

Regulatory Roundup

Weekly Webinar for Long-Term Care Professionals

(A) IHCA.org/regulatory-roundup

PRESENTERS

Lori Davenport

Indiana Health Care Association

Team Members from

Indiana Department of Health

August 10, 2023

Upcoming Education Offerings

WEBINAR	WEBINAR	WEBINAR	IN-PERSON
MDS Mastermind	Silver Quality	Advanced Action Planning for Administrators Aug 22 Details here.	Assisted Living
Webinar Series	Award Workshop		Symposium
Aug 10 – Sept 28	Aug 10 – 31		Sept 28 – 29
Details <u>here</u> .	Details <u>here</u> .		Details <u>here</u> .



Today's Agenda

- Keeping residents safe through vaccination –
 Mary Enlow RN, IP IDH
- NHSN Clarifications a repeat Teresa Hostettler, Lead QI Advisor Q Source
- Q&A

 Lori Davenport



KEEPING RESIDENTS SAFE THROUGH VACCINATION

MARY ENLOW BSN, RN, IP

INFECTIOUS DISEASE EPIDEMIOLOGY & PREVENTION DIVISION

8/10/2023

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



Objectives

What is important, and what do you need to know:

- Shingrix What is it, dosing, factors to consider
- RSV Vaccine What is it, Dosing, when will it be out
- PneumoVax Mobile App What is it, how to use it.
- Top 5 gaps and trends



Shingles

- Shingles is a painful rash that usually develops on one side of the body, often the face or torso
- The rash consists of blisters that typically scab over in 7 to 10 days and clears up within 2 to 4 weeks
- Some people describe the pain as an intense burning sensation
- For some people, the pain can last for months or even years after the rash goes away. This longlasting pain is called postherpetic neuralgia (PHN), and it is the most common complication of shingles.
- Your risk of getting shingles and PHN increases as you get older



Photos of Shingles (Herpes Zoster) | CDC



Shingrix vaccine

- Shingles vaccination is the only way to protect against shingles and postherpetic neuralgia (PHN), the most common complication from shingles.
- You should get Shingrix even if in the past you:
 - Had shingles
 - Received Zostavax (a different Shingles vaccines called Zostavax was used in the past, it is no longer available for use in the United States, as of Nov. 18, 2020.)
 - Received varicella (chickenpox) vaccine
- There is no maximum age for getting Shingrix.



Shingrix Dosing

Indications:

- Adults 50 years and older should get two doses of Shingrix, separated by 2 to 6 months
- Adults 19 years and older who have or will have weakened immune systems because of disease or therapy should also get two doses of Shingrix
- If needed, people with weakened immune systems can get the second dose 1 to 2 months after the first

Considerations:

- Adults with a minor acute illness, such as a cold, can receive Shingrix
- People who are moderately or severely ill should usually wait until they recover to be vaccinated



Contraindications:

- You should not give Shingrix to patients who are experiencing an acute episode of herpes zoster
- Defer vaccination for patients with suspected or confirmed COVID-19, regardless of symptoms, until the patient has met the criteria for discontinuing isolation
- Shingrix is an inactive vaccine so you can administer it with other inactive or live vaccines. If you administer Shingrix and another vaccine to someone on the same day, give them at different anatomical sites (e.g., different arms).
- Wait a minimum of 8 weeks after a person received Varivax to give Shingrix
- If a patient waits longer than 6 months to get the second dose you should give the second dose as soon as possible. However, you do not need to restart the vaccine series.

Possible Side Effects of Shingrix

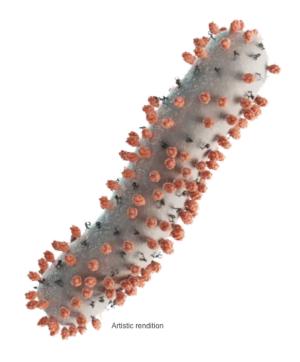
- Sore arm
- Mild or moderate pain
- Redness
- Swelling where they got the shot
- Tiredness
- Muscle pain
- Headache
- Shivering
- Fever
- Stomach pain
- Nausea

- Symptoms went away on their own in about 2 to 3 days
- Side effects were more common in younger people
- Patient may have a reaction to the first or second dose of Shingrix, or both doses
- Guillain-Barré syndrome (GBS) reported very rarely after Shingrix. (There is also a very small increased risk of GBS after having shingles)
- Report side effects from Shingrix to the Vaccine Adverse Event Reporting System (VAERS). VAERS website, or by calling 1-800-822-7967.



