



# **O** **PEN OFFICE HOURS**

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## **November 28, 2023**

**Happy Holidays to your team from ours! This is such a busy time of year and even though we aren't meeting for a live call, we thank you for taking time to keep infection prevention in the forefront!**

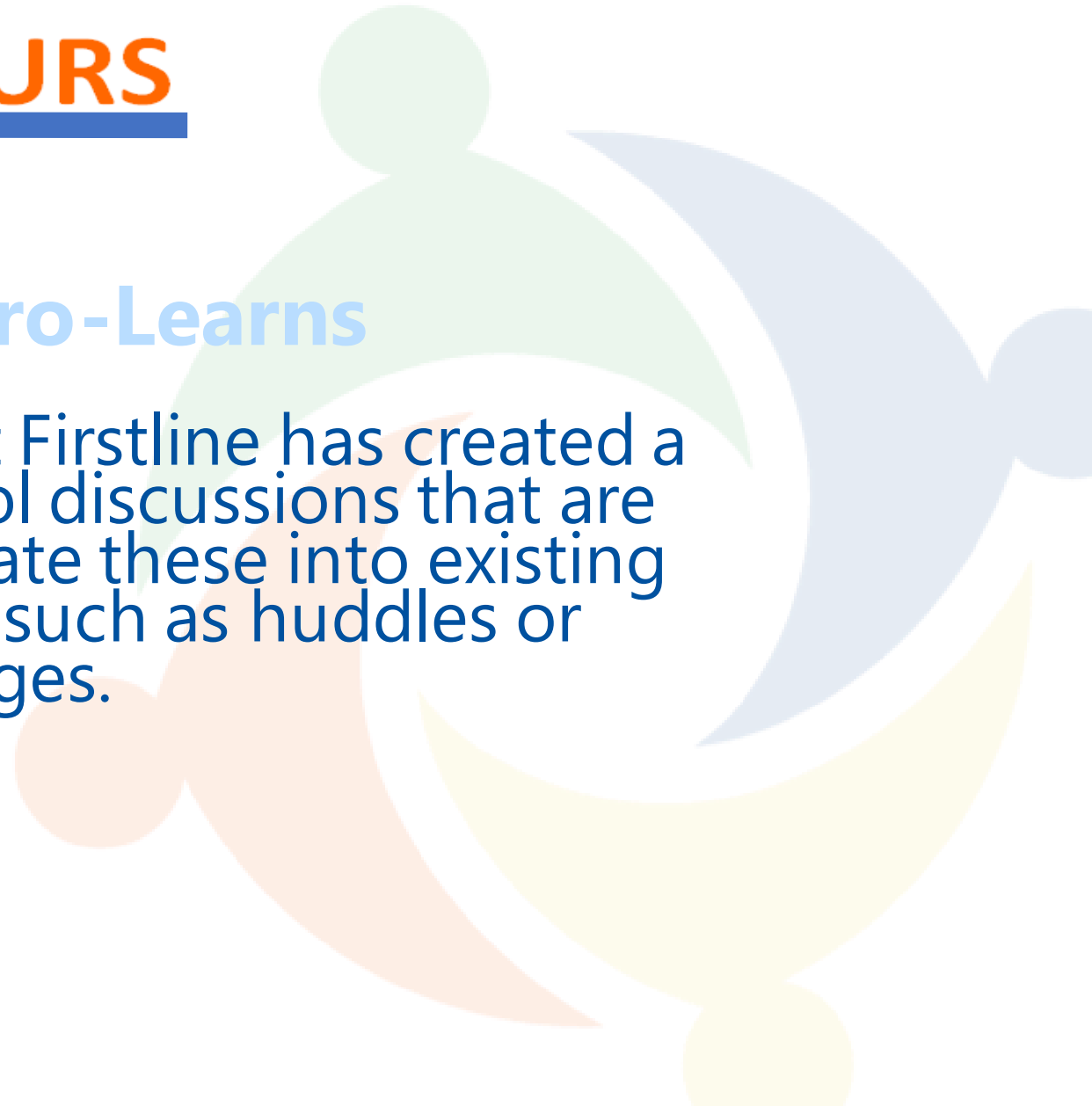
# **O**PEN OFFICE HOURS

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## **Spotlight**

### **CDC Project Firstline Micro-Learns**

**What is a Micro-Learn?** Project Firstline has created a series of guided infection control discussions that are brief with the intent to incorporate these into existing team educational opportunities such as huddles or meetings. Every guide has 3 pages.



## Micro-Learns

Use Project Firstline's short, adaptable micro-learn training resources to educate your team on a variety of infection control topics. The micro-learns are a series of guided discussions that connect infection control concepts to immediate, practical value, so healthcare workers can recognize infection risks and take action to stop the spread of germs. Incorporate these quick, in-person trainings into your next team meeting or huddle.



