



# Regulatory Roundup

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Weekly Webinar for Long-Term Care Professionals

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 [IHCA.org/regulatory-roundup](https://ihca.org/regulatory-roundup)

## PRESENTERS

**Lori Davenport**

Indiana Health Care Association

**Team Members from**

Indiana Department of Health

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August 17, 2023



# Upcoming Education

Aug 22, Webinar – Advanced Action Planning for Administrators, details [HERE](#)

Sept 26, Webinar – Meaningful Meetings, details [HERE](#)

Sept 28-29, In-person – Assisted Living Symposium, details [HERE](#)



# Today's Agenda

- Probari Update – Russ Evans, President, COO
- COVID Guidance Refresher – Dr. Vuppalanchi, Medical Director
- Question & Answers – Lori Davenport, IHCA

# Probari Update

*Proven* clinical program to help nursing homes

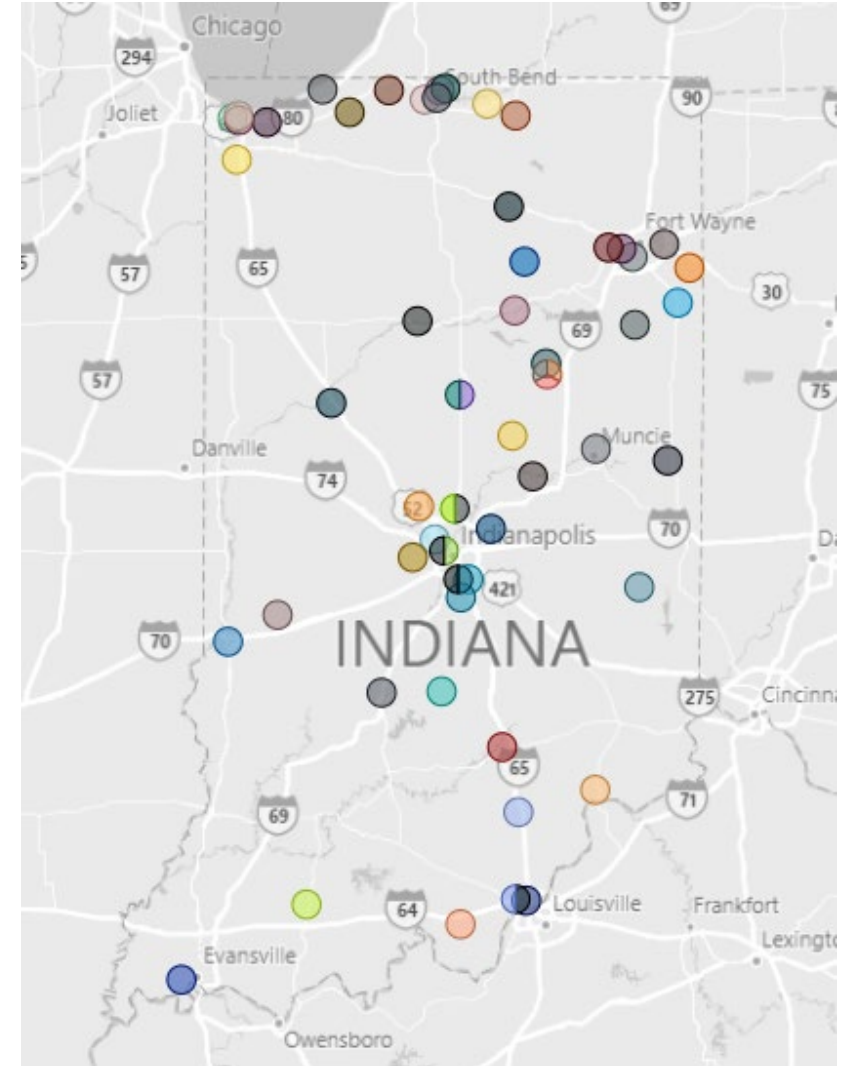


# Strike Team Program

1. Funded completely by COVID Strike Team dollars
2. 3 month enrollment for any facilities approved
3. Access to Probari Infection Prevention Software
4. Probari Admission and Infection Reviews

