The Roadmap to Success:

1

5

2

Prevention of Respiratory Infection Improving Vaccination Rates in Long Term Care





Infection Prevention (IP) and Control—Step

Rationale:

Fundamental IP activities like hand hygiene, covering your cough and sneeze, screening visitors/resident/staff for symptoms of illness, masking, and personal protective equipment (PPE) use, testing, cleaning, and vaccination are all crucial interventions in protecting the vulnerable residents living within long-term care facilities (LTCFs) from infection.

Strategies to Implement	Tools and Resources	
Educate staff, providers, residents, and families about the importance of IP practices including vaccination.	 <u>CDC</u>—Viral Respiratory Pathogens Toolkit for <u>Nursing Homes</u> <u>CDC</u>—Clean Hands <u>HSAG</u>—Process Measure Tracker and Trend <u>Chart</u> <u>CDPH</u>—Adherence Monitoring IP Tools <u>CDC</u>—Nursing Home (NH) Infection Control <u>Assessment and Response (ICAR) Tool</u> <u>HSAG</u>—Quality Assurance & Performance <u>Improvement (QAPI) Resources</u> <u>CDPH</u>—AB 1797 Immunization FAQs <u>CMS Regulatory Enforcement Guidance for</u> Infection Control Deficiencies 	
Ensure infection control supplies are easily accessible.		
Allocate resources to screen, test, and isolate promptly when signs, symptoms, or illnesses are identified.		
Empower staff, residents, and their families to speak up when non-compliant practices are identified. Place visual reminders of routine IP practices around the facility.	 Infection Control Deficiencies F Tag 887 Critical Element COV Pathway Infection Prevention Control and Immunization 	

Determine Who Is Eligible for Vaccination—Step

Rationale:

Vaccination is a crucial intervention in improving the safety and overall well-being of our staff, residents, and their family members. In order to improve vaccination rates and decrease vaccination hesitancy, we must first understand the current vaccines available, the benefits and risks of each vaccine, and be willing to address concerns such as vaccine hesitance and fatigue. A key method of approach is for nursing facilities to understand and implement the best practice guidelines on who is eligible to receive the vaccine, regulations around education and offering the vaccine, and how to appropriately document and track vaccination efforts.

Strategies to Implement	Tools and Resources
Review current data on vaccination status for both residents and staff.	 <u>CDC Clinical Considerations for Use of COVID-19</u> <u>Vaccines in the United States</u> <u>CDC—Respiratory Syncytial Virus (RSV) in Older</u> <u>Adults with Chronic Medical Conditions</u> <u>CDC—Pneumococcal Vaccination Facts</u>
 Develop (or review) process improvements to track and trend data on vaccination rates. Offer vaccination to residents at time of admission. If resident states they "already received", attempt to obtain vaccine record via resident, discharge hospital, or state immunization registry website. Provide vaccine education to residents upon admission. Provide vaccine education to staff at time of hire and at least annually thereafter. 	 <u>CDC</u>—Influenza Facts California Immunization Resources <u>CAIR2 Portal</u> and <u>CAIR2 User Guide</u> <u>RIDE</u> <u>My Vaccine Record Infographic CA</u> Arizona Immunization Data Base <u>My IR QR Disclosure</u> <u>Arizona State Immunization Information</u>
Develop process to educate staff and long-term residents annually.	System (ASIIS)CDPH—AB 1797 Immunization FAQsCMS Regulatory Enforcement Guidance for Infection Control DeficienciesF Tag 887Critical Element Pathway Infection Prevention Control and Immunization

Page | 4

3

Improving Vaccination Rates Through Education—Step

Rationale:

Ensuring staff members and residents have current education related to currently available vaccines, will allow for informed decision making and potentially eliminate vaccine hesitancy and declination due to limited knowledge or misinformation related to vaccines.