[Blood Micro-Learn](#) [PDF - 3 Pages]



[Rash Micro-Learn](#) [PDF - 3 Pages]



[Cough and Congestion Micro-Learn](#) [PDF - 3 Pages]



[Draining Wound Micro-Learn](#) [PDF - 3 Pages]



[Diarrhea Micro-Learn](#) [PDF - 3 pages]

[https://www.cdc.gov/infectioncontrol/projectfirstline/healthcare/training.html#anchor\\_46297](https://www.cdc.gov/infectioncontrol/projectfirstline/healthcare/training.html#anchor_46297)

To date CDC Project Firstline has 5 Micro-Learns ready to use and posted to their website. They continue to add Micro-Learns to the site, so check back often!

# Let's walk through one!

## Project Firstline: Micro-Learn

### What do you do when you see Diarrhea?

**Infection Control Micro-Learns User Guide**

**About the Micro-Learns**

The Project Firstline Infection Control Micro-Learns are a series of guided infection control discussions that provide brief, on-the-job educational opportunities. Each micro-learn focuses on a single infection control topic and connects infection control concepts to immediate, practical value. Healthcare workers can easily apply the key points to their daily work and perform the recommended actions to keep germs from spreading.

**Using the Micro-Learns**

The micro-learns can be incorporated into existing opportunities where groups of healthcare workers gather, such as pre-shift "huddles" or team meetings. The sessions should be led or facilitated by an experienced team member with infection control expertise.

**Each micro-learn package includes an adaptable discussion guide for the facilitator and one job aid.**

**Discussion Guide.** The discussion guide is not a script. Facilitators are encouraged to adapt the guide for their audience by incorporating relevant and practical questions and ideas. For instance, facilitators can connect the content to the audience's job duties, facility-specific cases or issues, resources and points of contact, or other information.

**Job Aid.** This one-page, visual job aid helps to reinforce the key messages of the micro-learn. Facilitators are encouraged to make the job aid available after the micro-learn session, such as in digital or hand-copy form.

**Notes for Facilitators**

- Before presenting a micro-learn, check the policies and protocols at your facility and adapt the content accordingly.
- Build on your knowledge, experience, and awareness to connect the content to local content or relevant events so that your audience can apply the concepts confidently.
- The micro-learn reinforces infection control concepts when risks are observed in patients or in the patient environment, not necessarily in visitors or other staff members.
- Reinforce your audience that if they see a patient in distress—e.g., with symptoms of breath, bleeding, or otherwise at risk of immediate harm—they should respond to the emergency according to facility protocols.

www.cdc.gov/ProjectFirstline

**Diarrhea Micro-Learn Discussion Guide:**

**What to do when you see diarrhea**

Use the talking points below and accompanying job aid to engage your team in short, focused discussion. Adapt to meet your needs.

- Introduce the topic.** Share key information about the topic that your audience should know and connect to your local context:
  - Diarrhea is a gut issue. All about a full of germs. Diarrhea can be caused by a lot of things, but it is sometimes a sign of a pathogen that can cause illness, even in healthy people.
  - Infections that cause diarrhea spread because germs move easily between hands, equipment, and surfaces in health care. Some of these germs can be difficult to kill.
  - Common examples of infections that cause diarrhea include C. difficile, norovirus, and rotavirus (especially in children).
- Expand on the topic.** Share information about what your audience should do:
  - Assume that diarrhea is infectious.
  - Use gloves when you're working with a patient who has diarrhea or in their environment. You might also need a gown if there's a risk you could get stool on your clothes, like if you're helping the patient with personal care or leaving over their bed.
  - Clean your hands immediately after interacting with the patient or their environment, and immediately after taking off your gloves. You can use either hand sanitizer or soap and water, but if your hands are visibly dirty, then soap and water is preferred.
- Discuss with your team.** Find out how your audience feels about the topic. Simple questions include:
  - What do you usually do when you see diarrhea? Do you worry you might catch something? How do you protect yourself and your patients? When might you call for help or assistance?
  - Do you have all the tools and information you need to do your job safely?
  - As a team, how can we help each other take the right infection control actions when we see diarrhea to keep germs from spreading?
- Wrap up and reinforce.** Reinforce key messages:
  - Diarrhea can be caused by an infection, but it is always full of germs.
  - Use gloves when you're working with the patient and in their environment, and clean your hands immediately afterwards.
 Share related facility specific information and use to follow-up opportunities:
  - Connect content with information, such as additional infection control actions, to take if the cause of the diarrhea is known, when to find cleaning supplies and PPE, testing protocols for caring for patients with diarrhea, recent cases or examples of patients with diarrhea or other relevant information.
  - Share resources, programs, and opportunities for further learning as appropriate, including the Project Firstline website at [www.cdc.gov/projectfirstline](http://www.cdc.gov/projectfirstline).

www.cdc.gov/ProjectFirstline

**When you see diarrhea, there's often more than meets the eye.**



**Some that diarrhea are invisible and can't be looked at. Protect yourself and others.**





**Use gloves when you're working with a patient who has diarrhea or in their environment. You might also need a gown if there's a risk you could get stool on your clothes, like if you're helping the patient with personal care or leaving over their bed.**

