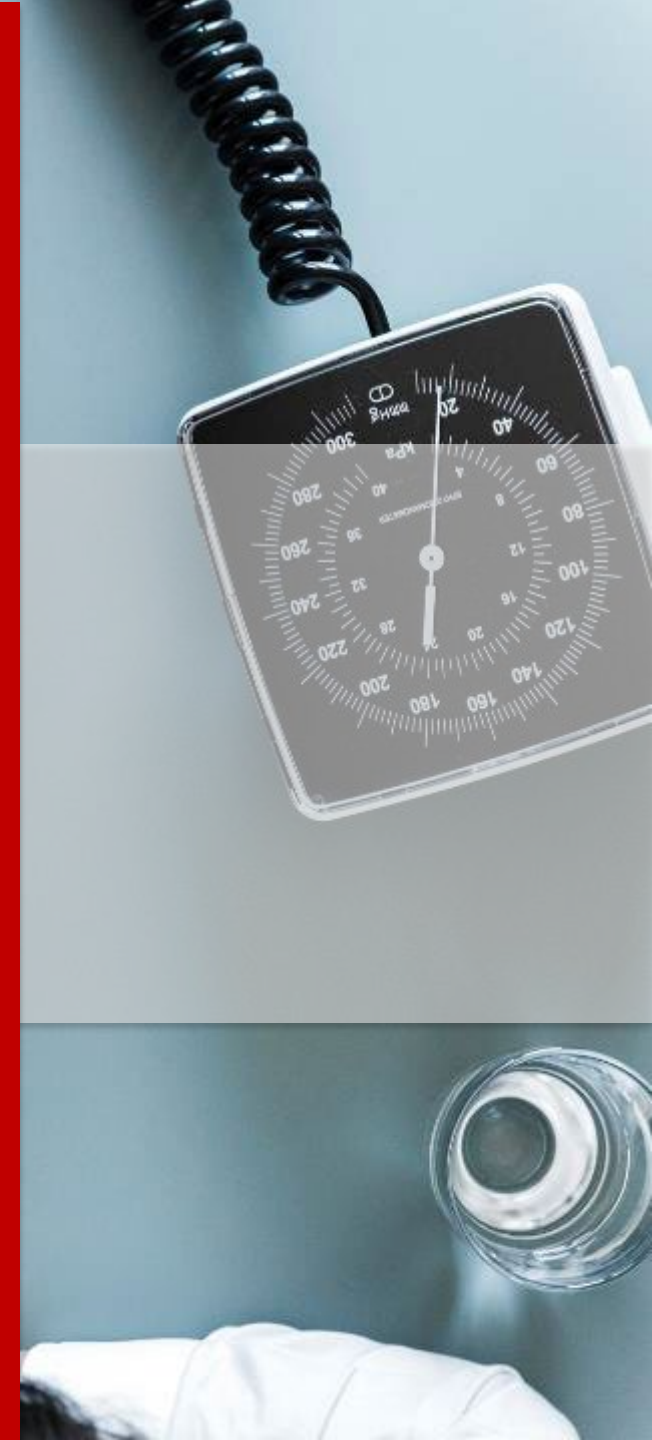


Learning Objectives

- Learners will be updated on COVID-19 epidemiology and infection prevention interventions.
- Learners will be able to understand risks associated with improperly managed building water systems.
- Learners will be able to utilize the CDC Guide to Developing a Water Management Program as a reference for policies, procedures and the water management program.
- Learners will utilize the resources provided regularly in their IP practice.



COVID-19 Update



CDC COVID-19 Data Tracker

Maps, charts, and data provided by CDC, updates Mondays and Thursdays by 8 p.m. ET

Data Update for the United States

Hospitalizations

Hospital Admissions

18,871

(August 27 to September 2, 2023)

Trend in Hospital Admissions

+8.7% in most recent week



Aug 4, 2023

Sep 2, 2023

Total Hospitalizations

6,308,630

Deaths

% Due to COVID-19

2.3%

(September 3 to September 9, 2023)

Trend in % COVID-19 Deaths

+4.5% in most recent week



Jul 22, 2023

Sep 9, 2023

Total Deaths

1,141,782

Vaccinations

Total Updated (Bivalent) Vaccine Doses Distributed

153,471,660

(through September 13, 2023)

CDC | Hospitalization data through: September 2, 2023; Death data through: September 9, 2023; Vaccination data through: September 13, 2023. Posted: September 14, 2023 4:08 PM ET



View Trends >




in Hospitalizations, Deaths, Emergency Department Visits, and Test Positivity



View Maps >

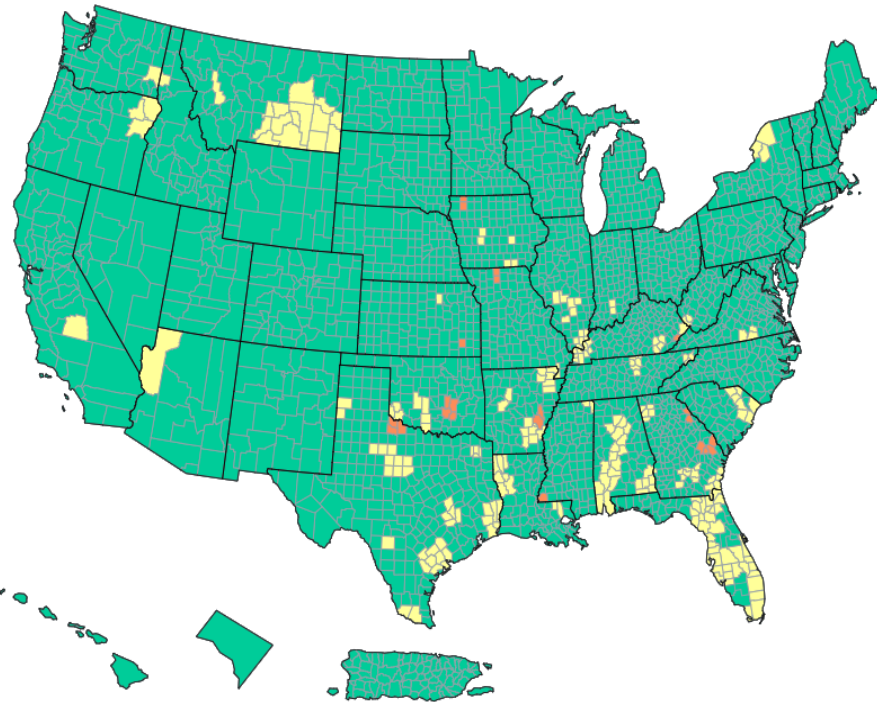
of Hospitalizations, Deaths, Emergency Department Visits, and Test Positivity

COVID-19 hospital admissions levels in U.S. by county
Based on new COVID-19 hospital admissions per 100,000 population

	Total	Percent	% Change
 ≥ 20.0	22	0.68%	0.22%
 10.0 - 19.9	230	7.14%	0.4%
 <10.0	2970	92.18%	-0.56%

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 September 2, 2023.

