

COVID-19 Q&A Hour for Long Term Care



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) and indicate your county.



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>

This is the LTC COVID-19 Q&A Hour!

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



COVID-19 Q&A Call Expectations

- Be present
- Assume positive intent
- Focus on solutions
- Speak and chat respectfully
- Give constructive feedback
- Express disagreements professionally and tactfully



Panelists





WASHINGTON STATE DEPARTMENT OF HEALTH

ICAR PROGRAM DETAILS

Our free, non-regulatory ICARs provide facilities with infection prevention recommendations and resources on how to keep residents and staff safe.

What We Do

- Provide support with an infection prevention expert
- Assist with addressing gaps in your current infection control protocols for COVID-19 or other infections
- Offer up-to-date guidance and resources

Who We Serve

- Long Term Care Facilities (Assisted, Skilled, Behavioral Health, Nursing facilities, and Adult Family Homes)
- Outpatient Settings
- Acute and Critical Access Hospitals

To Learn More or Schedule an In-Person or Virtual Visit:

<http://doh.wa.gov/ICAR>

Contact Us:

HAI-FieldTeam@doh.wa.gov (General)



In Partnership With

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



WASHINGTON STATE DEPARTMENT OF HEALTH

HAI-AR SECTION EMAIL ADDRESSES

Please refer to the table below to find the email most appropriate for your needs

Email Path	Description
HAI@doh.wa.gov	General healthcare associated infection questions
HAI-Covid@doh.wa.gov	COVID19-specific healthcare associated infection questions
HAIepiOutbreakTeam@doh.wa.gov	Epidemiological outbreak assistance and healthcare associated infection questions
HAI-FieldTeam@doh.wa.gov	Schedule an ICAR for your facility
HAI-FITTesting@doh.wa.gov	Respiratory Protection related questions www.doh.wa.gov/ltrcpp

Respiratory Protection Program LTC Facility Support

- Learn how to conduct a valid respirator fit test
 - Weekly webinars and Hands-on training for LTC facilities
 - [Fit Testing Training | Washington State Department of Health](#)
- Join our monthly Lunch and Learn on the third Wednesday, 12- 12:30pm
 - Upcoming topics:
 - October 19th – Medical Evaluation Referrals
 - November 16th – Respirator Job Accommodations
 - December 21st – Recordkeeping

Email questions to: HAIFitTest@doh.wa.gov

Visit our website: www.doh.wa.gov/ltrcpp



Enhanced Barrier Precautions Webinars for Nursing Facilities

Join DOH and RCS for a webinar on the recently [updated CDC recommendations for use of Enhanced Barrier Precautions \(EBP\) in nursing facilities](#). EBP is an important tool to prevent the spread of multi-drug-resistant organisms in your facility. This webinar will provide an overview of EBP and resources to assist with implementation and information from RCS.

EBP Webinars schedule:

- **Tuesday, Oct 25 2-3 pm:**
 - Registration link:
https://us02web.zoom.us/webinar/register/WN_n5oDMo2ES5CuY7XkMi3iGA

<https://doh.wa.gov/public-health-healthcare-providers/healthcare-professions-and-facilities/healthcare-associated-infections/special-projects>

ipCHAT – Infection Prevention & Control Health Access Team

- Forum for Skilled Nursing IPs to learn from experienced infection preventionists
- Covers infection prevention and antibiotic stewardship
- Leave with new knowledge, confidence, & connections to a community of infection preventionists
- Meetings take place every 1st and 3rd Tuesday of the month at 11:00 am – 12:00 pm
- Click link to register: <https://us02web.zoom.us/j/64811201201>



Project Firstline Podcast

Episodes



1. Introduction and HAIs
2. PPE
3. Hand Hygiene
4. MDROs
5. ALFs and SNFs
6. Hospital Settings
7. *Candida auris*
8. Respiratory Protection
9. Vaccine Preventable Diseases
10. *New* Dental Settings

Purpose



- Discuss and identify the importance and impact of infection prevention on our lives and the lives of our community
- [Project Firstline | Washington State Department of Health](#)



Summer Awardees
Announced Soon!