Respiratory Syncytial Virus (RSV)

- RSV is a contagious virus. Spread via virus droplets, and direct contact with the virus by touching a surface with the virus on it, causing lower respiratory infections.
- It is a common respiratory virus that usually causes mild, cold-like symptoms. Most people recover in a week or two, but RSV can be serious, especially for infants and older adults.
- CDC estimates that every year, RSV causes approximately 60,000–160,000 hospitalizations and 6,000–10,000 deaths among older adults.



What is RSV? | RSV in Adults for HCPs



Respiratory Syncytial Virus (RSV) Vaccines

New vaccines which are the first ones licensed in the United States to protect against RSV

Available this fall for people ages 60 years and older.

- These vaccines provide an opportunity to help protect older adults against severe RSV illness at a time when multiple respiratory infections are likely to circulate
- RSV vaccine is recommended as a single dose. Studies are ongoing to determine whether (and if so, when) revaccination may be needed

ABRYSVO
Pfizer
Package Insert

AREXVY
GlaxoSmithKline
Package Insert



RSV Vaccines

June 29, 2023

CDC Director Rochelle P. Walensky, M.D., M.P.H., endorsed the CDC Advisory Committee on Immunization Practices' (ACIP) recommendations for use of new Respiratory Syncytial Virus (RSV) vaccines from GSK and Pfizer for people ages 60 years and older, <u>using shared clinical decision-making</u>. This means these individuals may receive a single dose of the vaccine based on discussions with their healthcare provider about whether RSV vaccination is right for them.



Side Effects and Reporting Adverse Events

Side Effects

- Injection site pain
- Fatigue
- Muscle pain
- Headache
- Joint stiffness/pain
- Atrial fibrillation
- Guillain-Barré syndrome

Reporting of Vaccine Adverse Events

Adverse events after vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS). Reporting is encouraged for any clinically significant adverse event even if it is uncertain whether the vaccine caused the event.

Information on how to submit a report to VAERS is available at:

https://vaers.hhs.gov/index.html
or by telephone at 1-800-822-7967

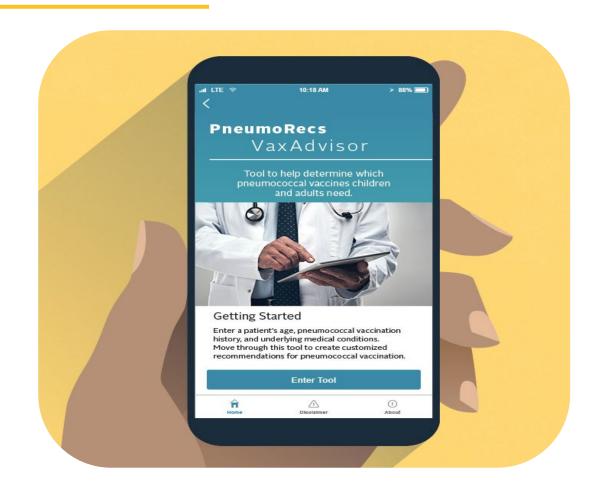


PneumoRecs VaxAdvisor

The **PneumoRecs VaxAdvisor** mobile app helps vaccination providers quickly and easily determine which pneumococcal vaccines a patient needs and when.

Recommended for all ages

- Provides patient-specific guidance consistent with the Advisory Committee on Immunization Practices (ACIP) pneumococcal vaccination recommendations.
- Eliminates the challenge of interpreting and synthesizing multiple vaccination recommendation statements.