**Use a gown if there's a risk you could get stool on your clothes. Be sure to perform hand hygiene immediately after you're done.**

**Clean and disinfect the patient's environment frequently with a disinfectant you're trained to use.**

**Diarrhea illnesses are not all the same. The only way to confirm a cause is to get a test. Call your facility's Infection Control team for more information.**

Learn More

www.cdc.gov/projectfirstline

# Infection Control Micro-Learns

## User Guide



### About the Micro-Learns

The Project Firstline *Infection Control Micro-Learns* are a series of guided infection control discussions that provide brief, on-the-job educational opportunities. Each micro-learn focuses on a single infection control topic and connects infection control concepts to immediate, practical value. Healthcare workers can easily apply the key points to their daily work and perform the recommended actions to keep germs from spreading.

### Using the Micro-Learns

The micro-learns can be incorporated into existing opportunities where groups of healthcare workers gather, such as pre-shift “huddles” or team meetings. The sessions should be led or facilitated by an experienced team member with infection control expertise.

Each micro-learn package includes an adaptable discussion guide for the facilitator and one job aid.



**Discussion Guide.** The discussion guide is not a script. Facilitators are encouraged to adapt the guide for their audience by incorporating relevant and practical questions and ideas. For instance, facilitators can connect the content to the audience’s job duties, facility-specific cases or issues, resources and points of contact, or other information.



**Job Aid.** The one-page, visual job aid helps to reinforce the key messages of the micro-learn. Facilitators are encouraged to make the job aid available after the micro-learn session, such as in digital or hard copy form.

### Notes for Facilitators

- Before presenting a micro-learn, check the policies and protocols at your facility and adapt the content accordingly.
- Build on your knowledge, experience, and awareness to connect the content to local context or relevant recent events so that your audience can apply the concepts confidently.
- The micro-learns reinforce infection control concepts when risks are observed in patients or in the patient environment, not necessarily in visitors or other staff members.
- Remind your audience that if they see a patient in distress—e.g., with shortness of breath, bleeding, or otherwise at risk of immediate harm—they should respond to the emergency according to facility protocols.

## Page 1:

This page describes the Micro-Learn activity and is the same in all packets. It reminds you that page 2 is not a script, but a guide. And page 3 is the handout. You should incorporate facility specific issues, policies, resources and points of contact into your own scripting.

# Diarrhea Micro-Learn Discussion Guide:

## What to do when you see diarrhea

Use the talking points below and accompanying job aid to engage your team in short, focused discussion. Adapt to meet your needs.

### 1. Introduce the topic

Share key information about the topic that your audience should **know and connect to your local context**:

- Diarrhea is liquid stool. All stool is full of germs. Diarrhea can be caused by a lot of things, but it is sometimes a sign of a pathogen that can cause illness, even in healthy people.
- Infections that cause diarrhea spread because germs move easily between hands, equipment, and surfaces in health care. Some of these germs can be difficult to kill.
- Common examples of infections that cause diarrhea include *C. difficile*, norovirus, and rotavirus (especially in children).

### 2. Expand on the topic

Share information about what your audience should **do**:

- Assume that diarrhea is infectious.
- Use gloves when you're working with a patient who has diarrhea or in their environment. You might also need a gown if there's a risk you could get stool on your clothes, like if you're helping the patient with personal care or leaning over their bed.
- Clean your hands immediately after interacting with the patient or their environment, and immediately after taking off your gloves. You can use either hand sanitizer or soap and water, but if your hands are visibly dirty, then soap and water is preferred.

### 3. Discuss with your team

Find out how your audience feels about the topic. Sample questions include:

- What do you usually do when you see diarrhea? Do you worry you might catch something? How do you protect yourself and your patients? When might you call for help or assistance?
- Do you have all the tools and information you need to do your job safely?
- As a team, how can we help each other take the right infection control actions when we see diarrhea to keep germs from spreading?

### 4. Wrap up and reinforce

Reinforce key takeaways:

- Diarrhea can be caused by an infection, but it is always full of germs.
- Use gloves when you're working with the patient and in their environment, and clean your hands immediately afterwards.

Share related facility-specific information and cue to follow-up opportunities:

- Connect content with information, such as additional infection control actions to take if the cause of the diarrhea is known; where to find cleaning supplies and PPE; facility protocols for caring for patients with diarrhea; recent cases or examples of patients with diarrhea; or other relevant information.
- Share reminders, prompts, and opportunities for further learning as appropriate, including the Project Firstline website at [www.cdc.gov/projectfirstline](http://www.cdc.gov/projectfirstline).

## Page 2:

This page provides talking points and a basic flow of content for the facilitator, but don't forget to adapt this information to include talking points specific to your policies, procedures and resources.

When you see diarrhea,  
there's often more than meets the eye.



