

# COVID-19 Updates, Definition Changes for Up-to-Date COVID-19 Vaccination Status, and Updates to COVID-19 Surveillance Pathways and COVID-19 Vaccination Modules

## Welcome!

Chat with Technical Support if you need assistance

### **Presented by:**

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

January 18, 2024

# Donald Chitanda, MPH, CIC LTC-CIP

## INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. Over the past several years, was 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.**

**Contact: [Donald.Chitanda@AlliantHealth.org](mailto:Donald.Chitanda@AlliantHealth.org)**



# Paula St. Hill, MPH, CIC, 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.**

**Contact: [Paula.StHill@allianthealth.org](mailto:Paula.StHill@allianthealth.org)**



# 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 was an infection prevention and control (IPC) subject matter expert for domestic and international IPC initiatives and emergency responses, including Ebola outbreaks and the COVID-19 pandemic.

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

**Contact: [Erica.Umeakunne@allianthealth.org](mailto: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. She loves all the time she can get outdoors, camping, bicycling, and running.**

**Contact: [Amy.Ward@AlliantHealth.org](mailto:Amy.Ward@AlliantHealth.org)**



# Objectives

## Agenda:

- New Up-to-Date Definition
- Reporting form changes
- Long-Term Care Facility Annual Survey
- HCP Vaccination Flu Summary Reporting
- NHSN Resources
- Live questions and answers

# **“New” Up-to-Date Definition**

# Up-to-Date

- Definition of up to date for NHSN Surveillance is updated quarterly
- New definition is effective beginning reporting week of Jan 1-7, 2024



(January 1, 2024 – March 31, 2024)

Received a 2023-2024 Updated COVID-19 Vaccine

# Flow Chart: Quarter 1 of 2024: Up to Date with COVID-19 Vaccines

Have they received a 2023-2024 updated COVID-19 vaccine?

Yes

No

Up To Date

Not Up To Date

# Reporting Form Changes

# Background on Form Changes

- Simplified COVID-19 vaccination reporting form for healthcare personnel
  - Removed question on complete primary series
    - Reflects latest guidance from CDC and FDA
    - Collects data most relevant for public health
  - Consistent with CMS Quality Reporting Program Measure reporting – transition of measures from primary series to up to date
- Aligns with COVID-19 vaccination reporting form for residents
  - No changes to reporting form for residents

# Old Weekly COVID-19 Vaccination: HCP Form

- **Removing** question on cumulative number of HCP who have received complete **primary series** (currently question #2)

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	0	0	
2. ★ <u>Cumulative</u> number of HCP in Question #1 who have received complete primary series of COVID-19 vaccine(s) at this facility or elsewhere since December 2020	0	0	
3. ★ <u>Cumulative</u> number of HCP in Question #1 with other condition			
3.1 ★ Medical contraindication to COVID-19 vaccine	0	0	

# Revised Weekly COVID-19 Vaccination: HCP Form

- Question on **up to date** vaccination (previously question #4) is now moved to **question #2**
- Aligns with resident form



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	0	0		
2. * Cumulative number of HCP in Question #1 who are <b>up to date</b> with COVID-19 vaccine(s).  Please review the current definition of up to date: <a href="#">Key Terms and Up to Date Vaccination</a> .	0	0		
3. * <b>Cumulative</b> number of HCP in Question #1 with other conditions:				
3.1 * Medical contraindication to COVID-19 vaccine	0	0		
3.2 * Offered but declined COVID-19 vaccine	0	0		
3.3 * Unknown/Other COVID-19 vaccination status	0	0		

# Revised Weekly COVID-19 Vaccination: HCP Form – (cont.)

## Question #3

- Cumulative number of HCP in question #1 with other conditions now relates to HCP who are **not up-to-date** with COVID-19 vaccination



