

Welcome to ECHO COVID-19 Action Network Continuation Phase Session 15: Continuing Vaccination

**AHRQ ECHO National Nursing
Home COVID-19 Action Network**





Questions? Email:
nursingecho@stanford.edu

Accreditation Statement

In support of improving patient care, Stanford Medicine 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

American Medical Association (AMA)

Stanford Medicine designates this other activity for a maximum of *27 AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

American Nurses Credentialing Center (ANCC)

Stanford Medicine designates this other activity for a maximum of 27 ANCC contact hours.

Disclosure

There are **no relevant financial relationships** with ACCME-defined commercial interests for anyone who was in control of the content of this activity.

CME credits are processed by the end of the series. Instructions on how to view your credits will be provided.



Questions?

Visit: www.hsag.com/echo

Contact: canursinghomes@hsag.com

Accreditation


Health Services Advisory Group, Inc., is the CE provider for this event. Provider approved by the CA Board of Registered Nursing, Provider Number 16578, for 1 contact hour; and approved by the California Nursing Home Administrator Program, Provider Number 1729, to offer 1.0 contact hour.

BRN and NH Administrator Program credits are awarded by session. Instructions and claim credit links for each session are posted on the NH Community page and in the post session email.

Sessions 4-19 are approved.

Attendance

- **Claim Attendance.** Check the chat for today's link.
- **Missed a Session?** Watch the recording and claim participation. Attendance reports posted on NH Community site.

 **ECHO Nursing Home COVID-19 Action Network**

Cohort 1 Attendance

This attendance form is for participants of the Cohort 1 (Alameda, Santa Clara, Contra Costa) ECHO session hosted by Stanford Center for Continuing Medical Education.

CLAIM ATTENDANCE

First Name *

Last Name *

Which session are you marking as attended? *

Participated in Live Session or Watched Recording? *

E-mail Address *
Please make sure that your email address is spelled correctly. We will email you any new information to you.



**ECHO Nursing Home
COVID-19 Action Network**

Session 11 Recording

ECHO COVID-19 Nursing Home Action Network Compensation Important Dates and Deadlines

*If your nursing home is opting out of receiving the \$6,000 compensation, please complete the **Compensation Opt-Out Form** as soon as possible.*

Need more help? Email questions to:
ECHONursingHome@salud.unm.edu

AUGUST
16

Submit contract/agreement and W9 to Online Payment Initiation Form

AUGUST
27

Participate in 13 or more sessions with 2 or more participants from your nursing home to be eligible. Ensure to submit any make up recorded attendance to Stanford Training Center through claim attendance links by this date.

AUGUST
30/31

Attend the Wrap Up Celebration sessions
(More information coming soon)

SEPTEMBER
10

Stanford Training Center to provide all eligible nursing homes a certified attendance report and certificate of completion

SEPTEMBER
23

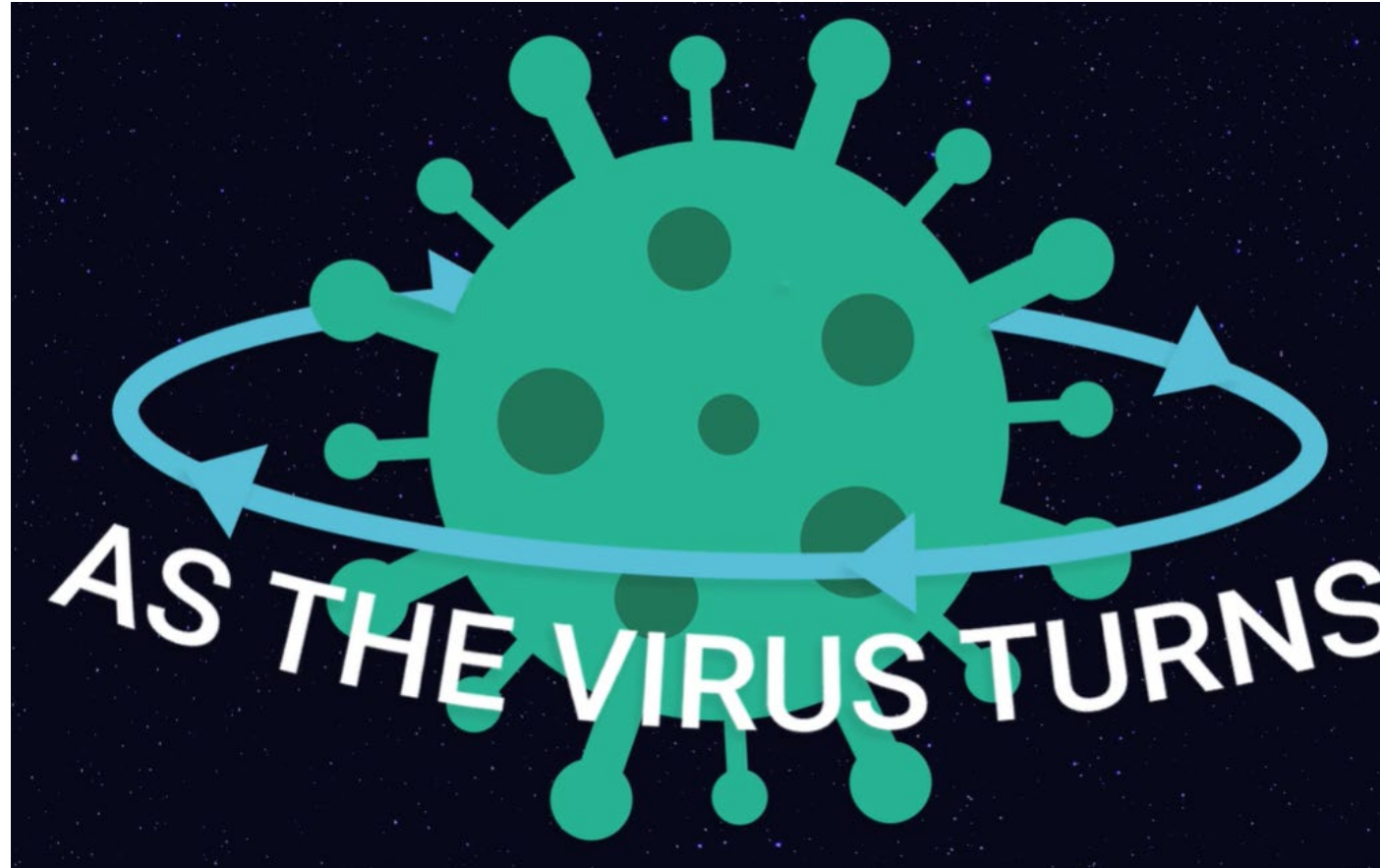
This is the last day to email your nursing home's invoice, certified attendance report, and certificate of completion reports to the ECHO Institute at: acctspay@unm.edu



Respect Private Health Information

- To protect patient privacy, please only display or say information that doesn't identify a patient or that cannot be linked to a patient.
 - Names
 - Locations
 - Dates
 - Employment
 - Other Common Identifiers
-
- For educational and quality improvement purposes, we will be recording this ECHO Session. By participating in this ECHO session you are consenting to be recorded – we appreciate and value your participation.

