



## APIC Great Lakes: 2024 Educational Webinar Series

Long-Term Care Facility Reporting Required, Optional, and the Future





## Housekeeping

- Please mute your line
- Have questions for our speaker? Drop it in the chat to be asked!





## Continuing Education (CE)

There are no CEUs for today's presentation





## **Announcements**

MDHHS & MHA Project Firstline: IP Training

- Acute & Long-TermCare IP
  - Modules 1, 2, and 6
- Staff (Direct care, housekeeping & food service)
  - Modules 3, 4, and 5

New <u>Microlesson</u> posted on the APIC-GL YouTube Channel

APIC Great Lakes Microlearn:
Updating APIC Setting to Engage
in our Chapter Online
Community



# NEW! APIC-GL Peer-to-Peer Mentorship Roundtable

#### • WHAT:

 A facilitated time following APIC-GL monthly education webinars where members will have the opportunity to share challenges, ask questions, and seek advice from fellow member IPs.

#### WHO:

All APIC-GL members can participate and benefit.

#### • HOW:

Submit questions anonymously through <u>Google Forms</u>.
 Questions/situations will be presented to the group for discussion.





## Long Term Care Facility Reporting-Required, Optional, and the Future

SARMED REZZO-LTC EPIDEMIOLOGIST MDHHS

## Who We Are-Background

The Surveillance for Healthcare-Associated and Resistant Pathogens Unit (SHARP) was created in 2009 to:

- Coordinate activities related to Healthcare Associated Infection (HAI) surveillance, response, and prevention in Michigan
- Improve surveillance and detection of antimicrobial-resistant pathogens and HAIs
- Identify and respond to disease outbreaks
- Use collected data to monitor trends
- Educate healthcare providers, state and local public health partners, and the public on HAIs
- My role is the Long-Term Care Epidemiologist in the SHARP unit
  - Collaborate with facilities, Local Health Departments, other units, and sections at MDHHS regarding Long-Term Care Facilities (LTCFs)
  - Coordinate surveillance projects on HAIs in Long-Term Care Facilities (LTCFs)

Some of the slides in today's presentation were presented by the National Center for Emerging and Zoonotic Infectious Disease, Centers for Disease Control and Prevention (CDC)
Links to archived trainings can be found here:

- https://www.cdc.gov/nhsn/ltc/covid19/index.html
- https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html

LTCF COVID-19 Module: Surveillance Pathway Updates – June 2023

YouTube Webinar Recording (Video-46 minutes)

<u>Updates to Weekly COVID-19 Vaccination Data Reporting: Long-term Care Facilities – March</u> 2024

# Current Reporting Requirements

SKILLED NURSING FACILITIES: COVID-19 REPORTING

### **CMS Reporting Requirements for Long-term Care Facilities**

- Reminder: Facilities can contact CMS with questions about reporting requirements and quality reporting
  - Long-term care facilities weekly reporting requirement questions:
     DNH TriageTeam@cms.hhs.gov
  - Skilled nursing facilities quality reporting program questions: <u>SNFQualityQuestions@cms.hhs.gov</u>

COVID-19 Surveillance Pathways	COVID-19 Vaccination Module
Reporting requirements	Reporting requirements
CMS certified facilities are required to report at least once every reporting week	Weekly reporting requirement for LTC residents and staff  Report at least once every reporting week  Requirement to go through December 2024
Requirement to go through December 2024	<ul> <li>Quarterly Reporting Requirement for Staff</li> <li>Report vaccination data 1 week/month for staff</li> <li>After the weekly requirement expires in Dec. 2024, continue to report 1 week/month for staff</li> <li>Use the "COVIDI9 VaccinationHCP" tab in order to report these data</li> </ul>



#### Additional COVID-19 Vaccination Reporting Resources:

- Operational Guidance for Reporting COVID-19 Vaccination Data
- FAQs on Reporting COVID-19 Vaccination Data

# Current Reporting Requirements in NHSN-Weekly

Surveillance Reporting Pathways

- Due every 7 days
- ❖ No set reporting week, at least 1 report is required every 7 days
- 2 Pathways-Resident Impact and Facility Capacity & Staff and Personnel Impact
  - ❖ Newly positive tests in residents and staff
  - Vaccination status of resident COVID-19 cases

Weekly COVID-19 Vaccination
Data Reporting Module

- ❖ Due every 7 days
- ❖ Structured Reporting week every

  Monday-Sunday and must be completed
  before the next Sunday
  - ❖ Example: Data covering The week of 7/8/24-7/14/24 is due by 7/21/2024

## COVID-19 Surveillance pathways versus COVID-19 Vaccination Modules

COVID19 Surveillance Pathways

LTCF COVID-19 Module webpage



Module

COVID-19 Vaccination

Weekly HCP & Resident COVID-19 Vaccination webpage

VS.



