Shop Talk For Long-Term Care Facilities: Updates to CMS NHSN Reporting Requirements, COVID-19 and Respiratory Viruses Updates, NHSN Updates, and Live Q&A

Welcome!

Chat with Technical Support if you need assistance

Presented by:

Paula St. Hill, DrPH, MPH, CIC, A-IPC Infection Prevention Technical Advisor



Paula St. Hill, DrPH, MPH, CIC, A-IPC

INFECTION PREVENTION TECHNICAL ADVISOR

Dr. St. Hill is a health care professional 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.

Dr. St. Hill enjoys traveling, outdoor activities, and spending time with family and friends.

Contact: Paula.StHill@allianthealth.org



Donald Chitanda, MPH, CIC, LTC-CIP

INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. He previously 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.

Contact: <u>Donald.Chitanda@AlliantHealth.org</u>



Erica Umeakunne, MSN, MPH, APRN, CIC, CPPS

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 of 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. 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: <u>Erica.Umeakunne@allianthealth.org</u>



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 camping, bicycling and running.

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



Agenda

- CMS NHSN Reporting Requirements Update
- COVID-19 and Respiratory Viruses Updates
- NHSN Q3 Review
- NHSN Respiratory Pathogens Reporting
- Alliant Health and NHSN updates
- Live questions and answers



CMS NHSN Reporting Requirements Update



Long-Term Care (LTC) Facility Acute Respiratory Illness Data Reporting

- CMS proposes replacing the current COVID-19 reporting standards for LTC facilities that sunset on December 31, 2024
- Beginning on January 1, 2025, the new standard could require facilities to electronically report information about COVID-19, influenza, and respiratory syncytial virus (RSV)



NHSN COVID-19 LTCF Reporting Requirements

NHSN Reporting Requirement	NHSN Reporting Deadline
COVID-19/Respiratory Pathogens Pathway Data Reporting: New data should be reported weekly representing the time since the last report date. 1. Resident Impact and Facility Capacity 2. Staff and Personnel Impact	Reporting week is Monday through Sunday. Data must be submitted to NHSN once every reporting week. Report consistently each week.
COVID-19 Vaccination Data Reporting: Cumulative data should be reported every week for all residents and staff that were in your facility for the week of data collection. 1. Residents 2. HCP	Report once every week before Sunday at 11:59 p.m. (UTC).



CMS Reporting Requirements

Reminder: Facilities can contact CMS with questions about reporting requirements

- Weekly reporting requirement questions:
 <u>DNH_TriageTeam@cms.hhs.gov</u>
- Quality reporting program questions: <u>SNFQualityQuestions@cms.hhs.gov</u>



COVID-19 & Respiratory Viruses Updates



CDC Updates Respiratory Virus Dashboards

- 1) The <u>COVID-19 Data Tracker</u> is the CDC's flagship website for comprehensive data on COVID-19. Current hospital data visualizations using NHSN data, including those used to calculate COVID-19 County Hospital Admission Levels, have been archived.
- These have been replaced with <u>visualizations</u> that display data that hospitals voluntarily submit to the CDC's NHSN.
- 2) The Respiratory Virus Data Channel is CDC's one-stop shop for main data findings concerning the "big 3" viral respiratory illnesses—COVID-19, flu, and RSV. Current hospital data visualizations for COVID-19 and flu hospitalizations using NHSN data have been archived from the site and replaced with the respective findings from COVID-NET and FluSurv-NET.
- <u>RSV-NET</u> findings will continue to be displayed on the site.
- **3)** <u>Data.cdc.gov</u> is the CDC's central web-based platform that provides access to data published by the CDC for partners and the public. Datasets that include the historical NHSN data have been archived and remain available on data.cdc.gov for public use.
- Voluntarily reported NHSN hospital data products that include information on COVID-19 and flu will be made available to provide transparency in continued data collection efforts.



COVID-19 Update for the United States

COVID-19 Update for the United States

Early Indicators

Test Positivity

% Test Positivity

16.3%

Week ending July 27, 2024 Previous week 14.3%



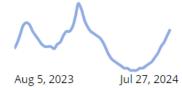
Aug 5, 2023 Jul 27, 2024

Emergency Department Visits

% Diagnosed as COVID-19

2.2%

Week ending July 27, 2024 Previous week 1.9%



These early indicators represent a portion of national COVID-19 tests and emergency department visits. <u>Wastewater</u> information also provides early indicators of spread.

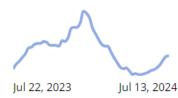
Severity Indicators

Hospitalizations

Rate per 100,000 population

3.1

Week ending July 13, 2024 Previous week 3.0



Deaths >

% of All Deaths in U.S. Due to COVID-19

1.5%

Week ending July 27, 2024 Previous week 1.2%

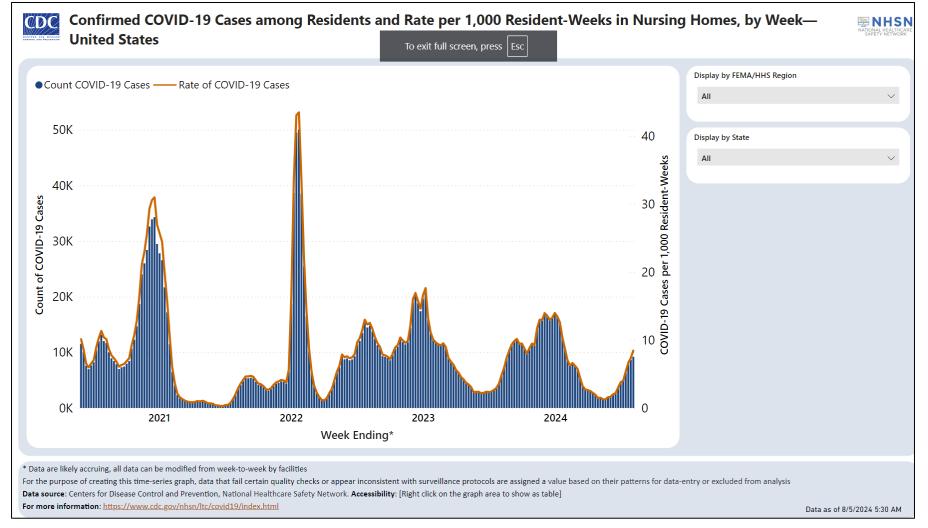


CDC | Test Positivity data through: July 27, 2024; Emergency Department Visit data through: July 27, 2024; Hospitalization data through: July 13, 2024; Death data through: July 27, 2024.