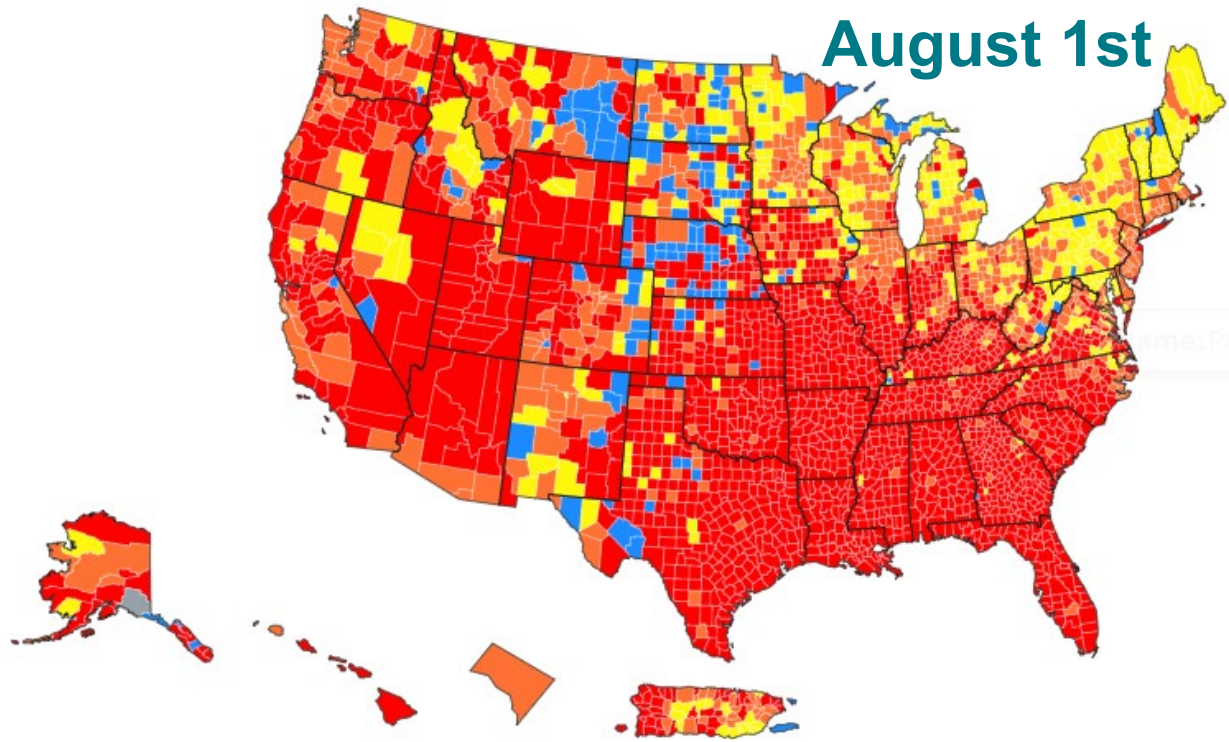
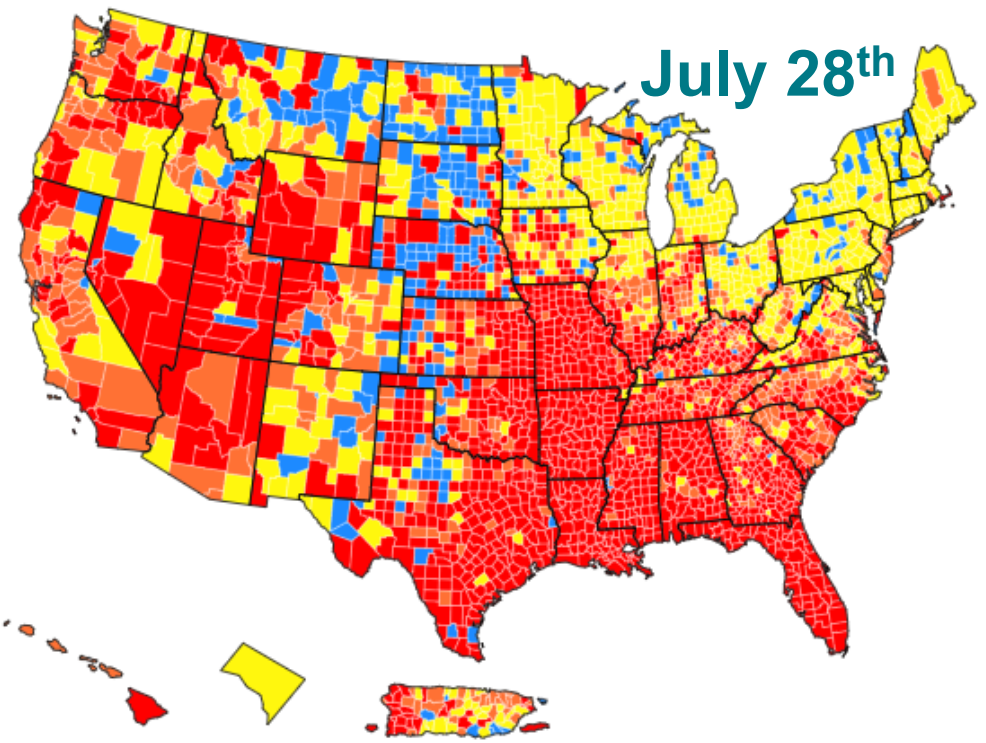
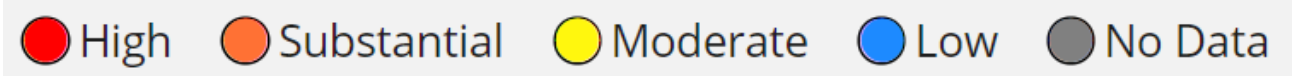
As The Virus Turns: Increasing Vaccine Uptake





US COVID-19 Community Transmission—July 28th vs. August 1st

<https://covid.cdc.gov/covid-data-tracker/#county-view>

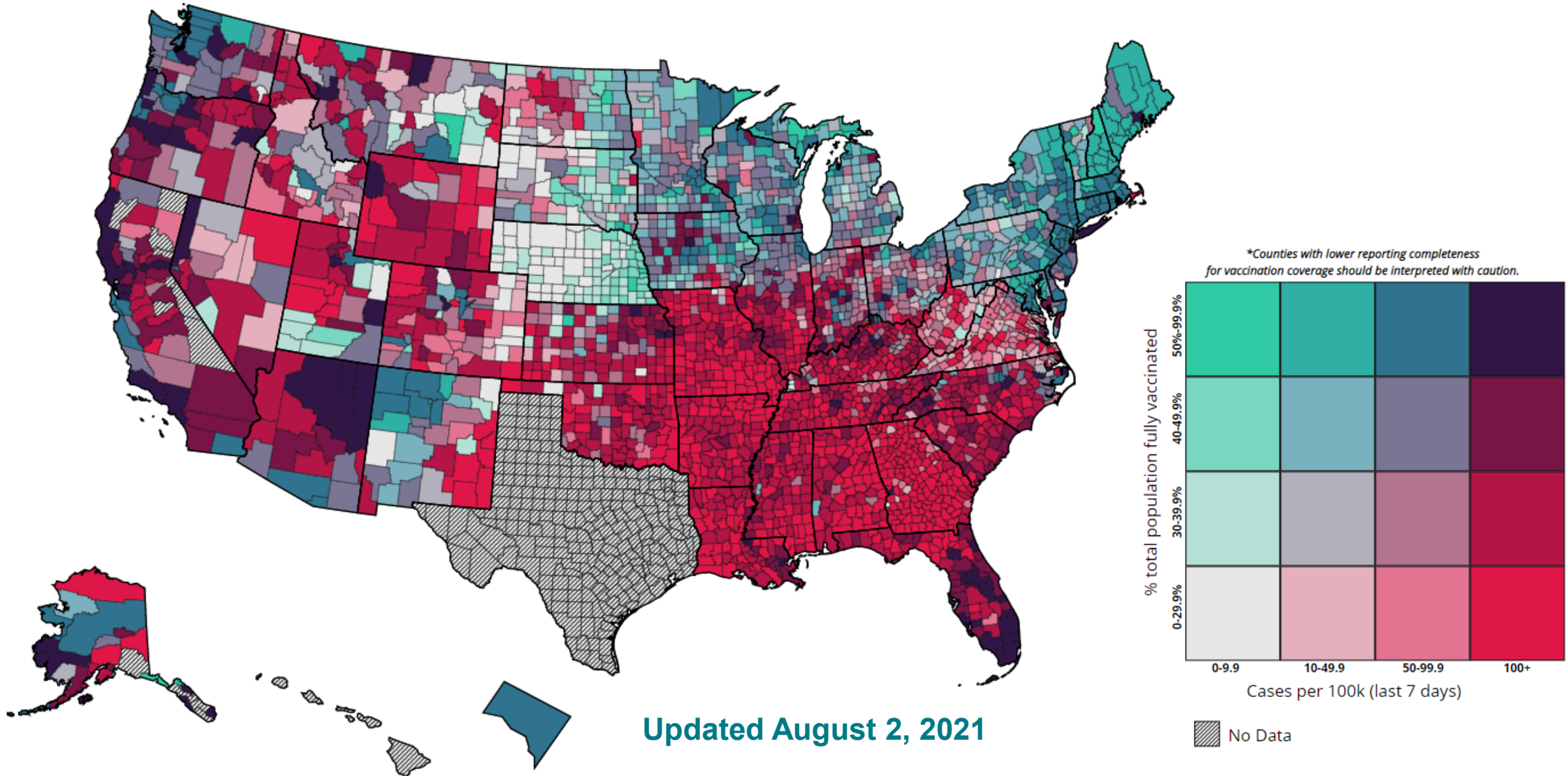


Level of Community Transmission	Number of U.S. Counties at this Level	Percent of U.S. Counties at this Level	Percentage Point Difference Since 7 Days Ago
High	1960	60.87%	14.78%
Substantial	609	18.91%	1.89%
Moderate	479	14.88%	-12.58%
Low	171	5.31%	-4.1%

