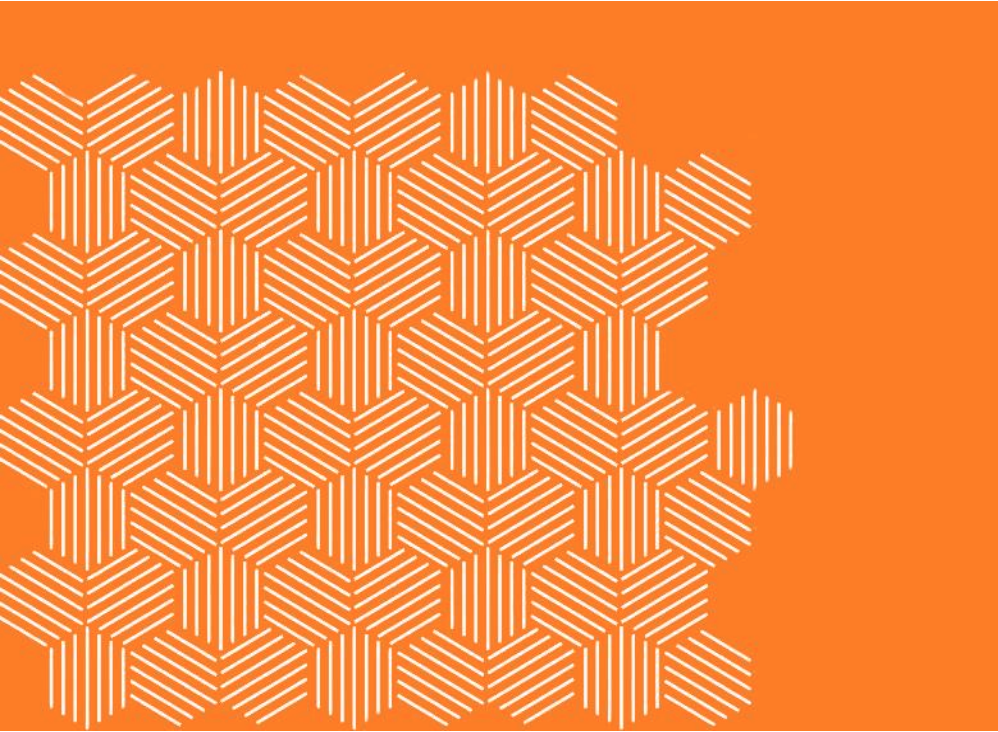


COVID-19 Q&A Hour for Long Term Care: Adult Family Homes



Washington State Department of Health

Healthcare-Associated Infections (HAI) Program

Shoreline, WA

Housekeeping



Attendees will be in listen only mode



Self-mute your lines when not speaking



Type questions into the question window. Please include the type of facility you are from in your question (e.g., NH).



Nursing Home

Participants from long-term care, regulatory, public health



No confidential information presented or discussed. This is an educational webinar and does not constitute legal advice.



Local guidance may differ, please consult with your Local Health Jurisdiction (LHJ):

<https://www.doh.wa.gov/AboutUs/PublicHealthSystem/LocalHealthJurisdictions>

Welcome to the 2021 Q&A Hour!

A chance to connect, ask questions, and learn about the COVID-19 response and infection prevention guidance



Where Can I Find the Q & A Document?

- Posted every Wednesday

- Washington Health Care Association:

<https://www.whca.org/washington-department-of-health-covid-19-qa-session/>

- Washington LeadingAge:

https://www.leadingagewa.org/ill_pubs_articles/copy-resources-preparing-your-community-staff-residents-and-families-for-the-coronavirus/

- Adult Family Home Council:

<https://adultfamilyhomecouncil.org/department-of-health-qa-webinars/>

Panelists

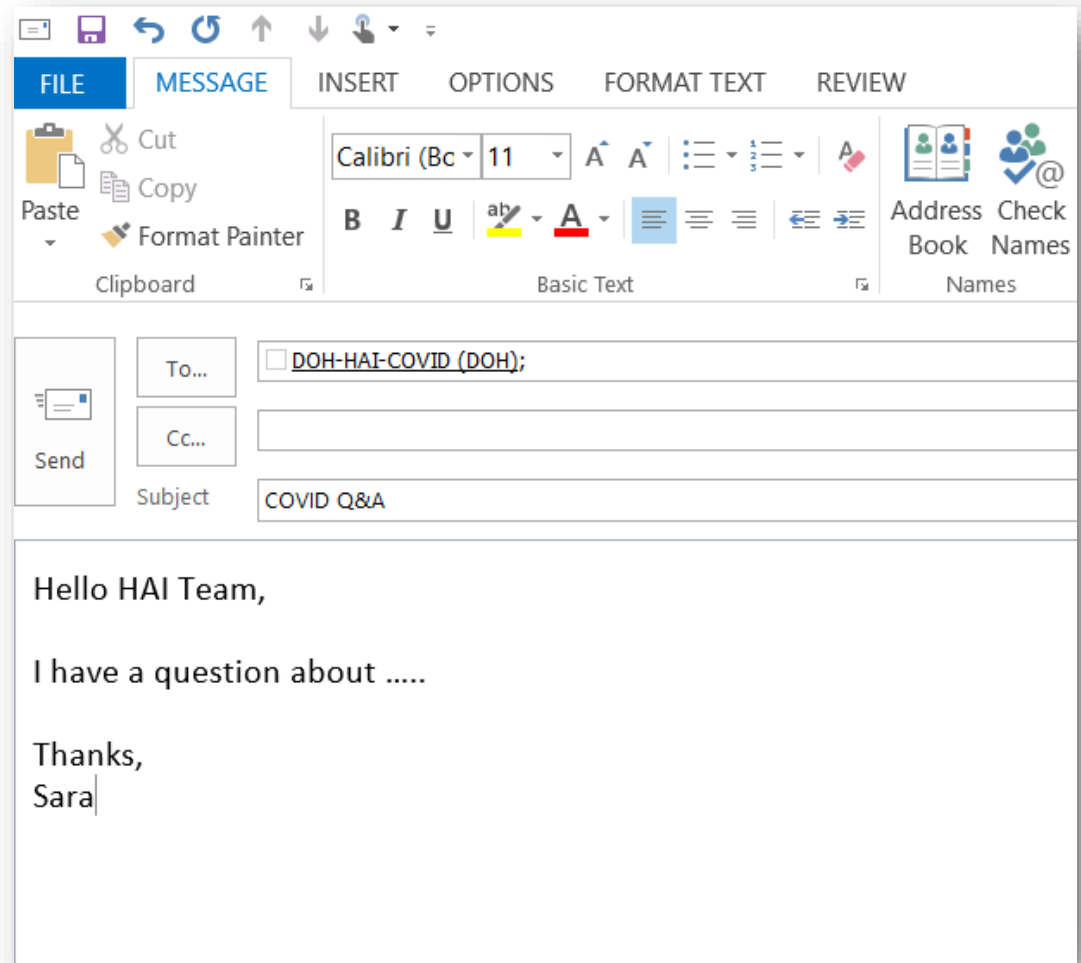


Send Us Your Questions Ahead of Time

Subject Line:
COVID Q&A

Email:
HAI-COVID@doh.wa.gov

Due by: COB Tuesday



Infection Control Assessment & Response (ICAR) Program

Free, non-regulatory ICARs are a great opportunity for skilled nursing facilities, adult family homes, and assisted living facilities to:

- Ask a Department of Health infection prevention expert questions.
- Get help finding gaps in your infection control protocols.
- Receive personalized advice and recommendations for your facility.

There are multiple ways to schedule an ICAR:

- Visit <https://fortress.wa.gov/doh/opinio/s?s=ICARconsultation>
- Email Chris Hankin Chris.Hankin@doh.wa.gov
- Email Melissa Feskin Melissa.Feskin@doh.wa.gov

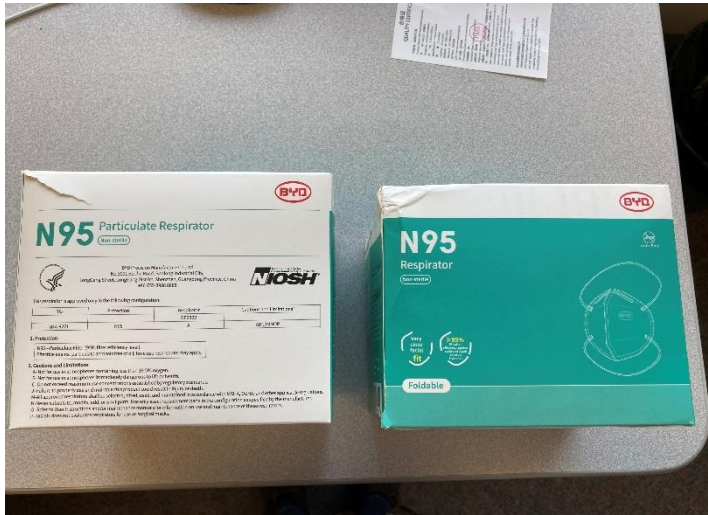
In partnership with:

- Local Health Jurisdictions
- LeadingAge Washington
- Washington Health Care Association
- Adult Family Home Council of WA State
- Washington State Hospital Association

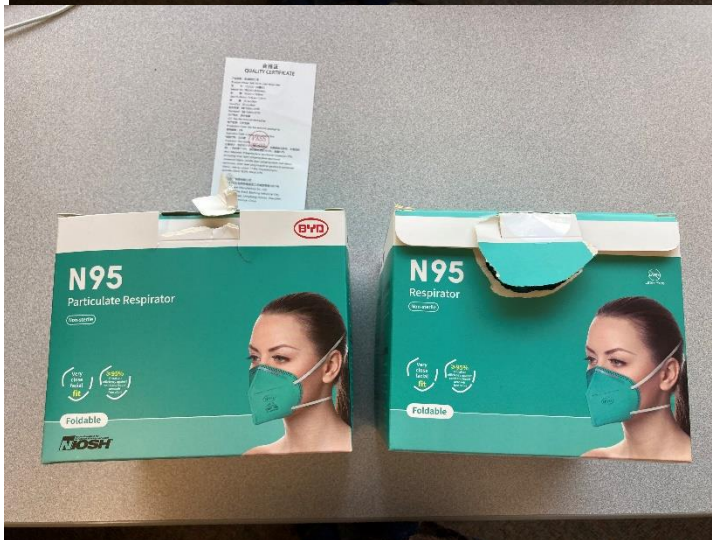


BYD N95 Respirator Quality Issue

Back of box -
If white, it is correct product



Front of box



BYD N95 Respirator

- Check your Respirator – NIOSH one on left is correct version



Actions to Take for BYD N95 Issues

- ❖ Stop using pre-NIOSH approved mask if you have newer version
- ❖ Contact us (HAI-COVID@doh.wa.gov) immediately if you have only pre-NIOSH model **AND** providing AGPs or COVID-19 Unit/ Resident with COVID-19. Report how many Caregivers in your facility using BYD N95 model currently. We will coordinate to send NIOSH approved model to your facilities.
- ❖ If anyone notices loose strap or other defect without other issue, please let us know **Lot #** and **production date**. Provide the information or take close-up photo with sticker on the individual package or bottom of the box with brief description.



Antimicrobial Stewardship in Adult Family Homes

Marisa D'Angeli, MD, MPH
Washington State Department of Health
Thursday LTC Q & A call, April 1 and 8, 2021

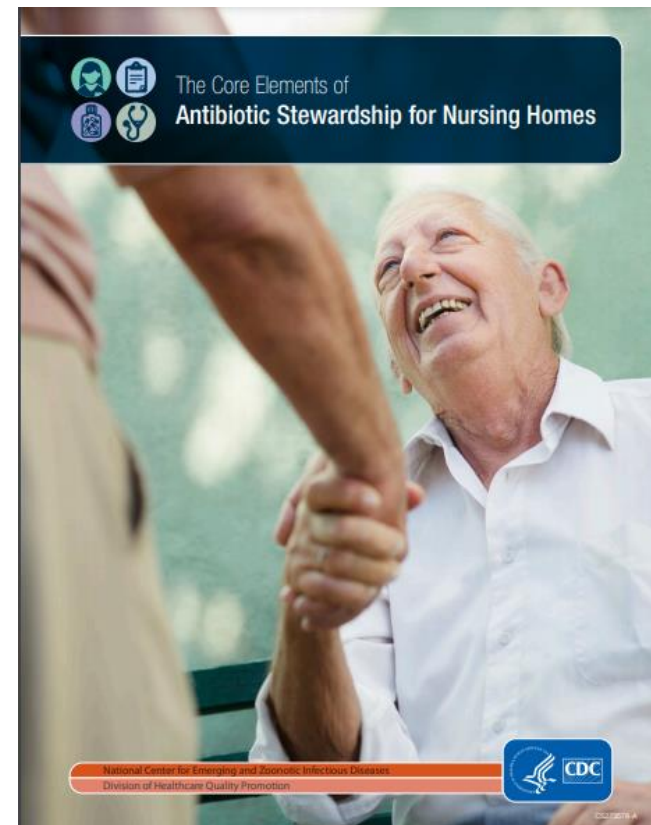
Outline

- Why have an antibiotic stewardship program
- Antibiotic-associated harms
- Elements of an antibiotic stewardship program and how to implement



Why have an Antibiotic Stewardship Program?