Strategies to Implement	Tools and Resources
 Assess the reasons staff members and/or residents are not accepting vaccination. Vaccine hesitancy. Vaccine misinformation. Vaccine fatigue. Limited knowledge about current vaccines available. Gather necessary resources and tools that can be utilized for education purposes based on which barriers are identified. Set both initial and incremental goals to reach for increases in vaccination rates. Set up opportunities to provide vaccine education to staff members and residents and improve overall knowledge related to current vaccine availability and recommendations. Workshops or in-services for staff members and residents in collaboration with facility leadership to show teamwork and support. Information booth to provide answers to vaccine related questions. Organize fun activities that can be incorporated as part of education efforts to help retain interest in the information being provided. Set up a visual display to highlight progress towards reaching set goals that are visible to staff members and residents to 	 <u>CDC</u>—Strategies to Help Increase COVID-19- <u>Vaccine Confidence and Uptake</u> <u>CDC</u>—Talking with Patients about COVID-19 <u>Vaccination</u> <u>CDC</u>—Myths and Facts about COVID-19 <u>Vaccines</u> <u>COVID-19 Vaccination Communication</u> Fact Sheet COVID Education Messaging <u>AHCA/NCAL</u>—#GetVaccinated Toolkit <u>American Health Care Association</u> (AHCA)/National Center for Assisted Living (NCAL)—Building Trust in LTC HSAG—Motivational Interviewing Tip Sheet HSAG—Motivational Interviewing Role Play <u>Script</u> <u>COVID-19 Vaccines for LTC Residents</u> <u>CDC</u>—How mRNA COVID-19 Vaccines Work <u>Vaccine Guidance and Education Resources for LTCFs</u> <u>CDC</u>—Pneumonia Information HSAG—Preventing Pneumonia in Skilled <u>Nursing Facilities Educational Webinar</u> <u>CDC</u>—RSV Prevention <u>AHCA/NCAL</u>—Preparing for Fall Vaccinations
celebrate success, large or small.	in LTC

Setting up a Vaccine Clinic—Step

Rationale:

On-site vaccine clinics provide vital protection to both residents and staff while also easing tracking and reporting efforts and reducing barriers to access. Most long-term care facilities can leverage existing pharmacy partner(s) and local public health resources to improve vaccine uptake.

Strategies to Implement	Tools and Resources
 Discuss hosting on-site vaccine clinics with new or existing pharmacy partner(s). Consider co-administration of all recommended vaccines when appropriate to increase vaccination at each clinic. This can help the clinics be more cost effective. 	 <u>CDC</u>—immunizations for respiratory viruses' prevention <u>CDC recommends updated 2024–2025 COVID-</u> 19 and Flu vaccines for fall/winter virus season <u>HHS COVID-19 and influenza vaccine co-</u> administration among older U.S. adults
 Before the clinic date, promote the event by posting a flyer or sending notes to residents, family members, and staff members to encourage uptake of vaccination. 	 Fillable Vaccine Clinic Promotional Handout Fillable Vaccine Educational Event Promotional Handout Template for email or letter to residents/families promoting upcoming vaccine clinic and vaccine education events
 Reach out to local health departments, health systems, and other medical providers for vaccination support for the underinsured or uninsured. 	<u>California Bridge Access Program (CA BAP)</u> <u>Extension</u>



Creating, Monitoring, and Follow-up of an Ongoing Plan—Step

Rationale:

It is a CMS requirement that staff members and residents are offered education and access to certain vaccines. NHs are responsible for continuous, open communication from leadership to staff members and residents regarding the risks and benefits of vaccination. As changes to the vaccine occur, education for staff members and residents can help reduce vaccine hesitancy and misinformation. Monitoring vaccine status of resident admissions, new staff hires as well as current staff members, and residents is key to a successful ongoing vaccination plan. Set goals for vaccination among staff members and resident by tracking trends in QAPI.

Strategies to Implement	Tools and Resources	
Know vaccination status of new resident and new hired staff members.	 <u>HSAG—QAPI Resources</u> <u>HSAG—Performance Improvement Project Guide</u> 	
Provide ongoing vaccine education.	 <u>Plan-Do-Study-Act (PDSA) Cycle Template</u> <u>Fall Vaccines</u> 	
Offer quarterly vaccine clinics.	 <u>NHSN Person-Level COVID-19 Vaccination Forms</u> <u>Vaccine Hesitancy Guide Vaccine Guide</u> 	
Review of admission process to determine how vaccine education is provided and vaccine is offered.	 <u>Medicare—Compare Care Near You</u> <u>Arizona Department of Health Services—Flu Preparedness</u> <u>California Department of Public Health—Flu Preparedness</u> 	
Review on a quarterly basis which vaccines due with the minimum data set (MDS) patient driven payment model (PDPM) and the Omnibus Budget Reconciliation Act (OBRA) process.	 <u>CDC—Weekly Flu Tracker</u> <u>CDC—Interim Guidance for Influenza Outbreak Management</u> 	
Review of new hire process to determine how vaccine education is provided and vaccine is offered.	 <u>CDC</u>—Pneumonia Causes, Risk Factors, Management, and <u>Prevention</u> <u>CDC</u>—Pneumococcal Vaccination Recommendations 	
 Monthly review, during the quality assurance meeting: New admissions, vaccine status, and education provided for residents. New hires, vaccine status, and education provided for staff members. 	 <u>CDC</u>—Preventing Respiratory Syncytial Virus (RSV) <u>CDC</u>—RSV in Older Adults and Adults with Chronic Medical <u>Conditions</u> <u>CDC Health Action Network</u>—Increased RSV Activity in Parts of the Southeastern United States: New Prevention Tools Available to Protect Patients 	

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