Gain recognition for
staff vaccine work you
are already doing!

NEW

Semi-Annual Fall Award
Cycle begins 9/1/2022 -
2/28/23. Report by
3/3/23.



[Long-Term Care COVID-19 Immunization Champion Award | Washington State Department of Health](#)

Comagine Health Events for October

Vaccination Station

Please tune in to the Comagine Health **Vaccination Station** every *second Tuesday of the month* at 10 a.m. PT/11 a.m. MT. These interactive sessions are designed to address questions about barriers or issues regarding adult vaccinations and offer opportunities for problem-solving and discussion.

During our meeting, we will share community risk data, updates to immunization regulations or current guidance, as well as educational resources.

Second Tuesday | 10 a.m. PT

[Register here](#)

NHSN Open Office Hours

Join Comagine Health every *fourth Wednesday of the month* at 11 a.m. PT/noon MT for **NHSN Open Office Hours**, a half-hour open conversation and technical assistance on NHSN reporting. Our subject matter expert, Lisa Barton, will provide reporting updates, answer questions and troubleshoot any reporting issues your building is experiencing.

Fourth Wednesday | 11 a.m. PT

[Register Here](#)

Driving Clinical Excellence

How do you take limited time frame, a burnt-out workforce, ever-changing leadership and little appetite to try “one new thing” and turn it into a successful, high-functioning team? Join Comagine Health every *first Thursday of the month* at 11 a.m. PT/ noon MT for **Driving Clinical Excellence**, an interactive and collaborative learning series that combines education, small-group consultation, peer-sharing and microlearning opportunities on effective clinical and change concepts.

First Thursday through Nov. 2, 2023 | 11 a.m. PT

[Register here](#)

APIC Puget Sound Virtual Conference - MDRO Risk Assessment Workshop

All are invited to attend – Open to members and non-members

Friday, October 28th

9:00 am - 3:00 p.m.

At this conference we will learn about the most concerning emerging pathogens, how to evaluate risk to your patients and prevent transmission to others.

Contact precautions for patients infected or colonized with MRSA is no longer the law in Washington State. With many new highly resistant organisms of concern, Infection Preventionists are evaluating risk and best practices to prevent transmission.

Registration: <https://events.eventzilla.net/e/puget-sound-apic-conference-2022--2138573819>

