

Guidance and responses were provided based on information known on 5/13/2021 and may become out of date. Guidance is being updated rapidly, so users should look to CDC and NE DHHS guidance for updates.

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DEPT. OF HEALTH AND HUMAN SERVICES

COVID-19 and LTC

May 13, 2021



**Infection Control Assessment
and Promotion Program**

Presentation Information:

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Slides and a recording of this presentation will be available on the ICAP website:

<https://icap.nebraskamed.com/covid-19-webinars/>

Use the Q&A box in the webinar platform to type a question. Questions will be read aloud by the moderator.

If your question is not answered during the webinar, please either e-mail it to NE ICAP or call during our office hours to speak with one of our IPs.

Continuing Education Disclosures

- 1.0 Nursing Contact Hour and 1 NAB Contact Hour is awarded for the LIVE viewing of this webinar
- In order to obtain nursing contact hours, you must be present for the entire live webinar and complete the post webinar survey
- No conflicts of interest were identified for any member of the planning committee, presenters or panelists of the program content
- This CE is hosted Nebraska Medicine along with Nebraska ICAP and Nebraska DHHS
- Nebraska Medicine is approved as a provider of nursing continuing professional development by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation

**Interim Final Rule -
COVID-19 Vaccine
Immunization
Requirements for
Residents and Staff**

CMS QSO-21-19-NH
Released 5/11/2021



**Infection Control Assessment
and Promotion Program**

CMS Memo QSO-21-19-NH

- On May 11, 2021, CMS published an interim final rule with comment period (IFC).
 - This rule establishes Long-Term Care (LTC) Facility Vaccine Immunization Requirements for Residents and Staff.
- This includes new requirements for educating residents or resident representatives and staff regarding the benefits and potential side effects associated with the COVID-19 vaccine, and offering the vaccine.
- Furthermore, LTC facilities must report COVID-19 vaccine and therapeutics treatment information to the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN).
 - **Transparency:** CMS will post the new information reported to the NHSN for viewing by facilities, stakeholders, or the general public on [CMS's COVID-19 Nursing Home Data](#) website.

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Ref: QSO-21-19-NH

DATE: May 11, 2021

TO: State Survey Agency Directors

FROM: Director
Quality, Safety & Oversight Group

SUBJECT: Interim Final Rule - COVID-19 Vaccine Immunization Requirements for Residents and Staff

Memorandum Summary

- CMS is committed to continually taking critical steps to ensure America's healthcare facilities continue to respond effectively to the Coronavirus Disease 2019 (COVID-19) Public Health Emergency (PHE).
- On May 11, 2021, CMS published an interim final rule with comment period (IFC). This rule establishes **Long-Term Care (LTC) Facility Vaccine Immunization Requirements for Residents and Staff**. This includes new requirements for educating residents or resident representatives and staff regarding the benefits and potential side effects associated with the COVID-19 vaccine, and offering the vaccine. Furthermore, LTC facilities must report COVID-19 vaccine and therapeutics treatment information to the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN).
- **Transparency:** CMS will post the new information reported to the NHSN for viewing by facilities, stakeholders, or the general public on CMS's [COVID-19 Nursing Home Data](#) website.
- **Updated Survey Tools:** CMS has updated tools used by surveyors to assess compliance with these new requirements.

Background

On December 1, 2020, the Advisory Committee in Immunization Practices (ACIP) recommended that health care personnel (HCP) and long-term care (LTC) facility residents be offered COVID-19 vaccination first (Phase 1a).¹ Ensuring LTC residents receive COVID-19 vaccinations will help protect those who are most at risk of severe infection or death from COVID-19.

[QSO-21-19-NH \(cms.gov\)](#)



New Tags and Noncompliance

- Noncompliance related to the new requirements for educating and offering COVID-19 vaccination to residents and staff will be cited at F-tag 887
 - **F887: COVID-19 Immunization**
- Noncompliance related to COVID-19 vaccination reporting will be cited at F-tag 884.
 - **F884: Reporting – National Healthcare Safety Network (NHSN)**
 - 42 CFR 483.80(g)(1)(viii)-(ix) requires LTC facilities report, on a weekly basis, the COVID-19 vaccination status of residents and staff, total numbers of residents and staff vaccinated, each dose of vaccine received, COVID-19 vaccination adverse events, and therapeutics administered to residents for treatment of COVID-19 through NHSN's LTCF COVID-19 Module.

F887: COVID-19 Immunization

[QSO-21-19-NH \(cms.gov\)](https://www.cms.gov)



**Infection Control Assessment
and Promotion Program**

Definitions

“Staff” means those individuals who work in the facility on a regular (that is, at least once a week) basis, including individuals who may not be physically in the LTC facility for a period of time due to illness, disability, or scheduled time off, but who are expected to return to work.

- This also includes individuals under contract or arrangement, including hospice and dialysis staff, physical therapists, occupational therapists, mental health professionals, or volunteers, who are in the facility on a regular basis, as the vaccine is available.

“Emergency Use Authorization (EUA)” is a mechanism to facilitate the availability and use of medical countermeasures, including vaccines, during public health emergencies, such as the current COVID-19 pandemic. The EUA process is a way to ensure safety while still expediting approval in emergent situations

Education

- All residents and/or resident representatives and staff must be educated on the COVID-19 vaccine they are offered, in a manner they can understand, and receive the [FDA COVID-19 EUA Fact Sheet](#) before being offered the vaccine.
- The FDA requires that vaccine recipients (or their representative) are provided with certain vaccine-specific EUA information to help make an informed decision about vaccination
- Education must cover the benefits and potential side effects of the vaccine.
 - This should include common reactions, such as aches or fever, and rare reactions such as anaphylaxis.

FACT SHEET FOR RECIPIENTS AND CAREGIVERS

EMERGENCY USE AUTHORIZATION (EUA) OF THE PFIZER-BIONTECH COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) IN INDIVIDUALS 12 YEARS OF AGE AND OLDER

You are being offered the Pfizer-BioNTech COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Pfizer-BioNTech COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19.