# Examples of Data Reporting Forms

## RIFC Pathway: Data Reporting Example

sident Impact for COVID-19 (SARS-CoV-2)			
★ POSITIVE TESTS: Enter the Number of residents with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 anti- and/or SARS-CoV-2 NAAT (PCR). Note: Do not include residents who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR). Only include residents newly positive since the most recent date data were collected for NHSN reporting.	igen tes		
ccination Status of Residents with a Newly Confirmed SARS-CoV-2 Viral Test Result			
Up to Date Vaccination Status			
Ip to Date: Include residents with a newly positive SARS-CoV-2 viral test result who are up to date with COVID-19 vaccines 14 days or more before he specimen collection date.			
ote: Please review the current NHSN surveillance definition of <u>up to date.</u>			
Not Up to Date: Based on the counts entered for POSITIVE TESTS and UP TO DATE, the count for residents who are NOT considered up to date based on the NHSN Surveillance definition has been calculated above.			
nis count is not editable, to edit please update the count entered for UP TO DATE.			
**Hospitalizations with a positive Tests" count reported above. Include only the number of new hospitalizations with a positive COVID-19 test since the most recent of respected to NHSN.  *Hospitalizations with a positive COVID-19 Test: Number of residents who have been hospitalized with a positive COVID-19 test.  Note: Only include residents who have been hospitalized during this reporting period and had a positive COVID-19 test in the 10 days prior to hospitalization, date of specimen collection is calendar day 1.  **Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number reported for "Hospitalizations with a positive COVID-19 Test and Up to Date: Based on the number of the number of test and Up to Date: Based on the number of test and Up to Date: Based on the number of test and Up to Date: Based on the number of test and Up to Date: Based on the number of test and Up to Date: Based on the number of test and Up to Date: Based on the numb	the		
COVID-19 Test" indicate the number of residents who were hospitalized with positive COVID-19 test and also up to date with COVID-19 vacci at the time of the positive COVID-19 test.	ination		
sident Deaths			
*TOTAL DEATHS: Number of residents who have died for any reason in the facility or another location.  Include only the number of new deaths since the most recent date data were collected for NHSN reporting.			

complications, either in the facility or another location.



# Staff and Personnel Impact Pathway Reporting Example



## Weekly COVID-19 Vaccination: Resident Form

#### Who is considered up to date has changed, but the form has not.

1. * Number of residents staying in this facility for at least 1 day during the week of data collection				
2. * Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines.				
Please review the current definition of up to date: Key Terms and Up to Date Vaccination.				
3. * Cumulative number of residents in Question #1 with other conditions:				
3.1 * Medical contraindication to COVID-19 vaccine				
3.2 * Offered but declined COVID-19 vaccine				
3.3 * Unknown/Other COVID-19 vaccination status				

**Note:** The sum of the numbers entered for questions 2 and 3 should equal the total number of individuals entered for question 1.

### Weekly COVID-19 Vaccination: HCP Form

#### Who is considered up to date has changed, but the form has not.

	Healthcare Personnel (HCP) Categories						
			Employee HCP	Non-Employee HCP			
	*All Core HCP <sup>a</sup>	*All HCP <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants <sup>d</sup>	*Adult students/trainees & volunteers <sup>e</sup>	*Other Contract Personnel <sup>f</sup>	
*Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection.							
2. * Cumulative number of HCP in Question #1 who are up to date with COVID-19 vaccine(s).  Please review the current definition of up to date:  Key Terms and Up to Date Vaccination.							
3. * Cumulative number of HCP in Question #1 with o	ther conditions:						
3.1 *Medical contraindication to COVID-19 vaccine							
3.2 *Offered but declined COVID-19 vaccine							
3.3 *Unknown/Other COVID-19 vaccination status					一		

**Note:** The sum of the numbers entered for questions 2 and 3 should equal the total number of individuals entered for question 1.

## Other Reporting Requirements

#### Point of Care Test Reporting

- Due within 24 hours of performing test
- ❖ All positive individual Point Of Care test results
- Batch.csv uploading available to streamline process
- ❖ One of 3 available methods:
  - NHSN Point of Care Test Result Reporting Module
  - ❖ MiBridges-Antigen Reporting Portal (Until Aug 17<sup>th</sup>)
    - ❖ New Reporting Method to come
  - Directly to your Local Health Department

Annual Healthcare Personnel Influenza Vaccination Reporting

- ❖ Due May 15th
- ♦ Covers annual influenza season (10/1-3/31)
- ❖ Only 1 report required
- Must be reported to the Healthcare Personnel Safety (HPS) Component in NHSN
  - Only the Facility Administrator role in NHSN can request access