Registration: \$50

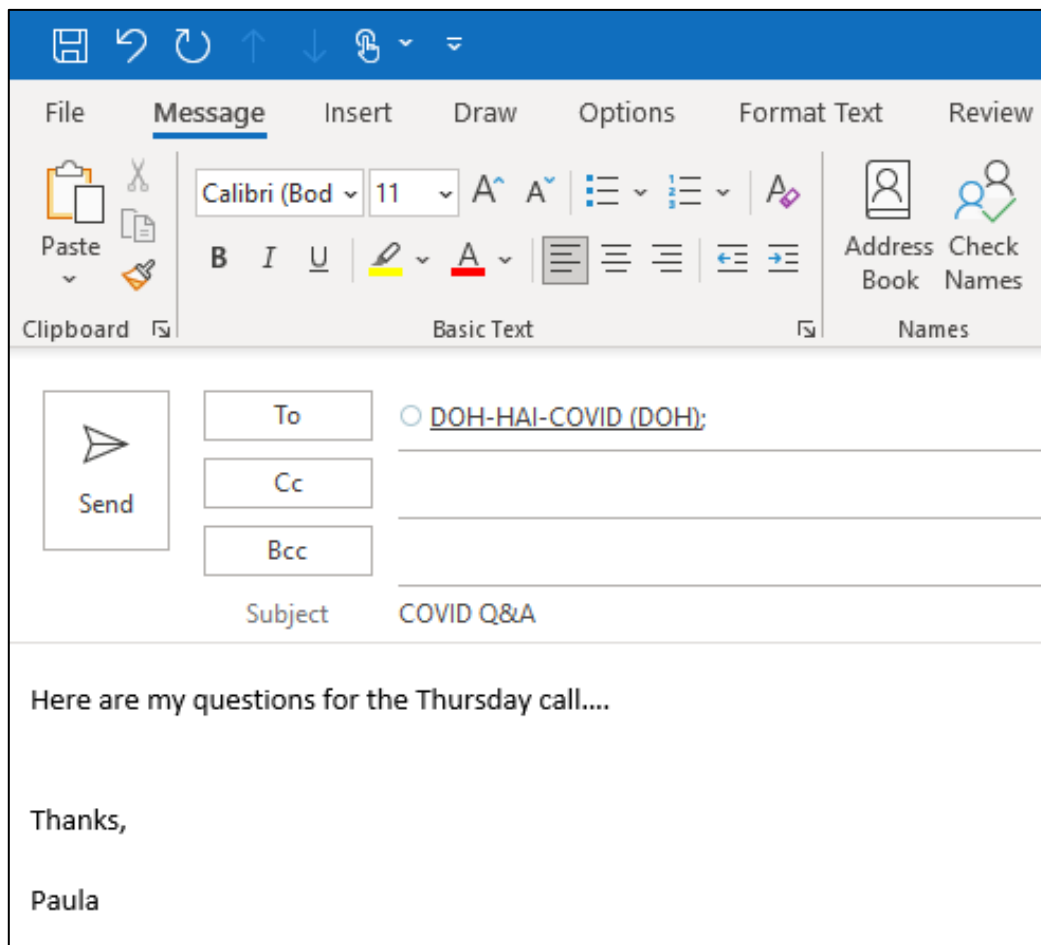
See flyer for more information; CEs TBD

Submit Your Questions by Monday

Subject Line:
COVID Q&A Call

Email:
HAI-COVID@doh.wa.gov

Due by: COB Monday



Upcoming LTC Q&A Micro Learning Presentations

Today's presentation:

Polling final – on Immunization Records

TBD Oct – Guidance updates to be scheduled soon

Nov 10- 2022-2023 Seasonal Influenza Preparation and Outbreak Response

This Q&A call series ends Oct 27.

New registration link for November and December monthly calls:

https://us02web.zoom.us/webinar/register/WN_IQAgQ4QRTsuoNNTh0Xef9w

COVID-19 Treatment Plans

Dr. James Lewis, Snohomish Health District

- Snohomish County Health Advisory: COVID-19 TREATMENT OPTIONS FOR MODERATELY OR SEVERELY IMMUNOCOMPROMISED PATIENTS
<https://www.snohd.org/CivicAlerts.aspx?AID=720>
- PHSKC COVID-19 Treatment Plan:
<https://kingcounty.gov/depts/health/covid-19/providers/~media/depts/health/communicable-diseases/documents/C19/T2T-LTCF.ashx>
- PHSKC Flu resources for LTCFs:
<https://kingcounty.gov/depts/health/communicable-diseases/immunization/flu-season/for-long-term-care-facilities.aspx>

MAILBOX QUESTION AND ANSWER



COVID-19 Vaccine Question

Q: Sorry - but the vaccine requirement is still a bit muddy... for clarification - if we are an AL - but Medicaid contracted - it sounds like the vaccine mandate stands after 10/31. Is that right?

A: According to Governor Inslee's [announcement](#) on September 8, ***“Vaccination requirements for health care and education workers will end, but employers will continue to be able to require them if they choose. Inslee has already announced that COVID-19 vaccination will remain a condition of employment for most Washington state agencies.”*** It is our understanding that the vaccine requirement will not be extended to those Home and Community Based Service (HCBS) settings such as assisted living facilities and adult family homes, or those HCBS that have a Medicaid contract with the department.

COVID-19 Vaccine Question

Q: Are HCP still required to be vaccinated in LTC after Oct. 31st?