The Pfizer-BioNTech COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Pfizer-BioNTech COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Pfizer-BioNTech COVID-19 Vaccine.

The Pfizer-BioNTech COVID-19 Vaccine is administered as a 2-dose series, 3 weeks apart, into the muscle.

The Pfizer-BioNTech COVID-19 Vaccine may not protect everyone.

This Fact Sheet may have been updated. For the most recent Fact Sheet, please see www.cvdvaccine.com.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE

WHAT IS COVID-19?

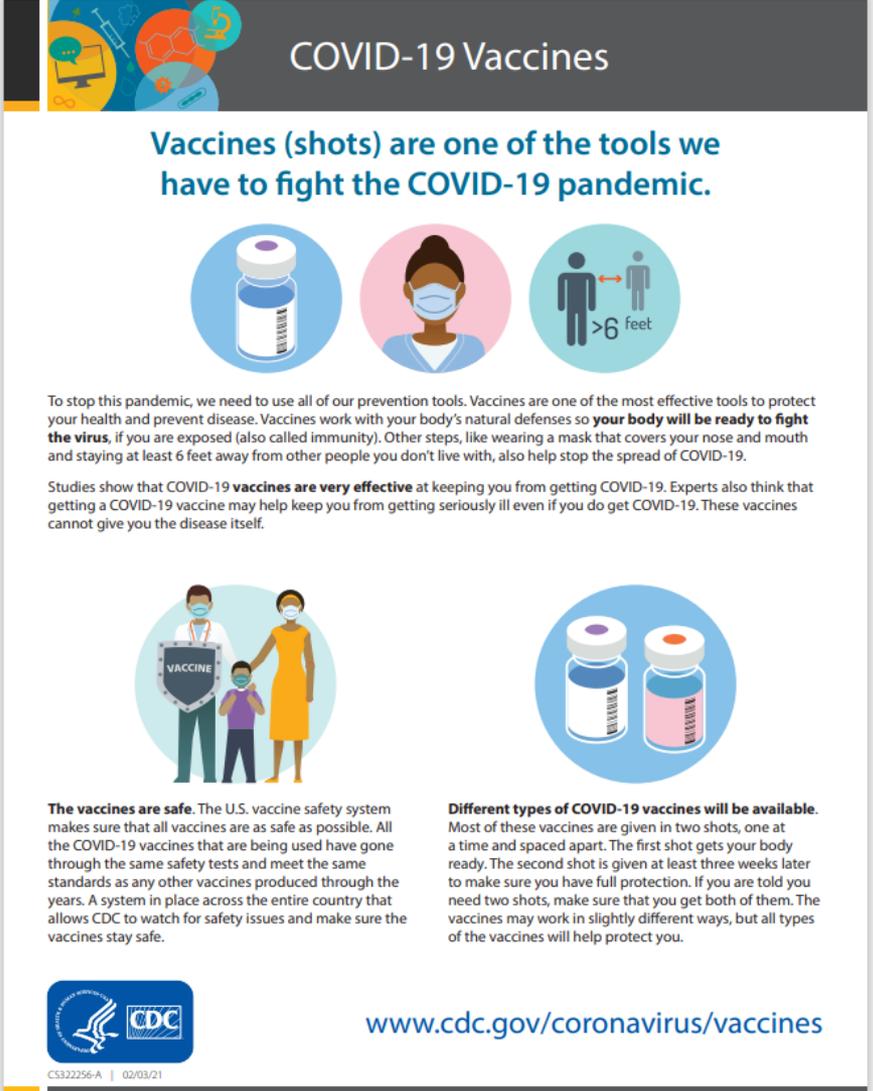
COVID-19 disease is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.

WHAT IS THE PFIZER-BIONTECH COVID-19 VACCINE?

The Pfizer-BioNTech COVID-19 Vaccine is an unapproved vaccine that may prevent COVID-19. There is no FDA-approved vaccine to prevent COVID-19.

Education

- If the vaccination requires multiple doses of vaccine, the resident or resident representative and staff are again provided with education regarding the benefits and potential side effects of the vaccine and current information regarding those additional doses, including any changes in the benefits or potential side effects, before requesting consent for administration of any additional doses.
- The resident, resident representative, or staff member must be provided the opportunity to refuse the vaccine and to change their decision about vaccination at any time.



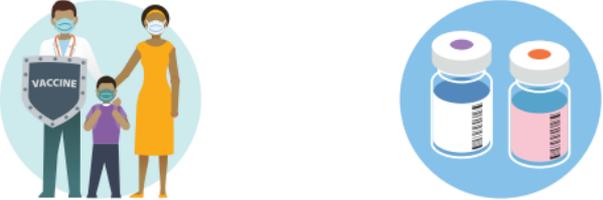
COVID-19 Vaccines

Vaccines (shots) are one of the tools we have to fight the COVID-19 pandemic.



To stop this pandemic, we need to use all of our prevention tools. Vaccines are one of the most effective tools to protect your health and prevent disease. Vaccines work with your body's natural defenses so **your body will be ready to fight the virus**, if you are exposed (also called immunity). Other steps, like wearing a mask that covers your nose and mouth and staying at least 6 feet away from other people you don't live with, also help stop the spread of COVID-19.

Studies show that COVID-19 **vaccines are very effective** at keeping you from getting COVID-19. Experts also think that getting a COVID-19 vaccine may help keep you from getting seriously ill even if you do get COVID-19. These vaccines cannot give you the disease itself.



The vaccines are safe. The U.S. vaccine safety system makes sure that all vaccines are as safe as possible. All the COVID-19 vaccines that are being used have gone through the same safety tests and meet the same standards as any other vaccines produced through the years. A system in place across the entire country that allows CDC to watch for safety issues and make sure the vaccines stay safe.