## Point of Care & Annual Flu Vaccination Location



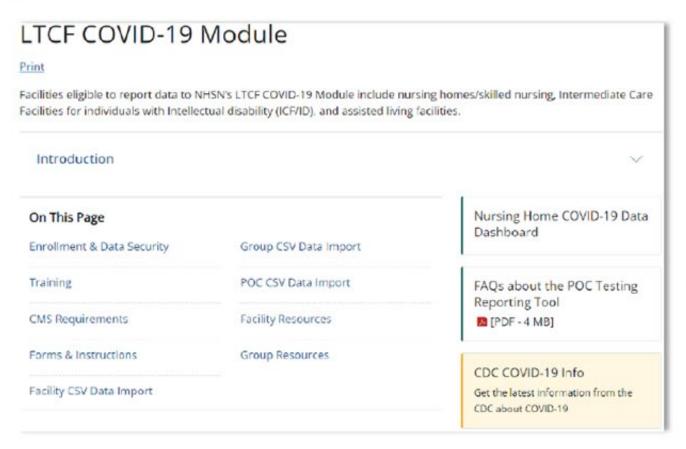






### One Stop Browsing for NHSN LTCF COVID-19 Module Resources

Visit NHSN LTCF COVID-19 Module web page for reporting resources



#### Data Collection Forms and Instructions

Resident Impact and Facility Capacity

COVID-19 Resident Impact and Facility Capacity Pathway Form (57.144). 🚨 [PDF – 251 KB] (print-only) -

#### Staff and Personnel Impact

COVID-19 Staff and Personnel Impact Pathway Form (57.145). Dec [PDF - 161 KB] (print-only) -

Table of Instructions (57.145) [PDF - 250 KB] [PDF - 358 KB]

#### Point of Care Testing

Point of Care Test Reporting Tool (57.155) [PDF - 80 KB] (print-only) -

○ Table of Instructions (57.155) 🖪 [PDF - 200 KB] -



## Optional Reporting

PART 1: PERSON LEVEL VACCINATION DATA

## Up to Date: Quarter 2 of 2024 (April 1, 2024 – June 30, 2024)

- Individuals are considered up to date with their COVID-19 vaccines for the purpose of NHSN surveillance if they meet the following criteria:
- 65 years and older and received 2 doses of the updated 2023-2024 COVID-19 vaccine

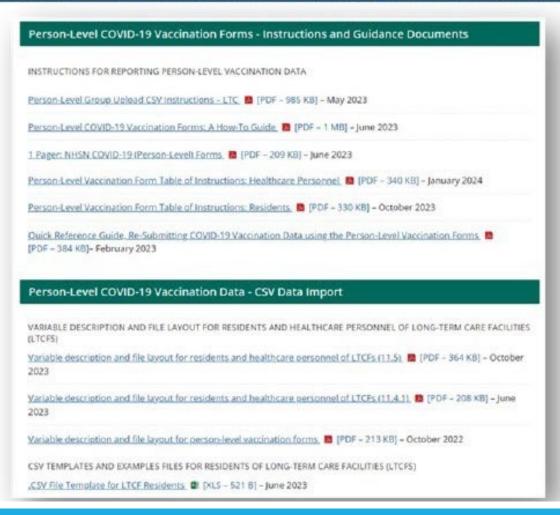
or

\_puated 2023-2024 COVID-

- The Person-level forms apply 65 years and older and received 1 dose of the updated 2022 vaccine in the last 4 months these definitions for you!
- Under the age of 65 and receive 19 vaccine

#### Resource: Person-Level COVID-19 Vaccination Forms

All resources: LTCF | COVID-19/Respiratory Pathogens Vaccination | NHSN | CDC



## Optional Reporting

PART 2: INFLUENZA/RSV CASE AND VACCINATION REPORTING

## Surveillance Pathways: 2 Pathways and 1 Optional Tab

Optimizing Timely, Standardized Data Collection to Characterize National Impact, Inform Ongoing Activities, and Direct Resources

Resident Impact and Facility Capacity

- Newly Positive Tests
- Up-to-date status
- Hospitalizations
- Hospitalizations and up-to date status
- Deaths