A: For SNFs, the [CMS requirements](#) related to staff and vendor vaccine mandates remain in place. For state licensed Home and Community Based Services (HCBS) settings, according to Governor Inslee's [announcement](#) on September 8, ***“Vaccination requirements for health care and education workers will end, but employers will continue to be able to require them if they choose. Inslee has already announced that COVID-19 vaccination will remain a condition of employment for most Washington state agencies.”*** It is our understanding that the vaccine requirement will not be extended to those HCBS settings such as assisted living facilities and adult family homes, or those HCBS that have a Medicaid contract with the department.

COVID-19 Testing

Q: SNF - is there a plan to address how SNFs can obtain POC Ag tests for routine staff screening that are approved for serial testing of asymptomatic people as according to most recent CMS memo on CLIA waiver we can no longer use POC Ag tests for this purpose unless the test is approved for this use (the Abbott BinaxNow cards provided by HHS are not approved for asymptomatic testing)?

A: On 9/26/2022, CMS released a [memorandum](#) that rescinded previous guidance allowing sites with CLIA waivers to use molecular and antigen point-of-care (POC) tests on asymptomatic individuals outside of the test's instructions for use.

On 10/7/2022, CMS [rescinded that memorandum](#), effectively allowing the use of molecular and antigen point-of-care tests on asymptomatic individuals outside of the test's instructions for use again. This means that no change in testing practices needs to occur as a result of the original memorandum released 9/26/2022.

More information on the 12/07/2020 CMS policy allowing POC tests to be performed on asymptomatic individuals outside of the test's Emergency Use Authorization (EUA): [CMS Revises Enforcement Discretion for SARS-CoV-2 Point-of-Care Tests \(cdc.gov\)](#)

Influenza Vaccination

Q: Any recommendations on when we should administer flu vaccines to cover for flu season?

A: It's best to be vaccinated before flu begins spreading in your community. September and October are generally good times to be vaccinated against flu. Ideally, everyone should be vaccinated by the end of October. However, even if you are not able to get vaccinated until November or later, vaccination is still recommended because flu most commonly peaks in February and significant activity can continue into May.

Adults, especially those 65 years and older, should generally not get vaccinated early (in July or August) because protection may decrease over time, but early vaccination can be considered for any person who is unable to return at a later time to be vaccinated.

<https://www.cdc.gov/flu/season/faq-flu-season-2022-2023.htm>

Influenza Vaccine Consent Form

**Q: Flu Vacc ---- do we have a new consent form for the flu?
Updated I mean**

A: DOH doesn't have a flu consent form as they would be defined by whoever is administering the vaccine/policies of the organization where the individual is residing.

- The Vaccine Information Statement (VIS) changes depending on the vaccine being utilized. A link to it: [Vaccine Information Statements - VISs - CDC information sheets for patients \(immunize.org\)](https://www.immunize.org/vaccine-information-statements). Federal law requires that the VIS be provided to those being immunized/making decisions about the immunization.
- This link includes influenza vaccine questionnaires and standing orders; however, these are only samples, and you will still need a prescribing provider signature through your facility if using standing orders: [Immunization Forms | Washington State Department of Health](#)

Influenza Testing

Q: Last year we were told to not use rapid flu tests in SNF, can we this year?

A: The following are recommended flu testing methods:

- Most common - “rapid influenza diagnostic tests (RIDTs).” RIDTs detect the parts of the virus (antigens) that stimulate an immune response, provide results within approx. 10-15 minutes but may not be as accurate as other flu tests. Therefore, you could still have flu, even though your rapid test result is negative.
- “Rapid molecular assays” detect genetic material of the flu virus. Rapid molecular assays produce results in 15-20 minutes and are more accurate than RIDTs
- Several more accurate flu tests available that must be performed in specialized laboratories, such as hospital and PHL: reverse transcription polymerase chain reaction (RT-PCR), viral culture, and immunofluorescence assays.

CDC resource: <https://www.cdc.gov/flu/symptoms/testing.htm>

Outbreak Definition

Q: What is the current definition of outbreak?

