

Nursing Home ECHO

COVID-19 Action Network

Virginia Nursing Homes * VCU Department of Gerontology VCU Division of Geriatric Medicine * Virginia Center on Aging

For educational and quality improvement purposes, we will be recording this video-session. By participating in this ECHO session you are consenting to be recorded. If you have questions or concerns, please email, nursinghome-echo@vcu.edu.

Project ECHO® collects registration, participation, questions/answers, chat comments, and poll responses for some teleECHO® programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives











Welcome! (back)

Lets go over what this new phase will look like

Continuation Phase: 8 Modules

- 1. Ongoing COVID-19 Identification and Treatment—plans for recognizing patients with COVID, post-COVID syndromes, testing, treatment, and cohorting
- 2. Post-Vaccination Practices—including visitation policies and PPE practices
- 3. Emotional and Organizational Support for Staff
- 4. Vaccinations—vaccine confidence, testing, logistics, ongoing compliance, and complications
- 5. Addressing And Supporting Needs of Residents and Families or Care Partners—isolation, family communications
- 6. Leadership Communication for COVID-19—huddles, rounding, etc.
- 7. Leadership Behaviors to Support Teams During COVID-19—teamwork, roles, and psychological safety
- 8. Stopping the Spread (Infection Control)—building sustainable infection control practices

Based on Survey Feedback

Top 3 modules were:

- Post-Vaccination Practices—including visitation policies and PPE practices
- Leadership Communication for COVID-19— huddles, rounding, etc.
- Ongoing COVID-19 Identification and Treatment— plans for recognizing patients with COVID, post-COVID syndromes, testing, treatment, and cohorting

Each module will consist of:

- Weekly sessions
- 5 weeks of in-depth discussions
- QI content with COVID-19 content

What's staying the same/What's new

Staying the Same:

- Same team
- Same format
- CEs offered
- Same mission

What's New:

- Deeper dives
- No incentive payment*
- Flexibility (for you and for us)





Post-Vaccination Practices: Session 1

Infection Prevention and Management:
Post-Vaccination Practices Needed in
Nursing Homes

CE/CME Disclosures and Statements

Disclosure of Financial Relationships:

The following planners, moderators or speakers have the following financial relationship(s) with commercial interests to disclose:

Christian Bergman, MD – none; Dan Bluestein, MD – none; Joanne Coleman, FNP-none; Laura Finch, GNP - none; Tara Rouse, MA, CPHQ, CPXP, BCPA – none; Sharon Sheets-none;

Accreditation Statement:

In support of improving patient care, VCU Health Continuing Education is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

Credit Designation:

VCU Health Continuing Education designates this live activity for a maximum of 1.50 **AMA PRA Category 1 CreditsTM.** Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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VCU Health Continuing Education awards 1.50 hours of participation (equivalent to AMA PRA Category 1 CreditsTM) to each non-physician participant who successfully completes this educational activity.



Agenda

- Introduction (current VDH COVID19 dashboard community positivity rate, cases, deaths, vaccination status)
- COVID-19 Update (new guidelines, active issues, etc.)
- Weekly Content with Interactive Quality Improvement
- Wrap up
- Open Discussion
 - COVID-19 Active Issues
 - QI Content, more in-depth conversation
 - Questions for Group Discussion



ECHO is All Teach, All Learn





Session Learning Objectives

By the end of this session, participants should be able to:

- 1. Critically evaluate the current process for ongoing vaccination of staff, contracted staff, residents, consultants, and visitors.
- 1. Better understand the core elements necessary for post-vaccination best practices.
- 1. Design a Performance Improvement Project around post-vaccination practices.





Self-assessment Questions

Session 1 Question

What is your level of comfort with your nursing home's post-vaccination practices and plans for updates as it pertains to evolving guidance:

- Confident
- Somewhat Confident
- Opportunity for Improvement

Explain any extraordinary circumstances in the chat





COVID-19 Updates

- Data
- CDC/CMS

Data Updates

In this section, we will cover weekly updates regarding data around COVID-19 transmission, variants, and forecasting.



COVID-19 in Virginia

COVID-19 State Profile Report - Virginia | HealthData.gov As of April 30

RATE OF NEW	COVID-19	CASES	PER 100.	.000

VIRAL (RT-PCR) LAB TEST POSITIVITY RATE

NEW CONFIRMED COVID-19 HOSPITAL ADMISSIONS / 100 BEDS

RATE OF NEW COVID-19 DEATHS PER 100,000

COMMUNITY TRANSMISSION LEVEL

PEOPLE RECEIVED AT LEAST 1 DOSE

PEOPLE 65+ RECEIVED AT LEAST 1 DOSE

PEOPLE FULLY VACCINATED

PEOPLE 65+ FULLY VACCINATED

SUBSTANTIAL 1	TRANSMISSION
1.2	-11%
4	-24%
4.9%	-1.1%
85	-20%
LAST WEEK	PREVIOUS WEEK

CHANCE EDOM

SODSTANTIAL	TRANSMISSION .
4,019,353 people	47.1% of total pop.
1,133,256 people	83.4% of 65+ pop.
2,802,389 people	32.8% of total pop.
966,003 people	71.1% of 65+ pop.