Transmission data as of 8/1/2021 →

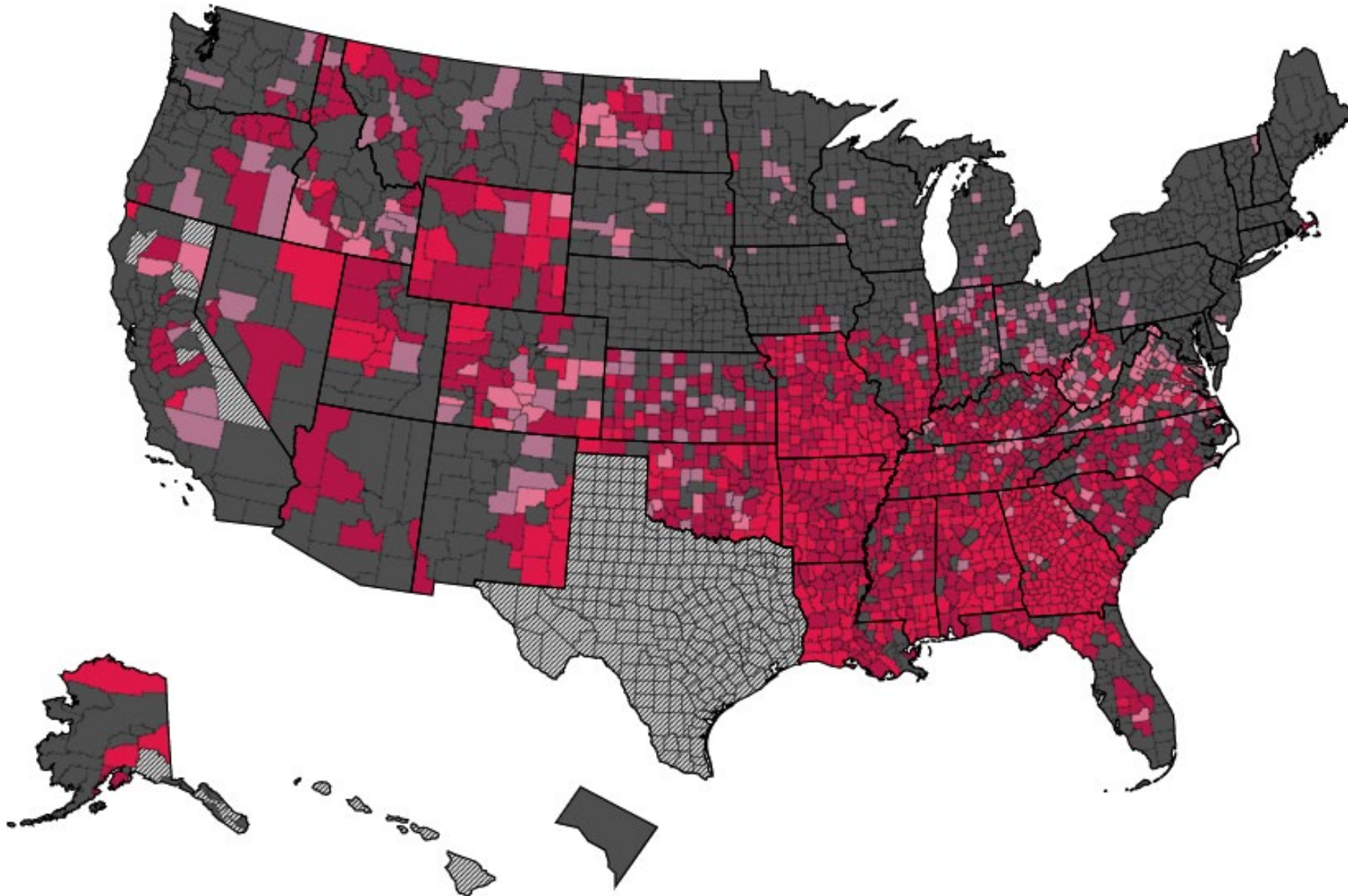
COVID-19 Cases (last 7 days) and % of Population Fully Vaccinated

<https://covid.cdc.gov/covid-data-tracker/#vaccination-case-rate>



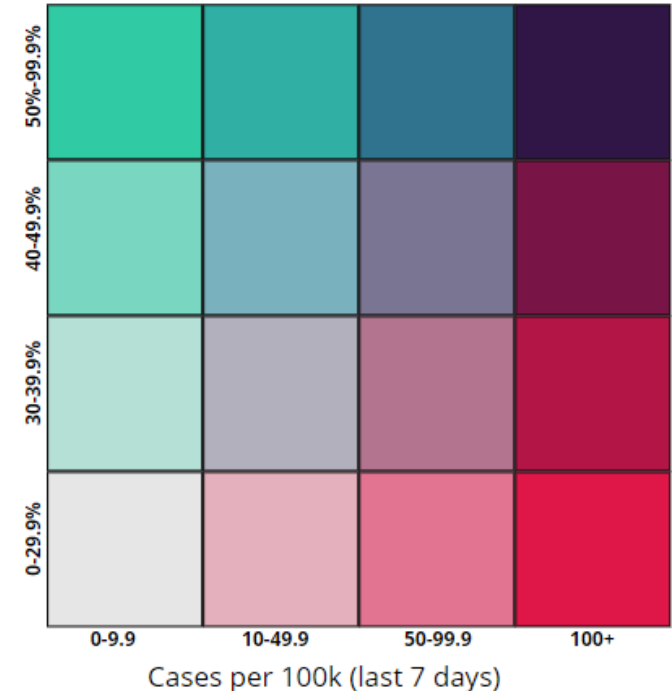
COVID-19 Cases (last 7 days) and % of Population Fully Vaccinated


<https://covid.cdc.gov/covid-data-tracker/#vaccination-case-rate>



Counties in color have the highest COVID-19 cases per 100k and lowest vaccination rates