Posted: August 5, 2024 3:00 PM ET

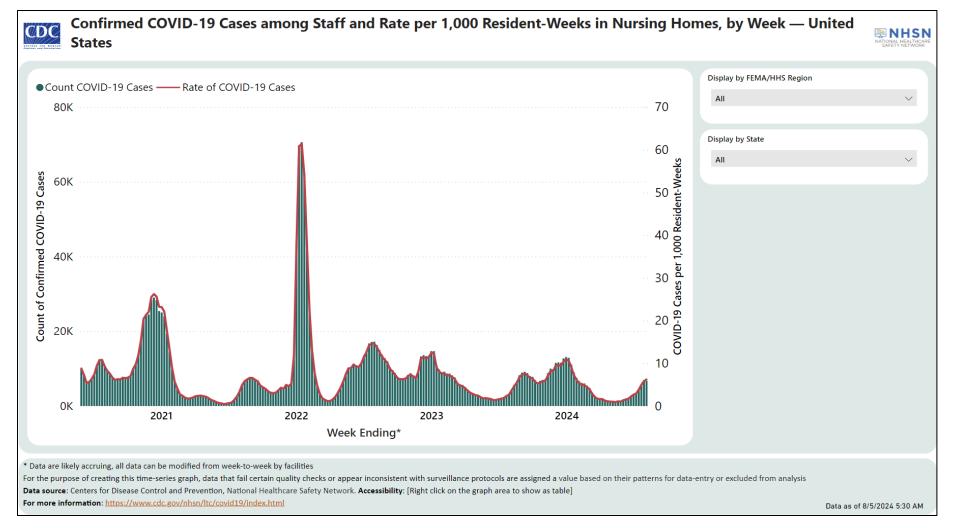


Confirmed COVID-19 Cases Among Residents in Nursing Homes

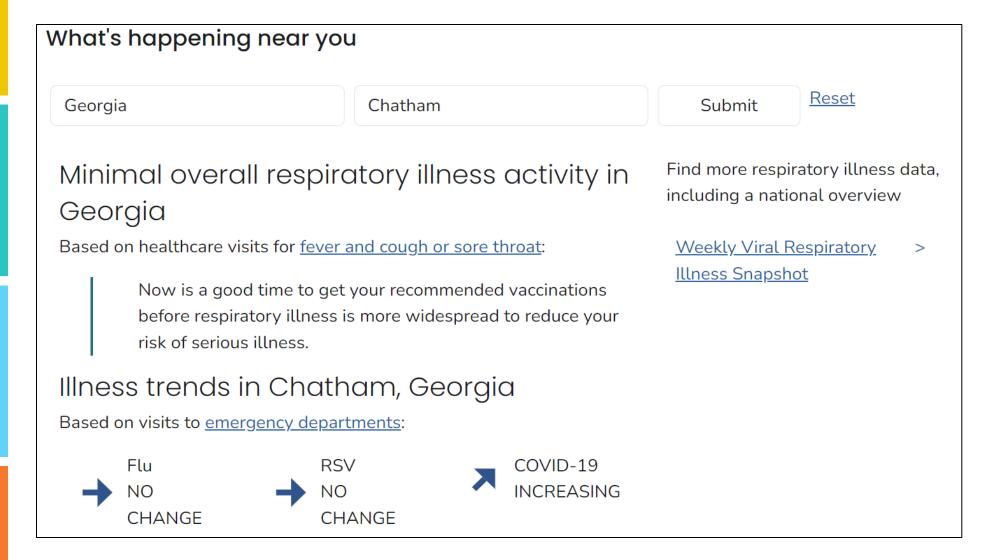




Confirmed COVID-19 Cases Among Staff in Nursing Homes

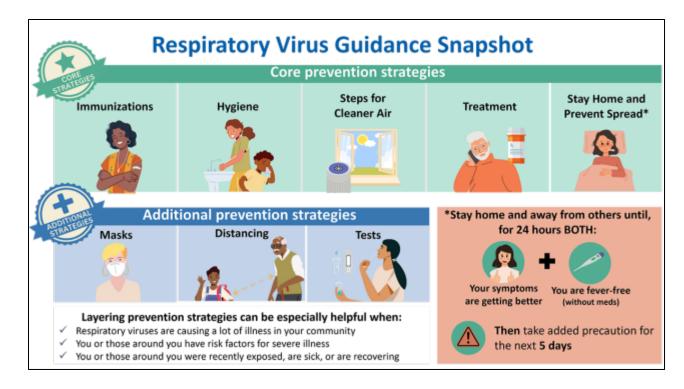


CDC Respiratory Illnesses Data Channel



CDC Respiratory Virus Recommendations

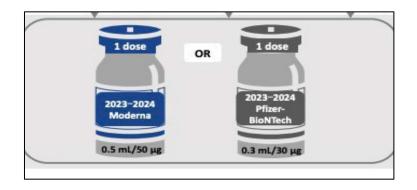
- Stay <u>up-to-date with vaccinations</u> to protect against serious illness, hospitalization, and death. This includes flu, COVID-19, and RSV if eligible.
- Practicing good hygiene by covering coughs and sneezes, washing or sanitizing hands often, and cleaning frequently touched surfaces.
- Taking steps to clean the air, such as bringing in more fresh outside air, purifying indoor air, or gathering outdoors.