Germ from diarrhea are everywhere and can be infectious.  
Protect yourself and others:



Use gloves when you're working with a patient or resident or in their environment. Clean your hands immediately afterwards.



Use a gown if there is risk you might get stool on your clothes, like if you're performing personal care tasks or leaning over the bed.



Clean and disinfect the patient's or resident's environment frequently with the correct products.

Learn More

Diarrhea Dilemma Interactive Scenario: <https://bit.ly/48SdERz>

Germ Live in the Gut Infographic: <https://bit.ly/3s1cleg>

Hand Hygiene Training Module: <https://bit.ly/49B21KW>

[www.cdc.gov/ProjectFirstline](http://www.cdc.gov/ProjectFirstline)



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention



## Page 3:

This page is the handout with key points of emphasis for the topic.

In every micro-learn, there are links for additional education that you may choose to utilize. These links are consistently located in the blue bar towards to bottom of the handout.

When you see diarrhea,  
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U.S. Department of  
Health and Human Services  
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**Learn More:** check out the links associated with this Micro-Learn!

[Interactive Scenario: Diarrhea Dilemma](#)  
(approx. 5 minutes)

[Infographic: Germs that Live in the Gut](#)

[CDC Hand Hygiene, Glove Use & Preventing Transmission of C. Difficile training module](#) (approx. 15 minutes)



If you need additional assistance with Project Firstline materials and activities contact the KDHE team at [KDHE.ProjectFirstLine@ks.gov](mailto:KDHE.ProjectFirstLine@ks.gov) or Loretta Fitzgerald with KFMC, Health Improvement Partners [lfitzgerald@kfmc.org](mailto:lfitzgerald@kfmc.org)

Next we have a couple of slides with infection prevention tips that are great reminders for family gatherings & food safety! Share these tips with your team. It's great to provide all staff reminders of how to keep themselves and their families healthy throughout the holiday season!

## General Infection Prevention Tips for the Holidays!

Avoid close contact with people who are sick. Refrain from gatherings when you are ill to protect others. This will help prevent the spread of transmission.

Cover your mouth and nose with a tissue when coughing or sneezing. Flu, COVID-19, and other serious respiratory illnesses are spread by coughing, sneezing, or unclean hands. Dispose of tissues promptly in trash receptacles.

Wash your hands frequently. If soap and water are not available, use an alcohol-based hand rub. Have paper towels readily available at sinks for drying hands rather than shared washable hand towels.

Avoid touching the “T-zone” of your face- your forehead, nose, and chin. Germs are often spread when a person touches a contaminated surface and then touches their eyes, nose, or mouth.

Don't prepare foods if you are experiencing symptoms of vomiting or diarrhea or have recently recovered from symptoms.



## Holiday family gathering food safety tips!

Wash your hands and surfaces before, during, and after preparing food and before eating. Replace those pretty hand towels with paper towels.

Rinse fresh fruits and vegetables in water. Ensure utensils, kitchen surfaces, and cookware are clean before use.

Avoid cross-contamination. Raw meat, poultry, seafood, and eggs can spread germs to ready-to-eat foods unless you keep them separate. Use separate cutting boards and plates for raw meat, poultry, and seafood.

Serve finger foods with serving utensils.

Cook to the right temperature. Food is safely cooked when the internal temperature gets high enough (160° F) to kill germs that can make you sick. Use a food thermometer to ensure food is safely cooked.

Refrigerate food promptly. Bacteria can multiply rapidly if left at room temperature or between 40°F and 140°F. Refrigerate perishable food within 2 hours. Thaw frozen food safely in the refrigerator, in cold water, or the microwave. Never thaw foods on the counter.

11/28/2023





# **O** **PEN OFFICE HOURS**

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## **Information Sharing**

In this next section you will find links to a variety of resources.

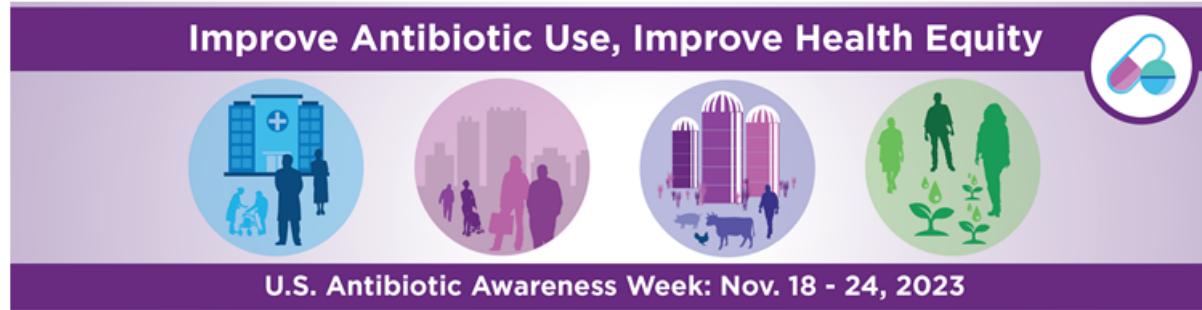
Previous call summaries/resource pages can be accessed on the **KFMC News & events**