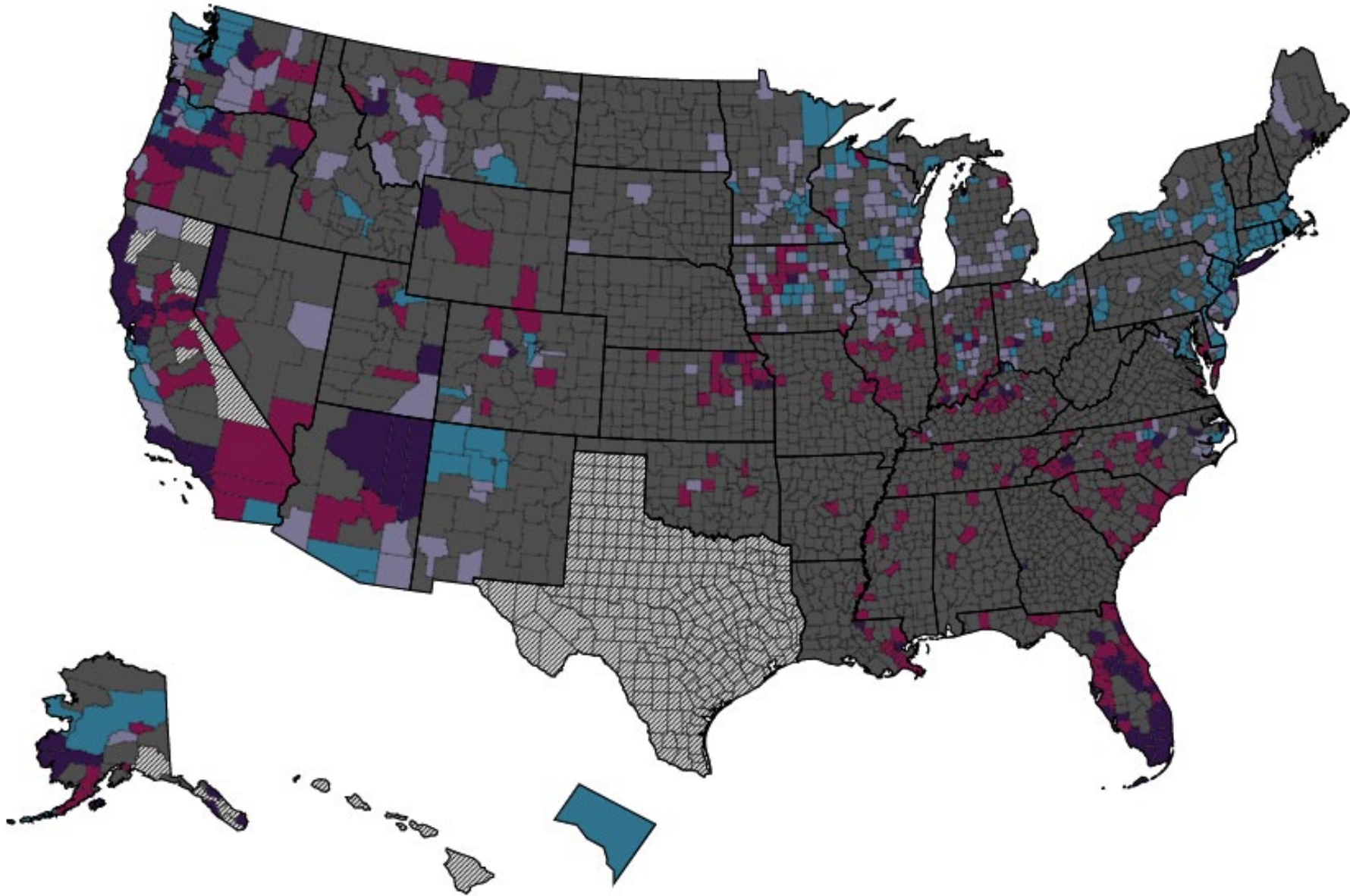
**Counties with lower reporting completeness for vaccination coverage should be interpreted with caution.*



 No Data

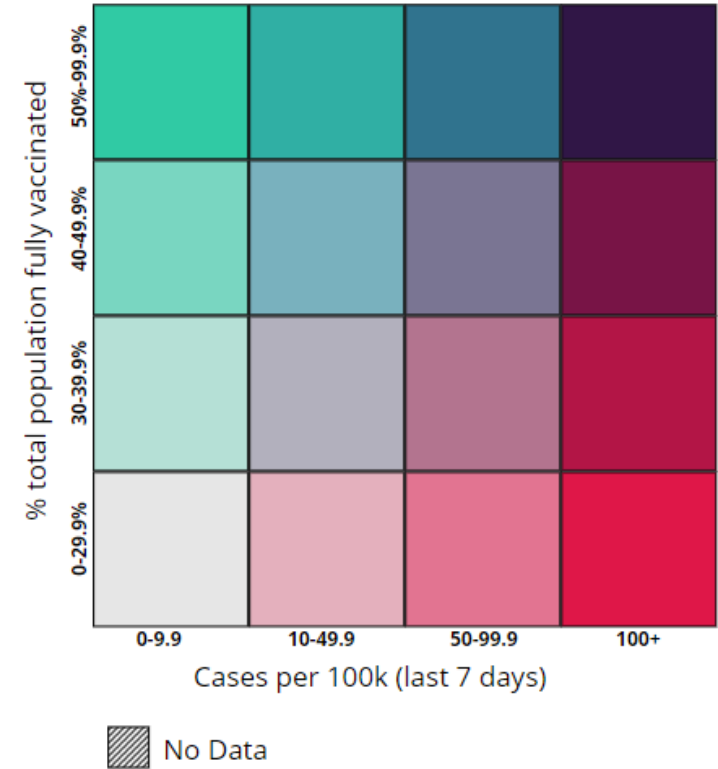
COVID-19 Cases (last 7 days) and % of Population Fully Vaccinated

<https://covid.cdc.gov/covid-data-tracker/#vaccination-case-rate>



Counties in color have the highest COVID-19 cases per 100k and highest vaccination rates

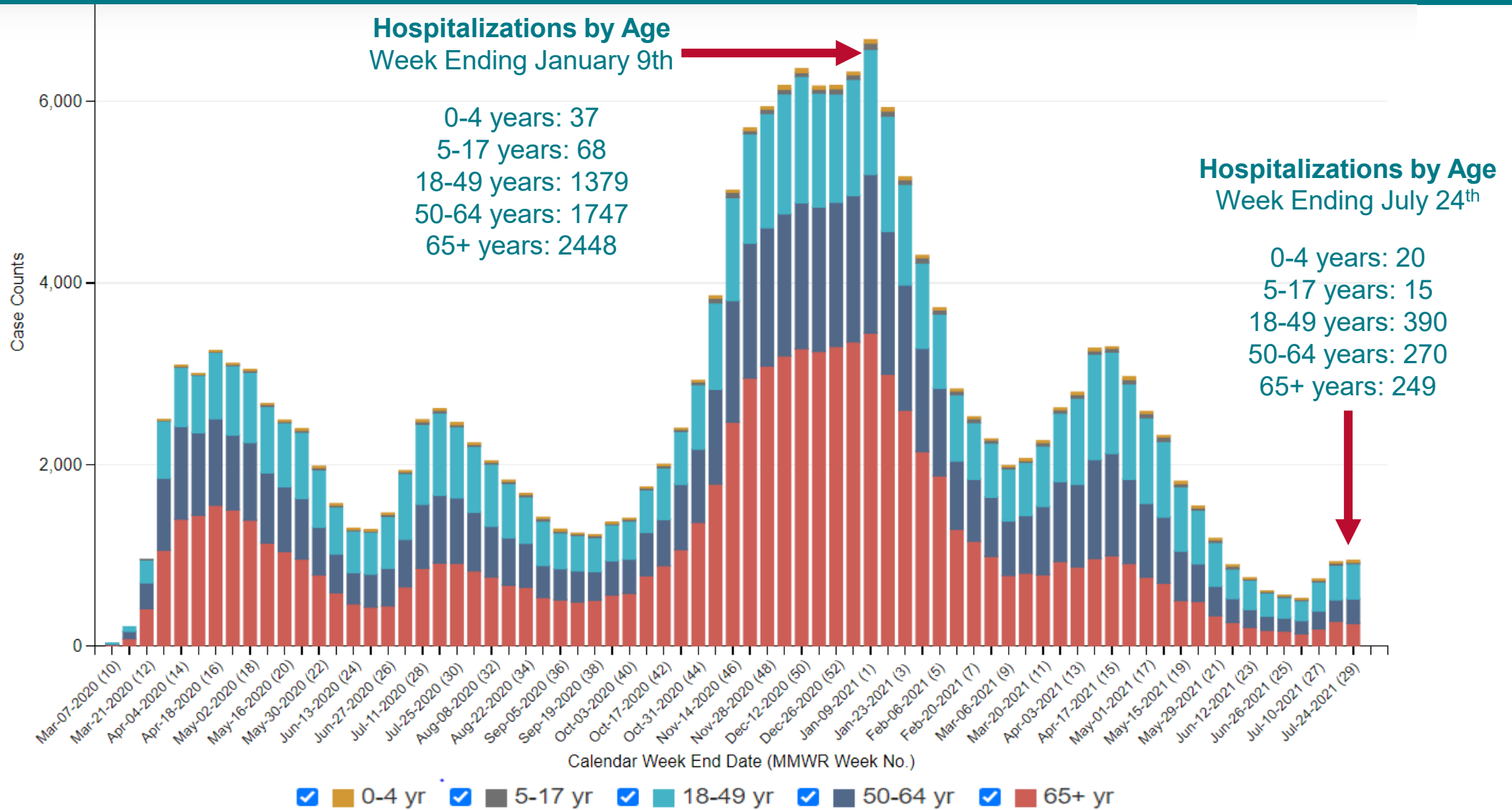
**Counties with lower reporting completeness for vaccination coverage should be interpreted with caution.*