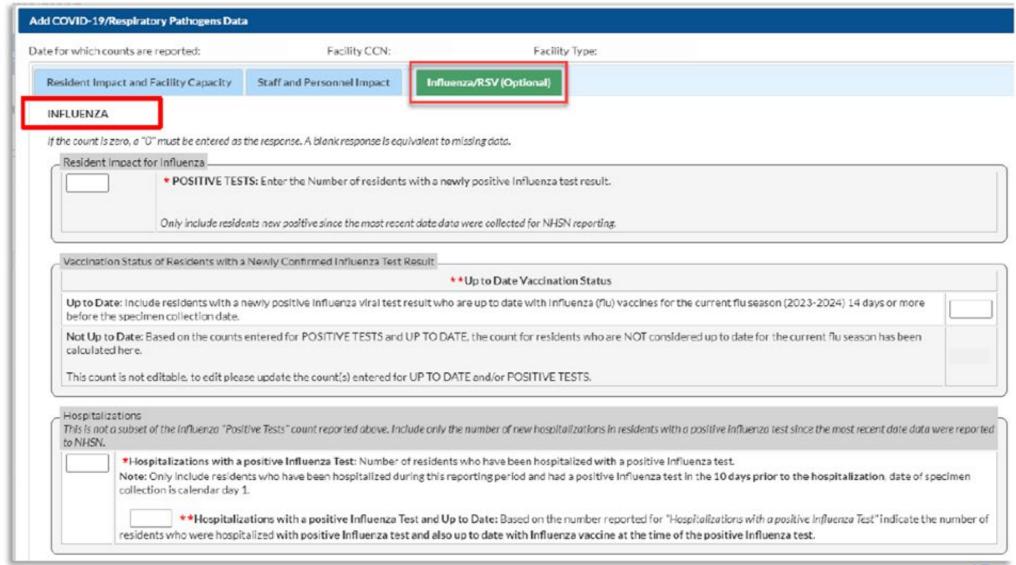
Staff and Personnel Impact

Newly Positive Tests

Optional

- Influenza
- RSV

## NHSN Application Updates: Influenza and RSV Case Reporting



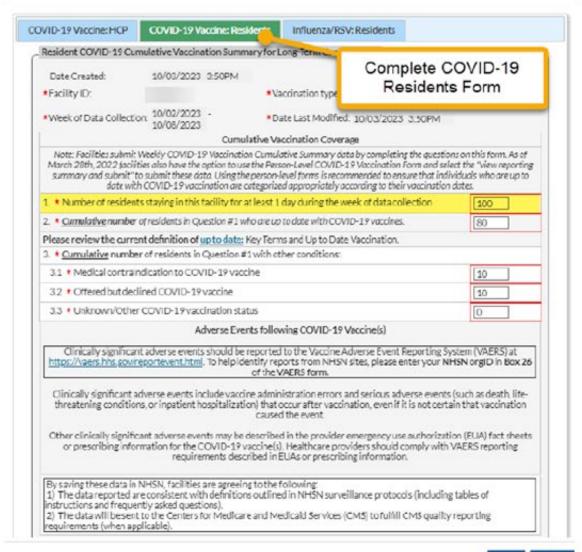


## Complete COVID-19 Vaccine Residents Form

Edit Vaccinc Data

 Required to report COVID-19 residents' data before entering Influenza/RSV vaccination data

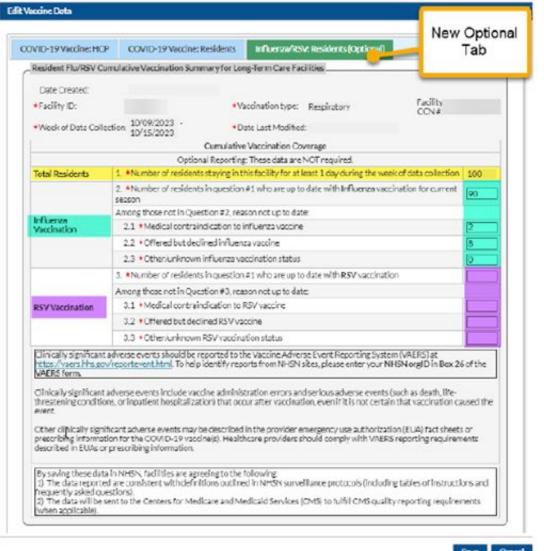
- Continue to report COVID-19 per CMS requirements
- Question 1 from COVID-19 residents form will auto populate total residents on Flu/RSV form





### Influenza and RSV Vaccine Form

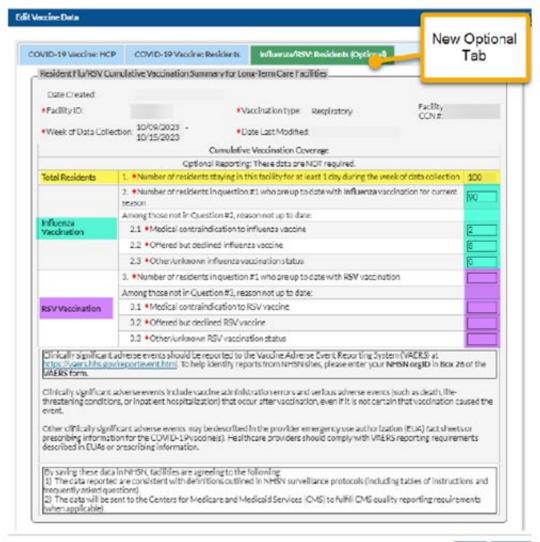
- Flu/RSV Total Residents (Question 1) is auto-populated from COVID-19 Residents tab
- 4 data fields for Flu/RSV vaccinations
  - Number of up to date
  - Number of medical contraindications
  - Number offered but declined
  - Number other/unknown
- The 4 data fields need to add up to the number reported in Total Residents (Question1)