Different types of COVID-19 vaccines will be available. Most of these vaccines are given in two shots, one at a time and spaced apart. The first shot gets your body ready. The second shot is given at least three weeks later to make sure you have full protection. If you are told you need two shots, make sure that you get both of them. The vaccines may work in slightly different ways, but all types of the vaccines will help protect you.



www.cdc.gov/coronavirus/vaccines

CS322256-A | 02/03/21

[COVID-19 Vaccines are one of the tools we have to fight the COVID-19 Pandemic \(cdc.gov\)](https://www.cdc.gov/coronavirus/vaccines)

<https://www.cms.gov/files/document/qso-21-19-nh.pdf>

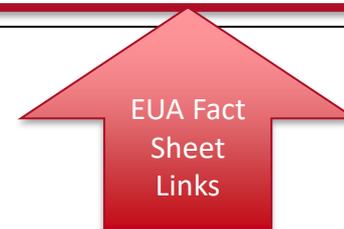


Helpful Tools for Education

- The CDC, FDA, Immunization Action Coalition (IAC), and vaccine manufacturers have developed a variety of educational and training resources for healthcare professionals related to COVID-19 vaccines.
- The CDC's LTC Facility Toolkit: [Preparing for COVID-19 Vaccination at Your Facility](#) has information and resources to build confidence among staff and residents.
- Fact Sheets can be found at the Center for Disease Control and Prevention's (CDC) [COVID-19 Vaccine Emergency Use Authorization \(EUA\) Fact Sheets for Recipients and Caregivers](#) website

[QSO-21-19-NH \(cms.gov\)](#)

The screenshot shows the CDC website page for COVID-19 Vaccine Emergency Use Authorization (EUA) Fact Sheets. The page title is "COVID-19 Vaccine Emergency Use Authorization (EUA) Fact Sheets for Recipients and Caregivers". The page content includes an introduction stating that the FDA requires vaccine recipients or their caregivers to be provided with certain vaccine-specific EUA information to help make an informed decision about vaccination. It also mentions that the Fact Sheet is similar in purpose and content to vaccine information statements (VIS) for licensed vaccines but differs in that the EUA Fact Sheet is specific to each authorized COVID-19 vaccine, is developed by the manufacturer of the vaccine, and is authorized by the FDA. A note states that there is no VIS for COVID-19 vaccines authorized under an EUA, and that the FDA-issued EUA Fact Sheet for Recipients and Caregivers must be used. A section titled "To help facilitate documentation of having provided the EUA Fact Sheet in electronic medical records/immunization information systems, CDC is leveraging the existing VIS Code Set infrastructure, barcoding, and URLs to provide the information needed for various systems, analogous to electronic system and workflow documentation of VISs." contains a red-bordered box with the following text: "Thus far, the codes and URL links to access the EUA Fact Sheet documents have been developed for the following current and potential COVID-19 EUA vaccines:" followed by a list of links: "COVID-19 Pfizer BioNTech Vaccine EUA Fact Sheet for Recipients", "COVID-19 Moderna Vaccine EUA Fact Sheet for Recipients", "COVID-19 AstraZeneca Vaccine EUA Fact Sheet for Recipients", and "COVID-19 Janssen Vaccine EUA Fact Sheet for Recipients". A note below the links states: "Note: URL links cited in the codes for the EUA Fact Sheets are not active until after the FDA provides Emergency Use Authorization for the vaccine." The page also features a sidebar with navigation options such as "COVID-19 Vaccination", "Product Info by US Vaccine", "Clinical Care", "Provider Requirements and Support", "Training and Education", "Vaccine Recipient Education", "Health Departments", "Planning & Partnerships", "Vaccine Effectiveness Research", "Vaccination Toolkits", "COVID-19 Vaccine Data Systems", "Content Syndication", and "Vaccinate with Confidence".



Offering Vaccinations

- LTC facilities must offer residents and staff vaccination against COVID-19 when vaccine supplies are available to the facility.
 - Screening individuals prior to offering the vaccination for prior immunization, medical precautions and contraindications is necessary for determining whether they are appropriate candidates for vaccination at any given time.
- The vaccine may be offered and provided directly by the LTC facility or indirectly, such as through an arrangement with a pharmacy partner, local health department, or other appropriate health entity.
- The facility **is not required** to educate and offer COVID-19 vaccinations to individuals who enter the facility for specific purposes and for a limited amount of time, such as delivery and repair personnel or volunteers who may enter the LTC facility infrequently (**meaning less than once weekly**).
 - However, if the facility has the availability, they may offer education and vaccination to these individuals.

https://nesiis-dhhs-prod.ne.gov/prd_ir/public/clientSearch.do?language=en

Nebraska State Immunization Information System

Immunization Record Search

Families and individuals can use this screen to view and print their immunizations. First Name, Last Name and Birth Date are required.

* First Name * Last Name

* Birth Date MM/DD/YYYY

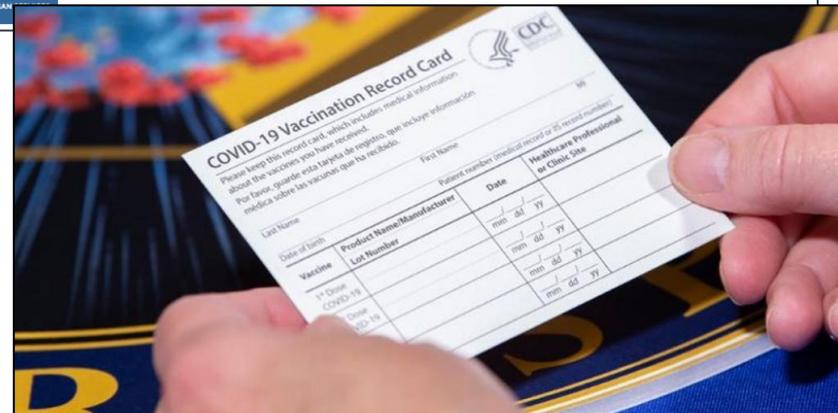
Please supply the Social Security Number:

* SSN - -

Click one of the links below to see the Nebraska State Immunization Information System Parent Brochure:

- [NESIIS Parent Brochure](#)
- [Folleto de NESIIS para Padres de Familia](#)

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Offering Vaccinations

- If a resident or staff member requests vaccination against COVID-19 but missed earlier opportunities for any reason (including recent residency or employment, changing health status, overcoming vaccine hesitancy, or any other reason), CMS expects the facility to offer the vaccine to that individual as soon as possible.
 - If the vaccine is unavailable in the facility, the facility should provide information on obtaining vaccination opportunities (e.g., health department or local pharmacy) to the individual, however it is expected that the facility will provide evidence, upon request, of efforts made to make the vaccine available to its staff and residents.