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	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. * Cumulative number of HCP in Question #1 who are <u>up to date</u> with COVID-19 vaccine(s).  Please review the current definition of up to date: <a href="#">Key Terms and Up to Date Vaccination.</a>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. * <u>Cumulative</u> number of HCP in Question #1 with other conditions:						
3.1 * Medical contraindication to COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.2 * Offered but declined COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.3 * Unknown/Other COVID-19 vaccination status	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

# How to answer question #2:

Cumulative number of HCP in question #1 who are up to date with COVID-19 vaccine(s)

■ Question #2

- Enter the number of HCP who are up to date with COVID-19 vaccination
  - Many HCP who previously had a completed primary series will not be up counted as up to date.
  - Facilities should report **zero (0) up to date for Question #2** until HCP receive the 2023-2024 updated COVID-19 vaccine

2. * Cumulative number of HCP in Question #1 who are <u>up to date</u> with COVID-19 vaccine(s).				
Please review the current definition of up to date: <a href="#">Key Terms and Up to Date Vaccination.</a>	0	0		



# How to answer question #3:

Cumulative number of HCP in Question #1 with other conditions (those 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

3. * <u>Cumulative</u> number of HCP in Question #1 with other conditions:						
3.1 *Medical contraindication to COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.2 *Offered but declined COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.3 *Unknown/Other COVID-19 vaccination status	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

# How to answer question #3 (cont.):

## Cumulative number of HCP in Question #1 with other conditions

- Individuals who are **not up to date** with COVID-19 vaccination must be reported in question **3.1, 3.2, or 3.3**.
  - Individuals having a medical contraindication (that prevents them from receiving vaccine that would make them up to date) are reported in **question 3.1**.
  - Individuals who were offered but declined vaccination (declined vaccine that would make them up to date) are reported in **question 3.2**.
  - All other individuals who are not reported in question 2, 3.1, or 3.2 are reported in **question 3.3** (unknown/other COVID-19 vaccination status).

# How to answer question #3 (cont.):

## Cumulative number of HCP in Question #1 with other conditions

- Examples of individuals who should be included in **question 3.3 (unknown/other COVID-19 vaccination status)**
  - The facility could not determine an individual's vaccination status.
  - The individual received vaccination outside of the healthcare facility but did not provide written documentation of vaccination.
    - Reminder: Individuals can self-report in writing (paper or electronic) that the vaccination was received elsewhere or provide documentation of receipt of the COVID-19 vaccine elsewhere. Documentation should include the date and location of vaccine receipt and vaccine type.
  - The vaccine is not yet available in a particular location, so the individual has not yet declined or indicated that they would like to receive the vaccine.

# Weekly COVID-19 Vaccination: Example with Employees

Remember: The sum of the numbers entered for questions #2 (up to date) and #3.1-3.3 (reasons not up to date) must equal to the number entered for question #1.

Employees at facility = **100**

- Up to date with COVID-19 vaccination = **75**
- Medical contraindication = **2**
- Declined vaccination = **10**
- Unknown/other vaccination status = **13**

$$75 + 2 + 10 + 13 = 100$$

	*All Core HCP <sup>a</sup>	*All HCP <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants <sup>d</sup>
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	240	280	100	80
2. *Cumulative number of HCP in Question #1 who are <u>up to date</u> with COVID-19 vaccine(s).  Please review the current definition of up to date: <a href="#">Key Terms and Up to Date Vaccination</a> .	165	180	75	55
3. *Cumulative number of HCP in Question #1 with other conditions:				
3.1 *Medical contraindication to COVID-19 vaccine	2	2	2	0
3.2 *Offered but declined COVID-19 vaccine	35	40	10	15
3.3 *Unknown/Other COVID-19 vaccination status	38	58	13	10

# Summary

- HCP will not be up to date with COVID-19 vaccines until they receive the 2023-2024 updated COVID-19 vaccine
  - Facilities should report **zero (0) up to date for Question #2** until HCP receive the 2023-2024 updated COVID-19 vaccine.
- The question about HCP being up to date with COVID-19 vaccination (formerly Question #4) was moved up on the form to Question #2
- Questions 3.1-3.3 will now refer to HCP who are not up to date in Question #2



# Polling Question 1

- Chloe is a health care worker who received two doses of the original Moderna primary series in June 2021. She received a bivalent Moderna vaccine in December 2022 and a 2023-2024 updated COVID-19 vaccine in September 2023.
- Where do we count Chloe?