Reported COVID-19 New Hospital Admissions Rate per 100,000 Population in the Past Week, by County - United States



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 Visits, Test Positivity) and weekly the following Mondays (Hospitalizations) by 8 pm ET¹

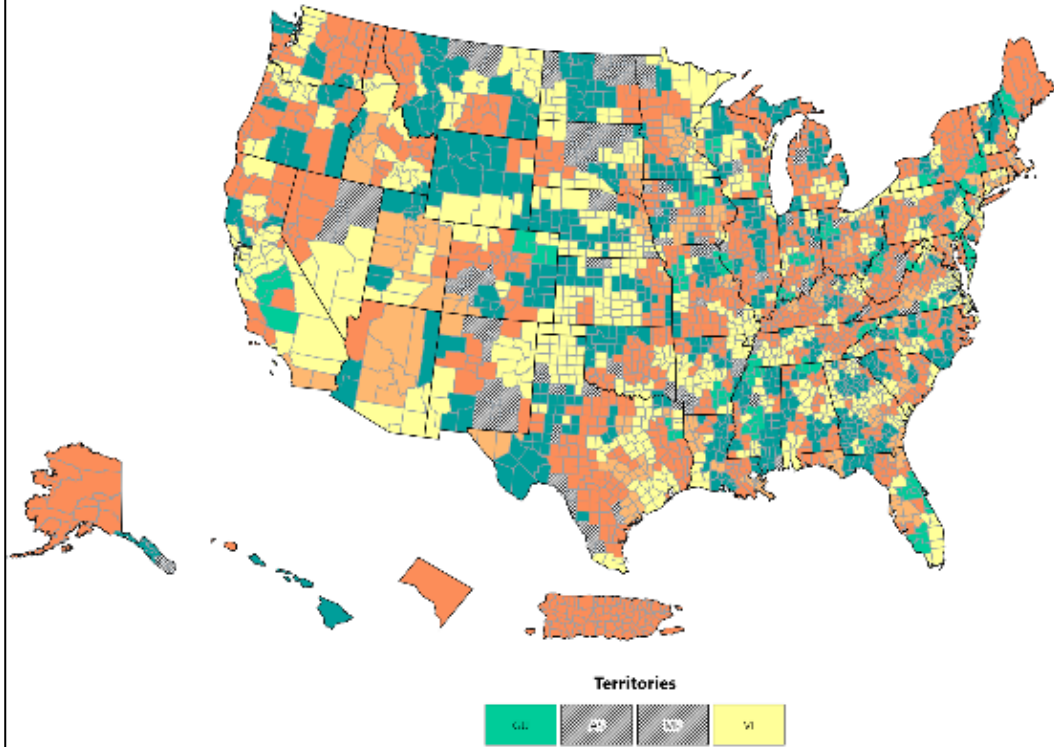
[View Footnotes and Download Data](#)

<p>COVID-19 HOSPITAL ADMISSIONS (PAST WEEK)</p> <p>18,871</p>	<p>% CHANGE IN COVID-19 HOSPITAL ADMISSIONS</p> <p>8.7%</p>	<p>COVID-19 HOSPITAL ADMISSIONS PER 100,000 (PAST WEEK)</p> <p>5.68</p>
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CDC | Data through: September 2, 2023. Posted: September 14, 2023

https://covid.cdc.gov/covid-data-tracker/#cases_new-admissions-rate-county

Change (%) in COVID-19 New Hospital Admissions from Prior Week, by County - United States



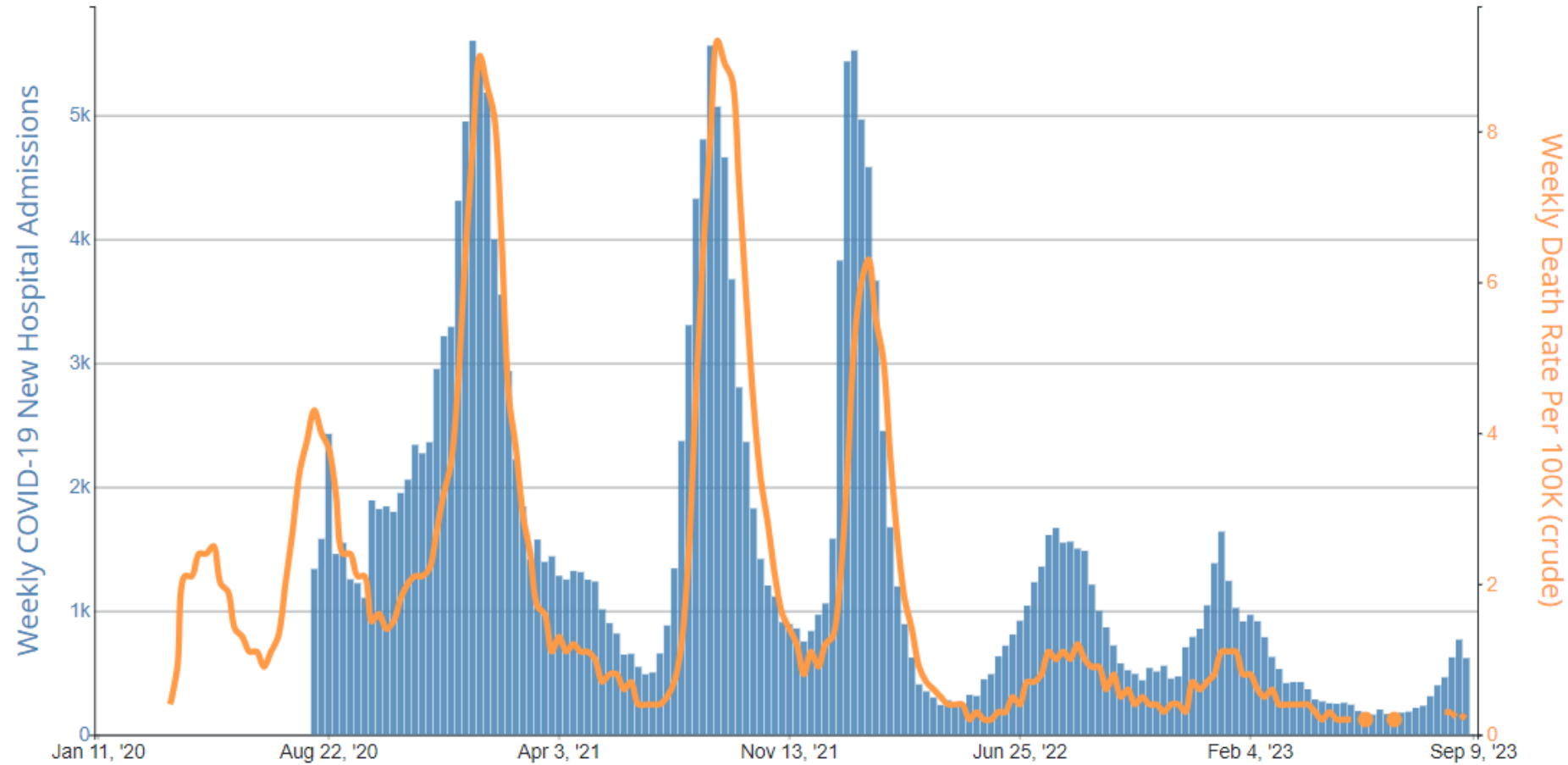
% Change in new hospital admissions of confirmed COVID-19 from the prior week

- Substantial Decrease (< -20.0%)
- Moderate Decrease (-19.9% to -10.0%)
- Stable (-9.9% to 9.9%)
- Moderate Increase (10.0% to 19.9%)
- Substantial Increase (≥20.0%)
- Insufficient data

Centers for Disease Control and Prevention, COVID-19 Data Tracker, Atlanta, GA, U.S. Department of Health and Human Services, CDC 2020, September 15, <https://covid.cdc.gov/covid-data-tracker/>

<https://covid.cdc.gov/covid-data-tracker/#cases-new-admissions-percent-change-county>

COVID-19 New Hospital Admissions and Provisional COVID-19 Death Rate per 100,000 Population (Crude), by Week, in Georgia, Reported to CDC