A: Announcement: DOH HAI Epi is navigating the updated 2022 COVID outbreak definition in healthcare settings posted on the CORHA and CSTE websites. For the time being, please utilize the previous definition for outbreak identification and reporting purposes (noted below), the 2020 CSTE COVID-19 Outbreak Definition. DOH will provide education and a crosswalk with a date of implementation for WA reporting purposes at a later date.

	LTCF and LTACH
Outbreak Definition	<ul style="list-style-type: none">• ≥ 1 facility-acquired* COVID-19 cases in a resident

*Facility-acquired COVID-19 infection in a long-term care resident is defined as a confirmed diagnosis 14 days or more after admission for a non-COVID condition, without an exposure during the previous 14 days to another setting where an outbreak was known or suspected to be occurring.

[Interim COVID-19 Healthcare Outbreak and CSTE 2020 HC Outbreak Definition \(wa.gov\)](#)

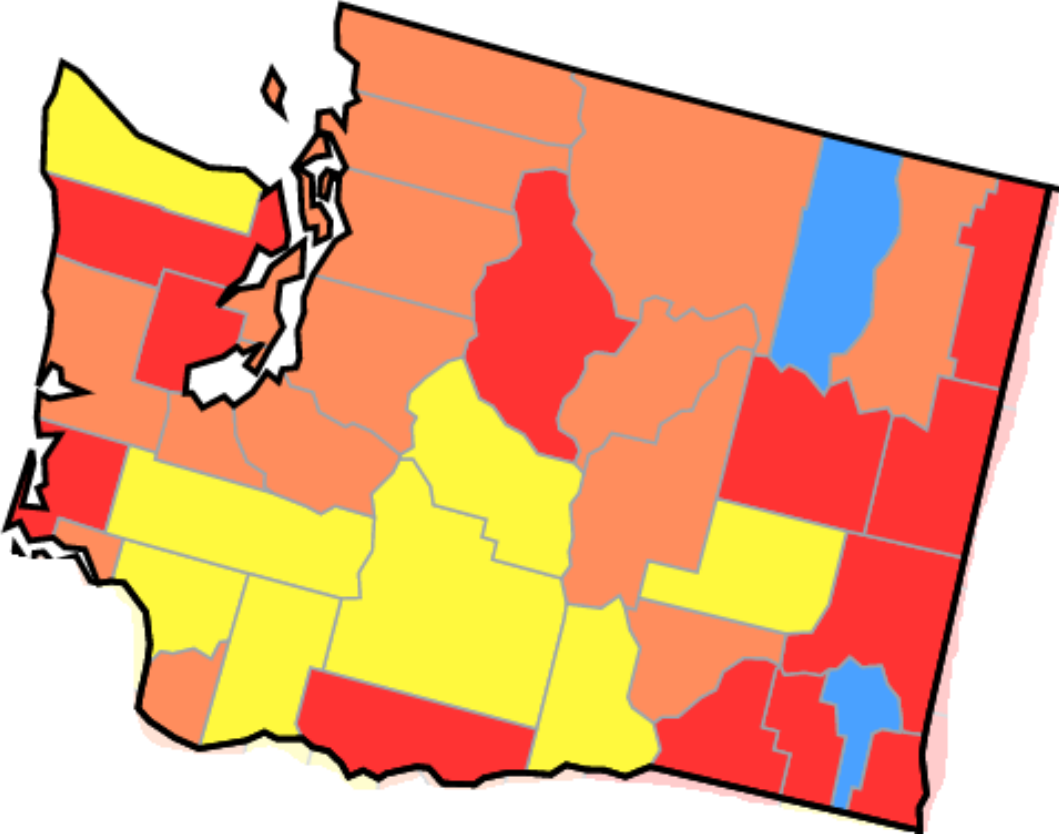
Outbreak Definition (Cont.)