COVID-19 Associated Hospitalizations by Age

Preliminary Data as of July 24, 2021

https://gis.cdc.gov/grasp/covidnet/COVID19_5.html



Tracking COVID-19 in California

<https://covid19.ca.gov/state-dashboard/>

https://public.tableau.com/app/profile/ca.open.data/viz/COVID-19CasesDashboardv2_0/CaseStatistics

Updated Tuesday, August 3, 2021

Cases

7,318 today

17.5 new cases per 100K

Deaths

11 today

0.03 new deaths per 100K

Hospitalizations

348 more COVID-19 hospitalized patients

7.3% increase

Tests

154,929 today

6.7% 7-day test positivity

Vaccines Administered

63% fully vaccinated

9.6% partially vaccinated

ICU Bed Availability

1 fewer ICU beds available

0.05% decrease

Cases per 100k (7-day average) by County

Lake	57
Del Norte	41
Tuolumne	40
Yuba	27
Alpine	26
Solano	25
Nevada	25
Sacramento	24
Contra Costa	23
San Francisco	23
Sutter	23
San Diego	21
Los Angeles	20

Humboldt	19
Amador	19
Kings	19
Sierra	18
Placer	18
Sonoma	18
San Joaquin	18
Alameda	18
Riverside	18
Mendocino	18
Stanislaus	18

Yolo	17
Mariposa	16
San Bernardino	16
Ventura	15
Butte	14
Napa	14
El Dorado	14
Orange	13
Merced	13
Madera	13
San Mateo	13

Fresno	12
Marin	12
San Luis Obispo	12
Santa Barbara	12
Shasta	11
Santa Clara	11
Inyo	11
Mono	10
Kern	10
Imperial	10
Tulare	9
Santa Cruz	9
Tehama	8
Calaveras	8

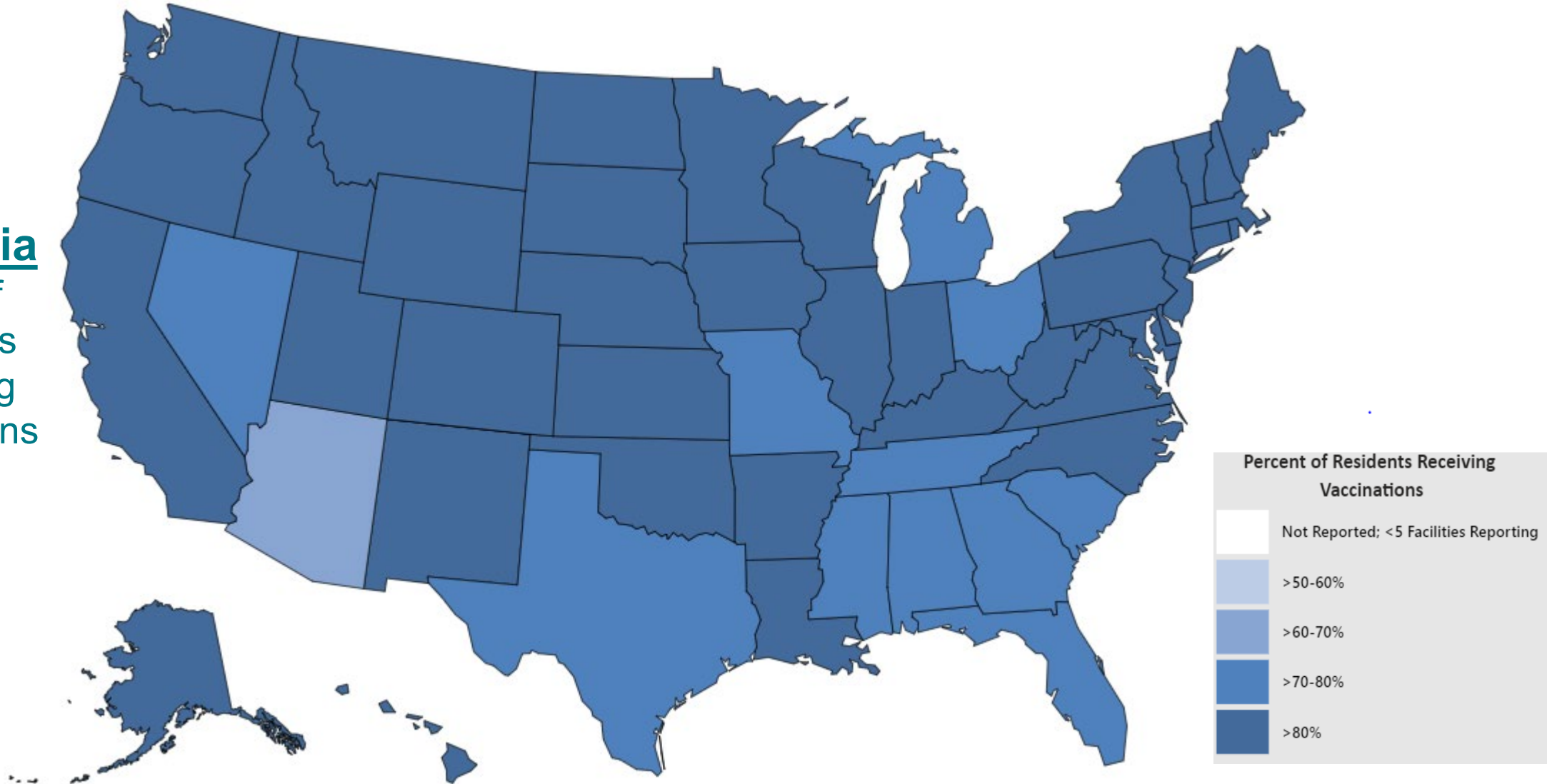
Percent of Residents Receiving Vaccination