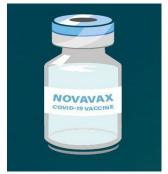




Stay Up-to-Date With COVID-19 Vaccines

- CDC recommends the 2023-2024 updated COVID-19 vaccines Pfizer-BioNTech, Moderna, or Novavax to protect against serious illness from COVID-19
- None of the updated 2023-2024 COVID-19 vaccines is preferred over another
- Everyone aged 5 years and older should get one dose of an updated COVID-19 vaccine to protect against serious illness from COVID-19
- People aged 65 years and older who received one dose of any updated 2023-2024 COVID-19 vaccine (Pfizer-BioNTech, Moderna or Novavax) should receive one additional dose of an updated COVID-19 vaccine at least four months after the previous updated dose
- COVID-19 vaccine recommendations will be updated as needed







Updated 2024-2025 COVID-19 Vaccine

- On June 27, 2024, the CDC adopted the ACIP's recommendations for the use of 2024–2025 COVID-19 vaccines
- The 2024–2025 vaccines are expected to be available in fall 2024
- CDC recommends everyone ages 6 months and older receive an updated 2024-2025 COVID-19 vaccine to protect against the potentially serious outcomes of COVID-19 this fall and winter



Updated 2024-2025 Flu Vaccine Recommendation

- CDC recommends that everyone 6 months of age and older receive an updated 2024-2025 flu vaccine to reduce the risk of influenza
- Providers are encouraged to begin their influenza vaccination planning efforts now and to vaccinate patients as indicated once 2024-2025 influenza vaccines become available
- September and October remain the best times for most people to get vaccinated



NHSN Reporting Period Q3 (July 1, 2024 – September 29, 2024)



NHSN Reporting Period Q3

From July 1, 2024 – September 29, 2024

For this reporting quarter, individuals are considered up-to-date with their COVID-19 vaccines for NHSN surveillance if they meet the following criteria:

- Individuals aged 65 years and older: Received two doses of the updated 2023-2024 COVID-19 vaccine or one dose of the updated 2023-2024 COVID-19 vaccine within the past four months
- Individuals younger than 65 years of age: Received one dose of the updated 2023-2024 COVID-19 vaccine



Up-To-Date With COVID-19 Vaccines Decision Tree

Appendix 1a: Decision Tree: Up to date with COVID-19 Vaccines during the surveillance period Quarter 2 2024 (April 1, 2024 – June 30, 2024) and Quarter 3 2024 (July 1, 2024 – September 29 2024) for the **COVID-19 Vaccination Modules** Facilities can use the following decision tree to help determine up to date vaccination status for the NHSN COVID-19 Vaccination Modules during the reporting period of Quarter 2 of 2024 (representing vaccination data for April 1, 2024 – June 30, 2024) and Quarter 3 2024 (representing data for July 1, 2024 – September 29, 2024). Have they received one or more 2023-2024 updated COVID-19 vaccine(s)? Are they 65 years of age or older? Did they receive only one dose of the Did they receive two doses of the vaccine? vaccine within the last four months? No Not Up To Date Up To Date



NHSN Reporting Period Q3

How should facilities report data beginning with Quarter 3 of 2024?

- Residents and health care personnel aged 65 and older should NOT be counted as up-to-date with COVID-19 vaccines until they receive a second dose of the 2023-2024 updated COVID-19 vaccine; or if they have received one dose of the updated 2023-2024 COVID-19 vaccine in the past four months
- Be careful not to incorrectly over-report the numbers of residents who are up-to-date. Residents aged 65 and older who previously had one dose of the 2023-2024 COVID-19 vaccine greater than four months ago should NOT be counted as up-to-date (Question #2)
- Continue to count residents and health care personnel aged less than
 65 as up-to-date if they have received one dose of the updated 2023-2024 COVID-19 vaccine



Reviewing Q3 **Up-to-Date** Definitions Polling Questions



Polling Question #1

James (67 years old) is a health care worker at Giant Peach Nursing Home. In January 2024, he received one dose of the updated 2023-2024 COVID-19 vaccine and a second dose in July 2024.

Is James considered up-to-date?

- A. Yes
- B. No
- C. Not sure



Answer

A. Yes

James IS considered up-to-date.

Where to document?

James should be counted in **Question #2 (up-to-date)** because he is over 65 years old and received two doses of the updated 2023-2024 COVID-19 vaccine.



Polling Question #2

Andy (80 years old) is a resident at Buzz Lightyear Health and Rehab. He has declined all COVID-19 vaccines and states he will "never get one."

Is Andy considered up-to-date?

- A. Yes
- B. No
- C. Not sure



Answer

B. No

Andy is NOT considered up-to-date.

Where to document?

Andy should be counted in **Question #3.2** (declined vaccine) because he declined to receive the updated 2023-2024 COVID-19 vaccine.



Polling Question #3

Mary (45 years old) is a health care worker at Hocus Pocus Nursing Home. She reported a medical contraindication that prevented her from receiving the updated COVID-19 vaccine in 2023- 2024.

Is Mary considered up-to-date?

- A. Yes
- B. No
- C. Not sure



Answer

B. No

Mary is NOT considered up-to-date.

Where to document?

Mary should be counted in **Question #3.1 (medical contraindication)** because she has a medical contraindication that prevents her from receiving the 2023-2024 updated COVID-19 vaccine.



Polling Question #4

Elsa (38 years old) is a resident at Let It Go Nursing & Rehab Center. She refused all previous COVID-19 vaccines but decided to receive the updated 2023-2024 COVID-19 vaccine.