	LTCF and LTACH
Threshold for Additional Investigation by Facility	<ul style="list-style-type: none"> • ≥ 1 probable[†] or confirmed COVID-19 case in a resident or HCP*; • ≥ 3 cases of acute illness compatible with COVID-19 in residents with onset within a 72h period
Threshold for Reporting to Public Health	<ul style="list-style-type: none"> • ≥ 1 probable[†] or confirmed COVID-19 case in a resident or HCP* • ≥ 3 cases of acute illness compatible with COVID-19 in residents with onset within a 72h period

*Healthcare Personnel (HCP), defined by Center for Disease Control and Prevention (CDC), include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, contractual staff not employed by the healthcare facility, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the healthcare setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, and volunteer personnel)

[†] Probable case is defined as a person meeting clinical criteria AND epidemiologic evidence with no confirmatory laboratory testing performed for COVID-19; A person meeting presumptive laboratory evidence AND either clinical criteria OR epidemiologic evidence; A person meeting vital records criteria with no confirmatory laboratory testing performed for COVID-19.

Today's COVID-19 Community Transmission rates



● Key ● High ● Substantial ● Moderate ● Low ● No Data

[CDC COVID Data Tracker: County View](#)



Advancing Adult Immunization Equity & Access

IMMUNIZATION RECORDS WA IIS LTC Needs



Office of Immunization, Adult Immunization Data Quality, 9/2022

Normalizing Operations

THANKS to YOU, LTC Providers! Amazing work done to vaccinate residents & save lives!

1. Moving beyond the pandemic, return the focus back to regular work
2. Office of Immunizations conducts upstream quality improvement work for all populations
3. Advance LTC access & equity to immunization data = DOH regular work
4. Advance supports available to assist LTC partners with staff access and use of WA IIS
5. SHARED GOALS for best resident services & outcomes:
minimize vaccine preventable diseases, improve care outcomes, advance LTC immunization service quality, and work to meet or exceed national standards for benchmark immunization performance

Enhancing LTCF Immunizations

Thank YOU for your continued partnership,
LTC WA IIS Support Project continues progress in 2022!

Overview of Project & What to Expect

Fall phase of project: complete formal LTCF baseline needs assessment for all care levels

Process: informal surveys, formal survey, develop interventions, launch pilot program & test interventions, then broadly spread best practices across LTC settings

Plan: assess gaps, develop LTC supports, & provide for needs

Thank you for Helping
Advance LTC WA IIS Access & Support:

Partnership Milestones Completed in 2022:

1. SHORT FACILITY POLLS ON LTC WA IIS USE (MAY & JUNE)
2. WA IIS PRESENTATION & MICRO LEARNING (JUNE)
3. SNF SURVEY: PARTNERED W/ DSHS, WCHA & LEADING AGE (JULY)
4. SHORT BENCHMARK SURVEY DEVELOPED FOR ALL LTCF (AUG)

PARTNERSHIP NEXT STEPS:

1. Deeper Dive (expanded survey, learn needs, all care levels)
Define Specific Challenges & Needs by setting

2. Develop Program Resources

Provide necessary supports. Develop & share LTCF resources and tools.

3. Deliver bridge supports to LTCFs to help advance access, equity & quality
Include 1:1 supports, training & at the elbow assistance

Please help us learn your LTC needs related to immunization data supports:



ANSWER 13 QUESTIONS

Share your experiences & challenges!

TAKE THE LTCF WA IIS USE SURVEY NOW!

Let us know if you'd like to be in a LTC pilot project. [YOU can master WAIS!](#)

THANK YOU TO OUR PROJECT PLANNING TEAM & DOH LTC Q&A CALL PARTNERS:

Amy Abbot, DSHS
Elena Madrid, WHCA
Laura Hoffman, Leading Age WA

Jill Carter, HAI
Paula Parsons, HAI



To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

It's Polling Time!

SURVEY PART 3: Q.#3

Our facility would like to be included in a pilot project with DOH to improve immunization information system access. The estimated total time required from 1 facility staff member is 1-3 hours maximum, broken into multiple contacts which may include a group participant 30-minute meeting, and at the elbow virtual assistance as required, to ensure necessary support for system use & user comfort with understanding for successful system navigation.

Yes

No

Unsure

Q & A Section

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