**page:** <https://www.kfmc.org/infection-prevention-long-term-care-facilities-and-communal-setting-providers-open-office-hours/>

# Antibiotic Stewardship

# Antibiotic Awareness Week 2023

[U.S. Antibiotic Awareness Week | Antibiotic/Antimicrobial Resistance | CDC](#)



## November 18 Kicks Off U.S. Antibiotic Awareness Week (USAAW) 2023

### Improve Antibiotic Use, Improve Health Equity

Kick off **U.S. Antibiotic Awareness Week (USAAW)** with CDC on Saturday, November 18!

Every year, CDC recognizes USAAW to raise awareness and share information on the importance of improving antibiotic and antifungal use. Any time antibiotics or antifungals are used—in people, animals, or plants—they can cause side effects and contribute to [antimicrobial resistance \(AR\)](#). The USAAW observance is aligned with [World Antimicrobial Resistance Awareness Week \(WAAW\)](#) during the same week.

This year, CDC is focusing on the connection between appropriate antibiotic and antifungal prescribing and use and [health equity](#). Health equity means everyone has a fair and just opportunity to attain their highest level of health. Health inequities resulting from less-than-optimal antibiotic or antifungal prescribing practices may impact health outcomes, and result in an increase in antimicrobial resistance or adverse events in some populations.

Join CDC November 18-24 as we recognize the importance of improving antibiotic and antifungal prescribing and use, improving health equity, and slowing the spread of antimicrobial resistance. Learn how you can take action this week and the rest of the year.

Even though USAAW was Nov 18-24, it's not too late to utilize USAAW activities & resources!

- Use and Share the partner toolkit
- Join social media chats
- Go Purple for AR
- Webinars
- Check out CDC resources



## Webinar Recordings

From June to October, Dr. Kellie Wark presented a webinar series for LTC & Communal Living settings. These monthly webinars were centered around focused initiatives for various infection types. The recordings and handouts are available.

<https://www.kfmc.org/ltc-antimicrobial-stewardship-webinar-series/>

Earlier this month Dr. Wark also presented an intriguing informational webinar about Kansas and Midwest connections to multiple antimicrobial discoveries! The recording and handouts are now available, click on the link and then scroll to the November 15<sup>th</sup>, 2023 recording.

<https://khconline.org/events/recordings>



# Did you know that vaccination is an intervention to combat Antimicrobial Resistance?

If your facility is engaged in activities focused on vaccine education, accessibility and/or improved vaccination rates of staff and/or residents, these efforts can be counted towards your antibiotic stewardship efforts.

NIH article: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8626314/>

CDC has updated the vaccine schedules for 2024, they are effective immediately.

<https://www.cdc.gov/vaccines/schedules/index.html>

Immunize Kansas Coalition (IKC) has a multitude of resources available regarding vaccinations for adults and children.

<https://www.immunizekansascoalition.org/vaccine-resources.asp>







# NHSN

## Updates & Information



# NHSN

Next is important information regarding modifications to the Long-term Care Facility COVID-19/Respiratory Pathogens Module and the COVID-19/Respiratory Pathogens Vaccination Module. The changes described became available beginning the week of October 23, 2023, and are now visible within the NHSN application. Resources on the [NHSN LTCF COVID-19/Respiratory Pathogens Module](#) webpage and the [COVID-19/Respiratory Pathogens Vaccination Modules](#) webpage have been updated, where indicated, with revised forms, instructions, FAQs, and CSV templates.



# NHSN-continued

## Geolocation

- Please disregard alerts asking you to confirm your facility's geolocation. The facility geolocation function located on the 'Facility Info' page is not operational at this time.

## Point of Care (POC) Test Reporting Tool

- No enhancements

## State Veterans Homes COVID-19 Event Reporting Tool

- No enhancements



# NHSN-COVID-19/Respiratory Pathogens Pathway Data Reporting

- **New!** The LTCF COVID-19 Module was renamed to align with the additional reporting options for Influenza and RSV that became available with the recent NHSN release.
- The new name: **COVID-19/Respiratory Pathogens Module**

## **New!** Influenza/RSV Surveillance Tab (optional)

- The new tab within the LTCF Surveillance Pathways allows LTCF's to report newly positive resident cases for Influenza and RSV.
- This newly added tab is **OPTIONAL**, but highly encouraged!

## **NHSN-Influenza/RSV (optional) \*\*NEW DATA TAB\*\*** **New!** Influenza/RSV Surveillance Tab (optional)

- Data entry for this tab is **OPTIONAL**, facilities may choose when and how often data is reported to this tab. However, it is encouraged to report these data on a weekly basis for any facilities choosing to report.
- If a facility does choose to enter data, information must be entered for both Influenza and RSV in order for the page to save successfully.