# Polling Question 1 - Answer

- Chloe is a health care worker who received two doses of the original Moderna primary series in June 2021. She received a bivalent Moderna vaccine in December 2022 and a 2023-2024 updated COVID-19 vaccine in September 2023.
- Where do we count Chloe?
  - Chloe should be counted **in question #2 (up to date)** because she received a 2023-2024 updated COVID-19 vaccine.

# Polling Question 2

- Marc is a health care worker who received a dose of the bivalent Moderna COVID-19 vaccine five months ago and has declined all COVID-19 vaccines since then.
- Where do we count Marc?



# Polling Question 2 - Answer

- Marc is a health care worker who received a dose of the bivalent Moderna COVID-19 vaccine five months ago and has declined all COVID-19 vaccines since then.
- Where do we count Marc?
  - Marc should be counted in question **#3.2 (declined vaccine)** because he declined to receive a 2023-2024 updated COVID-19 vaccine.

# Polling Question 3

- Kitt is a health care worker who has refused all previous COVID-19 vaccines but decided to receive the 2023-2024 updated COVID-19 vaccine.
- Where do we count Kitt?

# Polling Question 3 - Answer

- Kitt is a health care worker who has refused all previous COVID-19 vaccines but decided to receive the 2023-2024 updated COVID-19 vaccine.
- Where do we count Kitt?
  - Kitt should be counted in **question #2 (up to date)** because she received a 2023-2024 updated COVID-19 vaccine.

# Polling Question 4

- Josh, a health care worker, received a dose of bivalent Pfizer on August 15, 2023. He is unsure if he will receive the 2023-2024 updated COVID-19 vaccine, but it hasn't been offered.
- Where do we count Josh?

# Polling Question 4 - Answer

- Josh, a health care worker, received a dose of bivalent Pfizer on August 15, 2023. He is unsure if he will receive the 2023-2024 updated COVID-19 vaccine, but it hasn't been offered.
- Where do we count Josh?
  - Josh should be counted in **question #3.3 (unknown/other COVID-19 vaccine status)** because he has not yet received a 2023-2024 updated COVID-19 vaccine, but he also hasn't declined it.

# Polling Question 5

- Michael, a health care worker, reported a medical contraindication that prevents them from receiving the 2023-2024 updated COVID-19 vaccine.
- Where do we count Michael?

# Polling Question 5 - Answer

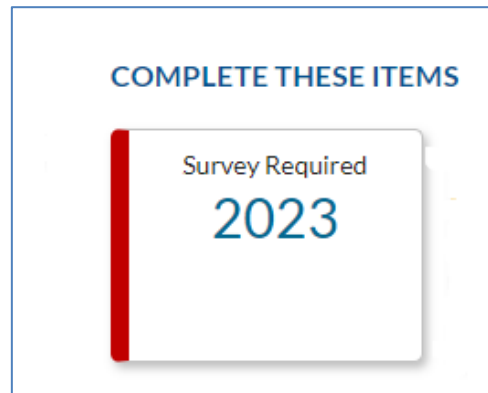
- Michael, a health care worker, reported a medical contraindication that prevents them from receiving the 2023-2024 updated COVID-19 vaccine.
- Where do we count Michael?
  - Michael should be counted in question #3.1 (medical contraindication) because he has a medical contraindication that prevents him from receiving the 2023-2024 updated COVID-19 vaccine.