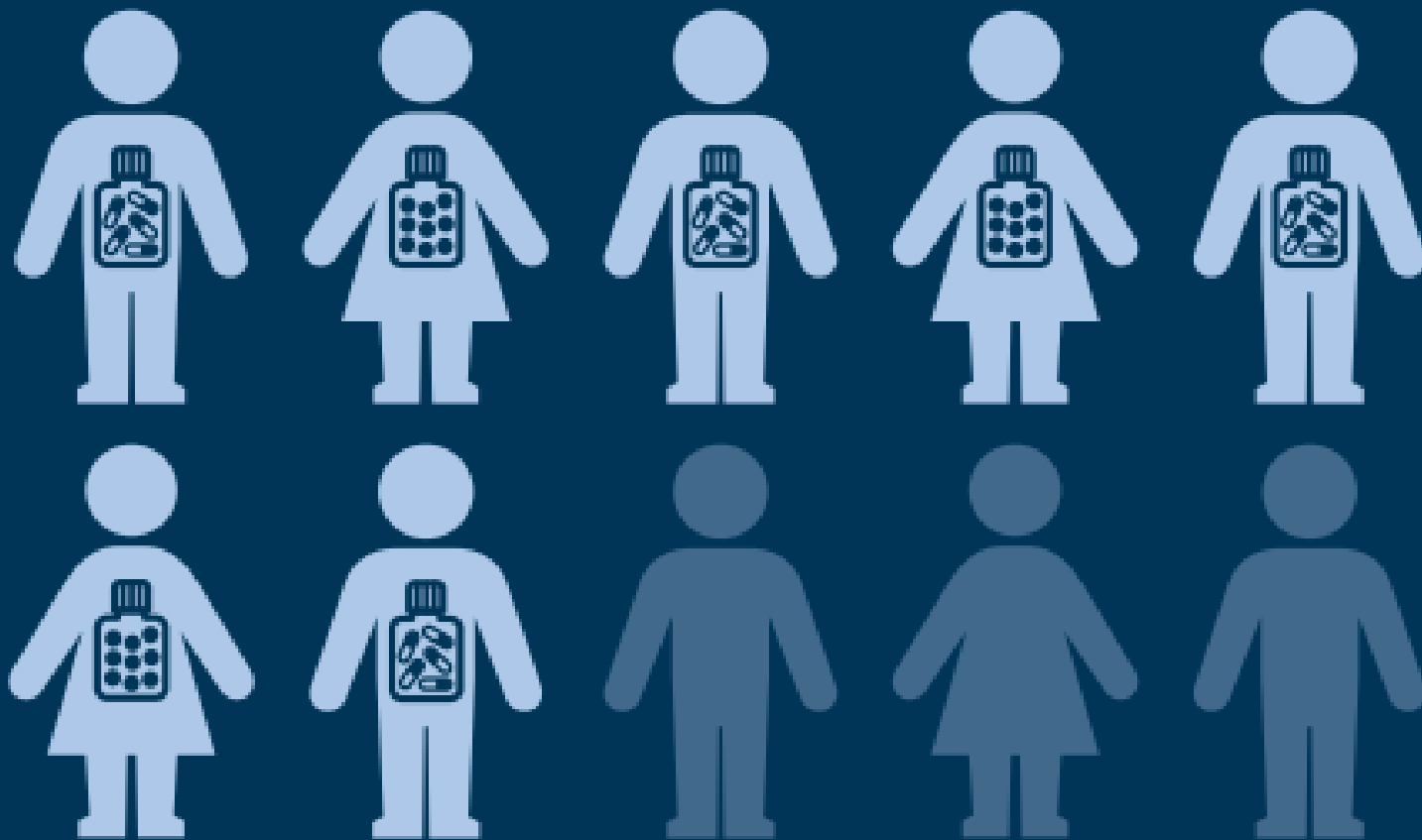
- Required in NH
- Good for patients and residents in all healthcare facilities
- Saves money
- Good for everyone, **including you**



Antibiotic-associated harms

- Adverse drug event (rash, anaphylaxis)
- Yeast infections
- *Clostridioides difficile* (C diff) infection
- Antibiotic resistance





UP TO **70%** OF NURSING HOME RESIDENTS
RECEIVED **one or more** COURSES
OF SYSTEMIC ANTIBIOTICS IN A YEAR

More harms in NH with higher antibiotic use

- Wide range in antibiotic use—from 20-193 antibiotic-days/1000 resident-days
- More antibiotic related adverse events in NH with higher antibiotic use, **even for residents who did not receive antibiotics**
- Harms included C diff, antibiotic resistance, allergic reactions, and medication adverse events

Daneman, et al. Variability in Antibiotic Use Across Nursing Homes and the Risk of Antibiotic-Related Adverse Outcomes for Individual Residents. JAMA Intern Med. 2015;175(8):1331-1339. Article URL:

<http://archinte.jamanetwork.com/article.aspx?articleid=2337257>

Antibiotic stewardship refers to a set of commitments and activities designed to “optimize the treatment of infections while reducing the adverse events associated with antibiotic use.”