Is Elsa considered up-to-date?

- A. Yes
- B. No
- C. Not sure



Answer

A. Yes

Elsa IS considered up-to-date.

Where to document?

Elsa should be counted in **Question #2 (up-to-date)** because she is younger than 65 and needs only one dose of the 2023-2024 updated COVID-19 vaccine to be considered up-to-date.



NHSN Respiratory Pathogens Reporting



Is NHSN Reporting Required for Influenza and RSV Vaccines for LTCF Residents?

Reporting for Influenza and RSV is optional

- There are not currently any federal regulations for reporting these vaccines among this population
- Reporting is still highly encouraged!

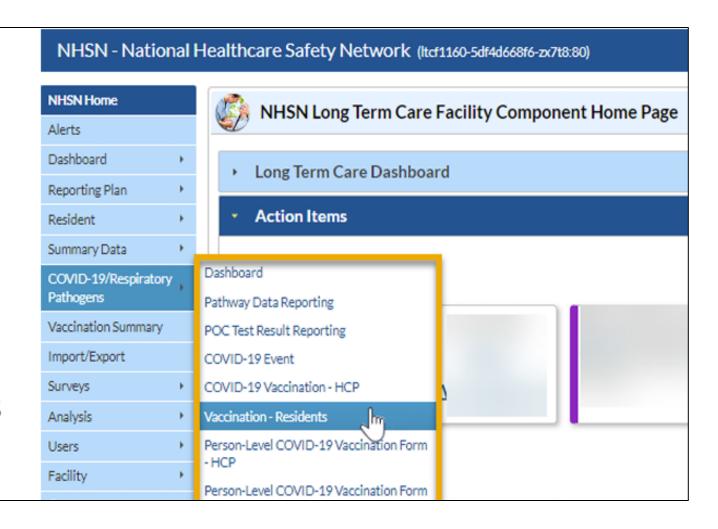


Long-Term Care Facility Home Page

 First, go to the NHSN Long Term Care Facility
 Component Home Page

 Go to the "COVID-19 / Respiratory Pathogens" tab

Select Vaccination-Residents



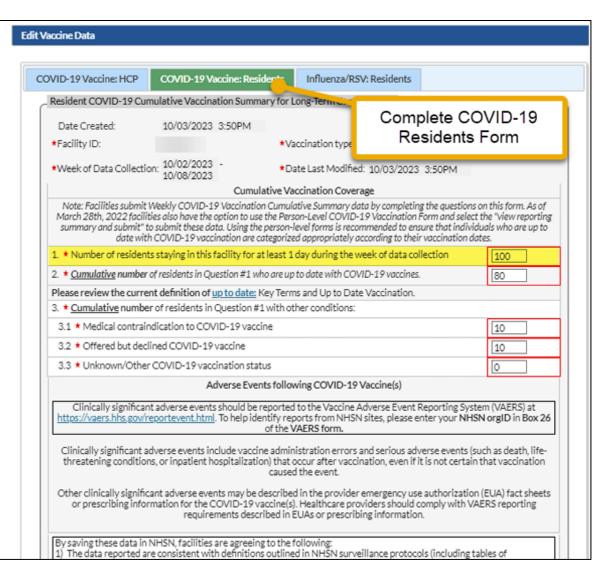


Complete COVID-19 Vaccine Residents Form

 Required to report COVID-19 residents' data **before** entering Influenza/RSV vaccination data

 Continue to report COVID-19 per CMS requirements

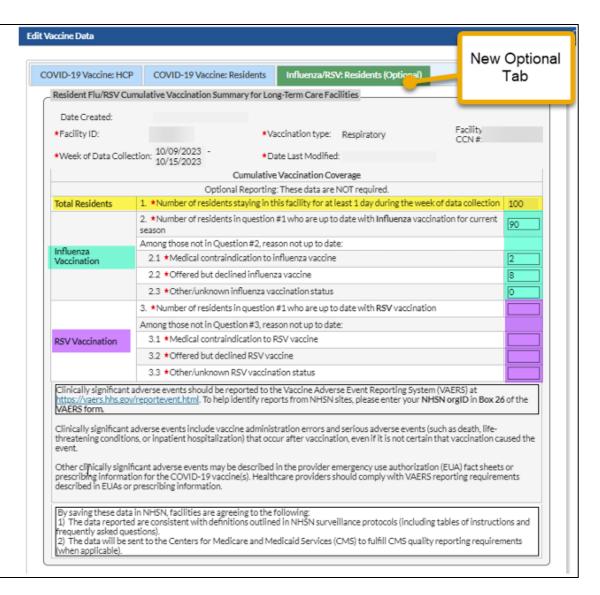
 Question 1 from COVID-19 residents form will auto populate total residents on Flu/RSV form





Influenza and RSV Vaccine Form

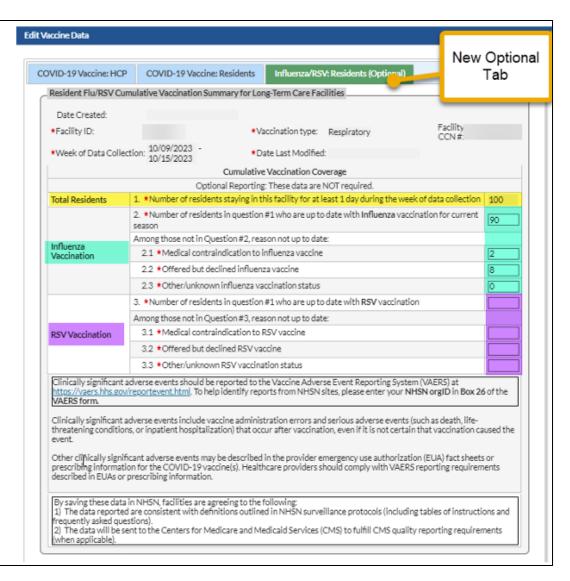
- Flu/RSV Total Residents (Question 1) is auto-populated from COVID-19 Residents tab
- 4 data fields for Flu/RSV vaccinations
 - Number of up to date
 - Number of medical contraindications
 - Number offered but declined
 - Number other/unknown
- The 4 data fields need to add up to the number reported in Total Residents (Question1)