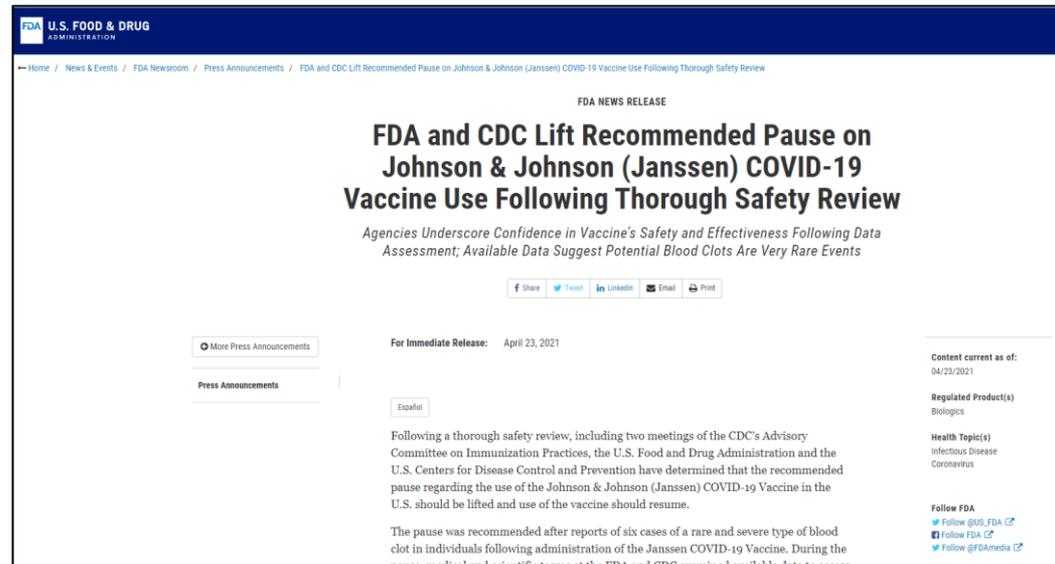
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Offering Vaccinations

- Like influenza vaccines, if there is a manufacturing delay, the facility should provide evidence of the delay, including efforts to acquire subsequent doses as necessary.
- Indications and contraindications for COVID-19 vaccination are evolving and facilities should be alert to any new or revised guidelines issued by the CDC, FDA, vaccine manufacturers, or other expert stakeholders.

Example: FDA and CDC Lift Recommended Pause on Johnson & Johnson (Janssen) COVID-19 Vaccine Use Following Thorough Safety Review



The screenshot shows the FDA website's news release page. The header includes the FDA logo and navigation links. The main heading is "FDA and CDC Lift Recommended Pause on Johnson & Johnson (Janssen) COVID-19 Vaccine Use Following Thorough Safety Review". Below the heading is a sub-headline: "Agencies Underscore Confidence in Vaccine's Safety and Effectiveness Following Data Assessment; Available Data Suggest Potential Blood Clots Are Very Rare Events". There are social media sharing buttons for Facebook, Twitter, LinkedIn, Email, and Print. A "More Press Announcements" button is also visible. The text of the release begins with "Following a thorough safety review, including two meetings of the CDC's Advisory Committee on Immunization Practices, the U.S. Food and Drug Administration and the U.S. Centers for Disease Control and Prevention have determined that the recommended pause regarding the use of the Johnson & Johnson (Janssen) COVID-19 Vaccine in the U.S. should be lifted and use of the vaccine should resume." The release date is April 23, 2021. On the right side, there are sections for "Content current as of: 04/23/2021", "Regulated Product(s): Biologics", "Health Topic(s): Infectious Disease, Coronavirus", and social media follow links for FDA, @US_FDA, and @FDAmedia.

<https://www.fda.gov/news-events/press-announcements/fda-and-cdc-lift-recommended-pause-johnson-johnson-janssen-covid-19-vaccine-use-following-thorough>

Vaccination Administration

For residents and staff who opt to receive the vaccine, vaccination must be conducted in accordance with CDC, ACIP, FDA, and manufacturer guidelines.

- All facilities must adhere to current infection prevention and control recommendations when preparing and administering vaccines.

Administration of any vaccine includes appropriate monitoring of recipients for adverse reactions, and long-term care facilities must have strategies in place to appropriately evaluate and manage post-vaccination adverse reactions among their residents and staff, per 483.45(d), F757.

- Particularly for COVID-19 vaccines, safety monitoring is required under the associated EUAs.

Pfizer-BioNTech COVID-19 Vaccine
Vaccine Preparation



Prepare the injection with the correct needle length based on the recipient's age. Gender and weight should be considered for adults 19 years of age and older.

- Use aseptic technique to mix the vaccine and prepare the injection.
- Prepare the vaccine using a **NEW** vial of diluent and a **NEW** vial of vaccine **EVERY TIME**.
- Prepare the injection using a new, sterile needle and syringe **EVERY TIME**.



» **Mixing Vaccine**

Do	Don't
 Use the needles and syringes labeled for mixing vaccine and diluent in the ancillary supply kit.	 Do NOT use needles and syringes designated for administration to mix vaccine and diluent.
 Use 0.9% sodium chloride (normal saline, preservative-free) ONLY .	 Do NOT use bacteriostatic normal saline or other diluents.
 Mix 1.8 mL of the diluent with the thawed vaccine.* Slowly inject diluent to prevent excess foaming or bubbling.	 Do NOT use all the diluent in the vial.
 Gently invert the vial 10 times before and after adding the diluent.	 Do NOT shake the vial.
 Discard the diluent vial after mixing the vaccine.	 Do NOT use or save any remaining diluent to mix with additional vials of vaccine or for other uses.

