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LTC COVID-19 Update

Presented by:
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Today's Topics

- ☒ Opening comments and updates – Amy Kent
- ☒ Booster shots and protection clarification – Dr. Vuppalanchi
- ☒ Qsource trends and updates – Kara Dawson
- ☒ Additional precautions – Lori Davenport
- ☒ Q&A

***Nursing Staff Competency Workshop**, an in-person workshop on Mar. 10, details [HERE](#)*

***Life Safety Code Workshop**, an in-person workshop on Mar. 24, details [HERE](#)*

***Spring Conference: Recruitment & Retention**, April 18-20 in French Lick, details [HERE](#)*



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Qsource Trends and Updates



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NHSN – Reporting Deaths

- Total Deaths –
 - *Number of residents who have died for any reason in the facility or another location since the last date counts were reported to NHSN*
- Include each resident death (no matter the cause) only once in Total Deaths count
- Total Deaths should **NEVER** be lower than the COVID-19 Deaths in a reporting week
- Residents **DISCHARGED** from the facility are **EXCLUDED** from the count



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NHSN – COVID -19 Death Reporting

- COVID-19 Deaths –
 - *Residents who died from COVID related complications and includes resident deaths in the facility AND in other locations, such as an acute care facility in which the resident with COVID was transferred to receive treatment*
- This count for new COVID Deaths **CANNOT** be higher than the count for new Total Deaths in a reporting period.
- Residents **DISCHARGED** (specifically, **NOT** expected to return to the facility) from the facility are excluded from the count.



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NHSN Vaccination Reporting

- Be prepared for survey by ensuring
 - Approved documentation is readily available
 - Signed statement or form
 - Electronic form or email from the HCW indicating when and where they received the vaccine
 - A note, receipt or vaccination card from the outside vaccinating entity stating that the HCW received vaccine at that location
 - **VERBAL STATEMENTS ARE NOT ACCEPTABLE IN ORDER TO DOCUMENT VACCINATION ON REPORT**



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QIO Assistance & Support

- Hands on/Collaborative Approach
 - Intervention/System implementation
 - Creation and/or sharing of monitoring tools and/or resources
- Services include (not limited to):
 - In-services
 - NHSN Technical Assistance
 - Infection Control Binder Review
 - Antibiotic Stewardship Binders
 - Mock Surveys
 - Infection Preventionist support /training
 - Root Cause Analysis/QAPI



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QIO Assistance & Support (cont.)

- Quality Measures
- Observations/Monitoring
- Skills/Competency checkoffs
- Vaccination clinics
- Dementia/Behavior Training
- Advanced Care Planning
- Directed Plans of Correction
- Looking at different out of the box ways to provide education and training as well
 - Learn Dash
 - Virtual Escape Room



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Trends/Observations Identified

- Lack of hand hygiene
 - When exiting and entering resident rooms
 - Between meal trays
- Equipment Cleaning
 - Between residents – especially B/P cuffs and Hoyer lifts
- Medication and treatment carts left unlocked
- Failure to Don and Doff PPE correctly
- Housekeeping carts let unlocked and unattended
- Storing personal beverages on med carts, housekeeping carts and nurses stations.



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Trends/Observations (cont.)

- Failure to wear protective eye wear
- Masks below nose and/or chin
- Several staff certified with IP but not one accountable
- Lack of documentation
- Care Plans not updated and/or individualized to the resident
- Staff not aware of which residents are in isolation (yellow zone specifically)



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Resources Available



[ResourceHub.Exchange](#) is our online warehouse of tools, resources, podcast and webinars.



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Additional Precautions

Who:

Staff who remain unvaccinated due to a **medical/religious exemption** or **newly hired staff** who only have the first dose of the two-dose series.



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Possible Actions

- Be intentional and take a layered approach
 - Risk assessment – staff and residents served
 - Know what is required of all and what is more restrictive
 - Additional = more than what is required of vaccinated staff




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Recommendations:

- ☒ Establish policies and procedures around what additional precautions for unvaccinated staff will be in your facility.
- ☒ Review current CDC, CMS and state guidelines and requirements and know the difference of what is required and what is more restrictive.
- ☒ Establish education for all employees related to the P&Ps.
- ☒ Establish surveillance and oversight to ensure compliance shift to shift.
- ☒ Unvaccinated staff could be interviewed during the survey process and observed.
- ☒ Ensure a system for visitors signing in and who they are visiting is followed.
- ☒ Keep your eyes on the ball with your QAPI program.



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Q&A

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THANK YOU!

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