Reporting Influenza and RSV Vaccinations

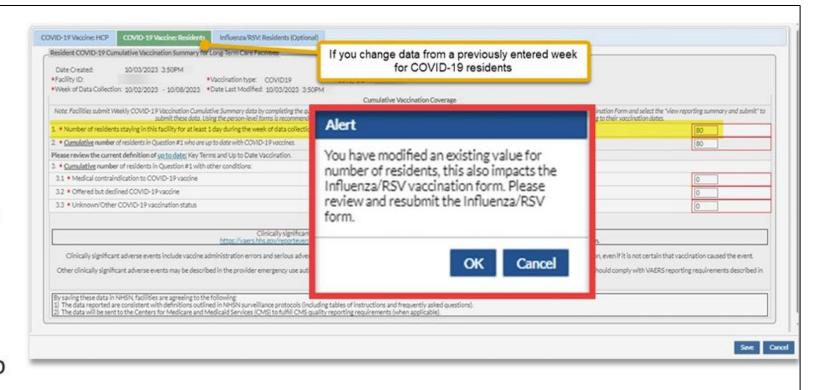
- You can report:
 - Both Flu and RSV vaccination questions
 - Only Flu vaccination (questions 2-2.3)
 - Only RSV vaccination (questions 3-3.3)
 - Neither
- If you report in any data field for either vaccine. You must complete all vaccination questions for the associated vaccine.
- Users choose how often to report
 - Ideally in same weekly reporting cadence as COVID-19 Vaccine





Note About Modifying Previously Entered Data

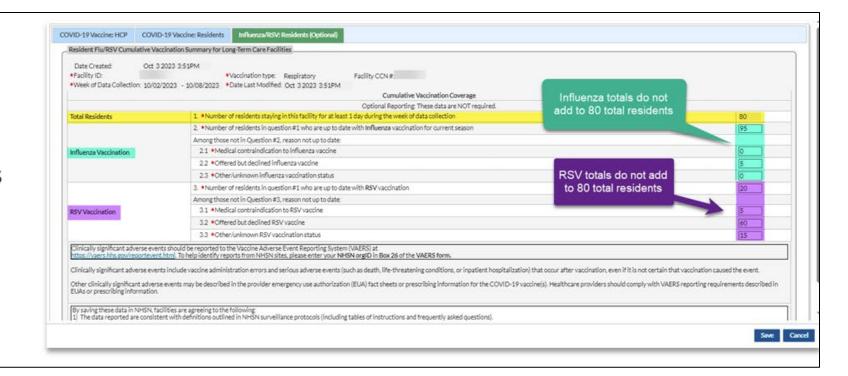
- An alert will appear if you modify the question 1 total on the COVID vaccine form for a previously saved week
- We changed a previous week from 100 residents to 80 residents
- Click OK, and then navigate to the influenza/RSV tab.





Review the Influenza/RSV Tab After Data Change

- Review that week's Flu and RSV data after changing COVID-19 total residents
- On the Flu and RSV tab totals do not add to 80
- Their totals will need to be changed in order to match the new total in Question 1

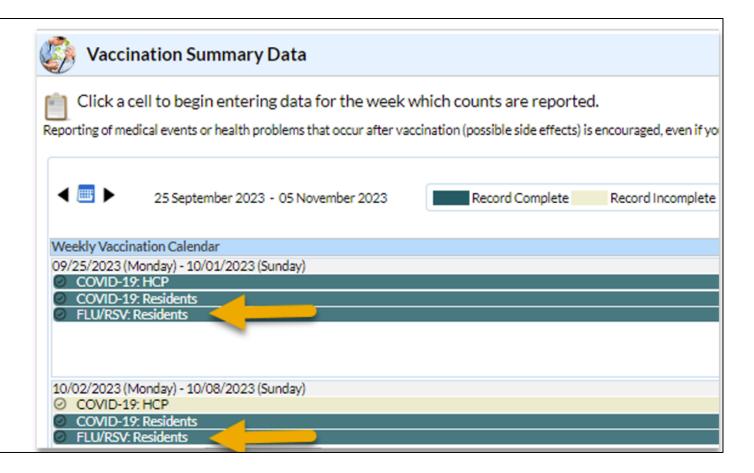




Weekly Vaccination Calendar

 Verify data submission on the Weekly Vaccination Calendar

- After saving data, it will be highlighted green
- Tan means data has not been submitted





Printable Form for Influenza and RSV

- Download the physical form from the "COVID19/Respiratory Vaccination" webpage
- Located under "Data Collection Forms and Instructions"