# Long-Term Care Facility Annual Survey



# LTCF Annual Survey

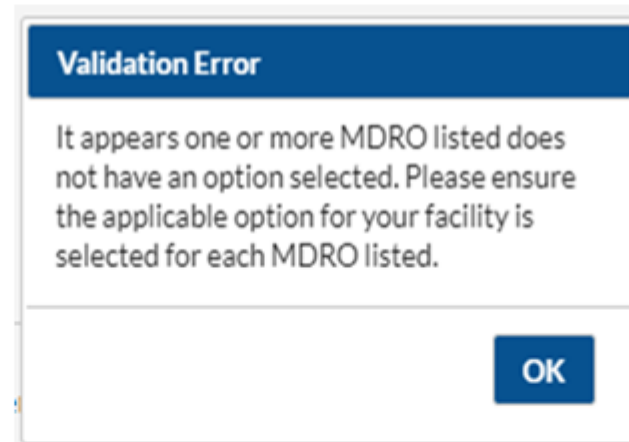
- Deadline for submission: March 1, 2024
- Paper form:  
[https://www.cdc.gov/nhsn/forms/57.137\\_LTCFSurv\\_B\\_LANK.pdf](https://www.cdc.gov/nhsn/forms/57.137_LTCFSurv_B_LANK.pdf)
- Survey Table of Instructions:  
<https://www.cdc.gov/nhsn/forms/instr/57.137-toi-annual-facility-survey.pdf>



# LTCF Annual Survey

Dear LTCF User,

The NHSN Team has been made aware of an issue affecting the LTC **Annual Facility Survey**. Specifically, when a user selects the answer “**No**” for question #6: “Is it a policy in your facility to routinely use gown/gloves for care of residents infected or colonized with a multidrug-resistant organism (MDRO)? ☐ Yes ☐ No (If “**No**”, **continue to question #7**)”. The application produces a validation error (shown below) that prevents the completed survey from saving.



**Please note, this only impacts facilities that respond with the answer “No” to question #6; therefore, users that respond with “Yes” and fulfill its MDRO reporting options can submit their completed surveys directly into the NHSN application.**

# LTCF Annual Survey

Please note, this only impacts facilities that respond with the answer “No” to question #6; therefore, users that respond with “Yes” and fulfill its MDRO reporting options can submit their completed surveys directly into the NHSN application.

If yes, please select the option that is applicable to your facility for each MDRO. (“No” should only be selected if your facility does not have a policy for the MDRO listed.)