# Strike Team Program Reach

- Worked with 61 facilities
- 4005 Admission Reviews
- 2923 Infection Reviews
- 28,011 Intervention Recommendations





Indiana Health Information Exchange

PointClickCare®  
MatrixCare™



**Probari uses hospital records and facility EMR to reconcile admission orders**



**Probari Daily Checklist**

## Probari Daily Report >



Probari App Notification via sendgrid.net  
to me ▾

Good morning, This is your daily checklist email.

Use the attached PDF or login at <https://app.probarisystems.com/login> to view your Probari Daily Report.

Have a great day!

Click to login to software

Reply to email with  
feedback/questions

One attachment • Scanned by Gmail ⓘ



PDF Checklist

↩ Reply

➦ Forward

The Probari Daily Report





Save PDF

Facility

Testing Facility



Email



## Testing Facility DAILY CHECKLIST 05-23-2022

### Note from Probari:



Edit Note



Save Note

Great work on documentation, Nicole in particular. Very detailed on wounds!

### Time Sensitive Recommendations

Luke, Skywalker

[New Admission Review] Reduce medication by 25 mg per Hospital records.

As soon as possible

### Standard Recommendations

Yoda, Baby

[New Admission Review] Call orders from medications not entered into the medical record.

1-2 days

### For Your Information

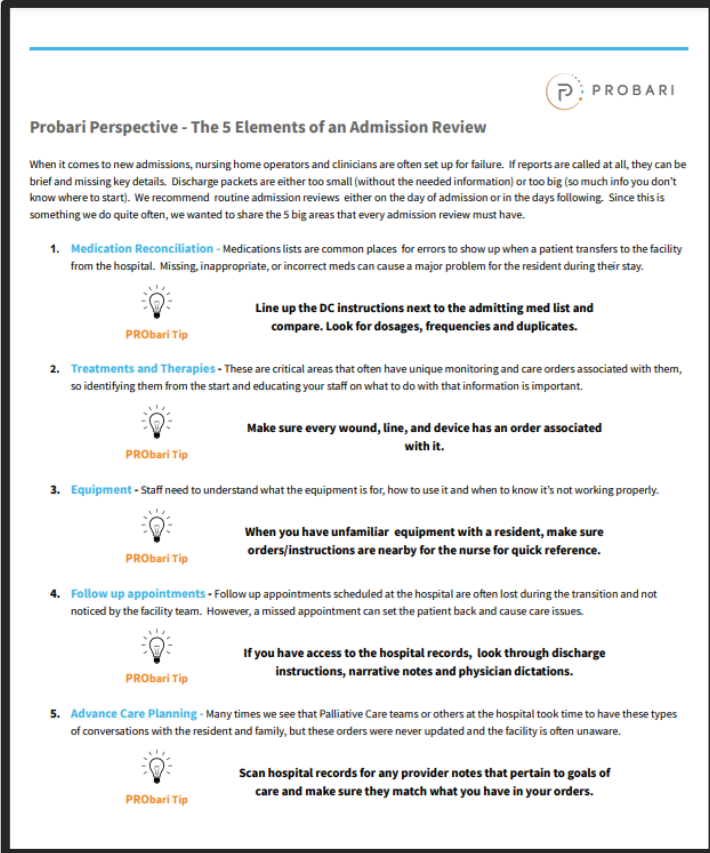
Vader, Darth

[New Admission Review] Follow up appointment for heart failure needs to be scheduled.

In case you missed it






# Probari Elements of an Admission Review

1. Medication reconciliation
2. Treatments and orders
3. Equipment
4. Follow up appointments and orders
5. Advance Care Planning



**Probari Perspective - The 5 Elements of an Admission Review**

When it comes to new admissions, nursing home operators and clinicians are often set up for failure. If reports are called at all, they can be brief and missing key details. Discharge packets are either too small (without the needed information) or too big (so much info you don't know where to start). We recommend routine admission reviews either on the day of admission or in the days following. Since this is something we do quite often, we wanted to share the 5 big areas that every admission review must have.