July 19-25, 2021

<https://www.cdc.gov/nhsn/covid19/ltc-vaccination-dashboard.html>

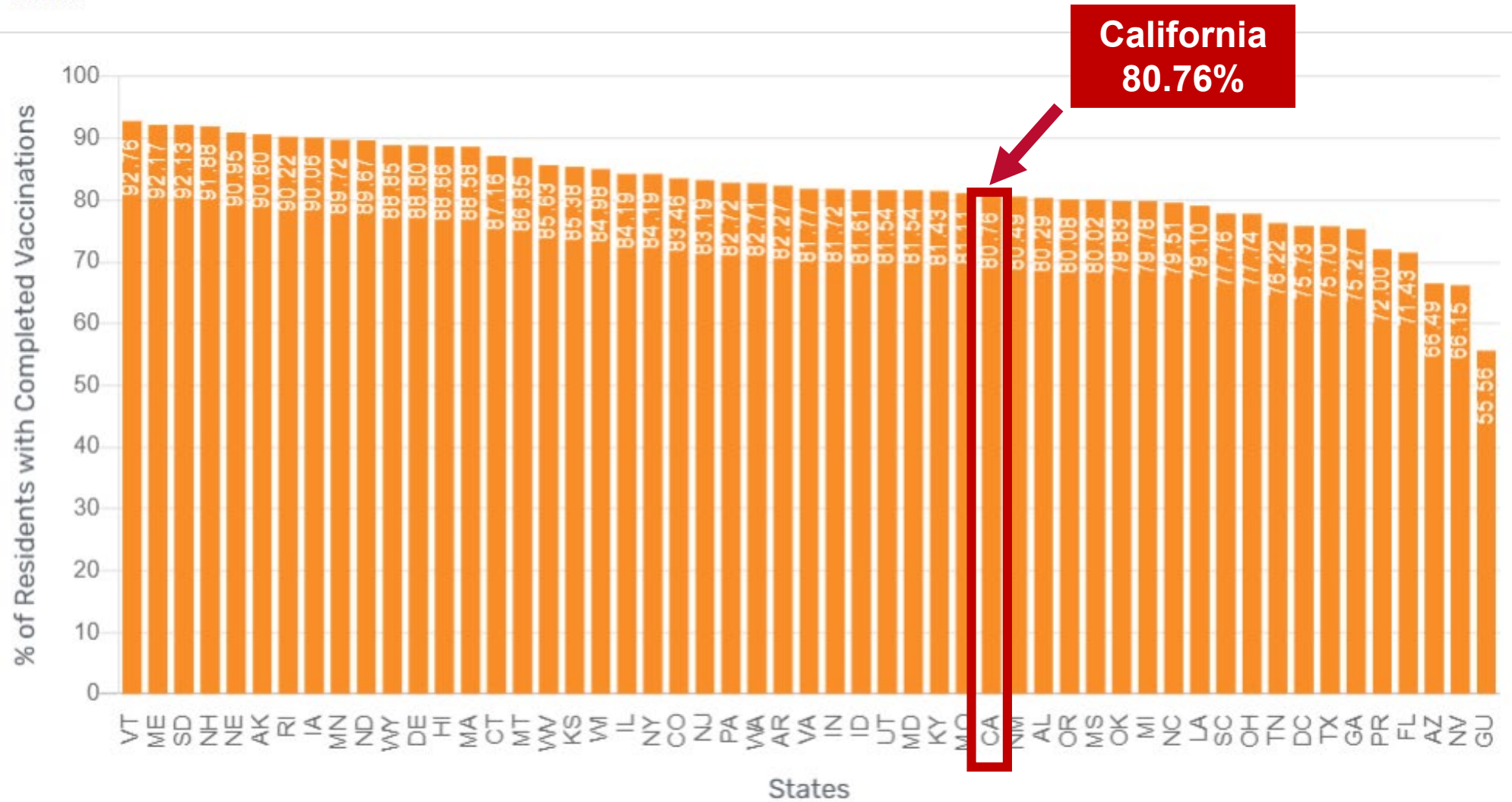
California

>80% of
Residents
Receiving
Vaccinations



Percent of Current Residents with Completed COVID-19 Vaccinations

Note: This shows the average percentage among facilities who have reported vaccination data in the current or prior week.

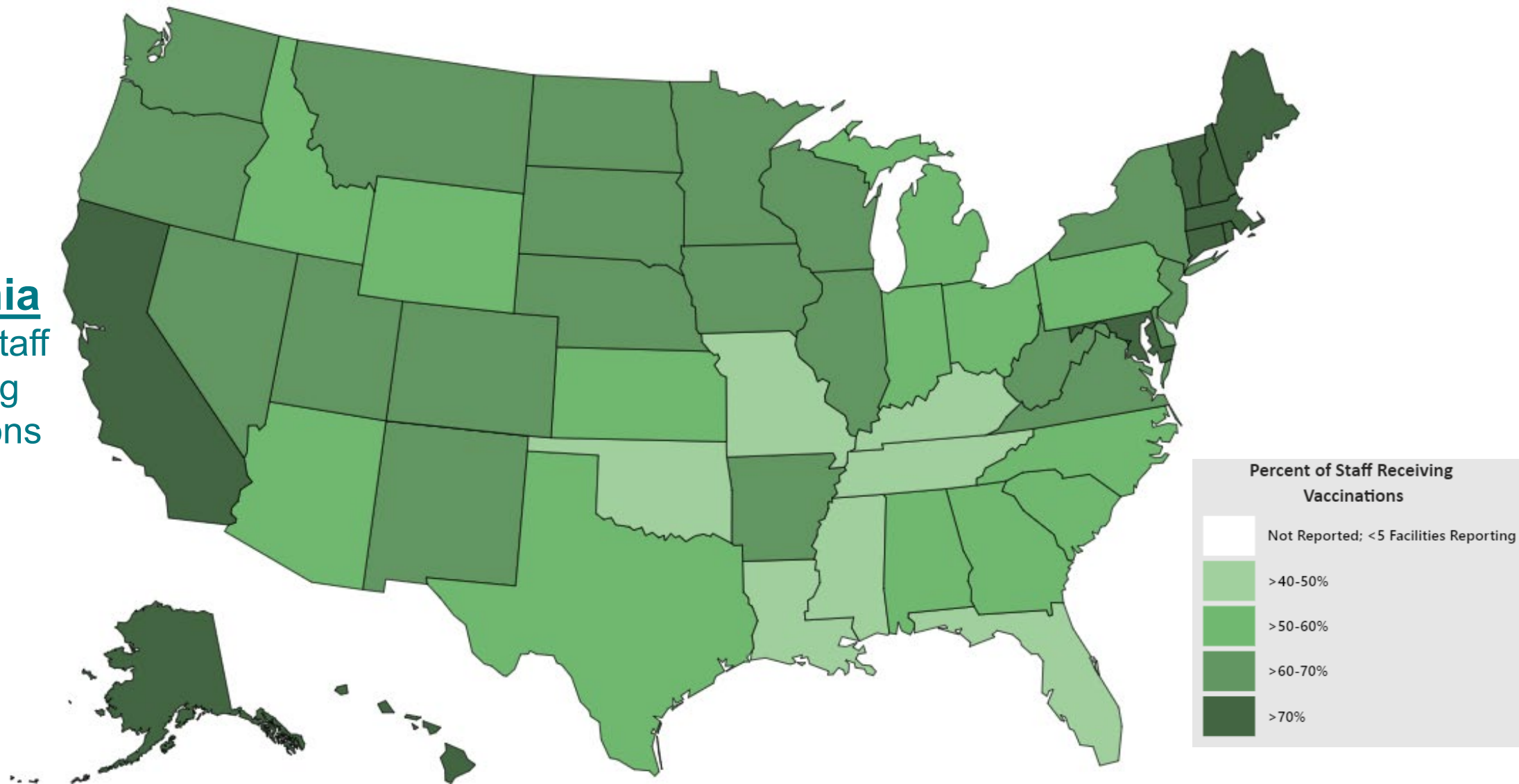


Percent of Staff Receiving Vaccination

July 19-25, 2021

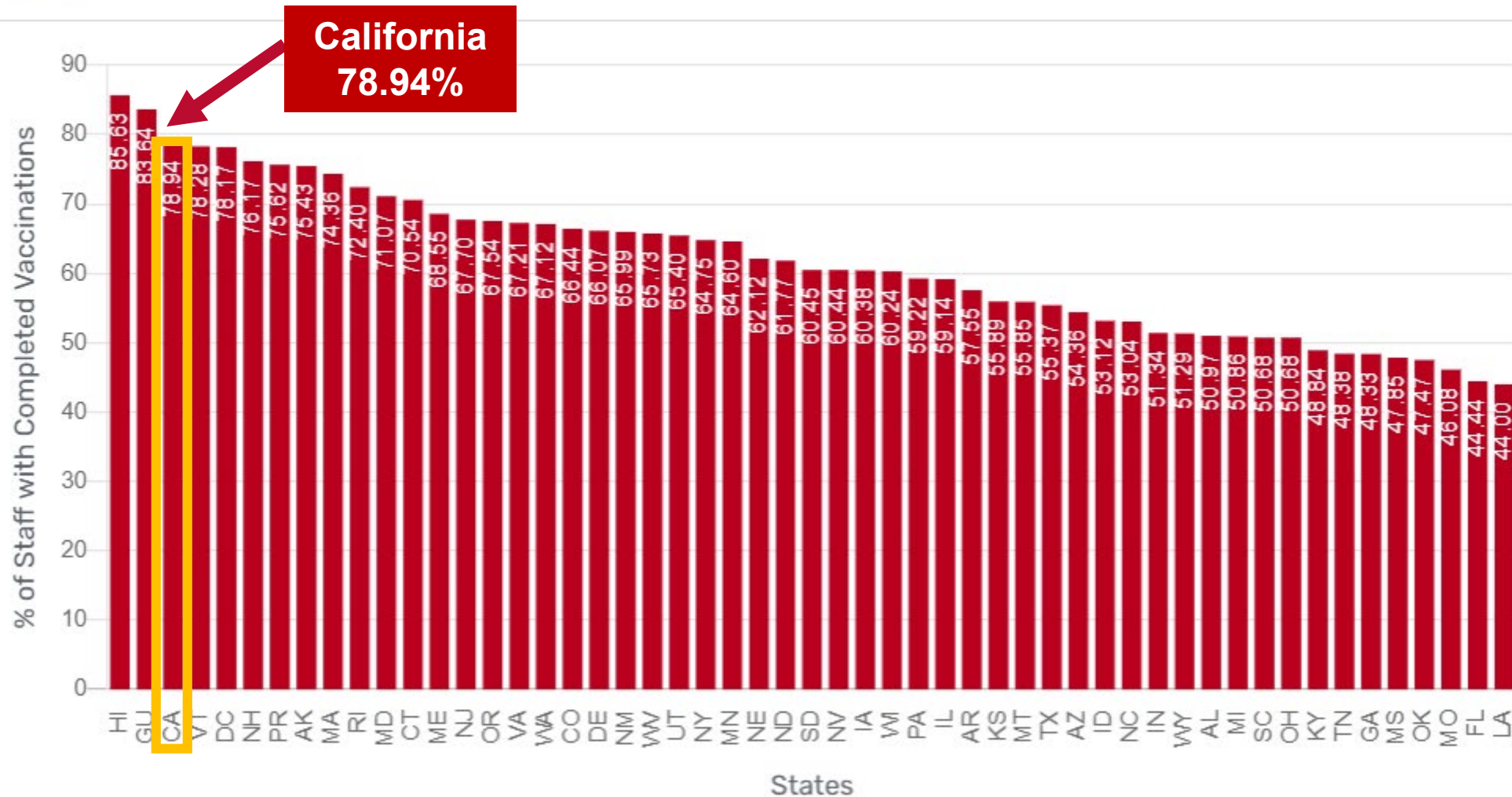
<https://www.cdc.gov/nhsn/covid19/ltc-vaccination-dashboard.html>