Trends: Top 5 IPC Gaps in LTC/AL

Top 5 IPC Gaps:

- 1. Resident hand hygiene
- 2. Auditing
 - Hand Hygiene (30 per 100 residents monthly), safe injection practices, cleaning & disinfecting practices, etc.
- 3. Antibiotic stewardship practices
 - Keeping antibiograms, training nurses and providers annually on antibiotic use, etc.
- 4. Wearing proper PPE with laundry
- 5. EVS managers rounding

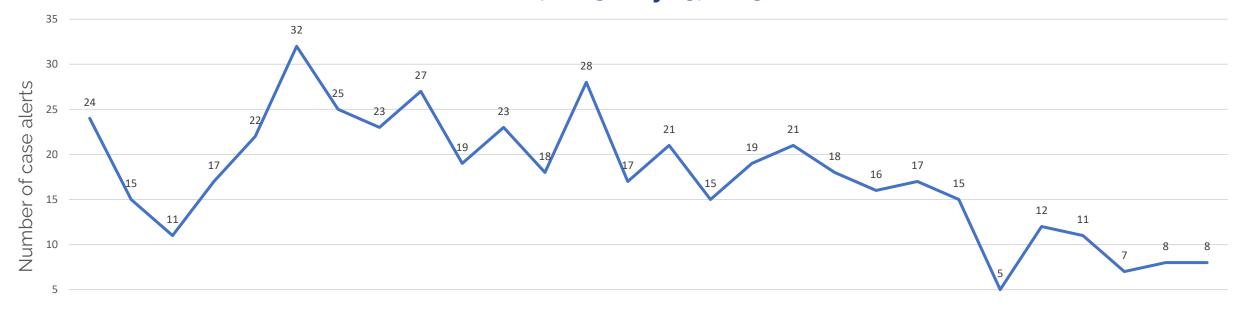
RESOURCES

- IDOH's IP Website
- Project Firstline
 Education Materials
- CDC's ICAR Auditing Tools
- CDC's Core Elements of Antibiotic Stewardship
- Sign Up for the IDOH LTC Newsletter



Reported COVID-19 Outbreaks in LTC/AL

Number of COVID-19 Case alerts per Week Jan 1, 2023-July 15, 2023





Date range per Week

References

Shingles Vaccination: What Everyone Should Know | CDC

Shingrix Vaccine FAQs | CDC

AREXVY.PDF (gskpro.com)

Now Approved | AREXVY (Respiratory Syncytial Virus Vaccine, Adjuvanted) (arexvyhcp.com)

FDA Approves First Respiratory Syncytial Virus (RSV) Vaccine | FDA

For Healthcare Professionals: RSV (Respiratory Syncytial Virus) | CDC

How to Report an Adverse Event to VAERS

PneumoRecs VaxAdvisor: Vaccine Provider App | CDC

Vaccine Schedules App | CDC

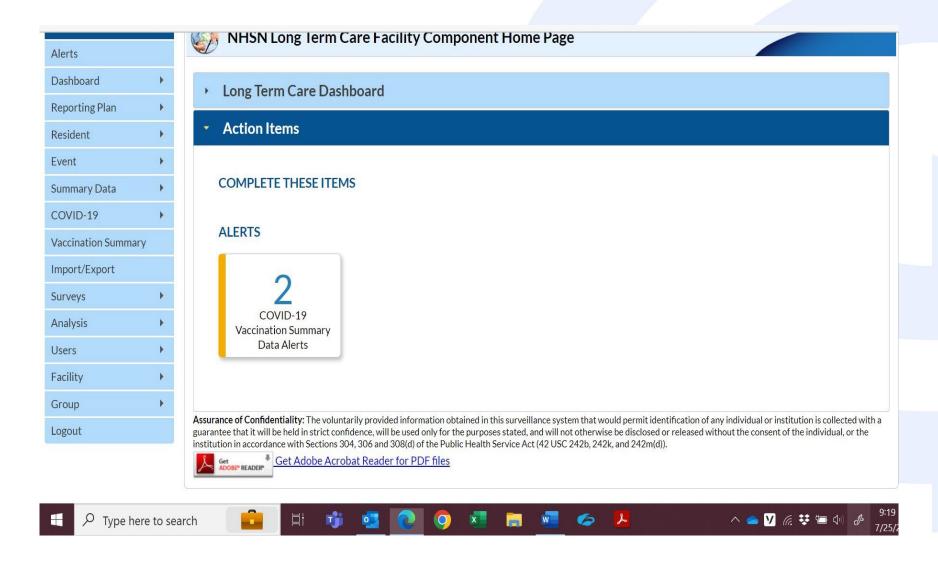
CDC Recommends RSV Vaccine For Older Adults | CDC Online Newsroom | CDC