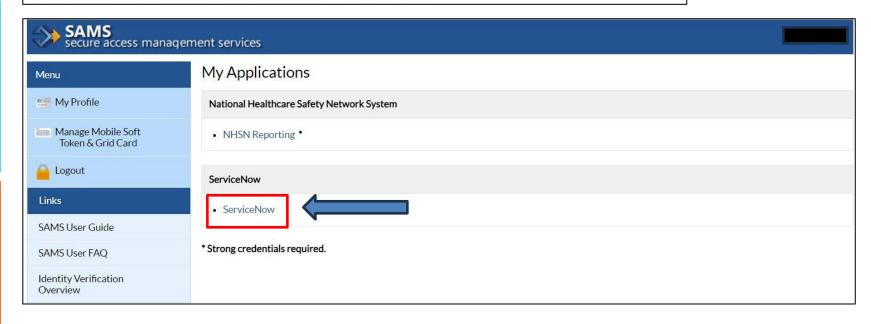
Weekly RSV/Influenza Vaccination Cumulative Summary for				
Residents of Long-Term Care Facilities ()				
1 page *required for saving				
Facility ID#:				
Week of data collection (Monday – Sunday):				
/// Date Last Modified: _ / _/				
Cumulative Vaccination Coverage				
Note: Facilities submit_vaccination data by completing the questions on this form. Facilities also have the option to use the Person-Level Vaccination Forms to enter individual vaccination information and select the "view reporting summary and submit" to submit these data. Using Person-Level Vaccination Forms is recommended to ensure that individuals are categorized appropriately according to their vaccination dates. Learn more here: (https://www.cdc.gov/nhsn/tc/weekly-covid-vac/index.html#anchor_21096)				
Total	Number of residents staying in this facility for at least 1 day during the week of data			
Residents	collection 2. Number of residents in question #1 who are up to date with Influenza vaccination for			
Vaccination	current influenza season			
	Among those not in Question #2, reason not up to date:			
	2.1. Medical contraindication to influenza vaccine			
	2.2. Offered but declined influenza vaccine			
	2.3. Other/unknown influenza vaccination status			
RSV Vaccination	Number of residents in question #1 who are up to date with RSV vaccination			
	Among those not in Question #3, reason not up to date:			
	3.1. Medical contraindication to RSV vaccine			
	3.2. Offered but declined RSV vaccine			
	3.3. Other/unknown RSV vaccination status			
Adverse Events following Vaccine(s)				
Clinically significant adverse events should be reported to the Vaccine Adverse Event Reporting System (VAERS) at https://vaers.hhs.gov/reportevent.html . To help identify reports from NHSN sites, please enter your NHSN orgID in Box 26 of the VAERS form.				
Clinically significant adverse events include vaccine administration errors and serious adverse events (such as death, life-threatening conditions, or inpatient hospitalization) that occur after vaccination, even if it is not certain that vaccination caused the event. Other clinically significant adverse events may be described in the Vaccine Information Statements (VIS) or prescribing information for the vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in VISs or prescribing information.				
Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).				

Any NHSN-Related Questions or Need Help? Use ServiceNow

NHSN-ServiceNow is LIVE

Please submit NHSN questions in ServiceNow instead of using nhsn@cdc.gov, and nhsndua@cdc.gov. ServiceNow can be accessed through your SAMS account at https://sams.cdc.gov/.

Tickets requiring CDA support and AUR test files should continue to be emailed to nhsnCDA@cdc.gov until further notice. If you are unable to access ServiceNow, you can still email the NHSN Help Desk at nhsn@cdc.gov.







Alliant Health Solutions and NHSN Updates



In Case You Missed It

Last month's July Shop Talk:

Updates/Upcoming NHSN trainings, HCP Vaccination Flu Summary Reporting, and NHSN Optional Reporting of Influenza and RSV Vaccination for LTC Residents

- Slides
- Webinar Recording





Reporting Deadline Reminder for CMS Quality Reporting Programs

The following data must be entered into NHSN by **August 15, 2024**, for facilities that participate in certain CMS quality reporting programs:

Skilled Nursing Facilities (SNFs) that participate in the Skilled Nursing Facility Quality Reporting Program -

 2024 Quarter 1 (January 1-March 31) Weekly Health Care Personnel COVID-19 Vaccination Summary data



2024 NHSN Annual Training

Training topics include surveillance definitions and analysis for:

- COVID-19 Surveillance
- Respiratory Pathogen Reporting
- Resident, Patient, and Health Care Personnel Vaccination
- Healthcare-Associated Infections (HAIs)
- Dialysis Event Surveillance
- Standardized Infection Ratio (SIR) Reporting