California
>70% of Staff
Receiving
Vaccinations



Percent of Current Staff (Healthcare Personnel) with Completed COVID-19 Vaccinations

Note: This shows the average percentage among facilities who have reported vaccination data in the current or prior week.



Continuing COVID-19 Vaccination: How to Thread the Needle

<https://youtu.be/UDpt4h8dC2s>

**AHRQ ECHO National Nursing
Home COVID-19 Action Network**





California State Public Health Officer Order

July 26, 2021

- Order shall take effect on August 9, 2021.
- Facilities must be in full compliance by August 23, 2021.
- Facilities must have a plan in place for tracking vaccination status.
- Workers who are not fully vaccinated, or for whom vaccine status is unknown or documentation is not provided, must be considered unvaccinated.
- Facilities must provide respirators to all unvaccinated workers, and strongly encourage the use of respirators at all times, including the green zone and common areas.
- Unvaccinated workers are required **to undergo** diagnostic screening testing **at least twice weekly** with either PCR testing or antigen testing.

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Unvaccinated-Workers-In-High-Risk-Settings.aspx>

Poll: How do you share COVID-19 vaccine-related updates and new state and federal guidance with your staff? (select all that apply)

- A. Emails
- B. Text messages
- C. Huddles
- D. Communication Board
- E. One-on-one conversations
- F. Newsletters
- G. Town Halls
- H. Other (enter in chat box)



Two Polls: COVID-19 Vaccine Access & Barriers

Poll #1:

What is your current situation in accessing vaccines for your residents and staff?

- A. Our facility can easily access vaccines
- B. Our facility cannot easily access vaccines
- C. Our facility is unable to access vaccines
- D. Unsure
- E. Does not apply

Poll #2:

What is keeping your residents and staff from getting the vaccine? (select all that apply)

- A. Contraindications
- B. COVID-recovered (i.e., feels protected; antibodies)
- C. Fertility/pregnancy concerns
- D. Worried about side effects
- E. Religious & cultural beliefs
- F. Waiting for FDA approval
- G. Misinformation/disinformation & myths
- H. Access to the vaccine
- I. Other (enter in chat box)

Case Study

Our new admission received his first vaccine dose prior to admission, but we are unable to determine when and where it occurred. We are unsure of the type of vaccine that was administered.

The resident's record is not in CAIR2 and the family does not have any evidence of the first dose. How do we proceed with administering the second dose, especially if we don't know if it's Pfizer or Moderna?

CDPH Response:

- Please see CDC's Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States on the section titled "Interchangeability of COVID-19 vaccine products."
www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html
- Every effort should be made to determine which vaccine product was received as the first dose to ensure completion of the series with the same product.
- In exceptional situations in which the mRNA vaccine product given for the first dose cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered to complete the mRNA COVID-19 vaccination series.

Mindfulness Moment:

Headspace | Meditation | The Hole in the Road

**AHRQ ECHO National Nursing
Home COVID-19 Action Network**



QI Corner

Survey Readiness – How Do You Know?

**AHRQ ECHO National Nursing
Home COVID-19 Action Network**



Chat Poll Question: Are You Ready for the Surveyors if They Walk in Today?

- A. Yes
- B. No
- C. Maybe
- D. Not Sure



[This Photo by Unknown Author is licensed under CC BY-NC](#)

Exploring best practices for survey readiness? Let's Use the QI Process.

1. Get curious about the nature of the problem.

- Observe it
- Talk to staff (huddles!)
- Map/diagram/brainstorm
- Measure it

2. Set a goal for what you want to achieve.

3. Decide what you want to try.

4. Test/try it on a small scale...1 day, 1 resident, 1 staff member, 1 new idea.

5. Measure your impact in ways that make sense.

Step 1: Get Curious!

- What are the most pressing challenges/questions?
 - How do I know if we are ready? How confident are the staff when surveyors are in the building? What are the surveyors going to focus on?
- Where is our system the weakest?
 - What are the top ten F tags? Where are we falling out? What were our weaknesses in previous surveys?
- What are we most worried about?
 - How reliable are our critical processes? What should I focus on with staff training?
- What tools can we use to identify weaknesses in our current system?
 - QA data, Root cause analysis, Pareto Charts, QAPI Plan, Team Huddles, Mock survey, Walking Rounds

Poll: What Survey Prep Tools Have Worked Well for You? (multiple choice)

- A. Practice makes perfect – Mock survey
- B. Top ten F tags
- C. Ask your neighbor or sister facilities to share tips
- D. Review last year's findings
- E. What's in your QAPI
- F. Look at your QA data trends
- G. Walking Rounds – Reliable processes ask 5 people
- H. Other

As of March 1, 2021, the following F-Tags made up the top 10 nationally:

1. F0884 Reporting - National Health Safety Network (NHSN)
2. F0880 Infection Prevention & Control
3. F0886 COVID-19 Testing-Residents & Staff
4. F0689 Free of Accident Hazards/Supervision/Devices
5. F0684 Quality of Care
6. F0580 Notify of Changes (Injury/Decline/Room, etc.)
7. F0883 Influenza and Pneumococcal Immunizations
8. F0885 Reporting-Residents, Representatives & Families
9. F0686 Treatment/Services to Prevent/Heal Pressure Ulcers
10. F0609 Reporting of Alleged Violations

Manage the Survey Process



COVID-19 Focused Infection Control (FIC) Survey Entrance Conference Worksheet

INFORMATION NEEDED FROM THE FACILITY IMMEDIATELY UPON ENTRANCE*	
<input type="checkbox"/>	1. Census number
<input type="checkbox"/>	2. An alphabetical list of all residents and room numbers (note any resident out of the facility).
<input type="checkbox"/>	3. A list of residents who are confirmed or suspected cases of COVID-19.
<input type="checkbox"/>	4. Name of facility staff responsible for Infection Prevention and Control Program.
ENTRANCE CONFERENCE	
<input type="checkbox"/>	5. Conduct a brief Entrance Conference with the Administrator.
<input type="checkbox"/>	6. Signs announcing the survey that are posted in high-visibility areas.
<input type="checkbox"/>	7. A copy of an updated facility floor plan, if changes have been made, including observation and COVID-19 units.
INFORMATION NEEDED FROM FACILITY WITHIN ONE HOUR OF ENTRANCE*	
<input type="checkbox"/>	8. The actual working schedules for all staff, separated by departments, for the survey time period.
<input type="checkbox"/>	9. List of key personnel location, and phone numbers. Note contract staff (e.g., rehab services). Also include the staff responsible for notifying all residents, representatives, and families of confirmed or suspected COVID-19 cases in the facility.
<input type="checkbox"/>	10. Provide each surveyor with access to all resident electronic health records – do not exclude any