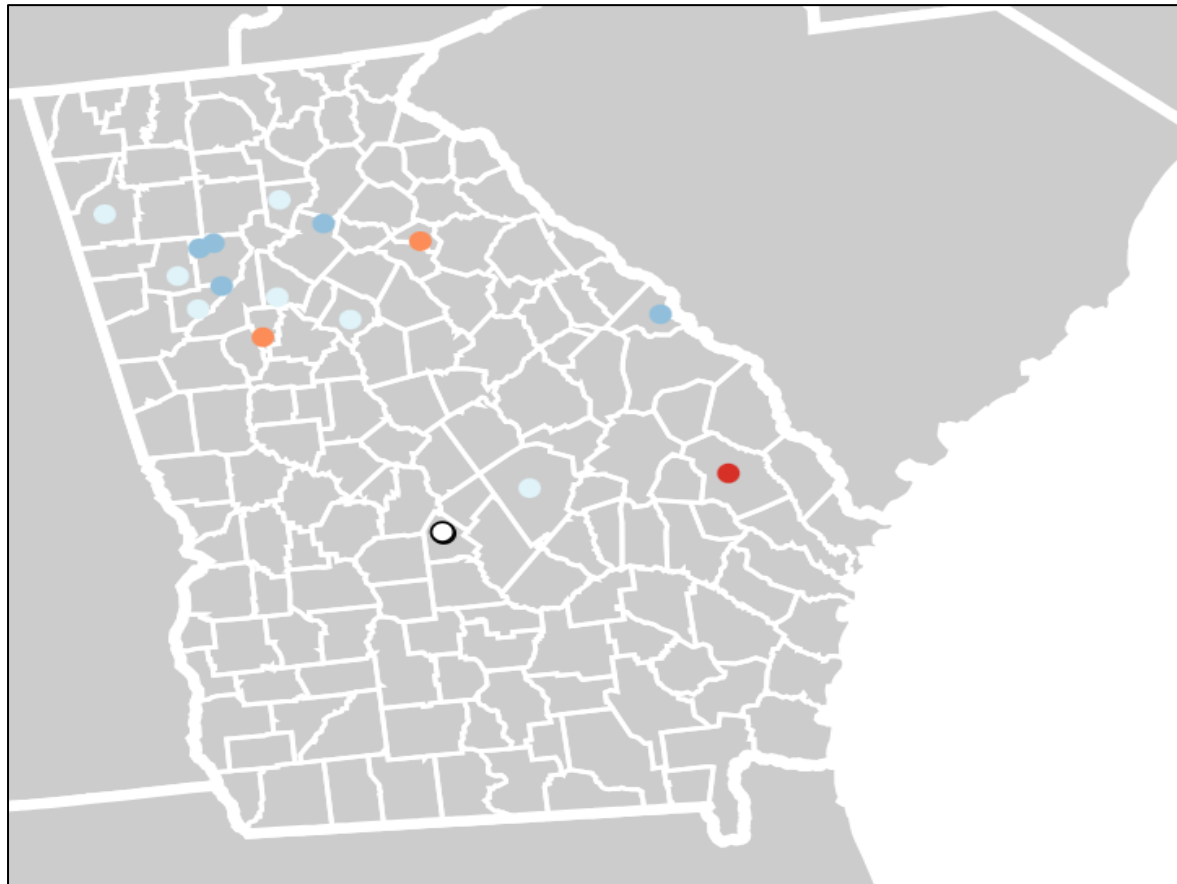


Jan 11, '20

Sep 09, '23

https://covid.cdc.gov/covid-data-tracker/#trends_weeklyhospitaladmissions_weeklydeathratecrude_13

Wastewater Surveillance

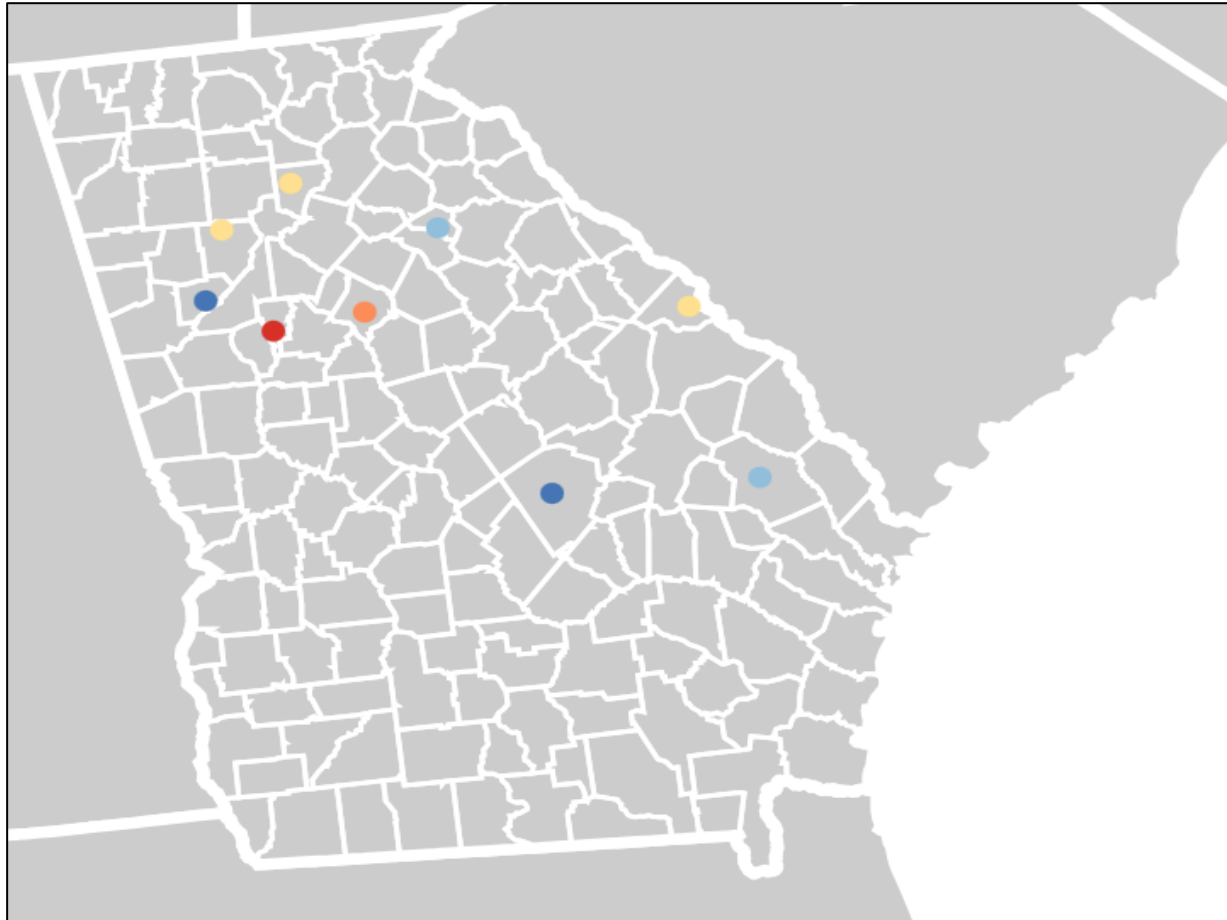


Current SARS-CoV-2 virus levels by site, Georgia

Current virus levels category	Num. sites	% sites	Category change in last 7 days
New Site	2	12	0%
0% to 19%	0	0	N/A**
20% to 39%	5	29	0%
40% to 59%	7	41	- 13%
60% to 79%	2	12	- 71%
80% to 100%	1	6	- 75%

