

LTC Newsletter 2022-44 Dec. 9, 2022

LTC Update:

- CMS Memo QSO-23-03-All The Importance of Timely Use of COVID-19 Therapeutics
- CDC Reviews and Posts Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings
- Building an Infection Prevention Savvy Workforce: Free Training for LTC Professionals
- Civil Money Penalty (CMP) Reinvestment Application In-Person Visitation Aids Portable Fans and Portable Room Air Cleaners – Deadline Dec. 30

CMS Memo QSO-23-03-All – The Importance of Timely Use of COVID-19 Therapeutics

On Nov. 22, CMS released memo <u>QSO-23-03-All</u>. This memo discusses the importance of the timely use of available COVID-19 therapeutics, particularly for high-risk patients who test positive for the virus. Treatments, including both monoclonal antibodies and oral antiviral drugs, can prevent serious illness and save the lives of high-risk individuals who would otherwise be at risk of severe complications.

Nursing homes, in particular, should review and reinforce their infection control protocols as we move into fall and winter, when respiratory infections are more commonly transmitted. In addition to mitigating opportunities for transmission of COVID-19, nursing homes should ensure residents receive (in consultation with their physician and family) appropriate treatment when tested positive for COVID-19.

CDC Reviews and Posts Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings

The Centers for Disease Control and Prevention's (CDC) <u>Core Infection Prevention and Control</u> <u>Practices for Safe Healthcare Delivery in All Settings</u>, also known as Core Practices, are now available on CDC's Infection Prevention and Control website.

These practices were originally compiled by the Healthcare Infection Control Practices Advisory Committee (HICPAC) workgroup and posted on the HICPAC website in 2014.

By moving the Core Practices under CDC and posting on CDC's Infection Control website, CDC is clarifying that these core practices remain fundamental standards of care that should be implemented in all settings where healthcare is delivered. As part of this process, the core practices were reviewed by CDC to determine if updates were needed since their original posting. Additions, as outlined below, were shared at the November 2022 HICPAC meeting.

Key information

- Two new practices were added:
 - 5c. Injection and Medication Safety: Prepare medications in a designated clean medication preparation area that is separated from potential sources of contamination, including sinks or other water sources.
 - 5e. Minimizing Potential Exposure: Develop and implement systems for early detection and management of potentially infectious persons at initial points of patient encounter in outpatient settings and at the time of admission to hospitals and long-term care facilities.
- Addition of consideration for broader use of source control during periods of higher levels of community respiratory virus transmission was also added to the section addressing Minimizing Potential Exposures.
 - During periods of higher levels of community respiratory virus transmission*, facilities should consider having everyone mask upon entry to the facility to ensure better adherence to respiratory hygiene and cough etiquette for those who might be infectious. Such an approach could be implemented facility-wide or targeted toward higher risk areas (e.g., emergency departments, urgent care, units experiencing an outbreak) based on a facility risk assessment.

*Examples of potential metrics include, but are not limited to, increase in outbreaks of healthcare-onset respiratory infections, increase in emergency department or outpatient visits related to respiratory infections.

These core practices are intended to serve as a standard reference and reduce the need to repeatedly evaluate practices that are considered basic and accepted as standards of medical care. Future updates to the Core Practices will be guided by the publication of new or updated CDC infection prevention and control guidelines.

Read more here: <u>CDC's Core Infection Prevention and Control Practices for Safe Healthcare</u> <u>Delivery in All Settings | Infection Control | CDC</u>

Building an Infection Prevention Savvy Workforce: Free Training for LTC Professionals

The University of Indianapolis Center for Aging & Community and the Indiana Department of Health will host 11 sessions of Building an Infection Prevention Savvy Workforce over the course of 2023 for long-term care professionals. These sessions will each be comprised of three half-days spread over three weeks. The virtual training sessions are designed to provide an in-depth education on infection control with long-term care specific content and examples.

Who should attend?

Indiana Long-Term Care Professionals who are interested in Infection Prevention and Control.

When:

Session 1: Jan. 6, 13 and 20 Session 2: Feb. 3, 10 and 17 Session 3: March 3, 10 and 17 Session 4: March 14, 21 and 28 Session 5: April 14, 21 and 28 Session 6: May 5, 12 and 19 Session 7: Aug. 15, 22 and 29 Session 8: Sept. 15, 22 and 29 Session 9: Oct. 6, 13 and 20 Session 10: Oct. 18, 25 and Nov. 1 Session 11: Nov. 3, 10 and 17 Participants are required to attend all three days.

Delivery Mode:

Three-day, virtual training sessions. The class is designed to offer three partial days of virtual training, with a week interval between sessions. Participants are required to attend all three days. Class is 11 a.m. to 4 p.m. EDT each day. Please note that breaks will be given, but there is no lunch period.

Content:

The virtual training sessions are designed to provide in-depth education in infection control with long term care specific content and examples. The course will involve a pre-and post-test to reflect knowledge improvement. Additionally, there will be a "final exam" given after the third virtual session.

Credential:

Participants receiving a score of 75% or above on the final exam will receive a Certificate of Training: Infection Prevention in the Long-Term Care Setting. CEUs are available for Administrators and Social Workers.

To register, at no cost, please visit: <u>https://store.uindy.edu/catalog?pagename=Infection_Prevention</u>

Civil Money Penalty (CMP) Reinvestment Application – In-Person Visitation Aids – Portable Fans and Portable Room Air Cleaners – Deadline Dec. 30

On Feb. 2, the Centers for Medicare & Medicaid Services (CMS) issued a revised FAQ guidance for Nursing Home Visitation – COVID-19 in Memorandum <u>QSO-20-39-NH Revised</u>. CMS clarified a facility may request the use of Civil Money Penalty (CMP) Reinvestment funds to purchase portable fans and portable room air cleaners with high-efficiency particulate air (HEPA, H-13 or -14) filters to increase or improve air quality. A **maximum use of \$3,000 per facility**, including shipping costs, may be requested.

Expenses incurred on or after the Feb. 2 release date are eligible for reimbursement.

Facilities that have not done so already may submit applications to <u>INCMP@isdh.in.gov</u> and email questions to Suzanne Williams at <u>SuWilliams@health.in.gov</u>. **The deadline to submit applications to IDOH is Friday, Dec. 30.**

<u>Civil Money Penalty (CMP) Reinvestment Application Template Coronavirus Disease 2019 (COVID-</u> <u>19) In-Person Visitation Aids Request Instructions</u>

CMP Application for In-Person Visitation Aid Requests Frequently Asked Questions (FAQs)