Cases in Skilled Nursing Facilities 4-25-21

SNFs WITH ≥1 NEW RESIDENT COVID-19 CASE	3%†	-1%*
SNFs WITH ≥1 NEW STAFF COVID-19 CASE	12%†	+2%*
SNFs WITH ≥1 NEW RESIDENT COVID-19 DEATH	1%†	+0%*

Potential Discharges post-COVID-19 4-30-21

CONFIRMED AND SUSPECTED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	1,995 (12)
CONFIRMED NEW COVID-19 HOSPITAL ADMISSIONS (RATE PER 100 BEDS)	609 (4)

Emerging Variants in the US

Variants in Va: SARS-CoV-2 Variants of Concern • proportions of variants of concern identified in Virginia: B.1.1.7 (UK) (53.3%), B.1.351 (SA) (2.3%), B.1.427/B.1.429 (USA) (6.0%), P.1 (0.5%)

Variants (mutations) video: (66) What causes a virus to change? - YouTube

Region	B.1.1.7	B.1.351	B.1.427	B.1.429	P.1
Virginia	1,140	89	68	49	12
	(83.9%)	(6.6%)	(5.0%)	(3.6%)	(0.9%)
Central	240	12	17	4	1
	(87.6%)	(4.4%)	(6.2%)	(1.5%)	(0.4%)
Eastern	161	61	23	14	3
	(61.5%)	(23.3%)	(8.8%)	(5.3%)	(1.1%)
Northern	351	11	6	17	7
	(89.5%)	(2.8%)	(1.5%)	(4.3%)	(1.8%)
Northwest	135	3	22	11	1
	(78.5%)	(1.7%)	(12.8%)	(6.4%)	(0.6%)
Southwest	253	2	O	3	O
	(98.1%)	(0.8%)	(0.0%)	(1.2%)	(0.0%)

Total Cases

(VDH updated 5/10/21)

Since the beginning of the pandemic

 Total
 Total
 Total

 Cases*
 Hospitalizations**
 Deaths

 666,986
 28,911
 10,902

Confirmed† 519,310 Probable† 147,676 Confirmed† 27,446 Probable† 1,465 Confirmed† 9,192

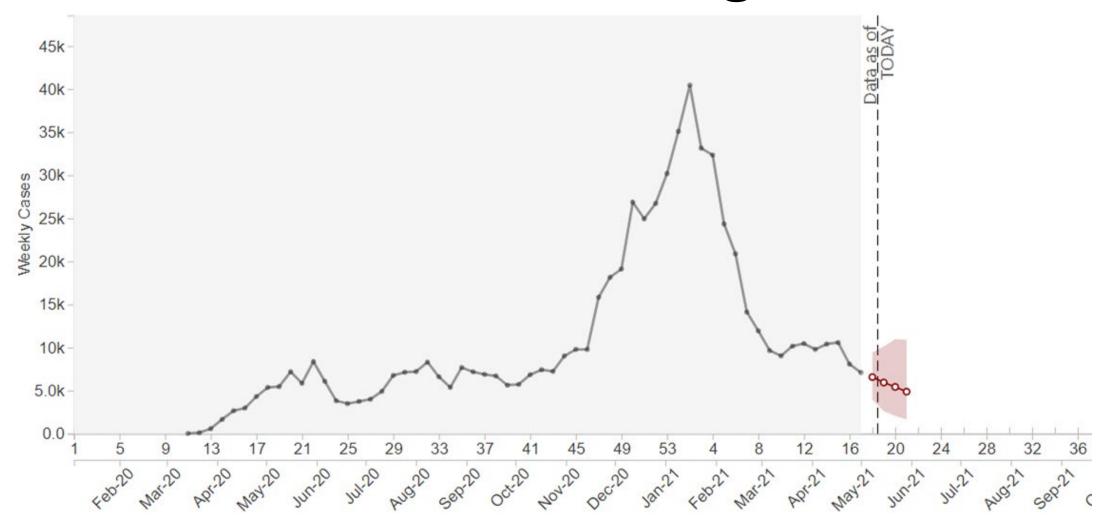
Probable† 1,710

Virginia SNF Population: 28,000-30,000

Virginia Total Population: 8.5 million



Observed and forecasted weekly COVID-19 cases in Virginia



CDC/CMS Updates

In this section, we will cover weekly updates from CDC, CMS, VDH, or novel research findings that impact nursing homes.