Total sites with current data: 17

Total number of wastewater sampling sites: 27

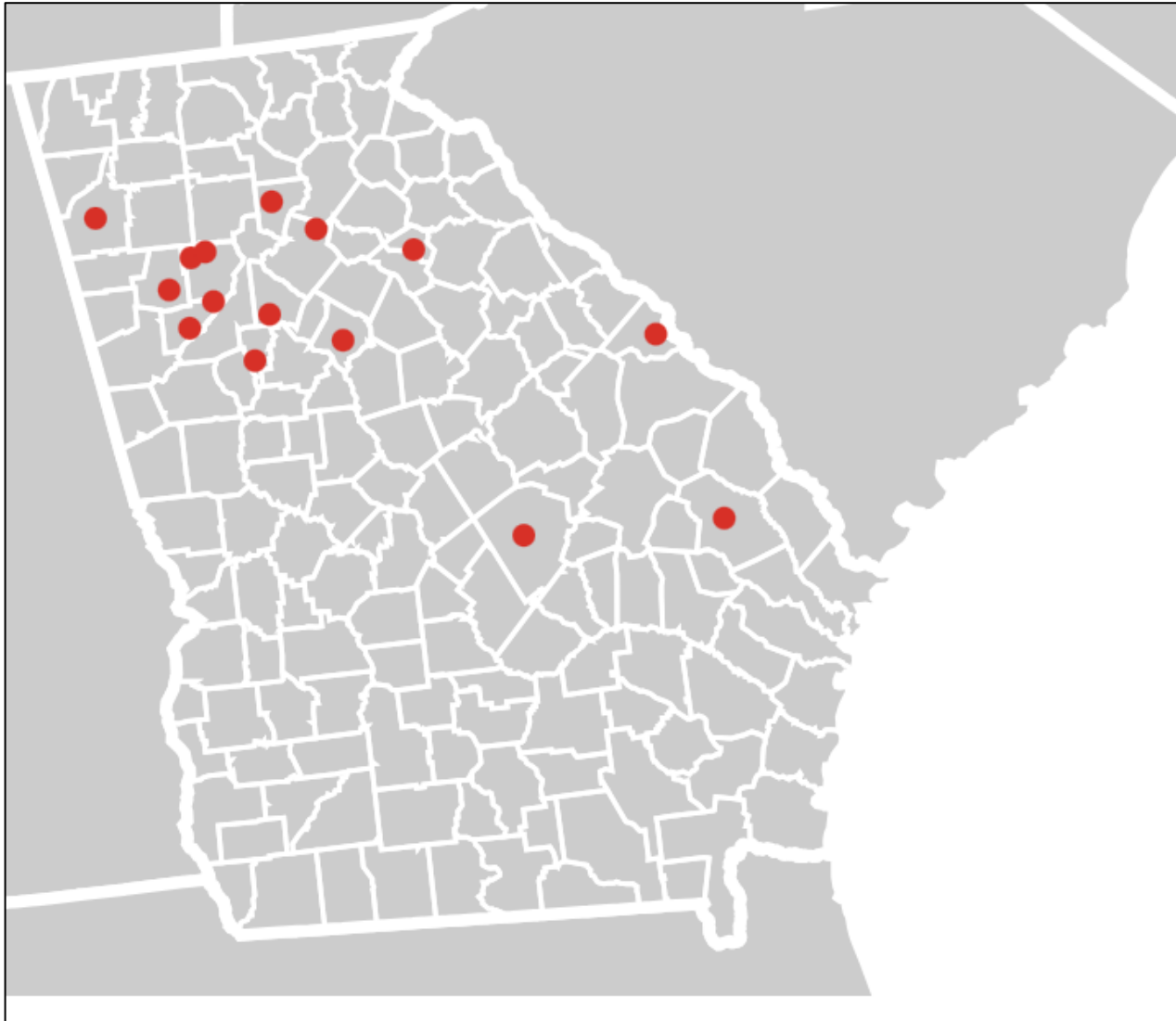


Percent change of SARS-CoV-2 in the last 15 days by site, Georgia

15-day % change category	Num. sites	% sites	Category change in last 7 days
- 100%	2	22	N/A**
- 99% to - 10%	2	22	- 85%
- 9% to 0%	0	0	- 100%
1% to 9%	0	0	- 100%
10% to 99%	3	33	50%
100% to 999%	1	11	- 67%
1000% or more	1	11	- 50%

Total sites with current data: 9

Total number of wastewater sampling sites: 27



Percent of wastewater samples with detectable SARS-CoV-2 in the last 15 days by site, Georgia

15-day detection % category	Num. sites	% sites	Category change in last 7 days
Non-Detect	0	0	N/A**
1% to 19%	0	0	N/A**
20% to 39%	0	0	N/A**
40% to 59%	0	0	N/A**
60% to 79%	0	0	N/A**
80% to 100%	15	100	- 38%

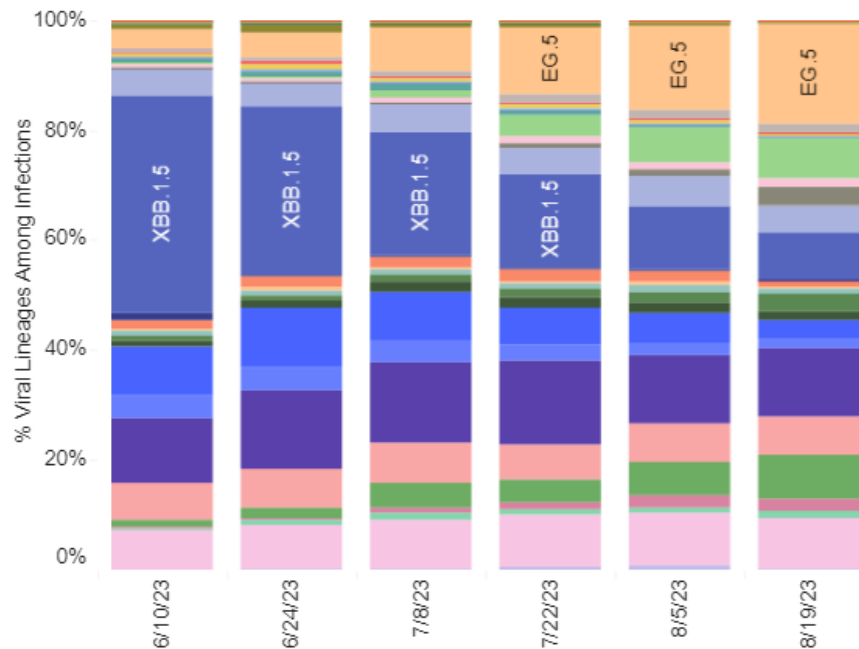
Total sites with current data: 15

Total number of wastewater sampling sites: 27

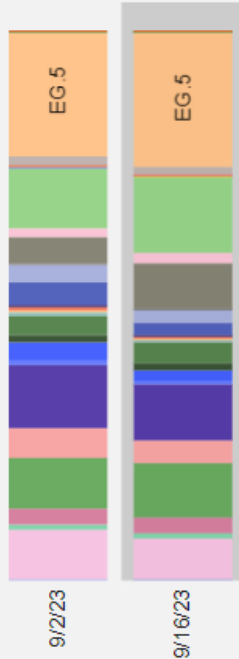
Weighted and Nowcast Estimates in United States for 2-Week Periods in 5/28/2023 – 9/16/2023

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

Weighted Estimates: Variant proportions based on reported genomic sequencing results



Nowcast: Model-based projected estimates of variant proportions



Collection date, two-week period ending

Nowcast Estimates in United States for 9/3/2023 – 9/16/2023

USA

WHO label	Lineage #	%Total	95%PI	
Omicron	EG.5	24.5%	22.5-26.6%	
	FL.1.5.1	13.7%	9.8-18.7%	
	XBB.1.16	10.2%	8.6-11.9%	
	XBB.1.16.6	9.9%	8.4-11.7%	
	HV.1	8.4%	6.6-10.5%	
	XBB.2.3	7.2%	6.2-8.5%	
	XBB.1.16.1	4.1%	3.4-4.9%	
	XBB.1.5.70	3.8%	2.9-4.9%	
	XBB.1.16.11	3.0%	2.3-3.8%	
	XBB	2.5%	2.1-2.9%	
	XBB.1.5	2.2%	1.9-2.6%	
	XBB.1.9.1	1.9%	1.6-2.2%	
	GE.1	1.7%	1.3-2.3%	
	EG.6.1	1.5%	1.0-2.1%	
	XBB.1.5.72	1.2%	0.9-1.6%	
	XBB.1.42.2	0.9%	0.5-1.7%	
	XBB.1.9.2	0.7%	0.6-0.9%	
	XBB.1.5.68	0.6%	0.4-0.9%	
	XBB.1.5.10	0.6%	0.4-0.7%	
	XBB.2.3.8	0.4%	0.2-0.6%	
CH.1.1	0.3%	0.2-0.4%		
FD.1.1	0.3%	0.2-0.4%		
XBB.1.5.59	0.2%	0.1-0.4%		
FE.1.1	0.2%	0.1-0.3%		
EU.1.1	0.0%	0.0-0.1%		
XBB.1.5.1	0.0%	0.0-0.0%		
BQ.1	0.0%	0.0-0.1%		
BA.2.12.1	0.0%	0.0-0.0%		
B.1.1.529	0.0%	0.0-0.0%		
BA.5	0.0%	0.0-0.0%		
FD.2	0.0%	0.0-0.0%		
Other	Other*	0.1%	0.0-0.1%	