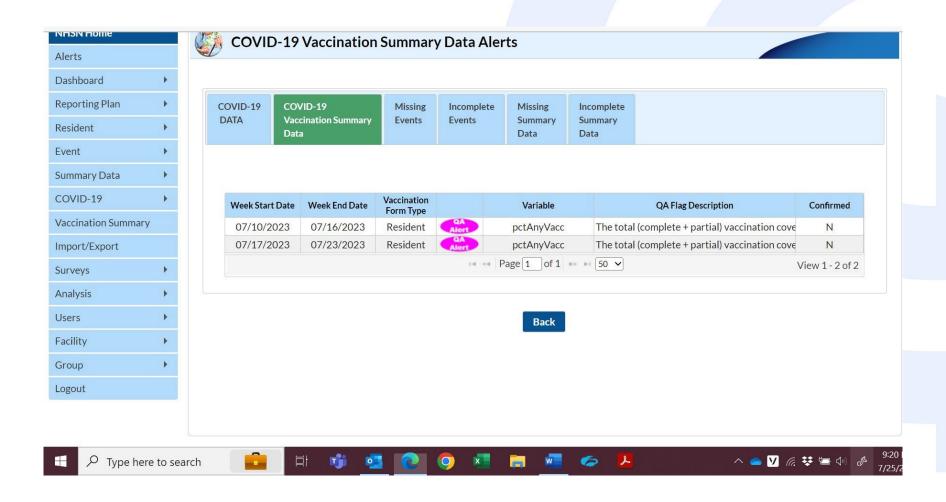
Please reach out to your district IP for more information.

Mary Enlow BSN, RN
Infection Preventionist District 10

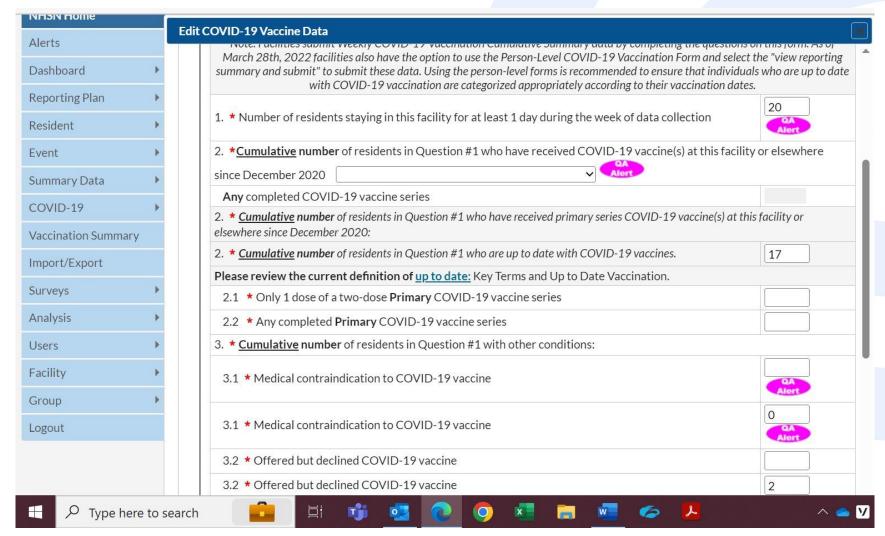




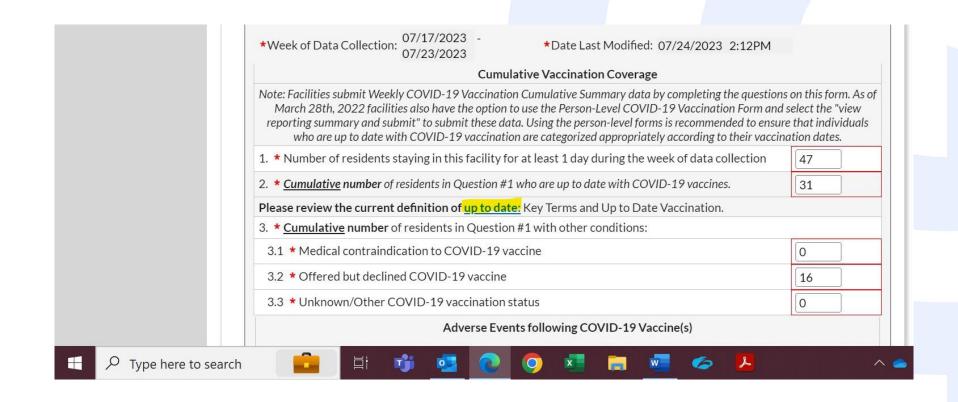














NHSN Clarifications –NHSN's Response to Alerts

Ticket Number

Resolution

This response was sent to NHSN user on 7/25/2023.