*Using a 21-gauge or narrower needle

<https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/downloads/diluent-poster.pdf>

Vaccination Adverse Event Reporting

- In accordance with FDA requirements, select adverse events for COVID-19 vaccines must be reported to the [Vaccine Adverse Event Reporting System \(VAERS\)](https://vaers.hhs.gov)
 - vaccine administration errors
 - serious adverse events
 - multisystem inflammatory syndrome (MIS) in children or adults
 - cases of COVID-19 that result in hospitalization or death
- Any revised safety reporting requirements must also be followed.
- For additional information see VAERS – Vaccine Adverse Event Reporting System at <https://vaers.hhs.gov>

The screenshot displays the VAERS (Vaccine Adverse Event Reporting System) website. At the top, the VAERS logo and the text "Vaccine Adverse Event Reporting System" and "www.vaers.hhs.gov" are visible. Below this is a navigation bar with links for "About VAERS", "Report an Adverse Event", "VAERS Data", "Resources", and "Submit Follow-Up Information". The main content area features a large heading "Have you had a reaction following a vaccination?" with two numbered steps: "1. Contact your healthcare provider." and "2. Report an Adverse Event using the VAERS online form or the downloadable PDF. *New!*". A blue-bordered box contains an "Important" notice: "If you are experiencing a medical emergency, seek immediate assistance from a healthcare provider or call 9-1-1. CDC and FDA do not provide individual medical treatment, advice, or diagnosis. If you need individual medical or health care advice, consult a qualified healthcare provider." Below this is a Spanish version of the heading: "¿Ha tenido una reacción después de recibir una vacuna?" with similar numbered steps. To the right of the text is a photograph of a female doctor in a white lab coat talking to a female patient. Below the photo is a blue banner with the text "COVID-19 vaccine EUA reporting requirements for Providers". At the bottom of the page, there are four small thumbnail images with corresponding text boxes: "REPORT AN ADVERSE EVENT" (Review reporting requirements and submit reports), "SEARCH VAERS DATA" (Download VAERS Data and search the CDC WONDER database), "REVIEW RESOURCES" (Find materials, publications, learning tools, and other resources), and "SUBMIT FOLLOW-UP INFORMATION" (Upload additional information related to VAERS reports).

Vaccination Refusal

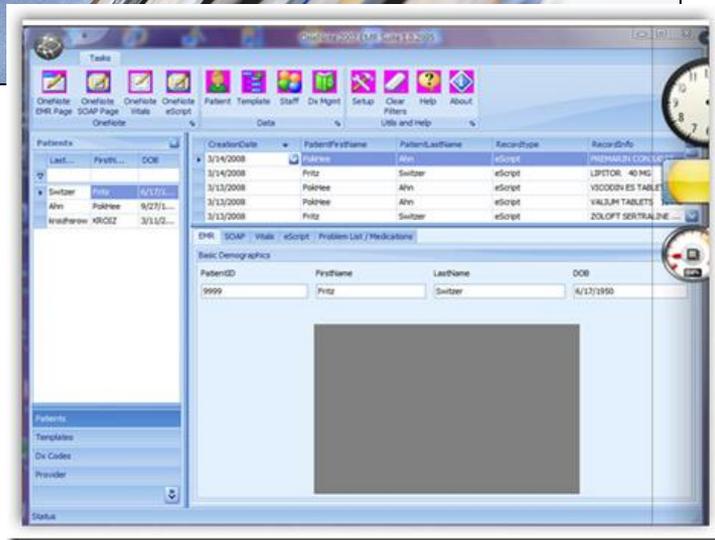
- Residents and their representatives have the right to refuse the COVID-19 vaccine in accordance with Resident Rights requirements at 42 CFR 483.10(c)(6) and tag F578.
- Additionally, the regulation at §483.10(b)(2) states “The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart.”
 - **Therefore, facilities cannot take any adverse action against a resident or representative who refuses the vaccine, including social isolation, denied visitation and involuntary discharge.**
- Facilities should follow state law and facility policies with respect to staff refusal of vaccination.



Documentation- Residents



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The resident's medical record must include documentation that indicates, at a minimum:

- That the resident or resident representative was provided education regarding the benefits and potential side effects of the COVID-19 vaccine
- That the resident (or representative) either accepted and received the COVID-19 vaccine or did not receive the vaccine due to medical contraindications, prior vaccination, or refusal.

*If there is a *contraindication* to the resident having the vaccination, the appropriate documentation must be made in the resident's medical record.

Documentation should include the date the education and offering took place, and the name of the representative that received the education and accepted or refused the vaccine, if the resident has a representative that makes decisions for them.

Facilities should also provide samples of the educational materials that were used to educate residents.



Documentation- Staff

- The facility must maintain documentation that each staff member was educated on the benefits and potential side effects of the COVID-19 vaccine and offered vaccination unless medically contraindicated or the staff member has already been immunized.
 - Compliance can be demonstrated by:
 - providing a roster of staff that received education (e.g., a sign-in sheet)
 - the date of the education
 - samples of the educational materials that were used to educate staff
- The facility must document the vaccination status of each staff member (i.e., immunized or not), including whether fully immunized (i.e., completed the series of multi-dose vaccines).
 - If a staff member is not eligible for COVID-19 vaccination because of previous immunization at another location or outside of the facility, the facility should request vaccination documentation from the staff member to confirm vaccination status.

[Answering Your Questions About the New COVID-19 Vaccines \(cdc.gov\)](https://www.cdc.gov)

[QSO-21-19-NH \(cms.gov\)](https://www.cms.gov)

Answering Your Questions About the New COVID-19 Vaccines

Do clinical trial results show whether vaccines are effective?
Yes. Clinical trials provide data and information about how well a vaccine prevents an infectious disease and about how safe it is. The Food and Drug Administration (FDA) evaluates these data, along with information from the manufacturer, to assess the safety and effectiveness of a vaccine. FDA then decides whether to approve a vaccine or authorize it for emergency use in the United States.