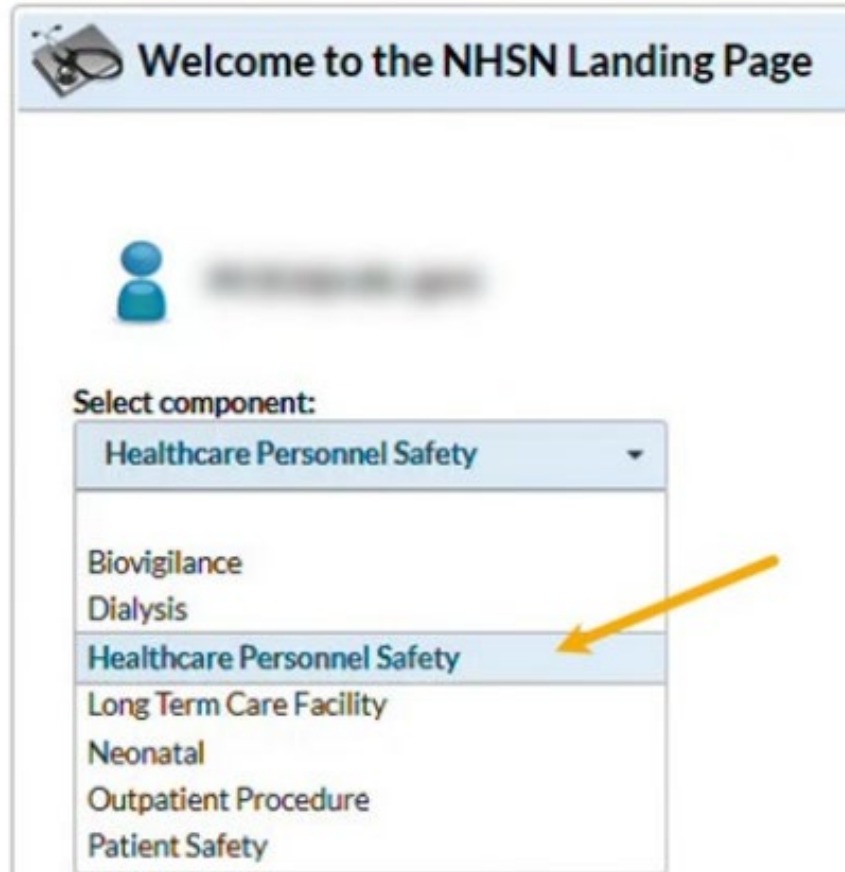
Multidrug-resistant organism (MDRO)	All infected or colonized with?	Certain characteristics that make them high risk for transmission (e.g., wounds, presence of an indwelling device)	No
a. MRSA:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. VRE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. CRE:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. ESBL or extended spectrum cephalosporin resistant Enterobacteriaceae	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>Novel and/or CDC-targeted MDROs</u>			
e. Pan-resistant organisms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Carbapenemase-producing organisms (e.g., Carbapenemase-producing Enterobacterales)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Candida auris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CDC understands surveys should be completed electronically by **March 1, 2024**. We are working rapidly to implement a NHSN application update to resolve the issue. If your facility is affected, please hold off on submitting the survey until further information is provided, as incorrect responses will impact the accuracy of the survey.


# HCP Influenza Reporting

# What To Report

- Report **annual HCP influenza vaccination summary data** through the NHSN Healthcare Personnel Safety (HPS) Component for the 2023-2024 influenza season



Welcome to the NHSN Landing Page

 [blurred text]

Select component:

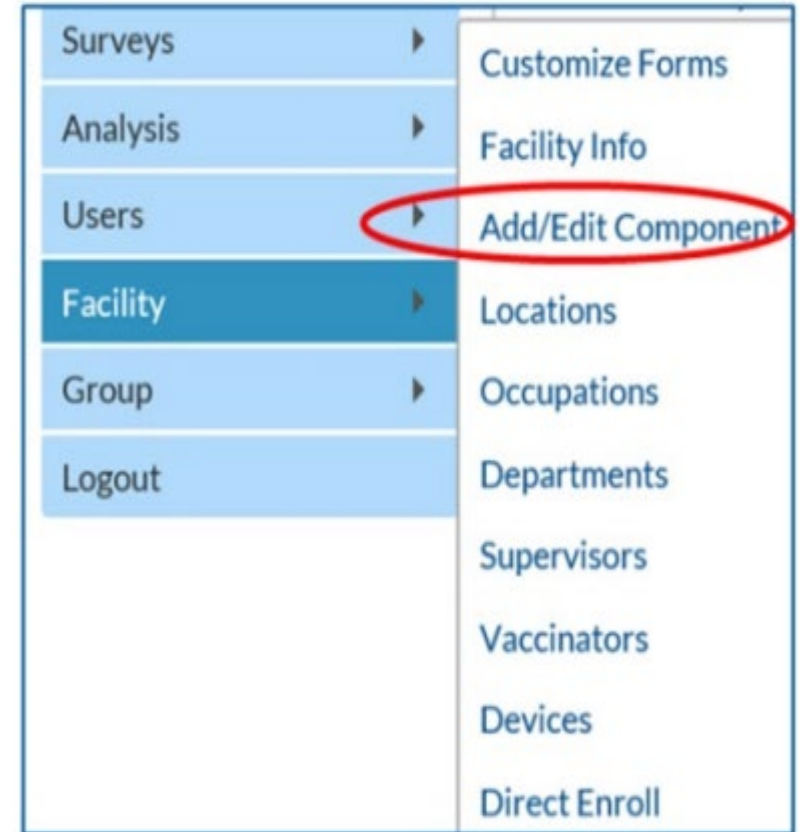
Healthcare Personnel Safety	▼
Biovigilance	
Dialysis	
Healthcare Personnel Safety	←
Long Term Care Facility	
Neonatal	
Outpatient Procedure	
Patient Safety	