Hello ----- Thank you for your message.

We are aware of the issue with the quality assurance (QA) alerts that appear on the alerts screen in the NHSN application, and we are currently working to resolve it. It appears that the data quality alerts are now sometimes generating inaccurately for the Weekly COVID-19 Vaccination Module for residents.

Please disregard these alerts, as the alerts are not impacting a facility's ability to enter, update, save, or analyze data. Additionally, please do not edit Weekly COVID-19 vaccination Module data from within the QA alerts screen.



Qsource NHSN Vaccination Team

NHSN Email re: Deadline for Reporting

Long-Term Acute Care Facilities (LTACs/LTCHs) that participate in the Long-Term Care Hospital Quality Reporting Program:

2023 Quarter 3 (January 1 - March 31) CLABSI and CAUTI data (all bedded inpatient locations)

2023 Quarter 3 (January 1 - March 31) C. difficile LabID Events (FacWidelN, all healthcare-onset, and community-onset)

2023 Quarter 1 (December 26, 2022 - March 26, 2023) Weekly Healthcare Personnel COVID-19 Vaccination Summary data

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

2023 Quarter 1 (December 26, 2022 - March 26, 2023) Weekly Healthcare Personnel COVID-19 Vaccination Summary data





Q&A

Contact Information

Lori Davenport - IHCA/INCAL Clinical/Regulatory

- Idavenport@ihca.org
- 765-516-0148

Jordan Stover - Assistant Commissioner, IDH

- Jstover1@health.in.gov
- 317-233-7289

Paul Krievins

• pkrievins@health.in.gov

Kelly White - Reporting, IDH

• <u>kewhite@health.in.gov</u>

Tammy Alley - Vaccine Questions, IDH

- talley@health.in.gov
- 317-223-7441

Janene Gumz-Pulaski - Infection Control, IDH

jgumzpulaski@health.in.gov

Randy Synder - Vaccine Questions, IDH

rsnyder1@health.in.gov

Peter Krombach

• <u>pkrombach2@health.in.gov</u>

Russell Evans

- russ@probarisystems.com
- <u>outreach@probarisystems.com</u>
- 317-804-4102

Paul Peaper – IHCA/INCAL President

ppeaper@ihca.org

Dr. Shireesha Vuppalanchi - Clinical, IDH

svuppalanchi@health.in.gov

Brenda Buroker – Survey, IDH

- <u>bburoker@health.in.gov</u>
- 317-234-7340

Jan Kulik

- jkulik@health.in.gov
- 317-233-7480

Michelle Donner

• midonner@health.in.gov

Pam Pontones - CDC Guidance, IDH

- ppontones@health.IN.gov
- 317-233-8400

Qsource - NHSN

- Angeleta Hendrickson <u>ahendrickson@qsource.org</u>
- 317-735-3551
- Teresa Hostettler thostettler@gsource.org
- 812-381-1581
- Candace Lord clord@qsource.org
- 317-829-0143
- Nedra Bridgewaters
 – <u>nbridgewaters@qsource.org</u>
- 317-678-9088

- Deeksha Kapoor IHCA/INCAL Communications/PR
 - dkapoor@ihca.org
- Rob Jones IDH Gateway Assistance
 - rjones@health.in.gov
- · Dr. Lindsey Weaver
 - <u>lweaver@health.in.gov</u>
- Langham Customer Service
 - 866-926-3420
 - Covidsupport@elangham.com
- Deanna Paddack Infection Prevention, IDH
 - dpaddack@health.in.gov
 - 317-464-7710
- Lauren Milroy Epidemiology, IDH
 - LMilroy@health.in.gov
- Caleb Cox Infectious Disease Epidemiology, IDH
 - calcox@health.in.gov
 - 317-232-7814
- Dave McCormick Immunization Division, IDH
 - DMcCormick@health.IN.gov