### Reporting Influenza and RSV Vaccinations

- You can report:
  - Both Flu and RSV vaccination questions
  - Only Flu vaccination (questions 2-2.3)
  - Only RSV vaccination (questions 3-3.3)
  - Neither
- If you report in any data field for either vaccine. You must complete all vaccination questions for the associated vaccine.
- Users choose how often to report
  - Ideally in same weekly reporting cadence as COVID-19 Vaccine





## Benefits of Optional Reporting-Flu/RSV

- Visibility of respiratory illness cases within the facility
- Analytic tools within the NHSN portal to track cases and vaccination over time and share with C-Suite
- Infection Prevention and outbreak management support from MDHHS
- Clarity for CDC on resource and funding allocation for future respiratory seasons



## Optional Reporting

PART 3: HEALTHCARE ASSOCIATED INFECTION (HAI) REPORTING

### **NEW Initiative:**

## Improve NHSN for HAI Reporting

- Recent CDC funding: Enhancing NHSN's use by increasing the enrollment of HAI reporting into NHSN for the LTCF component.
- Only have a handful of facilities that have ever reported their HAI data into NHSN's LTCF component and looking to change that

#### Primary Objectives of Initiative:

- Bolster the use of NHSN for HAI reporting in LTCFs
- Identify areas of HAI prevention/control improvement in LTCFs
- Increase adherence to prevention measures
- Improve and standardize HAI surveillance
- Increase understanding of how HAIs are transmitted in your facility and community
- Reduce HAI Prevalence/Incidence

# Initiative Benefits: Enrolling in the LTCF Component



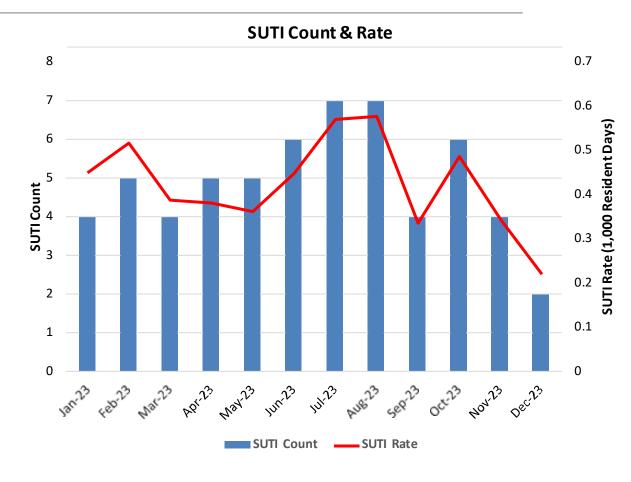
## The power of data

#### Benefits of visibility of HAI data in the LTC space

- Awareness of HAI infections in the facility and identifying areas of improvement
- Ability to inform action for infection prevention purposes and track progress
- MDHHS also generates monthly reports for participating facilities
- Additional support from the MDHHS SHARP Unit and Infection Prevention Unit and the ability to collaborate to help reduce the burden of HAIs.
- Improve Patient Safety

#### **Real-Time Data Tools and Analysis**

 NHSN gives healthcare facilities to review their data in realtime using embedded analysis tools, which can be shared with clinicians and facility leadership to help inform infection prevention strategies.

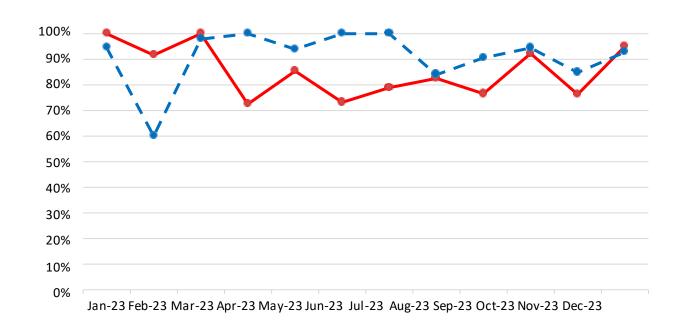


# Facility-specific Technical Assistance and Collaborative Opportunities

#### Workgroup/Group Calls

- Similar to NHSN Workgroup for Hospital Component
- Monthly meetings to discuss recent NHSN changes, share best practices, review HAI data, training/learning opportunities, other topics, and updates of interest
- Smaller group of engaged facilities to discuss
   HAI topics
- Access to Subject Matter Experts
- Review of MDHHS-generated reports covering participating facilities

#### **Hand Hygiene & Gown/Glove Rates**





# Educational Resources/Professional Development

A portion of CDC's SHARP Project IV funding can go to facilities for participation in NHSN Reporting.