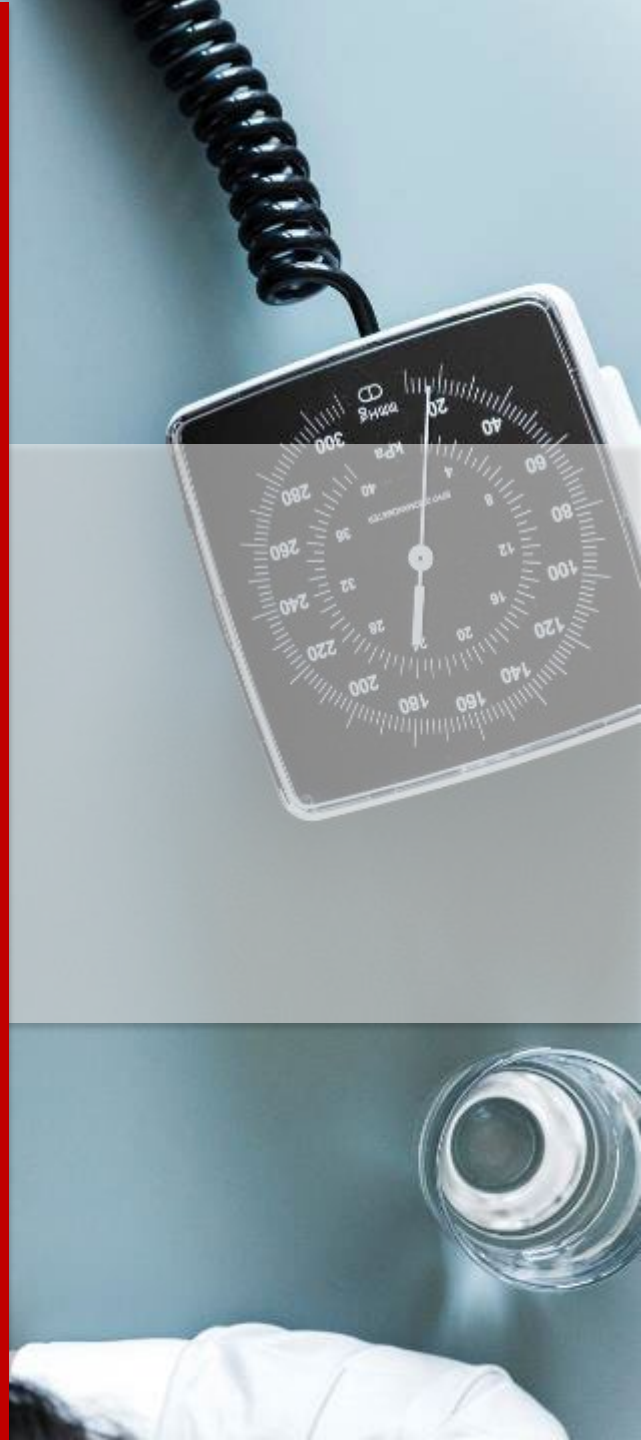
<https://covid.cdc.gov/covid-data-tracker/#variant-proportions>

COVID-19 Vaccine Update

- FDA approved updated 2023-2024 COVID-19 vaccines for this fall/winter season. The bivalent vaccines are no longer authorized as of 9/12/2023.
- [CDC recommends](#) everyone aged six months and older should receive the 2023-2024 updated COVID-19 vaccine to protect against serious illness from COVID-19 and to remain up to date.
- Review the [updated Interim Clinical Guidance for COVID-19 Vaccines](#) for clinical information and considerations.



IPC Water Management Program & COVID-19 Implications



Legionnaires' Disease

- A serious type of pneumonia caused by Legionella bacteria that live in water.
- Legionella can make people sick when they inhale contaminated water from building water systems that are not adequately maintained.

Other Waterborne Pathogens

- Pseudomonas
- Acinetobacter
- Stenotrophomonas
- Non-tuberculous mycobacteria
- Fungi

If You Answer YES to Any of These....

1. Is your building a health care facility where patients stay overnight, or does your building house or treat people who have chronic acute medical problems or weakened immune systems?

If You Answer YES to Any of These....

- 2.** Does the building primarily house people older than 65 years (e.g., a retirement home or assisted-living facility?)
- 3.** Does the building have multiple housing units and a centralized hot water system?

If You Answer YES to Any of These....

- Then, you should have a water management program for your facility's hot and cold-water distribution system.

So Where Do We Start?

Elements of a Water Management Program

Developing and maintaining a water management program is a multi-step, continuous process. The key steps, listed here, are explained in more detail throughout the toolkit with the associated step number appearing on the page where the specific step is discussed.



[Legionella Toolkit-Version 1.1-June 24, 2021](#)
[cdc.gov](https://www.cdc.gov)

Establish a Water Management Program Team

Certain skills, described in the diagram below, are needed to develop and implement your water management program. These skills would typically be provided by a combination of people, some of whom may have multiple skills (examples shown below).



[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](#)

Water Management Team (Nursing Homes)

- Three or more individuals representing:
 - Management
 - Infection preventionist
 - Facilities engineer
 - Clinician with expertise in infectious diseases
 - Risk and quality management staff
 - Contractors/consultants (e.g., water treatment professionals)
 - Microbiologists

Elements of a Water Management Program

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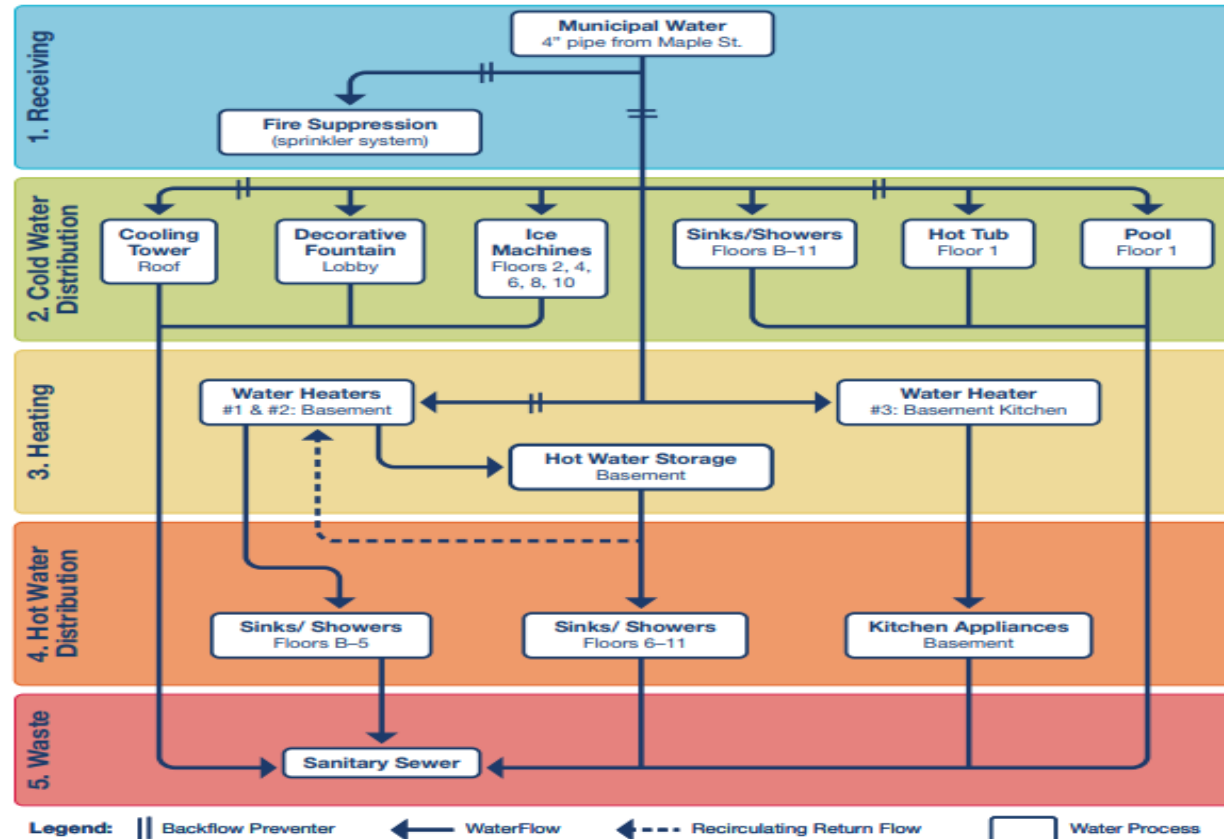
[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](#)

2

Describe Your Building Water Systems Using a Flow Diagram

EXAMPLE: BUILDING A

In addition to developing a written description of your building water systems, you should develop a process flow diagram. Below is an example of a process flow diagram for Building A. Note that this diagram does not need to be as detailed as your building plans. In fact, it's best if the process flow diagram can be understood easily by all members of your team.