# When To Report

- The reporting period for the 2023-2024 influenza season is from October 1, 2023, through March 31, 2024.
- The deadline to report the one-time summary report is May 15, 2024.

# Where To Report

- First, the Healthcare Personnel Safety (HPS) Component in NHSN must be activated.
  - Do not de-activate other checked components, such as the LTC component.



# Who Can Report

- The NHSN-designated facility admin (FA) is the only person who can initiate the process of activating the HPS component in NHSN.
  - FA must have SAMS Level 3 reporting access to activate the HPS component.
  - FA can designate another user to do the reporting once activated.



# Common Issues (last season)

- NHSN-designated FA is no longer employed at the facility.
- FA and/or other NHSN users did not have Level 3 access.
- LTC component was de-activated while trying to activate the HPS component.
- Facilities not aware of the reporting deadline.

# How To Be Prepared

- Ensure each entity has multiple NHSN users who have admin rights assigned to them.
- Ensure the person listed as FA is still with the facility.
- Ensure all NHSN users have Level 3 access.
  - If you do not currently have Level 3 access, you should have received an invitation from NHSN.
  - To request Level 3 access, please do so in NHSN-Service now or email [NHSN@cdc.gov](mailto:NHSN@cdc.gov) and put “SAMS Level 3 Access” in the email subject line.

# Questions or Need Help?

Please use **NHSN-ServiceNow** to submit questions to the NHSN Help Desk. The new portal can be accessed [here](#) and should be used in place of [nhsn@cdc.gov](mailto:nhsn@cdc.gov), [nhsntrain@cdc.gov](mailto:nhsntrain@cdc.gov), and [nhsndua@cdc.gov](mailto:nhsndua@cdc.gov).

ServiceNow will help the NHSN team respond to your questions faster. Users will be authenticated using CDC's Secure Access Management Services (SAMS), the same way you access NHSN. If you do not have a SAMS login, or are unable to access ServiceNow, you can still email the NHSN Help Desk at [nhsn@cdc.gov](mailto:nhsn@cdc.gov).

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](mailto:cdcinfo@cdc.gov) Web: [www.cdc.gov](http://www.cdc.gov)

# Resources for HCP Flu Reporting

## Where can facilities access training materials?

- Materials about annual HCP influenza vaccination data reporting are organized under the “Annual” reporting headings on this webpage: [HCP Flu Vaccination](#) | [HPS](#) | [NHSN](#) | [CDC](#).

## What are key training materials for LTCFs?

- This slide deck reviews how LTC facilities can report annual HCP influenza vaccination data through NHSN: [HCP Influenza Vaccination Summary \(cdc.gov\)](#).
- This operational guidance document outlines the CMS reporting requirement: [Operational Guidance for Skilled Nursing Facilities to Report Annual Influenza Vaccination Data to CDC’s NHSN](#).
- There will be a refresher training for LTCFs this fall. Registration information will be provided at a later date.

## Who do facilities contact with questions?


- Please direct all questions regarding CMS SNF QRP requirements and deadlines to [SNFQualityQuestions@cms.hhs.gov](mailto:SNFQualityQuestions@cms.hhs.gov).
- For questions on entering annual HCP influenza vaccination summary data through NHSN, please e-mail [nhsn@cdc.gov](mailto:nhsn@cdc.gov) with “HPS Flu Summary – LTCF” in the e-mail subject line.