After a vaccine is either approved or authorized for emergency use by FDA, more assessments are done before a vaccine is recommended for public use. The goal of these assessments is to understand more about the protection a vaccine provides under real-world conditions, outside of clinical trials.

After COVID-19 vaccines are approved or authorized for emergency use by FDA and recommended for public use, CDC will further assess their effectiveness. These real-world assessments will compare groups of people who do and don't get vaccinated and people who do and don't get COVID-19 to find out how well COVID-19 vaccines are working to protect people.

Why would the effectiveness of vaccines be different after the clinical trials?
Many factors can affect a vaccine's effectiveness in real-world situations. These factors can include things such as how a vaccine is transported and stored or even how patients are vaccinated. Vaccine effectiveness can also be affected by differences in the underlying medical conditions of people vaccinated as compared to those vaccinated in the clinical trials.

Assessments of vaccine effectiveness can also provide important information about how well a vaccine is working in groups of people who were not included or were not well represented in clinical trials.

How will experts evaluate the COVID-19 vaccines in real-world conditions?
Experts are working on many types of real-world studies to determine vaccine effectiveness, and each uses a different method:

- **Case-control studies** will include cases (people who have the virus that causes COVID-19) and controls (people who do not have the virus that causes COVID-19). People who agree to participate in a case-control study will provide information on whether they received a COVID-19 vaccine or not. Experts will look to see if the cases were less likely to have received the vaccine than controls, which would show that the vaccine is working.
- **A test-negative design study** will enroll people who are seeking medical care for symptoms that could be due to COVID-19. In this special type of case-control study, experts will compare the COVID-19 vaccination status of those who test positive (meaning they have COVID-19) to those who test negative (meaning they do not have COVID-19).

www.cdc.gov/coronavirus/vaccines



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F884: Reporting – National Healthcare Safety Network (NHSN)

[QSO-21-19-NH \(cms.gov\)](https://www.cms.gov)



**Infection Control Assessment
and Promotion Program**

NHSN Reporting Requirements

- Facilities must continue to report COVID-19 data through NHSN's LTCF COVID-19 Module
 - LTCF COVID19 Module webpage (<https://www.cdc.gov/nhsn/ltc/covid19/index.html>):
 - Visit this website before submitting questions to the NHSN help desk.
- In addition to previous reporting requirements, they must begin reporting vaccination data for residents and staff and the use of therapeutics for residents.
- CMS will begin reviewing for compliance with the new vaccination reporting requirements **Monday, June 14, 2021**.
 - As has been done since June 2020, CMS will continue to receive the CDC NHSN reported data and review for timely and complete reporting of all data elements.

TMF Health Quality Institute CMS Quality Improvement Organization

Melody Malone, PT, CPHQ, MHA
Quality Improvement Specialist
TMF Quality Innovation Network

NHSN Vaccine Reporting Modules

Weekly COVID-19 Vaccination Reporting

- Master website link for this module:
<https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>
- Link to training slides: [LTC Weekly COVID-19 Vaccination Reporting \(cdc.gov\)](#)
- *Please send any questions via e-mail to: nhsn@cdc.gov with 'Weekly COVID-19 Vaccination' in the subject line.*

Weekly reporting is Mandatory COVID-19 vaccination modules.

Key Points:

- Weeks begin on a Monday and end on a Sunday.
- Data can be edited, but report before 11:59 p.m. on Sundays.
- Resident: occupying a bed at this facility for at least 1 day (at least 24 hours)
- Healthcare personnel (HCP): eligible to have worked at this healthcare facility for at least 1 day during the week of data collection, regardless of clinical responsibility or patient contact.

Key Points:

- Medical contraindication or exclusions to COVID-19 vaccine – review the instructions
- There are *Optional questions*.
- *Be sure to complete ALL Required Questions.*
- Adverse Event Reporting:
<https://vaers.hhs.gov/reportevent.html>
- **Read the Instructions!**

NHSN Vaccine Reporting Tools

- [Data Tracking Worksheet for COVID-19 Vaccination among Residents – December 2020 \[XLS – 600 KB\]](#)
- [Data Tracking Worksheet for COVID-19 Vaccination among Healthcare Personnel – December 2020 \[XLS – 600 KB\]](#)

NHSN Vaccine Module Training

Replay Sessions:

Time: 3:30 p.m. Eastern Time/2 p.m. Central Time

- Tuesday, May 18, 2021
- Thursday, May 20, 2021
- Tuesday, May 25, 2021
- Thursday, May 27, 2021
- Register in advance for **one** of the webinar dates:
- [NHSN Vaccine Module Training Registration](#)

Live Demonstration

CMS Targeted COVID-19 Training for Frontline Nursing Home Staff & Management Learning

- Available through the [CMS Quality, Safety & Education Portal \(QSEP\)](#).
- *Can be completed on a cell phone*
- **Frontline nursing home staff modules:**

Module 1: Hand Hygiene and PPE

Module 2: Screening and Surveillance

Module 3: Cleaning the Nursing Home

Module 4: Cohorting

Module 5: Caring for Residents with Dementia in a Pandemic

- **3 hours total training time**

- **Management staff modules:**

Module 1: Hand Hygiene and PPE

Module 2: Screening and Surveillance

Module 3: Cleaning the Nursing Home

Module 4: Cohorting

Module 5: Caring for Residents with Dementia in a Pandemic

Module 6: Basic Infection Control

Module 7: Emergency Preparedness and Surge Capacity

Module 8: Addressing Emotional Health of Residents and Staff

Module 9: Telehealth for Nursing Homes

Module 10: Getting Your Vaccine Delivery System Ready

- **4 hours total training time**

TMF LTC Connect – 30 minute sessions

- **May 20 – Hit the Easy Button on NHSN COVID Data**
- Register: [May 20 - NHSN COVID Data Webinar](#)

- **June 10 – Hit the Easy Button on NHSN COVID Data *Part 2***
- Register: [NHSN COVID Data Part 2](#)