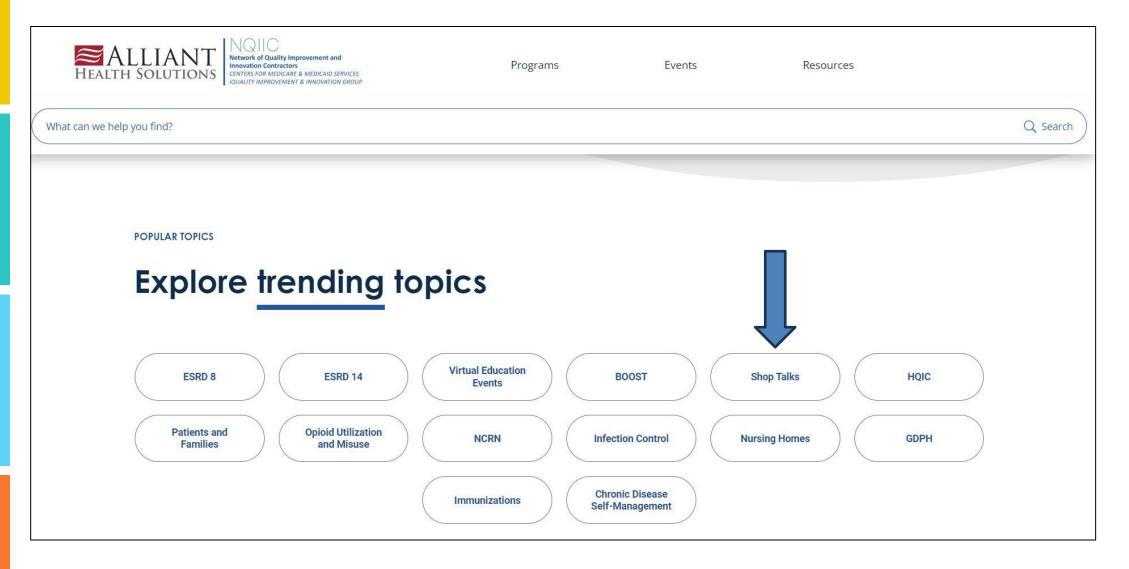


Long-Term Care Facility Component

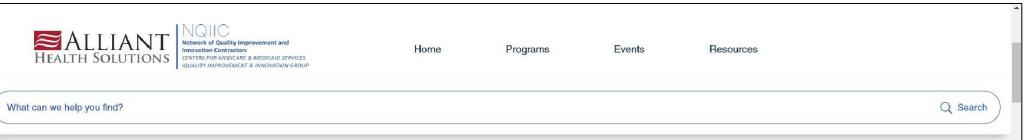
- Person Level Reporting for Long-term Care.pdf
- What is the Scoop All Things Data for the NHSN LTCF Component.pdf
- Current Hot Topics with Infection Prevention and Control in Long-term Care.pdf
- Quick Learn Demonstration Reporting Healthcare Personnel Safety COVID-19 Vaccination Data.pdf
- NHSN LTCF Component Past, Present, and Future.pdf
- QIN-QIO Assistance with NHSN Reporting.pdf



Alliant Health Solutions Website



Alliant Health Solutions Website



Shop Talks & Quickinars

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

Updates and support for surveillance, tracking and infection prevention in nursing homes using National Healthcare Safety Network (NHSN). This WebEx is focused on submitting COVID-19 data but may include other components such as C. Diff, UTIs and hand hygiene.

<u>Click here</u> to access the Shop Talk Shorts FAQs and video playlist.

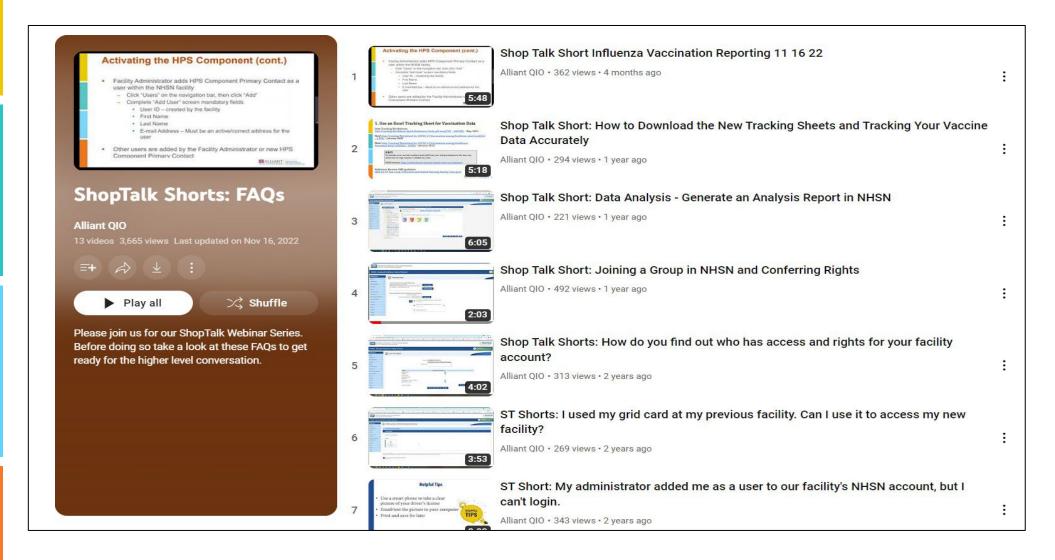
<u>Click here</u> to access the NHSN Weekly COVID-19 Vaccine Summary – Do Not Report Zeros resource.







Shop Talk and Shop Talk Shorts YouTube Channel







New Shop Talk Shorts

<u>Shop Talk Short: How to setup mobile soft token</u>

<u>Shop Talk Short: How to reinstall Entrust soft token on a new device</u>





NHSN E-Newsletters

Volume 19, Issue 2 June 2024	Inside this Issue:	
<u> </u>	Patient Safety Component	
NHSN	Attention! NHSN AUR Module Submission Required for the CY 2024 Medicare Promoting Interoperability Program	2
NATIONAL HEALTHCARE SAFETY NETWORK	Protocol Updates	3
	AUR Module Updates	7
	Rebaseline Corner	9
	NHSN Education and Training	
Z L	Register for NHSN Protocol and Training Ask the Experts June Webinar	10
Ĕ O	2024 Virtual Training Updates	11
Zi 🕶	Exciting News: New Training Resources for NHSN Administrators!	12
ğ 🕶	Healthcare Personnel Safety Component	
CENTERS FOR DISEASE CONTROL AND PREVENTION NHSN E-Newsletter	Gearing Up for the Changes to COVID-19 Vaccination Data Reporting Forms!	13
9 70	Dialysis Component	
4 5	Mark Your Calendars – Q1 2024 QIP Deadline	13
<u> </u>	General NHSN Information	
ž O	NHSN Vendor Corner	13
8	NHSN Application Time Stamps Updated to UTC	19
й —	NHSN Helpdesk: Activity Update	22
Š	NHSN Enrollment Update (as of June 10, 2024)	22
isi		
2		
Se C		
Zi -		
0		
(CDC		
	Page 1	





New Training Resources for NHSN Administrators

New Training Resources for NHSN Administrators

Dear NHSN Administrators,

We are delighted to announce the launch of our latest training resources tailored specifically for you. Our comprehensive set of training videos has been meticulously designed to guide you through various administrator tasks, step-by-step.

To ensure easy access, we have provided the link to the NHSN Administrators Training webpage below:

[Link: NHSN Administrators Training] NHSN Administrator Training | NHSN (cdc.gov)

These training videos cover essential topics such as:

- Adding a User to a Facility
- Enrolling a Facility in NHSN
- Deactivating and Activating a User in a Facility
- Reassigning the Facility Administrator in a Facility
- Adding a Component to a Facility

We encourage you to bookmark this page for future reference and share it with your team to facilitate seamless learning and skill development.