# NHSN-COVID-19/Respiratory Pathogens Pathway Data Reporting (*continued*)

The following data elements are collected for Influenza:

- Newly Positive Tests for Influenza
- Vaccination Status of Residents with a Newly Confirmed Influenza Test Result
- Hospitalizations with a Positive Influenza Test
- Hospitalizations with a Positive Influenza Test and Up to Date

The following data elements are collected for RSV:

- Newly Positive Tests for RSV
- Vaccination Status of Residents with a Newly Confirmed RSV Test Result
- Hospitalizations with a Positive RSV Test
- Hospitalizations with a Positive RSV Test and Up to Date



# NHSN-Weekly NHSN COVID-19 Vaccination Data Modules

- **New!** The LTCF COVID-19 Vaccination Module was renamed to align with the additional reporting options for Influenza and RSV that became available with the recent NHSN release.
- The new name: **COVID-19/Respiratory Pathogens Vaccination Module**
- Continue to report weekly COVID-19 vaccination data per CMS requirements.
- Reference the [COVID-19 Key Terms Document](#) for the most recent definition of Up to Date with COVID-19 vaccination for Quarter 4 of 2023
- **New!** Tab added: Influenza/RSV Vaccine Reporting (optional)



# NHSN-Weekly Influenza/RSV Vaccination Reporting for Residents (optional) **\*\*NEW DATA TAB\*\***

- Reporting Influenza/RSV Vaccines for Residents under this tab is **OPTIONAL**. If a user opts to enter these data, information can be entered for both Influenza and RSV vaccination or only one.
- COVID-19 vaccination data for residents must be reported first in order to access Influenza/RSV vaccination reporting tab
- Report Influenza/RSV data by entering it directly into NHSN application or using the CSV file option
- The Influenza/RSV vaccination tab is set up for weekly reporting, but these data can be reported at the discretion of the user
- Influenza/RSV vaccination materials and training slides became available through [LTCF COVID-19/Respiratory Pathogens Vaccination](#) website the week of October 23, 2023
- Person- Level forms for Influenza and RSV will be available in June 2024

# NHSN-Training Slides

- Training webinars for the new Influenza/RSV collection tabs for LTCF residents for both the Surveillance Pathways and Vaccination Module were conducted in October 2023. The training slides can be found on the [COVID-19/Respiratory Pathogens Module webpage](#).





# NHSN

- **Questions?** Brenda Davis ([bdavis@kfmc.org](mailto:bdavis@kfmc.org)) and Kim Byers ([kbyers@kfmc.org](mailto:kbyers@kfmc.org)) are our LTC NHSN experts, don't hesitate reach out!
- **Reminder:** if you haven't already started tracking your staff, volunteer, student influenza vaccination stats, start now! it is best if you track it throughout the reporting period rather than trying to gather it at the deadline!





# Other Updates & Information

# Vaccine Information Statements Update-10/19/2023

- [https://www.cdc.gov/vaccines/hcp/vis/current-vis.html?ACSTrackingID=USCDC\\_11\\_1-DM115639&ACSTrackingLabel=Vaccine%20Information%20Statement%20Update%20-%2010%2F19%2F2023&deliveryName=USCDC\\_11\\_1-DM115639](https://www.cdc.gov/vaccines/hcp/vis/current-vis.html?ACSTrackingID=USCDC_11_1-DM115639&ACSTrackingLabel=Vaccine%20Information%20Statement%20Update%20-%2010%2F19%2F2023&deliveryName=USCDC_11_1-DM115639)

## Current VISs

[Print](#)

[Download all VISs](#) [3 MB]

CDC maintains a current English language VIS for each vaccine. You and your patients can

- View and display the web page
- Download and print the PDF file
- Import the RTF (text) file into an electronic system
- View on a smartphone, tablet or other web-accessible mobile device

### COVID-19 Vaccine EUA Fact Sheets

Currently, providers are required by law to provide EUA fact sheets to vaccine recipients or their caregivers for all uses of [Novavax](#) and when [Moderna](#) or [Pfizer](#) vaccines are given to children 6 months through 11 years of age. For recipients who are 12 or older receiving Pfizer or Moderna vaccine, a provider may use the COVID-19 Vaccine Information Statement (VIS).

[Find more information](#)

### What Do Dates & Interim Mean?

- The date, in red, next to each VIS is the most recent version.
- The Interim version is to be used until the final version is available. See [What's New](#) to learn when the final version should be available.

See [FAQs](#) on when to start using a new VIS.

### Multi-, Routine-, & Non-Routine-Vaccine VISs

#### Multi

- [Multiple Vaccines \(DTaP, Hib, Hepatitis B, PCV, and Polio interim \(7/24/23\)\)](#)  
This VIS may be used in place of the individual VISs for DTaP, Hib, Hepatitis B, Polio, and PCV13 when two or more of these vaccines are administered during the same visit. It may be used for infants through children receiving their routine 4-6 year vaccines.