- Sessions start at 1:30 pm

NHSN RESOURCES

- **TMF NHSN resources:** [NHSN Resources](#)
- **CDC NHSN COVID19 Module:**
<https://www.cdc.gov/nhsn/ltc/covid19/index.html>
- **Details on SAMS Level 3:** [SAMS Level Three Access](#)
 - › *Having backup Users is crucial to staying in compliance with reporting!*
 - › **This process can take up to four weeks to be completed, but you will not lose access to NHSN at any time during the process.**

Reach out to us at:
nhnetwork@tmf.org
to submit requests for
assistance with
**NHSN reporting problems
or quality improvement
assistance.**

Respiratory Protection Taskforce

NEBRASKA RESPIRATORY PROTECTION TASK FORCE

Home / Nebraska Respiratory Protection Task Force

Nebraska ICAP has partnered with stakeholders around the state of Nebraska to form the Respiratory Protection Task Force.

The Nebraska Respiratory Protection Taskforce includes members from:

- Nebraska ICAP
- Leading Age Nebraska
- Nebraska Healthcare Association
- Nebraska Department of Health and Human Services
- University of Nebraska Medical Center HEROES and Fit Testing Specialists
- Omaha Metro Healthcare Coalition: Non-Hospital Workgroup
- Nursing Home Medical Director Representatives

PROJECT FIRSTLINE

MENTORSHIP

CLOSTRIDIoidES DIFFICILE

CLOSTRIDIoidES DIFFICILE
COLLABORATIVE STAFF
CONTACTS

CLOSTRIDIoidES DIFFICILE

<https://icap.nebraskamed.com/nebraska-respiratory-protection-task-force/>



Respiratory Protection Taskforce

LINKS TO RESOURCES

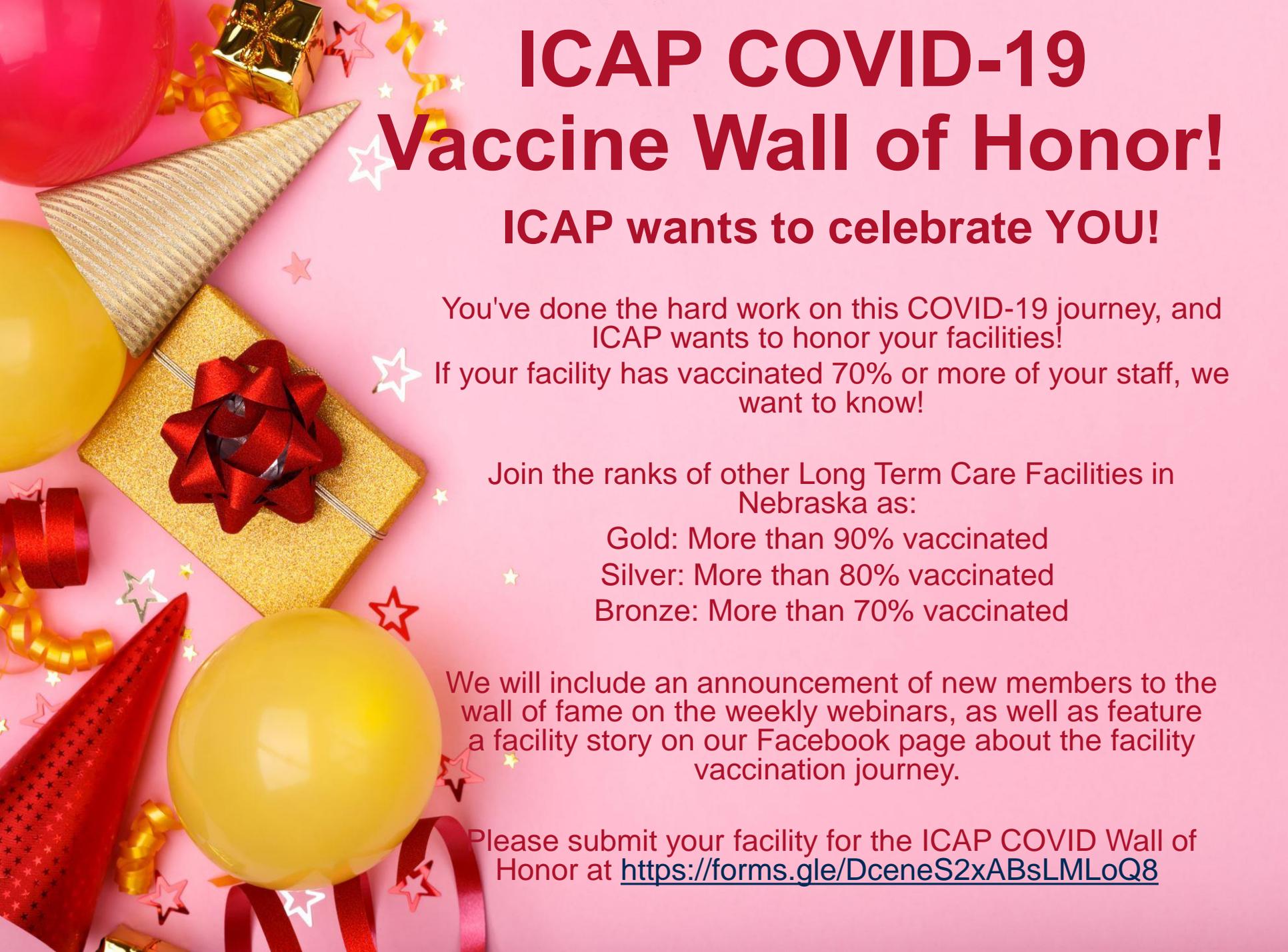
+	Supply Resources
+	Respiratory Protection Policy / Plan Development
+	Employee Training Resources
+	Public Policy Partnership/ Department of Labor Resources
+	Medical Evaluation/ Hazard Assessment/ Fit Testing Resources
+	Webinars and Training Resources

<https://icap.nebraskamed.com/nebraska-respiratory-protection-task-force/>



Happy National Skilled Nursing Care Week
2021 to All Long-Term Care Staff!