• Funding designed to be used for the professional development of IP staff and to enhance IP staff to offset this additional reporting.

Professional Development Incentive-\$2,500

- Eligible for enrollees prior to September 30<sup>th</sup>, 2024
- To be used for Guidelines, Conferences, Textbooks & Memberships to IP Organizations
- CDI/MDRO and UTI reporting required to be eligible for funding, Prevention Process Measures Optional

#### Who should Participate

Engaged facilities interested in and with the capacity to conduct HAI reporting

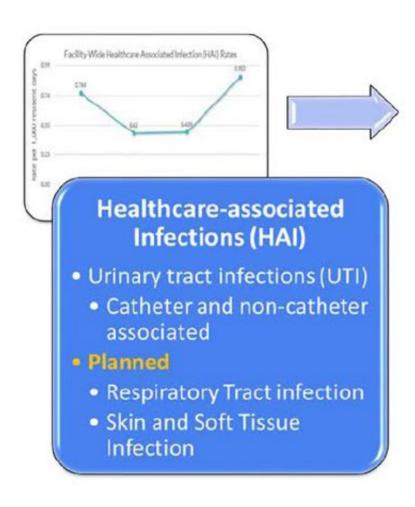
Facility staff knowledgeable in HAIs in the facility

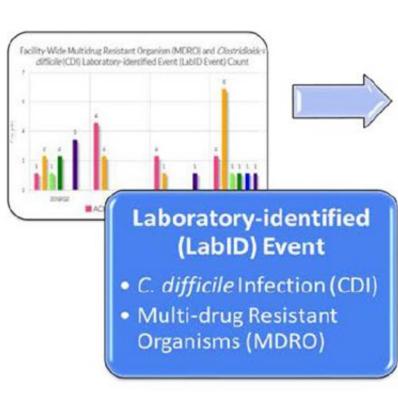
Facilities with buy-in from leadership

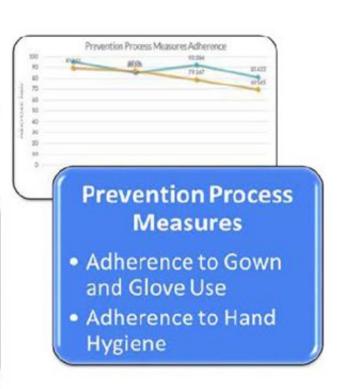
# NHSN's Resources/Process

 NHSN INFRASTRUCTURE, NAVIGATING TO REPORTS, AND ADDITIONAL NHSN RESOURCES

## Standardized Surveillance Criteria and Analysis for the Following Modules

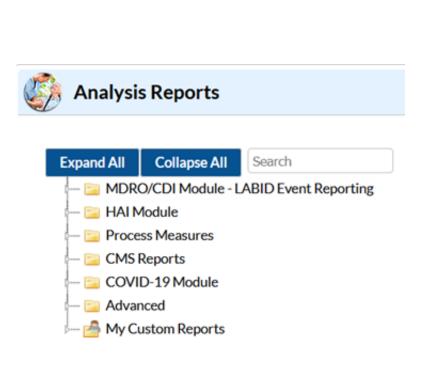


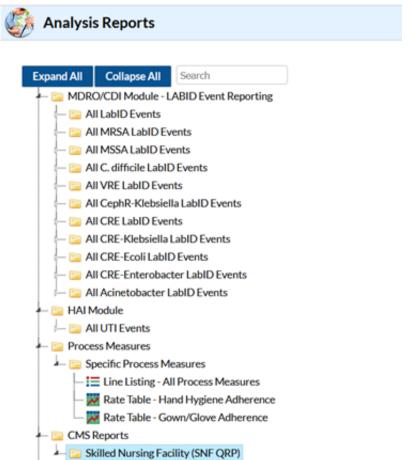




## Available NHSN Analysis Reports





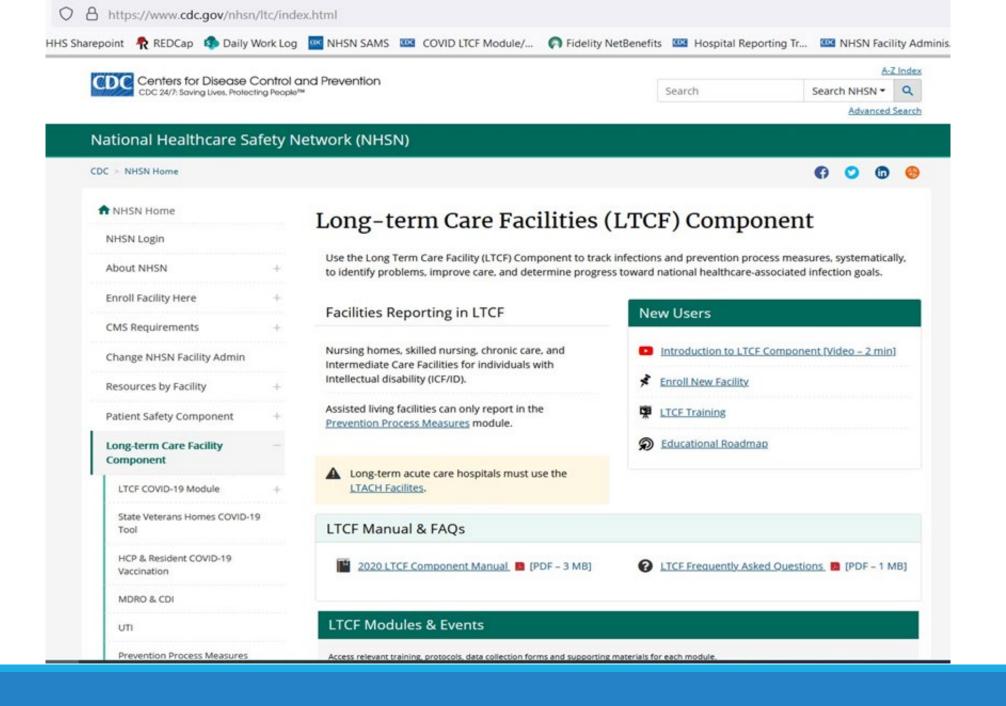


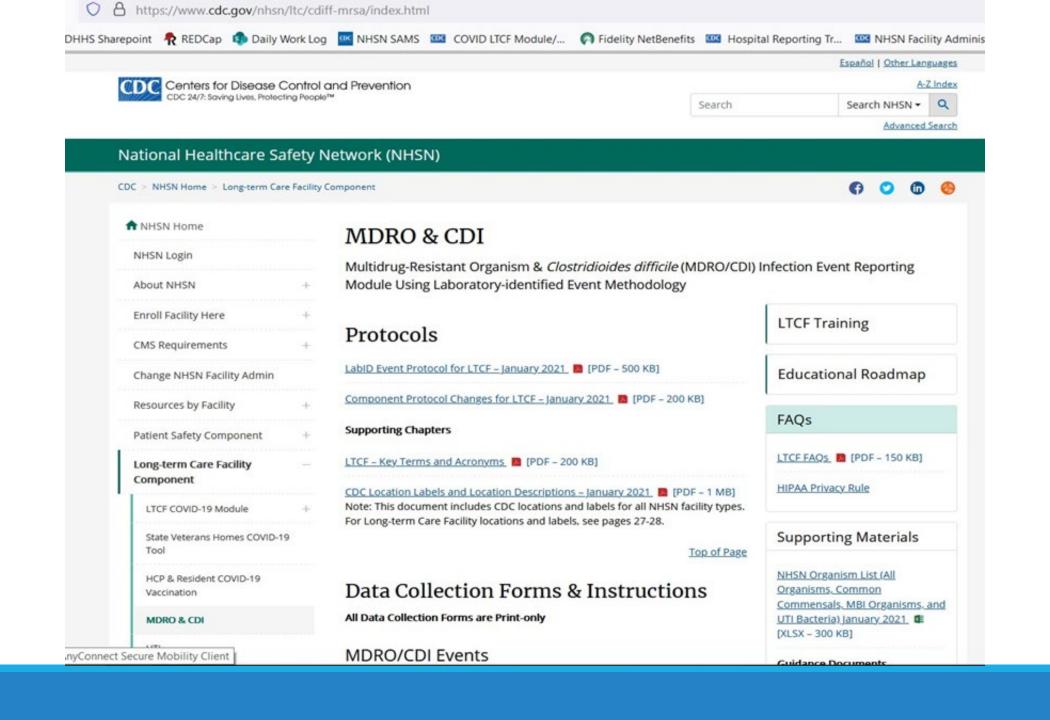
Rate Table - HCP COVID-19 Vaccination Data for CMS SNF QRP