Other Resources

- IHI Reliable Design Process- <http://www.ihl.org/Topics/Reliability/Pages/default.aspx>
- Top Ten F-Tags and Tips - <https://leadingage.org/regulation/top-10-survey-citations-march-2021>
- CMS Revised Survey Pathways - <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes>
- NHSN Pro Tips – <https://www.cdc.gov/nhsn/ltc/covid19/index.html>
- CAHF - <https://www.cahf.org/Education-Events/QCHF-Education-Foundation/Survey-Success-Resources-and-Materials-Page>

General Q&A

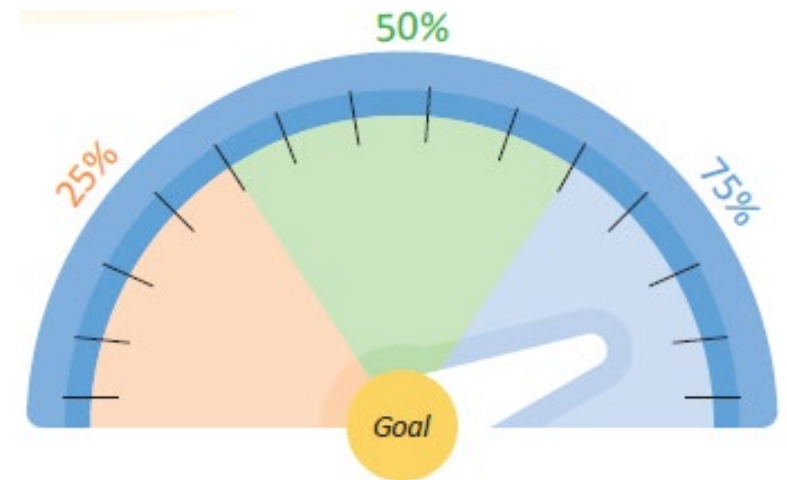
**AHRQ ECHO National Nursing
Home COVID-19 Action Network**



Full Speed Ahead! COVID-19 Vaccination Recognition Program

Nursing homes will receive a certificate of achievement for meeting either of the following criteria in July, August, and September:

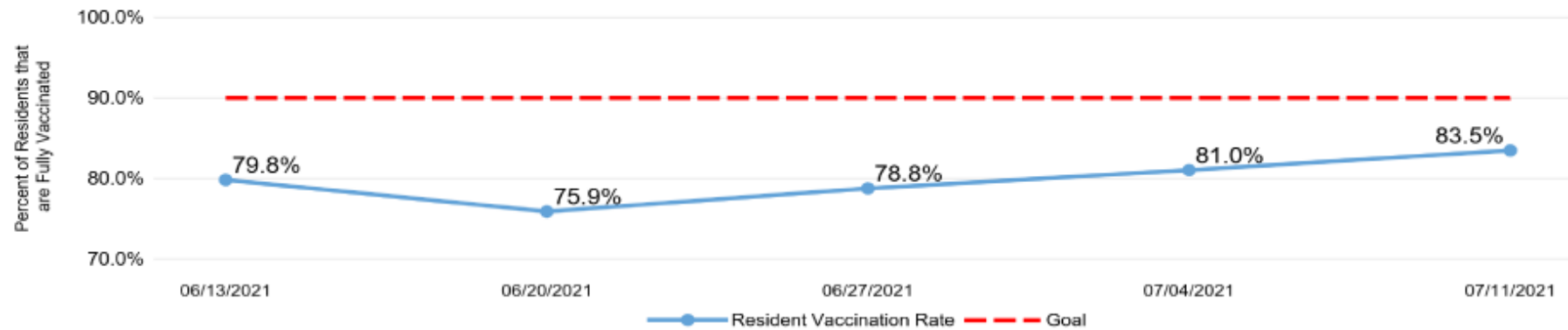
- ✓ Exceeding a 75% staff vaccination rate for 4 consecutive weeks.
- ✓ Exceeding a 90% resident vaccination rate for 4 consecutive weeks.



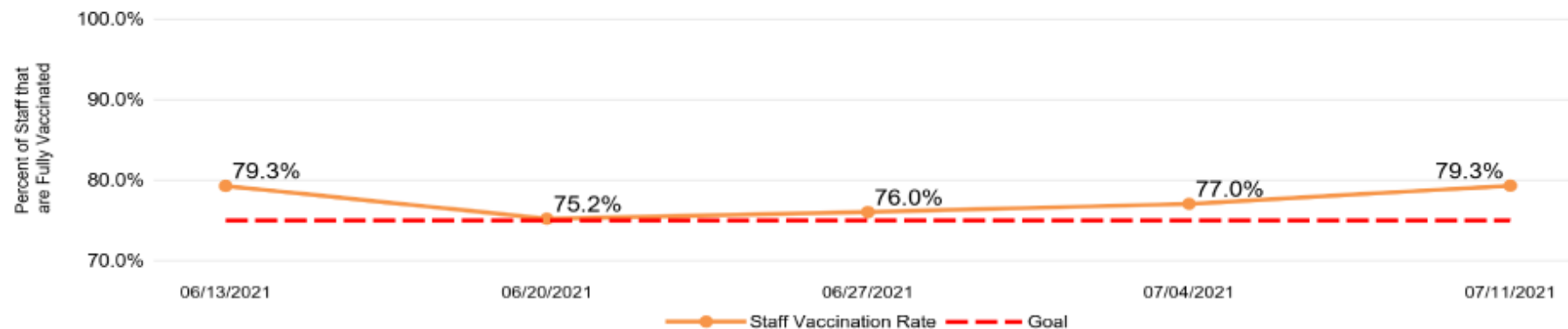
Facility-Specific COVID-19 Vaccine Data Report

Available at—<https://qiip.hsag.com>

Resident: Vaccination Rate



Staff: Vaccination Rate



To Access the Quality Improvement Innovation Portal (QIIP) for Facility Report

Quality Improvement Organizations
Sharing Knowledge. Inspiring Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

HSAG HEALTH SERVICES ADVISORY GROUP

HSAG Quality Improvement and Innovation Portal (QIIP) Administrator Form

The HSAG QIIP is your centralized place for information in support of the quality initiatives and activities which you are working on with HSAG to achieve the Centers for Medicare & Medicaid Services' (CMS') national goals. CMS' goals include increasing quality scores, improving infection prevention, decreasing opioid misuse, preventing adverse drug events, improving quality of care transitions, and preventing avoidable readmissions. The HSAG QIIP will allow you to view your weekly COVID-19 Trend Report. Future enhancements include the ability to complete assessments, track interventions, and view your performance dashboards.

To get access to your weekly COVID-19 Trend Report please fill out the short form below to designate your QIIP Administrator(s) and return the completed form via email to canursinghomes@hsag.com.

The QIIP Administrator(s) will have the following rights:

- Access performance reports and dashboards.
- Attest to the completion of activities.
- Complete assessment forms.

Facility Information
Please provide the CMS Certification Number (CCN) and facility name for your facilities. **Please add additional rows to the table as needed if your organization has more than one facility.**

CCN	Facility Name	Telephone Number

the table below. HSAG recommends having at least two staff members assigned to each facility.

www.hsag.com/covid-19/long-term-care-facilities/

Under California Resources, click on
"California HSAG Quality Improvement and Innovation Portal (QIIP) Administrator Form"

5-Part “Quickinar” Vaccine Series

- **Launch Full Speed Ahead! Program**
August 5, 2021 | 10:30–11:00 a.m.
- **The Moveable Middle**
August 19, 2021 | 10:30–11:00 a.m.
- **The Moved Middle**
September 2, 2021 | 10:30–11:00 a.m.
- **Invest in Trust Strategies, Part 2**
September 16, 2021 | 10:30–11:00 a.m.
- **Celebrate Success**
September 30, 2021 | 10:30–11:00 a.m.

Register for the entire “quickinar” series at:

https://www.hsag.com/en/covid-19/vaccine-resources/#Full_Speed_Ahead_COVID_19_Vaccination_Recognition_Program

Thank You!

**AHRQ ECHO National Nursing
Home COVID-19 Action Network**