[Legionella Toolkit-Version 1.1-June 24, 2021](#)
[\(cdc.gov\)](https://www.cdc.gov)

Elements of a Water Management Program

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[Legionella Toolkit-Version 1.1-June 24, 2021](#)
[cdc.gov](https://www.cdc.gov)

Where Can Legionella or Waterborne Pathogens Grow and/or Spread?

- Hot and cold water storage tanks
- Water heaters
- Aerators
- Showerheads and hoses
- Faucets
- Pipes, valves and fittings
- Misters and humidifiers
- Ice machines
- Decorative fountains or aquariums
- Hydrotherapy/hot tubs
- Infrequently used equipment, including eyewash stations

Consider...

- Areas that were shut down/closed due to COVID-19 and are due for re-opening.
- Patient care areas and other places like dialysis, respiratory therapy, hydrotherapy, dietary, and central supply that could contribute to the spread.
- Places where patients can be exposed to contaminated water (ice machines, heater-cooler units, respiratory therapy equipment).
- Areas where patient care supplies could be contaminated due to splashing.

Elements of a Water Management Program

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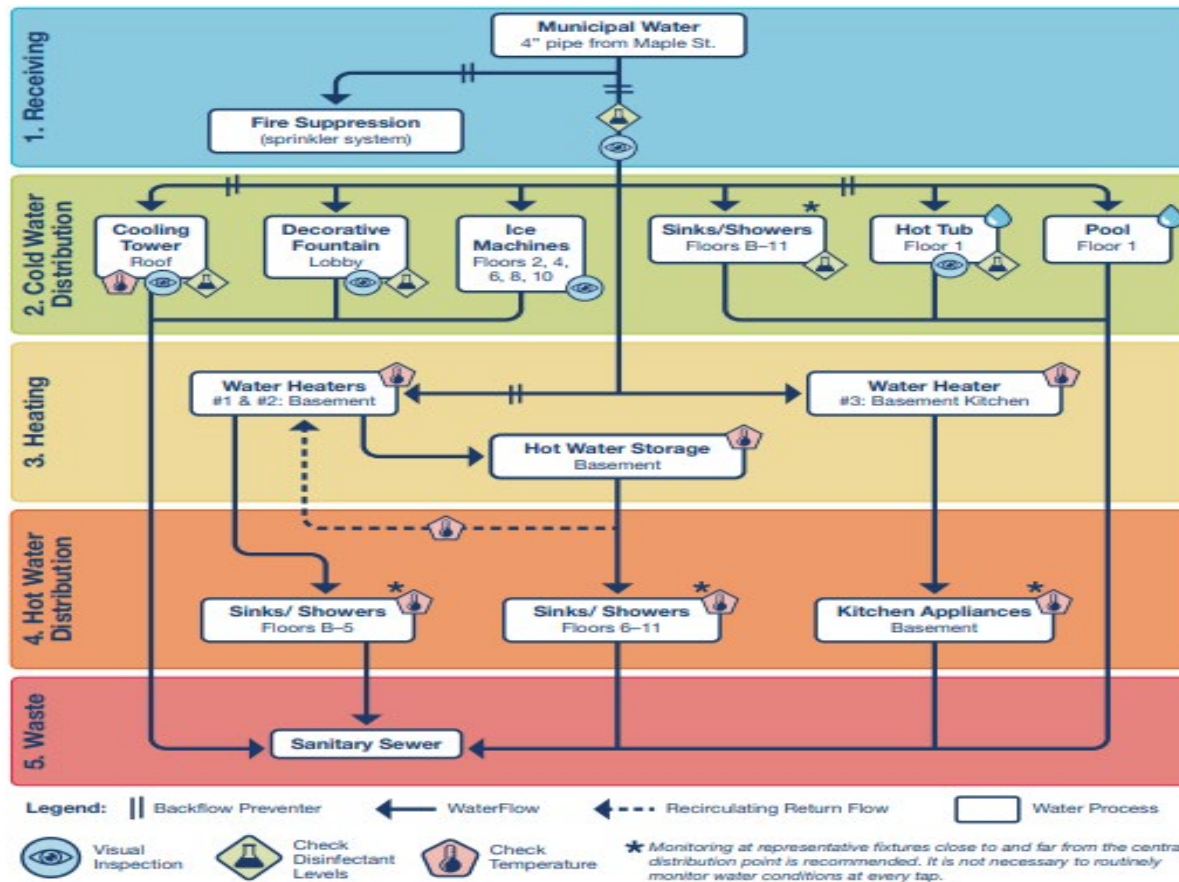


[Legionella Toolkit-Version 1.1-June 24, 2021](#)
[_cdc.gov](https://www.cdc.gov)

4 Decide How to Monitor Your Control Measures

EXAMPLE: BUILDING A

The diagram below shows which types of monitoring could occur at different locations within Building A's water system to reduce the risk of growth and spread of *Legionella*.



[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](https://www.cdc.gov/legionella/toolkit/)

Elements of a Water Management Program

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[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](#)

Establish Ways to Intervene When Control Limits Are Not Met

5

CORRECTIVE ACTION EXAMPLES

Building water systems are dynamic. You should plan for your monitoring results to vary over time and be prepared to apply corrective actions. **Corrective actions** are taken in response to systems performing outside of control limits. The following are examples of corrective actions.

Example 1—Biofilm growth in the decorative fountain

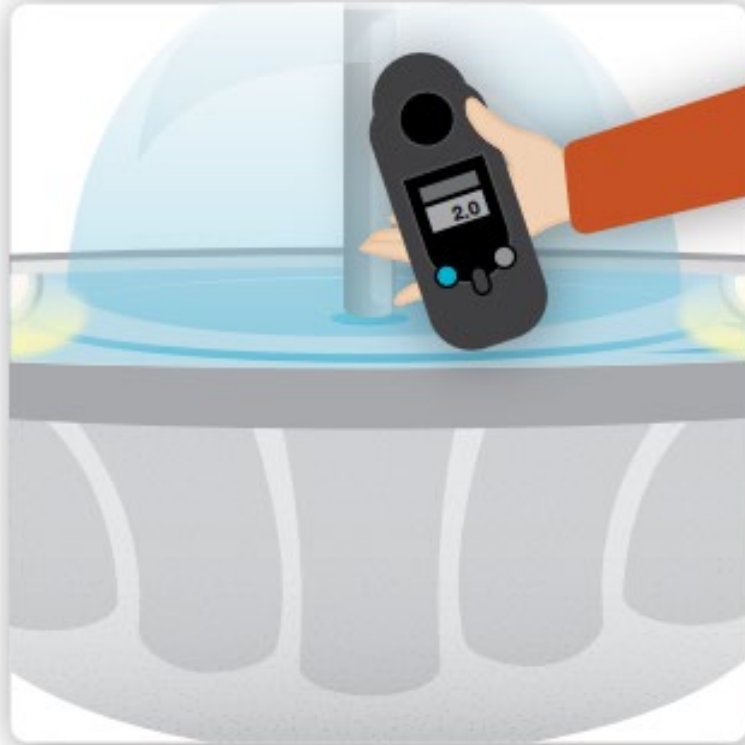


1. During her weekly inspection of the fountain in the first floor lobby, Michelle Patterson notes that the fountain walls have accumulated a slimy growth.