#### Routine

- [COVID-19 \(10/19/23\)](#)
- [Dengue \(12/17/21\)](#)
- [DTaP \(Diphtheria, Tetanus, Pertussis\) \(8/6/21\)](#)
- [Hepatitis A \(10/15/21\)](#)
- [Hepatitis B \(5/12/23\) interim](#)
- [Hib \(Haemophilus influenzae type b\) \(8/6/21\)](#)
- [HPV \(Human Papillomavirus\) \(8/6/21\)](#)
- [Influenza - Live, Intranasal \(8/6/21\)](#)
- [Influenza - Inactivated \(8/6/21\)](#)
- [Measles/Mumps/Rubella \(MMR\) \(8/6/21\)](#)
- [Measles/Mumps/Rubella & Varicella \(MMRV\) \(8/6/21\)](#)
- [Meningococcal ACWY \(8/6/21\)](#)
- [Meningococcal B \(8/6/21\)](#)
- [Pneumococcal Conjugate \(PCV\) \(5/12/23\) interim](#)
- [Pneumococcal Polysaccharide \(PPSV23\) \(10/30/19\)](#)
- [Polio \(8/6/21\)](#)
- [Rotavirus \(10/15/21\)](#)
- [Respiratory Syncytial Virus \(RSV\) Vaccine \(10/19/23\)](#)
  - [RSV Preventive Antibody \(nirsevimab\) Immunization Information Statement \(IIS\) \(9/25/23\)](#)
- [Tdap \(Tetanus, Diphtheria, Pertussis\) \(8/6/21\)](#)
- [Td \(Tetanus, Diphtheria\) \(8/6/21\)](#)
- [Varicella \(Chickenpox\) \(8/6/21\)](#)
- [Zoster / Shingles \(Recombinant\) \(2/4/22\)](#)

#### Non-routine

- [Adenovirus \(1/8/20\)](#)  
Note: Adenovirus vaccine is approved for use only among military personnel.
- [Anthrax \(1/8/20\)](#)
- [Cholera \(10/30/19\)](#)
- [Ebola \(6/30/22\)](#)
- [Japanese Encephalitis \(8/15/19\)](#)
- [Rabies \(6/2/22\)](#)
- [Smallpox/Monkeypox \(JYNNEOS™\) \(11/14/22\)](#)
- [Smallpox \(ACAM2000®\) \(12/1/15\)](#)  
[Medical Guide for vaccination with ACAM2000 \[6 pages\]](#)  
This medication guide replaces the Smallpox VIS. It is to be used before one receives the vaccination. This guide is not available in other languages.
- [Typhoid \(10/30/19\)](#)
- [Yellow Fever \(4/1/20\)](#)

HEALTH IMPROVEMENT PARTNER

# Get Connected with Infection Preventionists!

## National Infection Prevention Forum Aims to Foster Collaboration in LTC

- <https://www.ahcancal.org/News-and-Communications/Blog/Pages/New-National-Infection-Prevention-Forum-Aims-to-Foster-Collaboration-in-LTC.aspx>
- **How to get started:** To enroll in this national forum, all you need is an email address and password. Instructions for enrolling are available [here](#). If you have questions, please contact [LTC-NIPFhelp@ahca.org](mailto:LTC-NIPFhelp@ahca.org).

## APIC Kansas Chapters

<https://apic.org/member-services/about-membership/>

- Greater Kansas City Chapter (Metropolitan Kansas City, in both Kansas & Missouri)
- Heart of America Chapter (Northeast and North Central Kansas)
- Wichita Area Chapter (South Central & Western Kansas)



# Viral Respiratory Pathogens Toolkit for Nursing Homes

<https://www.cdc.gov/longtermcare/prevention/viral-respiratory-toolkit.html>

The screenshot shows the CDC website interface. At the top, the CDC logo and name are visible. Below the navigation bar, the page title is "Nursing Homes and Assisted Living (Long-term Care Facilities [LTCFs])". The main content area is titled "Viral Respiratory Pathogens Toolkit for Nursing Homes" and includes a "Print" link. A green action bar highlights the text: "ACTION: PREPARE for respiratory viruses (e.g., SARS-CoV-2, influenza, RSV)". Below this, there is a list of bullet points providing detailed instructions for vaccine provision, resource allocation, monitoring, education, ventilation, and testing/treatment protocols.

cdc.gov/longtermcare/prevention/viral-respiratory-toolkit.html

Spanish | Other Language

CDC Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™

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## Viral Respiratory Pathogens Toolkit for Nursing Homes

[Print](#)

Preparing for and responding to nursing home residents or healthcare personnel (HCP) who develop signs or symptoms of a respiratory viral infection