# Additional Resources

## Resources

### COVID-19 Vaccination

[How to Run Healthcare Personnel COVID-19 Vaccination Data Reports for Long-Term Care Facilities: January 2024 and Forward](#)  [PDF – 691 KB] – January 2024

[How to Run Resident COVID-19 Vaccination Data Reports for Long-Term Care Facilities for June 2023 and Forward](#)  [PDF – 1,005 KB] – January 2024

[NHSN COVID-19 RPV Public Data Dictionary](#)  [XLS – 85 KB] – January 2024

[How to Run COVID-19 Vaccination Reports for Long-Term Care Facilities Prior to June 2023](#)  [PDF – 701 KB] – January 2024


[Quick Reference Guide: How to Enter COVID-19/Respiratory Pathogens Vaccination Data for Long-Term Care Facilities](#)  [PDF – 831 KB] – January 2024

[Quick Reference Guide, How to Check Create Dates](#)  [PDF – 468 KB]

[Quick Reference Guide, Navigating Data Entry Screens for Long-Term Care Modules](#)  [PDF – 713 KB] – January 2023

[Quick Reference Guide, Bar Charts of COVID-19 Vaccination Data](#)  [PDF – 505 KB] – November 2022

[COVID-19 Vaccination Modules: Understanding Key Terms and Up to Date Vaccination](#)  [PDF – 358 KB] – January 2024

[Quick Reference Guide, Reporting up to date COVID-19 vaccination status through the COVID-19 Vaccination Modules](#)  [PDF – 230 KB] – January 2024

# NHSH Shop Talk for Long-Term Care Facilities

A shop talk is a webinar hosted by Alliant to share information and resources



## Shop Talks & Quickinars

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



# Contact the Patient Safety Team

[patientsafety@alliantHealth.org](mailto:patientsafety@alliantHealth.org)



**Paula St. Hill, MPH, CIC, A-IPC**  
Technical Advisor, Infection Prevention  
[Paula.Sthill@allianthealth.org](mailto:Paula.Sthill@allianthealth.org)



**Amy Ward, MS, BSN, RN, CIC**  
Patient Safety Manager  
[Amy.Ward@AlliantHealth.org](mailto:Amy.Ward@AlliantHealth.org)



**Erica Umeakunne, MSN, MPH, APRN, CIC**  
Infection Prevention Specialist  
[Erica.Umeakunne@AlliantHealth.org](mailto:Erica.Umeakunne@AlliantHealth.org)



**Donald Chitanda, MPH, CIC LTC-CIP**  
Technical Advisor, Infection Prevention  
[Donald.Chitanda@AlliantHealth.org](mailto:Donald.Chitanda@AlliantHealth.org)

# Questions?





# Mark Your Calendar!

Shop Talk

3<sup>rd</sup> 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



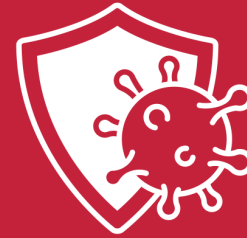
## CHRONIC DISEASE SELF- MANAGEMENT

- 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

# Making Health Care Better *Together*



ALABAMA • FLORIDA • GEORGIA • KENTUCKY • LOUISIANA • NORTH CAROLINA • TENNESSEE



@AlliantQIO



Alliant Health Solutions



@AlliantQIO



AlliantQIO

This material was prepared by Alliant Health Solutions, a Quality Innovation Network–Quality Improvement Organization (QIN – QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. 12SOW-AHS-QIN-QIO TO1-PCH–5095-01/12/24

 **ALLIANT**  
HEALTH SOLUTIONS

**QIN–QIO**  
Quality Innovation Network –  
Quality Improvement Organizations  
CENTERS FOR MEDICARE & MEDICAID SERVICES  
QUALITY IMPROVEMENT & INNOVATION GROUP