CDC Updates 4-27-21

Visitation

no distancing or masks if alone in room and both residents & visitors are vaccinated

Dining/Activities

ok for vaccinated residents

Routine testing of staff

Updated Healthcare Infection Prevention and Control Recommendations in Response to COVID-19 Vaccination

Updated Apr. 27, 2021 Print

CDC guidance for SARS-CoV-2 infection may be adapted by state and local health departments to respond to rapidly changing local circumstances.

Summary of Recent Changes

Updates as of April 27, 2021

- Updated SARS-CoV-2 testing recommendations
- · Updated visitation guidance to include recommendations for acute care facilities and to describe circumstances when source control and physical distancing are not required during visitation
- Added guidance for communal activities and dining in healthcare settings



CMS Updates

In accordance with CDC guidelines, CMS updated Visitation and Testing Memos:

QSO-20-39-NH (4/27/21) - "Nursing Home Visitation"

minor updates but changed to add vaccination status and quarantine status

QSO-20-38-NH (4/27/21) - Testing and COVID-19 Focused Survey

 added definitions around vaccination, revised table 2 for routine testing to only focus on unvaccinated staff



Testing Summary

- Symptom based testing continue
- Exposure testing continue
- Outbreak testing unchanged, test HCP and residents every 3-7 days until no new cases for 14 days
- Routine HCP testing fully vaccinated HCP no longer need to do routine testing

https://www.ahcancal.org/Survey-Regulatory-Legal/Emergency-

 $\frac{Preparedness/Documents/COVID19/CMS\%20and\%20CDC\%20Update\%20Guidance\%20on\%20Testing\%2c\%20Visitation\%2c\%20and\%20Activities\%20in\%20Response\%20to\%20COVID-19\%20Vaccination.pdf}$



CDC Updating NHSN Vaccine Module

- Remember: proposed SNF rule would make COVID19 vaccine reporting mandatory (effective October 1, 2021)
- Need level 3 SAMS access (nhsn@cdc.gov)
- May 11, 18, 20, 25, 27 webinar (all the same material)

https://www.cms.gov/newsroom/fact-sheets/fiscal-year-fy-2022-skilled-nursing-facility-prospective-payment-system-proposed-rule-cms-1746-p

https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html



NHSN HCP

Definitions:

a Environmental, laundry, maintenance, and dietary services b Registered nurses and licensed practical/vocational nurses c Certified nursing assistants, nurse aides, medication aides, and medication assistants d Therapists (such as respiratory, occupational, physical, speech, and music therapists) and therapy assistants e Physicians, residents, fellows, advanced practice nurses, physician assistants f Persons not reported in the HCP categories listed here, regardless of clinical responsibility or patient contact, including contract staff, students, and other nonemployees



Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Long-Term Care Facilities (CDC 57.219)

2 Pages

*required for saving

*Facility ID#:							
*Vaccination type: COVID-19							
*Week of data collection (Monda	y – Sunday)	:_/_/	_/_/	*Date Last N	Modified:/_/		
		Cumulati	ive Vaccination	n Coverage			
			Healthcar	e Personnel (HCI	P) Categories		
	*All HCP (Total)	Ancillary services employees ^a	Nurse employees ^b	Aide, assistant, and technician employees ^c	Therapist employees ^d	Physician and licensed independent practitioner employees°	Other HCP ^f
Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection							
Cumulative number of HCP 2020:	in Question #	#1 who have re	ceived COVID-1	19 vaccine(s) at th	is facility or else	where since Dec	ember
2.1. *Only dose 1 of Pfizer- BioNTech COVID-19 vaccine							
2.2. *Dose 1 and dose 2 of Pfizer-BioNTech COVID- 19 vaccine							
2.3. *Only dose 1 of Moderna COVID-19 vaccine							
2.4. *Dose 1 and dose 2 of Moderna COVID-19 vaccine							
2.5. *Dose of Janssen COVID- 19 vaccine							
2.99. Complete COVID-19 vaccination series: unspecified manufacturer							
* Any completed COVID-19 vaccine series							

Post-Vaccinations Practices Needed in Nursing Homes

Slides courtesy of:

AHRQ ECHO National Nursing Home COVID-19 Action Network



Together Through the Seasons

National Skilled Nursing Care Week* May 9-15, 2021



Your Questions

- What is top of mind for you?
- What should we be sure to cover for you?
- What has been most challenging or frustrating for you?

Please chat in with comments



Improvement of Quality



I should estimate that in my experience most troubles and most possibilities for improvement add up to the proportions something like this:

94% belongs to the system (responsibility of management)
6% special

W. Edwards Deming

source: quotes.deming.org/1538

Saying it happens all the time, without specifics, is a problem that is almost impossible to fix!



