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**Leveraging State Health Department and Academia Partnership for COVID-19 Prevention and Containment in Long-Term Care Facilities**

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**BACKGROUND:**

Nebraska Infection Control Assessment and Promotion Program (ICAP) is funded by Nebraska Department of Health and Human Services (DHHS) through a Centers for Disease Control and Prevention (CDC) grant. ICAP represents a state-academia collaborative including NE DHHS Healthcare-associated infections and Antimicrobial Resistance program, University of Nebraska Medical Center (UNMC) and Nebraska Medicine (UNMC's teaching hospital). This analysis outlines ICAP's role in supporting COVID-19 prevention and containment efforts in Nebraska long-term care facilities (LTCFs), including nursing homes and assisted living facilities.

**METHODS:**

ICAP provides assistance to LTCFs with infection prevention and control (IPC) protocols review, COVID-19 specific containment planning (including contact tracing, testing, decision making on quarantine/isolation, and establishing COVID-19 units), provision of educational resources and tools, coordinating access to monoclonal antibody treatment, promoting COVID-19 vaccination and when needed, onsite IPC assessment and feedback. ICAP team obtains data on

new LTCF COVID-19 cases (staff and residents) from various sources including self-reporting by LTCFs, National Healthcare Safety Network (NHSN), and DHHS epidemiology team. ICAP Infection Preventionists (IPs) contact the LTCFs to assess the situation and provide 1:1 assistance. LTCFs can call in to speak with ICAP experts for IPC related questions any time of the day including after hours. Weekly one-hour educational webinars are presented to LTCF IPC leaders to provide relevant updates on COVID-19 and general IPC guidance. Since December 2020, continuing education credits are also offered. Publicly reported NHSN COVID-19 nursing home resident cases and deaths as of December 2021 is utilized to compare COVID-19 outcomes in Nebraska LTCFs with other states. Overall state LTCF COVID-19 case and death rates are calculated by dividing the total reported cases and deaths during the pandemic by the sum of weekly reported occupied beds.

### **RESULTS:**

From March 2020 to January 2022, ICAP has assisted 384 of 489 (78.5%) Nebraska LTCFs on On average 294 (range 123 to 524) IPC leaders attended weekly webinars since March 2020. Data from 2020 and 2021 reflects continued interest with average weekly attendance of 322 and 282 respectively. When compared to other states, Nebraska have 10<sup>th</sup> lowest COVID-19 case rates and 7<sup>th</sup> lowest death rate for nursing home residents (6.45 cases and 1.16 deaths per 1000 weekly occupied beds, respectively).

### **CONCLUSIONS:**

A state health department and academia partnership can provide LTCF IPC program leaders access to certified IPs, educators, and infectious diseases experts. Future efforts should further optimize these relationships to strengthen IPC programs in LTCFs.

### **Topic Selection:**

Infectious Disease IV

### **Slot:**

: Monday, June 20, 2022: 4:00 PM-5:15 PM

**Scheduled Time:**

4:00 PM

**Title:**

Leveraging State Health Department and Academia Partnership for COVID-19 Prevention and Containment in Long-Term Care Facilities

**Submitter's E-mail Address:**

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**Committee:**

Infectious Disease

**Presentation Type:**

Breakout

**Disclosure:**

I understand by submitting an abstract, either myself or an alternative presenting author are **committed to attend the conference** if my abstract is accepted., I understand by submitting an abstract it is my responsibility to obtain agency approval for display of abstract and any materials related to presentation to registered conference attendees., All presenting authors are required to register for the conference and pay for related fees., I understand speakers must disclose to participants prior to speaking any significant financial interest or other relationship with any commercial services and Yes: I have read and understand the guidelines for abstract submissions

**I am a federal employee that receives support and/or approval from CDC for travel to the CSTE annual conference:**