**ACTION: PREPARE for respiratory viruses (e.g., SARS-CoV-2, influenza, RSV)**

- **Vaccinate:** Provide [recommended vaccines](#) to residents and HCP and provide information (e.g., posted materials, letters) to families and other visitors encouraging them to be vaccinated. Recommended vaccines help prevent infection and complications such as severe illness and death. Utilize pharmacy and public health partners to ensure access to indicated vaccines for residents and HCP.
- **Allocate resources:** Ensure that resource limitations (e.g., personal protective equipment (PPE), alcohol-based hand sanitizer (ABHS)) do not prevent HCP from adhering to recommended infection prevention and control (IPC) Plan for situations (e.g., multiple symptomatic individuals) that may require increased supplies.
- **Monitor and Mask:** Be aware when levels of [respiratory virus spread](#) are increasing in the community. When levels in the community are higher, consider having visitors and HCP wear a mask at all times in the facility and at a minimum, consider having residents wear a mask when outside of their room.
- **Educate:** Ensure everyone, including residents, visitors, and HCP, are aware of recommended [IPC practices in the facility](#), including when specific IPC actions are being implemented in response to new infections in the facility or increases in respiratory virus levels in the community. Encourage visitors with respiratory symptoms to delay non-urgent in-person visitation until they are no longer infectious. Following close contact with someone with SARS-CoV-2, [testing is recommended](#) and [visitors should wear](#) a mask while in the facility.
- **Ventilate:** In consultation with facility engineers, explore options to improve ventilation delivery and indoor air quality in resident rooms and all shared spaces.
- **Test and Treat:** Develop plans to provide rapid clinical evaluation and intervention to ensure residents receive timely treatment and/or prophylaxis when indicated.
  - Ensure access to respiratory viral testing with rapid results (i.e., onsite or send-out testing with results available within 24 hours). Testing results can inform recommended treatment and IPC actions.
  - Establish pharmacy connections to enable the use of any available respiratory virus treatments or prophylaxis.

PREPARE for respiratory viruses

RESPOND when a resident or HCP develops signs or symptoms of a respiratory viral infection

CONTROL respiratory virus spread when transmission is identified

& LOTS OF RESOURCES!



# Reimbursement Policy for SNF Provider Staff.pdf (ahcancal.org)

## REIMBURSEMENT GUIDE FOR SKILED NURSING FACILITY HEALTH CARE PERSONNEL FLU AND COVID-19 VACCINATIONS



### FREQUENTLY ASKED QUESTIONS VACCINE PAYMENT OPTIONS TO OPTIMIZE SNF STAFF VACCINE UPTAKE

#### 1. Are Influenza and COVID-19 vaccines required for SNF staff?

There are no federal requirements that staff receive these vaccines. However, there is a regulatory requirement to educate and offer the COVID-19 vaccine to staff and residents and educate and offer the flu vaccine to residents. AHCA/NCAL's #GetVaccinated toolkit contains a [summary of the CMS vaccine regulations](#).

Some states may have regulations about health care workers (HCW) receiving these vaccines. For example, some states require either the influenza vaccine or that the HCW uses a source control mask when around patients during high activity of influenza in the community. You need to check with your state health department about any state specific requirements for vaccination.

#### 2. Are there any quality measures for SNF staff vaccinations?

**Yes.** The SNF Quality Reporting Program (QRP) creates SNF quality reporting requirements as mandated by the Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act). Currently there are two staff vaccination quality measures:

##### **SNF QRP Measure #11: COVID-19 Vaccination Coverage among Health Care Personnel (HCP) (CBE #3636)**

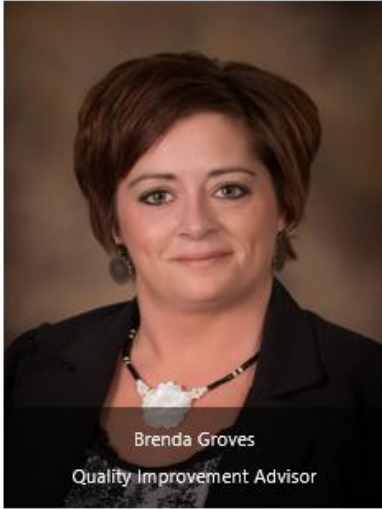
- This measure was finalized in the [FY 2022 SNF PPS Final Rule](#), (86 FR 42480 through 42489). Data submission for this measure began October 1, 2021.

##### **SNF QRP Measure #12: Influenza Vaccination Coverage among Health Care Personnel (HCP) (CBE #0431)**

- This measure was finalized in the [FY 2023 SNF PPS Final Rule](#), (87 FR 47537 through 47544). Data submission for this measure began October 1, 2022.



## Contact Information:



[bgroves@kfmc.org](mailto:bgroves@kfmc.org)



[bdavis@kfmc.org](mailto:bdavis@kfmc.org)



[nhagmeier@kfmc.org](mailto:nhagmeier@kfmc.org)



[lfitzgerald@kfmc.org](mailto:lfitzgerald@kfmc.org)



[dthompson@kfmc.org](mailto:dthompson@kfmc.org)



[kbyers@kfmc.org](mailto:kbyers@kfmc.org)



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