2. As dictated by her water management program, Michelle immediately shuts off the fountain, drains it to the sanitary sewer, and scrubs it with a detergent recommended by the manufacturer.

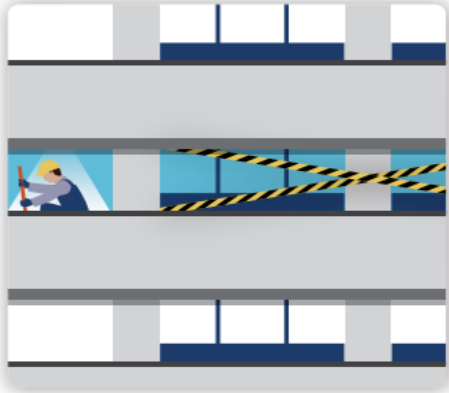
[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](https://www.cdc.gov/legionella/toolkit/)



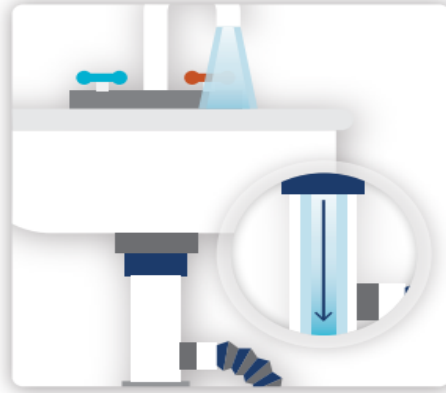
- 3.** She then follows the program's start up procedure to refill the fountain with water and checks the residual disinfectant levels to make sure that they are within control limits.



- 4.** Michelle documents her observations and the performance of interim cleaning in her log book. She informs her supervisor.

5
Example 2—Unoccupied floor


1. The eighth floor of the building is being renovated and is closed to the public. Jason Hernandez understands that this may cause a temporary hazardous condition because water usage will decrease, which means that stagnation is possible.



2. After discussing the issue with his supervisor, Jason counteracts the potential for stagnation by daily flushing of the sinks and fixtures with hot and cold water in several rooms including those at the end of the hall, which are farthest from the vertical pipe serving that floor (riser).



3. Jason also increases the frequency of measuring temperature and chlorine levels on the eighth floor from weekly to daily for the duration of the renovation.

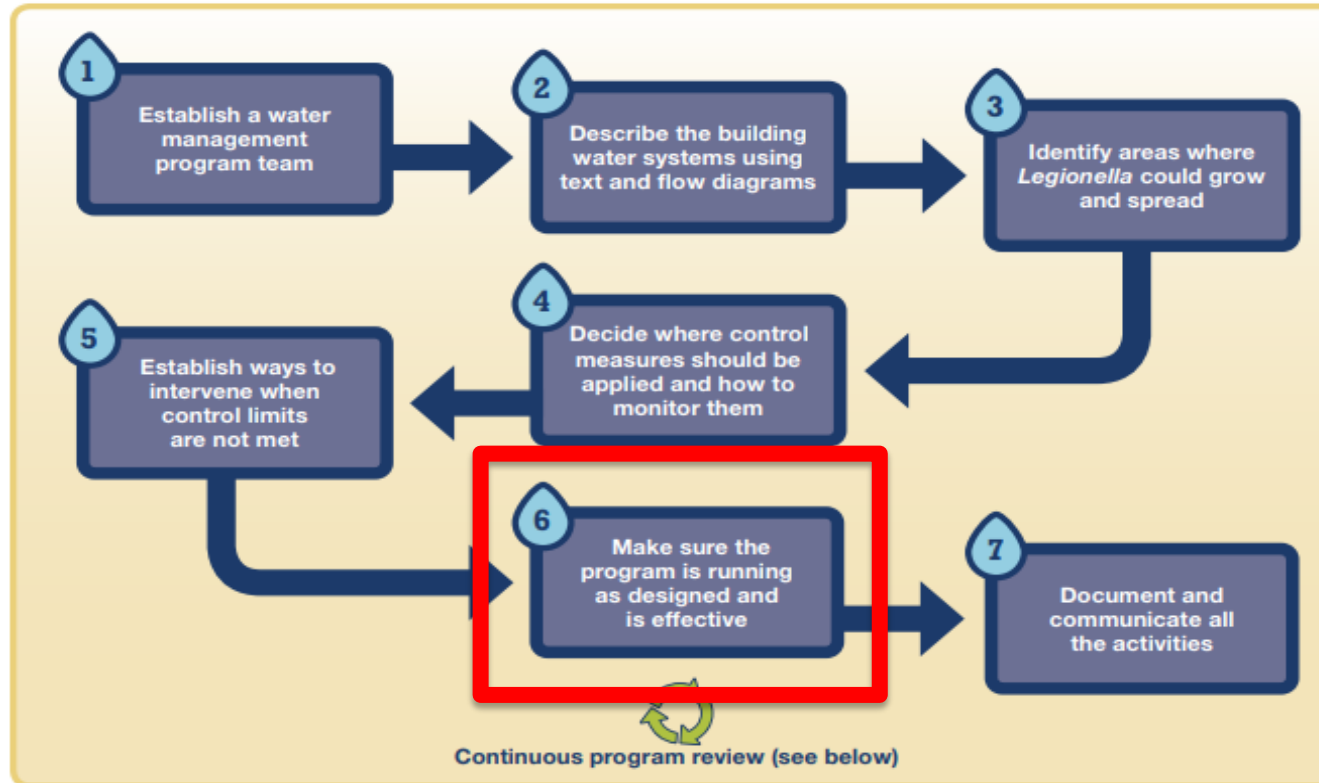


4. He documents the method and duration of flushing and records his daily temperature and chlorine readings in his log book. He reviews his documentation with his supervisor.

[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](https://www.cdc.gov/legionella/toolkit/)

Elements of a Water Management Program

Developing and maintaining a water management program is a multi-step, continuous process. The key steps, listed here, are explained in more detail throughout the toolkit with the associated step number appearing on the page where the specific step is discussed.



[Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](#)

Questions to Consider...

- **Are we doing what we said we would do?**
 - Establish procedures initially and ongoing to confirm that the water management program is being implemented as designed
- **Is our program working?**
 - Environmental testing for Legionella
 - Surveillance for healthcare-associated cases

Elements of a Water Management Program

Developing and maintaining a water management program is a multi-step, continuous process. The key steps, listed here, are explained in more detail throughout the toolkit with the associated step number appearing on the page where the specific step is discussed.



[Legionella Toolkit-Version 1.1-June 24, 2021](#)
[cdc.gov](https://www.cdc.gov)

Documentation

- **Your written program should include at least the following:**
 - Program team, including names, titles, contact info and roles on the team
 - Building description, including location, age, uses and occupants and visitors
 - Water system description
 - Control measures
 - Confirmatory procedures, including verification steps to show that the program is being followed as written and validation to show that the program is effective
 - Document collection and transport methods and which lab will perform the testing if environmental testing is conducted

Communication

- Share your work/ plan with your occupants, employees, and colleagues regularly to keep them informed that you have a plan in place to keep building water systems safe.
- Continually look for opportunities to improve the management and efficiency of your water systems.

Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings

Module 11: Water Exposure Facilitator Guide

Water Exposure: This form is intended to aid an ICAR facilitator in the review of a healthcare facility's infection risks posed by water exposures and related policies (Part A) and guide observations about water exposure risks (Part B). The form is intended for use in acute care facilities, long-term care facilities, and outpatient healthcare facilities. It is not intended for use in hemodialysis facilities; if conducting an assessment of a hemodialysis facility, refer to the resources at: [Audit Tools and Checklists | Dialysis Safety | CDC](#)

NOTE: This module does not apply to assessment of dental water lines.