Improvement Questions

- What is working?
- What is not working? Why? Why? Why?
- What would success look like?
- How would you know (what would you see) if successful?
- What could you try that would get you closer to success?
- What could you try out before the next call?



Nursing Home Team Roles

Nursing Home Administrators and Directors of Nursing

Design and Manage the Process

Medical
Directors /
Onsite
Clinicians

Implement postvaccination visitation and PPE practices Point of Care Staff

Implement post-vaccination visitation and PPE practices

Residents and Family Members

Follow postvaccination visitation and PPE practices



Leadership in Nursing Homes

- "Leadership is about accepting responsibility for enabling others to achieve shared purpose under conditions of uncertainty." (Marshall Ganz)
- Wise compassionate leadership is the ability to do hard things in a human way. (https://hbr.org/2020/12/compassionate-leadership-is-necessary-but-not-sufficient)





New Pandemic Phase: Post-Vaccination

Vaccine Impact on Signs and Symptoms

Core Principles COVID-19 Infection Prevention

Personal Protective Equipment

Visitation Policies

Staffing Considerations



Post-Vaccination Practices

Goal:

Create effective post-vaccination practices in alignment with current guidance for LTCFs





Post-Vaccination Practices

Strategy:

- Best practice approaches will allow nursing homes to resume visitation consistent with updated guidance, improving quality of life for residents, family members and staff
- Nursing Home leaders should create a plan that includes visitation policies and education, Personal Protective Equipment (PPE) protocols, and implementation of core principles of COVID-19 infection prevention





How to Make Changes Stick

- Focus initially on KEY PROCESSES rather than a benchmark
 - Having a goal is important but without the processes to get there, it is useless
- Evaluate if staff KNOW the process
 - Train staff in the process; Provide different learning modalities
- KEEP it SIMPLE!
 - Processes that are too complicated will not be remembered or followed
- Commit to LEARNING
 - You don't have to have it all right the first time through (or the second or the third)



Discussion Questions

- How have you made your PPE practices sticky?
 - What makes it easy for staff to access the PPE the need?
 - What visual reminders do you have that help staff remember the PPE that is needed?
- What is your process for having residents alert you if they are experiencing COVID-19 symptoms?
 - Residents are a key partner in this work? How can they also be part of the process?



Discussion Questions

- Visitation involves a LOT of players in the system: staff, residents, and the visitor (who may or may not be familiar with your practices)
 - What is your SIMPLE process for ensuring visitors are aware of your processes to have a safe visit with their loved one?



References and Resources

- Centers for Disease Control and Prevention. COVID-19. Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes. Updated Mar. 29, 2021: https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html
- Centers for Medicare & Medicaid Services. Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements and Revised COVID19 Focused Survey Tool. QSO-20-38-NH, August 26, 2020: https://www.cms.gov/files/document/qso-20-38-nh.pdf
- Centers for Medicare & Medicaid Services. Nursing Home Visitation COVID-19 (Revised). QSO-20-39-NH: Revision Date: 03/10/2021: https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf



Wrap-up

- Any final questions/comments?
- Any topics you would like the faculty to work on for next week?
- We want to continue to learn from you: please share your success, tests of changes, sticky changes with us by emailing: nursinghome-echo@vcu.edu



Announcements

Next Week: Post-Vaccination Practices - Visitation

CE Activity Code:

Within 7 days of this meeting, text the code to (804) 625-4041.

Questions? email ceinfo@vcuhealth.org

Attendance

Contact us at nursinghome-echo@vcu.edu if you have questions.



Resources - our website

https://www.vcuhealth.org/NursingHomeEcho

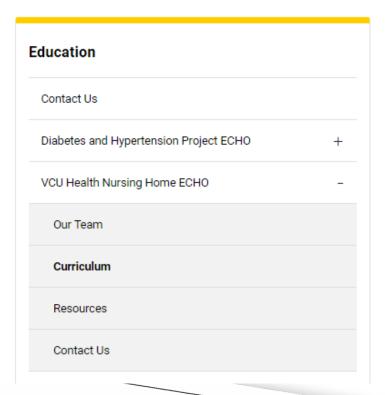


Our Providers

Our Services

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Home > Services > Telehealth > For Providers > Education > VCU Health Nursing Home ECHO > Curriculum



Curriculum

Take the opportunity to submit and discuss your de-identified case study for feedback from team c early childhood specialists. To submit a case for presentation during an ECHO clinic, please email jhmathews@vcu.edu.

Upcoming Sessions

16-Week Curriculum Topics

Session 1: Program Introduction: Preventing and Limiting the Spread of COVID-19 in Nursing Home

- Session 1 Summary
- · Slide Presentation

Session 2: Infection Prevention Management: Guidance and Practical Approaches for Use of Perso (PPE) during COVID-19