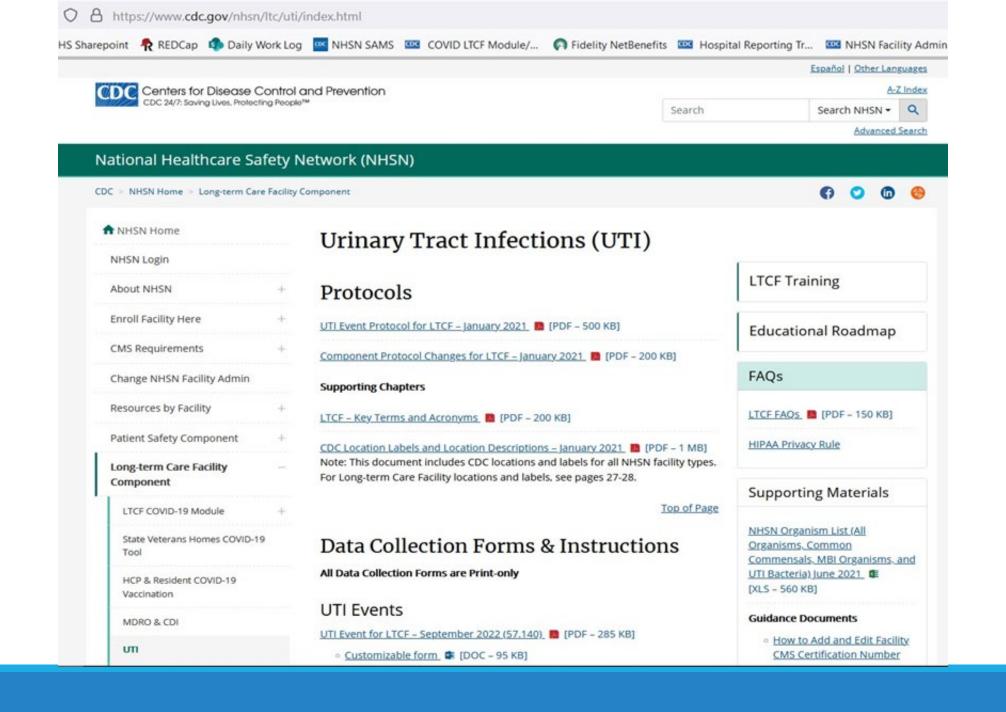
— COVID-19 Module

A My Custom Reports

— Paragraphic Advanced







#### Next Steps

Agreement to participate & Letter of Intent

Sign Up for NHSN's Module, MRP, UTI and CDI/MDRO monthly reporting (optional prevention process measures)

Added to participating facility list for additional info, addition to workgroup, and further instructions

#### To Sum Up:

#### Benefits of using NHSN for HAI Reporting:

- Educational Resources/Professional Development
- Module Expertise and Familiarity
- Access to User Group
- Real-Time Data analysis and visualizations
- Ability to share data with clinicians and facility leadership to leverage resources
- HAI Section's assistance to help lower the HAI burden

If you're already using NSHN-Share data with MDHHS NHSN Group

- Additional resources to help you understand your data
- Local prompt response to question

## The Future of NHSN

**UPCOMING REQUIREMENTS-2025 AND BEYOND** 

### **Upcoming NHSN Training**

- ♦ July 23<sup>rd</sup>-July 25<sup>th</sup>
- 2024 VirtualPost-AcuteCare Training
  - Intended Audience: Long Term Care and Dialysis facilities
- Registration Link



#### Known NHSN LTCF Module Updates

Next expected major LTCF Module Update- January 1st, 2025

#### **Demographics Updates:**

- Sex at birth-Required
- Gender Identity-Required
- Multiple Race Options
- Race & Ethnicity-Required

#### Longer Term Possibilities

RSV and Influenza-Upcoming NHSN Training

- Webinar Title-Respiratory Tract Infection (RTI) Pilot Project: The Importance of Respiratory Pathogen Reporting
- Still optional in 2025?

HAI Reporting?

#### Thank You!

Sarmed Rezzo, MPH

Long Term Care Epidemiologist

Michigan Department of Health and Human Services

Bureau of Infectious Disease Prevention

SHARP Unit

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www.michigan.gov/HAI







#### All webinars are from 1-2 PM EST

August 20<sup>th</sup> – Member Presentations
October 10<sup>th</sup> – APIC-GL Fall Conference!
November 19<sup>th</sup> - TBD

Please note this schedule is subject to change. All changes and additional event details will be communicated via email, once confirmed.

Please direct questions to **Kelsey Ostergren**, **Chau Nguyen**, or **Denise Parr** 



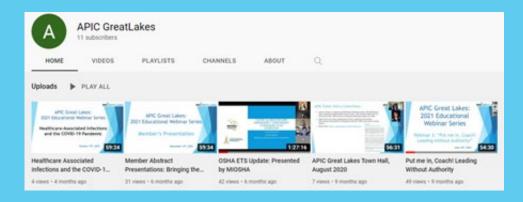
# Session Recordings NOW AVAILABLE!

APIC-GL site — webinar slides
Our Events - APIC Chapter 077 - Great Lakes

YouTube channel— webinar recordings

APIC Great Lakes - YouTube

#### Don't forget to subscribe!





If you have an open position you would like to post to the APIC-GL webpage, please email our web master Rebecca Battjes (apicgreatlakes@gmail.com)

### **Job Postings**

Link to job board





## Thank you for joining us today!