- 1. Medication Reconciliation** - Medications lists are common places for errors to show up when a patient transfers to the facility from the hospital. Missing, inappropriate, or incorrect meds can cause a major problem for the resident during their stay.  
  
**PRObari Tip** **Line up the DC instructions next to the admitting med list and compare. Look for dosages, frequencies and duplicates.**
- 2. Treatments and Therapies** - These are critical areas that often have unique monitoring and care orders associated with them, so identifying them from the start and educating your staff on what to do with that information is important.  
  
**PRObari Tip** **Make sure every wound, line, and device has an order associated with it.**
- 3. Equipment** - Staff need to understand what the equipment is for, how to use it and when to know it's not working properly.  
  
**PRObari Tip** **When you have unfamiliar equipment with a resident, make sure orders/instructions are nearby for the nurse for quick reference.**
- 4. Follow up appointments** - Follow up appointments scheduled at the hospital are often lost during the transition and not noticed by the facility team. However, a missed appointment can set the patient back and cause care issues.  
  
**PRObari Tip** **If you have access to the hospital records, look through discharge instructions, narrative notes and physician dictations.**
- 5. Advance Care Planning** - Many times we see that Palliative Care teams or others at the hospital took time to have these types of conversations with the resident and family, but these orders were never updated and the facility is often unaware.  
  
**PRObari Tip** **Scan hospital records for any provider notes that pertain to goals of care and make sure they match what you have in your orders.**

# Probari Elements of an Infection Review

1. McGeer's Criteria justification
2. Drug interactions
3. Order Review
4. Monitoring review
5. Documentation Review

# What does best practice look like?

1. Appropriate access to **hospital data** and orders
2. Consistent use of updated order sets
3. Clear and complete **documentation**
4. Checks and **balances for orders**
5. Infection **control timeouts**

# Areas that improved through project

- Documentation standardization
- Fewer errors and additional orders/protocols
- Survey compliance
- Reduced number of new infections
- Reduced transfers to hospital

# When Probari could be most helpful

- Facilities struggling after survey
- Special Focus facilities
- Buildings with clinical leadership turnover
- Any major clinical changes

# Strike Team Resources

Please check out our website for more information!

[www.probarisystems.com](http://www.probarisystems.com)

# Project Firstline

- Materials from CDC over infection control
- Partnering with University of Indianapolis - CAC
- Short, engaging videos and messages
- Text message enrollment - completely optional

**Text “infection” to 317-779-3225**





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PROBARI

Proven systems to transform nursing home care.

Questions?

[probarisystems.com](http://probarisystems.com)

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# Multi-Drug Resistant



Series of multi-drug resistant organism education events

- Fall 2023
  - Northern Regional Education – Districts 1,2,3 & 4
  - Central Regional Education – Districts 5,6,& 7
  - Southern Regional Education – Districts 8,9,& 10

Handout today – Map of emergency preparedness districts from IDOH

# Question from last week



- How many bivalent COVID vaccines should our residents have now?
- Do they need to have one now and another during the fall?
- Should providers encourage be offering the second bivalent now?

# Question from last week



## ANSWER:

Recommendation is that everyone over the age 6 should get one bivalent vaccine. Certain groups may get another dose as follows.

- People aged 65 years and older may get 1 additional dose of COVID-19 vaccine 4 or more months after the 1<sup>st</sup> updated COVID-19 vaccine.
- People who are moderately or severely immunocompromised may get 1 additional dose of updated COVID-19 vaccine 2 or more months after the last updated COVID-19 vaccine. Talk to your healthcare provider about additional updated doses.

An individual's clinician might be the best judge on who should receive the additional dose now vs wait for the fall dose. Fall doses will be manufactured based on XBB.1.5. ---- the new formulation is expected to be available to order no later than mid-September.



# Q&A

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