Stay tuned! In the near future, you will also be able to access these videos directly within the NHSN application on the left navigation bar on the Cheat Sheet tab.

Thank you for your dedication to ensuring the efficiency and success of our NHSN community.

Best regards,

NHSN Team

https://www.cdc.gov/nhsn/training/admintraining/nhsn-admin-training.html



NHSN Training

Our mission is to offer learning opportunities in a variety of formats that enhance the knowledge and skills of NHSN facility- and group-level participants and their partners in order that they may effectively use the data obtained from the surveillance system to improve patient and healthcare personnel safety.

Objectives

- Convey NHSN data collection methods, submission requirements, and analysis options to participants so that they may acquire, submit, and disseminate high quality, actionable data.
- Prepare participants to use the NHSN reporting application accurately and efficiently.
- Enhance participants' and their partners' understanding of data quality and the value of adverse event monitoring.
- Encourage collaboration among participants and partners to improve the patient and healthcare personnel safety across the spectrum of care.

NHSN Educational Roadmaps

NHSN Educational Roadmap

A guided tour of the training materials and information needed to provide a solid foundation of NHSN.



Long-Term Care Facility Component Roadmap

Phase II: Modules/Protocols Healthcare-associated Infections: Surveillance for Urinary Tract Infections Surveillance for UTI Module: Part I [Video - 24 min] Slideset P [PDF - 1.1 MB] Surveillance for UTI Module: Part II [Video - 31 min] Slideset [PDF - 3.4 MB] UTI Protocol PDF - 533 KB Laboratory-identified Event (LabID Event): Surveillance for CDI and MDROs in LTCF Surveillance for CDI in LTCFs: LabID Event Modules [Video - 30 min] Slideset [PDF - 1.1 MB] Surveillance for MDROs in LTCFs: LabID Event Modules [Video - 24 min] Slideset PDF - 1.1 MB1 LabID Event Protocol [PDF - 308 KB] Prevention Process Measures: Hand Hygiene, Gloves and Gown Adherence LTCF Prevention Process Measures Module [Video - 27 min] Slideset P [PDF - 2 MB] PPM Protocol [PDF - 308 KB] Phase III: Analysis Introduction to Analysis

Data for Action: How can NHSN data be used to guide prevention efforts in LTCF? - March 2017 [Video - 43 min]

Slideset PDF - 4 MB1



https://www.cdc.gov/nhsn/training/roadmap/ltc-roadmap.html



Questions?



Thank You for Your Time! Contact the Patient Safety Team

patientsafety@alliantHealth.org



Amy Ward, MS, BSN, RN, CIC, FAPIC
Patient Safety Manager
Amy.Ward@AlliantHealth.org



Erica Umeakunne, MSN, MPH, APRN, CIC, CPPS
Infection Prevention Specialist
Erica.Umeakunne@AlliantHealth.org



Paula St. Hill, DrPH, MPH, CIC, A-IPC
Technical Advisor, Infection Prevention
Paula.Sthill@allianthealth.org



Donald Chitanda, MPH, CIC, LTC-CIP
Technical Advisor, Infection Prevention
Donald.Chitanda@AlliantHealth.org



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 highrisk 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

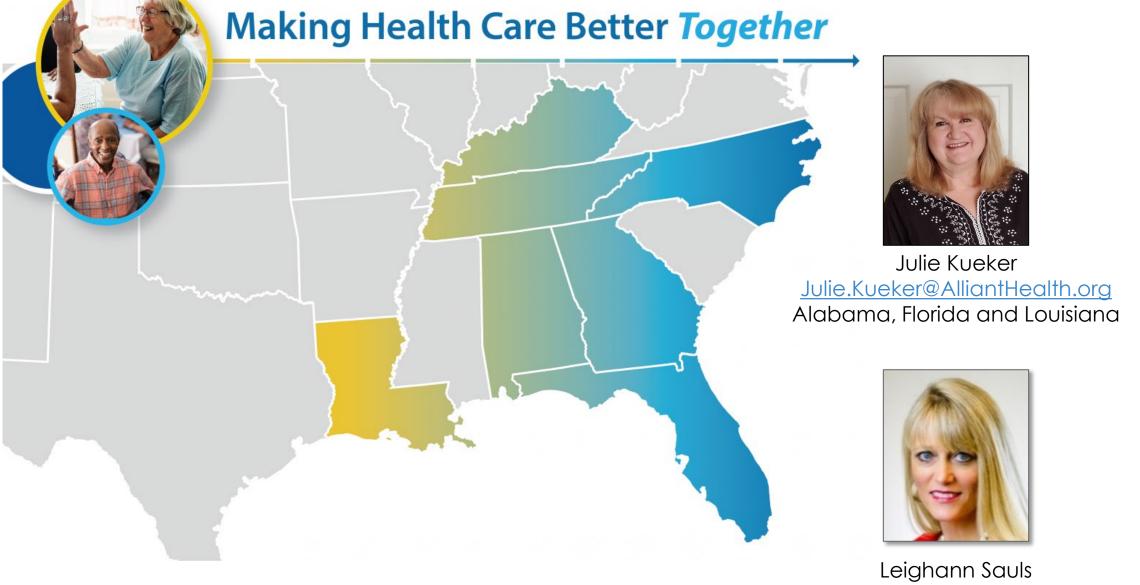
IMMUNIZATION

Increase influenza, pneumococcal, and COVID-19 vaccination rates

TRAINING

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





Leighann Sauls

<u>Leighann.Sauls@AlliantHealth.org</u>

Georgia, Kentucky, North Carolina and Tennessee









Making **Health Care** Better Together

@AlliantQIO





Alliant Health Solutions



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-NH TO1-PCH-6135-08/12/24