Together 
Through the Seasons
National Skilled Nursing Care Week® • May 9-15, 2021



ICAP COVID-19 Vaccine Wall of Honor!

ICAP wants to celebrate YOU!

You've done the hard work on this COVID-19 journey, and
ICAP wants to honor your facilities!

If your facility has vaccinated 70% or more of your staff, we
want to know!

Join the ranks of other Long Term Care Facilities in
Nebraska as:

Gold: More than 90% vaccinated

Silver: More than 80% vaccinated

Bronze: More than 70% vaccinated

We will include an announcement of new members to the
wall of fame on the weekly webinars, as well as feature
a facility story on our Facebook page about the facility
vaccination journey.

Please submit your facility for the ICAP COVID Wall of
Honor at <https://forms.gle/DceneS2xABsLMLoQ8>

COVID-19 Vaccine Wall of Honor

Bronze Medal Members

Bronze Medal Member by reaching 70% staff COVID-19 vaccination rate

- ❖ Crowell Memorial Home, Blair, NE
- ❖ Nye Legacy, Fremont, NE



54 LTC Facilities for the ICAP COVID-19 Vaccine Wall of Honor through 5/12/2021

Gold- Level Members

Azria Gretna
Central Ne Veteran's Home
Good Sam Beatrice
Good Shepherd's Village AL
Greeley Care Home and AL
Havelock Manor
Hillcrest Mable Rose
Hillcrest Millard
Hillcrest Silver Ridge
House of Hope AL and Memory
Care
Kingswood Court
Nebraska PEO Home
Rosewood Court Assisted Living-
Henderson Healthcare
Royale Oaks AL
Southview Heights
Tabitha in Crete
The Village at Regional West
The Waterford at Miracle Hills
The Willows AL
Valley View
Wakefield Care Centers

Silver- Level Members

Arbor Care Centers
Valhaven
Arbor Care Hartington
Cedarwood AL
Douglas County
Health Center
Falls City Care Center
Hillcrest Grand Lodge
Hillcrest Shadow Lake
Jefferson Community
Health and Life -
Gardenside
Pawnee City AL
The Evergreen AL
The Meriwether

Bronze-Level Members

Ambassador health Omaha
Blue Valley Lutheran Homes
Brookside Rehab Center,
Christian Homes
Clarkson Comm Care Center
Crowell Memorial Home
Dunklau Gardens
Eastern Ne Veteran's Home
Florence Home of Omaha
Good Shepherd Lutheran Community
Heritage Care Center Fairbury
Hillcrest Firethorn
Legacy Square LTC Facility- Henderson
Healthcare
Louisville Care Community AL
Louisville Care Community LTC
Mid-Ne Lutheran home
Mitchell Care Center
New Cassel Retirement
Nye Legacy
Nye Pointe Health & Rehab
Prairie Breeze AL
Tabitha at the Landing
Tri Valley Assisted AL
Well-Life Papillion

COVID-19 Tele-ICAP Reviews

- ICAP is offering COVID-19 focused virtual ICAR reviews to LTC, outpatient and acute care facilities
- The review will assess the status of COVID-19 policies and procedures and offer a summary of recommendations from ICAP
- Home Health Agencies fall under the outpatient umbrella and ICAP has developed a HH focused review to support our HH partners
- Contact NE ICAP at 402.552.2881 to be connected with the IP responsible for the facility

Webinar CE Process

1 Nursing Contact Hour and 1 NAB Contact Hour is offered for attending this LIVE webinar

A separate survey must be completed for each attendee.

Nursing Contact Hours:

- Completion of survey is required.
 - The survey must be specific to the individual obtaining credit. (i.e.: 2 people cannot be listed on the same survey)
- One certificate is issued monthly for all webinars attended
- Certificate comes directly from ICAP via email
- Certificate is mailed by/on the 15th of the next month

NAB:

- Completion of survey is required.
 - The survey must be specific to the individual obtaining credit. (i.e.: 2 people cannot be listed on the same survey)
- You must have a NAB membership
- Credit is retrieved by you
- Any issues or questions regarding your credit must be directed to NAB customer service.
 - ICAP can verify survey completion and check the roster list

Contact Marissa with questions:

Machaney@nebraskamed.com

402-552-2881



Infection Prevention and Control: Office and On-Call Hours

Call 402-552-2881

Office Hours are Monday – Friday

8:00 AM - 10:00 AM Central Time

2:00 PM - 4:00 PM Central Time

On-Call Hours are

**Monday – Friday 4:00 PM – 8:00 PM and
8:00 AM – 8:00 PM Weekends and Holidays**

Questions and Answer Session

Use the QA box in the webinar platform to type a question. Questions will be read aloud by the moderator.

Panelists:

- Dr. Rick Starlin
 - Kate Tyner, RN, BSN, CIC
 - Margaret Drake, MT(ASCP),CIC
 - Lacey Pavlovsky, RN, MSN, CIC
 - Sarah Stream, MPH, CDA, FADAA
 - Melody Malone, PT, CPHQ, MHA
 - Debi Majo, RN
-
- Moderated by Marissa Chaney
 - Supported by Margaret Deacy
 - Slide support from Lacey Pavlovsky, RN, MSN, CIC

The screenshot shows a list of resources on the right side of a page, including 'COVID-19 RESOURCES - FIVE', 'COVID-19 RESOURCES - SCHOOLS & BEHAVIORAL HEALTH', 'COVID-19 RESOURCES - EXPERT INFORMATION', 'COVID-19 WEBINARS', 'COVID-19 TOOLS FOR LTCF', and 'STAFFING RESOURCES'. Below this is a search bar with two entries: 'COVID-19 LTCF Webinar Slides' and 'COVID-19 LTCF Webinar Recordings'. A list of recording links follows, with a green arrow pointing to the link for the recording dated 03.26.2020.

<https://icap.nebraskamed.com/resources/>

Don't forget to Like us on Facebook for important updates!