Core elements of antibiotic stewardship



Leadership commitment

Demonstrate support and commitment to safe and appropriate antibiotic use in your facility



Accountability

Identify physician, nursing and pharmacy leads responsible for promoting and overseeing antibiotic stewardship activities in your facility



Drug expertise

Establish access to consultant pharmacists or other individuals with experience or training in antibiotic stewardship for your facility



Action

Implement **at least one** policy or practice to improve antibiotic use



Tracking

Monitor **at least one process** measure of antibiotic use and **at least one outcome** from antibiotic use in your facility



Reporting

Provide regular feedback on antibiotic use and resistance to prescribing clinicians, nursing staff and other relevant staff



Education

Provide resources to clinicians, nursing staff, residents and families about antibiotic resistance and opportunities for improving antibiotic use

Implementing antibiotic stewardship

- Leadership commitment and accountability
 - Owner and key staff
- Drug expertise
 - Ask a local hospital, one of your residents physicians, public health, or access online resources
- Action—start small and build on
 - Dose, duration, and indication for antibiotic orders
 - Antibiotic time out
 - Cultures before prescription
 - Loeb minimum criteria for initiation of antibiotics
- Tracking and reporting
- Education—many great online resources
 - Handouts to residents and families
 - Videos for staff

Washington DOH resources for antibiotic stewardship in LTCF

- 11 webinars + slides on stewardship implementation
- NH stewardship implementation guide
- Stewardship plan template
- Leadership commitment posters



A Commitment to Our Patients about Antibiotics

What we will do as your healthcare team
Your health is important to us. When you have an illness, we promise to provide the best possible treatments for your condition. If an antibiotic is not needed, or would do more harm than good, we will explain this to you and offer other treatments that are better for you.

Antibiotics only fight infections caused by bacteria
• Antibiotics don't work for viral infections like the common cold, most coughs, and most sore throats.
• If you're sick from a virus and you take antibiotics, you won't get better and you could get bad side effects.
• Antibiotics should only be taken when necessary.
• Buying medications that won't help you is a waste of your money.

Problems with using antibiotics
Antibiotics make bacteria more resistant and can make future infections harder to treat.
Side effects include:
• Drug-resistant infections ("superbugs")
• Skin rashes
• Diarrhea (including C. difficile which can be serious and difficult to treat)
• Yeast infections

What should you do?
• If you get an antibiotic, take it as prescribed.
• If you don't get an antibiotic but think you need one, discuss your concerns with us.

Our promise
As your healthcare team, we promise to provide the best possible treatments for your condition. We are dedicated to prescribing antibiotics only when they are needed, and we will avoid giving them to you when they might do more harm than good.

If you have any questions, please feel free to ask your doctor, nurse, or pharmacist.

Clinic Picture Here Clinic Name Here
Clinic Logo Here



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More GREAT resources for AS in LTCF

- AHRQ Nursing Home Antimicrobial Stewardship Guide

<https://www.ahrq.gov/nhguide/index.html>

- Rochester Nursing Home Collaborative

[https://www.rochesterpatientsafety.com/index.cfm?Page=For Nursing Homes](https://www.rochesterpatientsafety.com/index.cfm?Page=For+Nursing+Homes)

We're here to help!



marisa.dangeli@doh.wa.gov

206-418-5595



Mailbox Questions

1. AFH-If the Resident uses cpap machine at night only and nebulizer as needed does the cg when entering the room needs to put a n95 mask and gown up with face shields if the client have covid only, or needs to be where each the time the ppe when entering the room?
 - o The poster on the door that the client is using a Cpap machine needs to be all the time on the door, or only when COVID the client is having?
2. LHJ: A question from an Assisted Living Facility regarding Beauty Salons. The ALF is part of but separate from an independent living community. Prior to COVID -19, the independent and ALF residents used the same beauty salon. The salon is open to the ALF only. The independent living residents would now like to resume using the salon as well. If the ALF follows the Safe Start Plan addressing beautician, barber, nail technician requirements, can the independent residents resume use of the salon?

Mailbox cont

Q&A Portion

Please type your questions into the question window and tell us what type of facility you are from (e.g., ALF, SNF, AFH)