Part A. Water Exposure Interview Questions

This interview should include the person in charge of Plant Operations or Facility Management

- Does your facility have a water management program (WMP) to reduce the growth and transmission of *Legionella* and other waterborne pathogens (e.g., *Pseudomonas*, *Acinetobacter*, *Burkholderia*, *Elizabethkingia*, *Stenotrophomonas*, nontuberculous mycobacteria, and fungi)?
 - Yes
 - No
 - Unknown
 - Not Assessed

A water management plan should address additional topics not addressed in this ICAR, including the assessment and assurance of the microbial safety of water within a facility's premise plumbing. Information regarding water management including tools for developing a WMP to ensure the safety of patients, staff and visitors is available at [Reduce Risk from Water | HAI | CDC](#) and includes the following tools and other resources:

- [Healthcare Facility Water Management Program Checklist \(cdc.gov\)](#)
- [Water Infection Control Risk Assessment \(WICRA\) for Healthcare Settings \(cdc.gov\)](#) which may be performed during the initial development of a WMP, and which can be used to evaluate water sources, modes of transmission, patient susceptibility, patient exposure and program preparedness. It may be updated over time and subsequently reused.
- CDC Toolkit: [Developing a Water Management Program to Reduce Legionella Growth and Spread in Buildings](#).

NOTE: The Centers for Medicare and Medicaid Services (CMS) considers it essential that healthcare facilities have a Water Management Plan, and provides information at [SC17-30.Legionella Risks in Healthcare Revised 6-09-17 \(cms.gov\)](#)

NOTE: CDC guidelines recommend to evaluate possible environmental sources of specimen contamination (e.g., water, laboratory solutions, or reagents) when microbiologic test results (e.g., cultures) appear to be inconsistent with the given clinical context. For more information, see Box 1 of <https://www.cdc.gov/infectioncontrol/guidelines/environmental/index.html>

NOTE: An essential part of a water management plan includes monitoring water coming into the building (e.g., municipal water line). CDC recommends that healthcare facilities develop an ongoing dialogue with their drinking water provider so that they are aware of changes that may affect the building's water supply.

[ICAR Tool for General Infection and Control \(IPC\) Across Settings - Module 11: Water Exposure Facilitator Guide \(cdc.gov\)](#)

Environment of Care

- Are patient care items located at least three feet from sinks, or is a splash guard in place to prevent items from becoming wet, including in medication preparation areas?



Environment of Care

- Daily cleaning and disinfection of countertops and sinks with EPA-registered disinfectant.
- Are toilets in patient/resident rooms in restrooms with doors that can be closed when flushed, or are toilets equipped with flush covers?
- Does the facility have a policy to routinely flush all eye wash stations to prevent water stagnation in the systems?

Environment of Care

- Are ice machines and ice chests routinely cleaned and protected from contamination?
 - Are ice scoops stored outside the chest?
 - Is a log of preventative maintenance kept?
 - Are ice machines flushed before use if disconnected for a prolonged time?

Environment of Care

- Is shower equipment and surfaces cleaned and disinfected between each resident?
- Is there a system to help HCP readily identify clean equipment vs. not clean?
- For hydrotherapy areas:
 - Routine cleaning with EPA-registered product
 - Monitoring of minimal disinfectant levels
 - Avoid patients with draining wounds or fecal incontinence

Patient Care Activities Using Water

- Clean and disinfect nebulizer with sterile water rinse between treatments for same patient use
 - HLD or sterilize between use on different patient
- Use sterile fluid for nebulization

Resources

- [Legionella Toolkit-Version 1.1-June 24, 2021 \(cdc.gov\)](#)
- [ICAR Tool for General Infection and Control \(IPC\) Across Settings - Module 11: Water Exposure Facilitator Guide \(cdc.gov\)](#)

Questions?



Alliant Health Solutions Resources

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GA STRIKE & SUPPORT TEAM

Join us for the Georgia Department of Public Health Strike (& Support) Team Office Hours. These sessions will consist of a regularly scheduled monthly webinar for skilled nursing facilities (SNFs) as well as SNF medical directors. Office hours are your opportunity to come and learn, share, vent and more!

Each month we will have updates on infection prevention, clinical protocols and ideas for new tools and resources. This is your chance to access subject matter experts on infection control and clinical practice in long term care.

Come prepared to pose your questions to subject matter experts and learn from your peers about their best practices and their barriers.

Strike & Support Team Office Hours

Office Hours for SNF and MD's:

- [Click here](#) to register – November 18, 2022 at 11 a.m. ET
- [Click here](#) to register – December 16, 2022 at 11 a.m. ET

Office Hours for Non-SNF:

- [Click here](#) to register – November 18, 2022 at 1 p.m. ET
- [Click here](#) to register – December 16, 2022 at 1 p.m. ET

Bite Sized Learning:

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Infection Control Resources

Sepsis

[HQIC Sepsis Gap Assessment and Action Steps](#)
[HQIC Sepsis: Spot the Signs Magnet](#)
[HQIC Sepsis Provider Engagement](#)
[AQ Sepsis-ZoneTool](#)
[Recognition and Management of Severe Sepsis and Septic Shock](#)

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Catheter Associated Urinary Tract Infection (CAUTI)

[CAUTI Gap Assessment Tool](#)
[Urinary Catheter Quick Observation Tool](#)
[CDC-HICPAC Guideline for Prevention of CAUTI 2009](#)
[AHRQ Toolkit for Reducing CAUTI in Hospitals](#)
[CDC TAP CAUTI Implementation Guide](#)

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Hand Hygiene

[Handwash the FROG Way – Badges – English](#)
[Handwash the FROG Way – Badges – Spanish](#)
[Handwash the FROG Way – Poster – English](#)
[Handwash the FROG Way – Poster – Spanish](#)
[Frequently Asked Questions – Alcohol Based Hand Rub](#)

NHSN

[Joining the Alliant Health Solutions NHSN Group](#)
[Instructions for Submitting C. difficile Data Into NHSN](#)
[5-Step Enrollment for Long-term Care Facilities](#)
[CDC's National Healthcare Safety Network \(NHSN\)](#)
[NHSN Enrollment/ LAN Event Presentation](#)

Clostridioides Difficile Infection (C. difficile)

[C.difficile Training](#)
[Nursing Home Training Sessions Introduction](#)
[Nursing Home C.difficile Infection](#)

Antibiotic Stewardship

[Antibiotic Stewardship Basics](#)
[A Field Guide to Antibiotic Stewardship In Outpatient Settings](#)
[Physician Commitment Letter](#)
[Be Antibiotics Aware](#)
[Taking Your Antibiotics](#)

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Training

[Op'lions for Infection Control Training In Nursing Homes Flyer](#)

COVID-19

[Invest In Trust \(AHRQ Resource for CNA COVID-19 Vaccines\)](#)
[Nursing Home Staff and Visitor Screening Toolkit – PDF](#)
[Nursing Home Staff and Visitor Screening Toolkit – Excel](#)

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

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

Thank You for Your Time!
Contact the AHS Patient Safety Team
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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	<u>Sue.bunnell@dph.ga.gov</u> (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	<u>Theresa.Metro-Lewis@dph.ga.gov</u> (404-967-0589) <u>Karen.Williams13@dph.ga.gov</u> (404-596-1732)
Southwest (Albany, Valdosta) Districts 8-1, 8-2	<u>Connie.Stanfill1@dph.ga.gov</u> (404-596-1940)
Southeast (Savannah, Waycross) Districts 9-1, 9-2	<u>Lynn.Reynolds@dph.ga.gov</u> (804-514-8756)
Backup/Nights/Weekends	<u>Joanna.Wagner@dph.ga.gov</u> (404-430-6316)

Save the Date

SNF and Medical Directors Office Hours:

October 20, 2023 | 11 a.m. ET

ALF and PCH

October 27, 2023 | 11 a.m. ET



Thanks Again...

- Georgia Department of Public Health
- University of Georgia



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