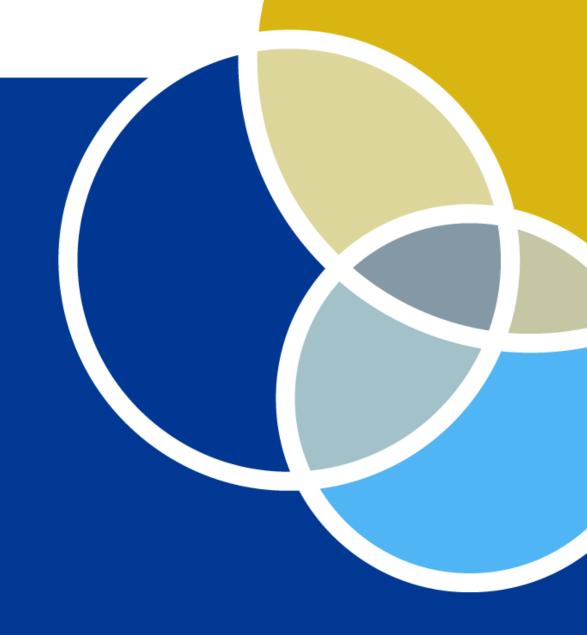




It's Worth a Shot

Question and Answer:

Centers for Medicare & Medicaid Services (CMS) Memos



Housekeeping Items



Add your webinar topics and clinician ideas or needs into chat!

We will meet every Wednesday through April 13, 2022!

Questions for You



High turnover rates are an issue many organizations are facing.

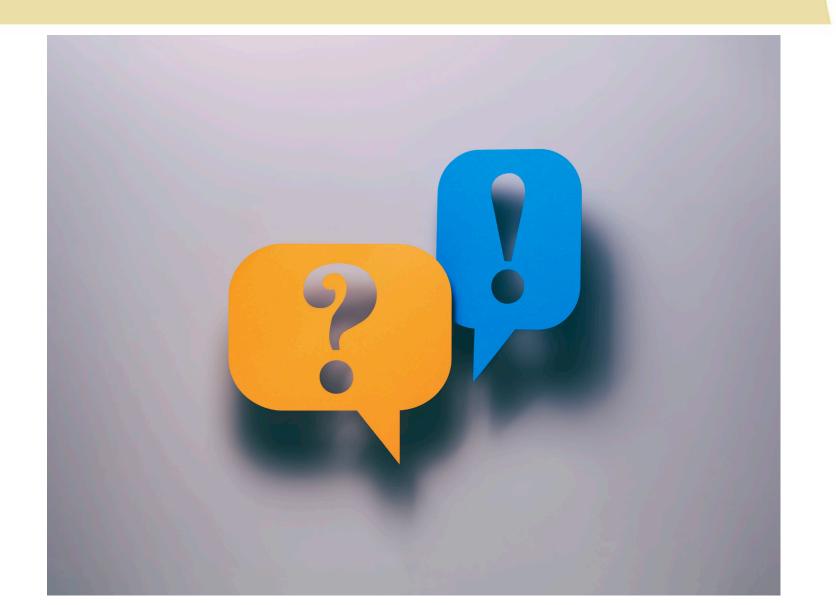
As an infection preventionist (IP) or a new IP, what tools or resources can Mountain-Pacific provide that would help in your role?

Last Week's Questions and Answers (Q&A)



- **Q**. The State of Alaska does *not* currently have the new pneumococcal vaccine. When can we expect them to be available?
- A. Alaska has formed a clinical pneumococcal workgroup. The group is currently discussing if the state should offer Pneumococcal 15, Pneumococcal 20 or both on its vaccine formulary. The decision is expected to be made in the coming weeks. Updates will be shared once they are received.

Q&A: CMS Memos



Q&A: One



Q: Does the vaccine mandate require staff to be "up to date?"

A: The vaccine mandate is outlined in Quality, Safety and Oversight (QSO)-22-09-All for Montana, Wyoming and Alaska and QSO-22-07-ALL for Hawaii. Those memos reference staff completing the vaccine series (i.e., one dose of a single-dose vaccine or all doses of a multiple vaccine series), having been granted a quality exemption or identified as having a temporary delay as recommended by the Centers for Disease Control and Prevention (CDC).

Q&A: Two



Q: Nursing homes are supposed to track positivity rates each week. Is there any information regarding the CDC tracker website not working properly?

A: As a reminder, the CDC's new COVID-19 Community

Level recommendations do not apply in health care
settings such as hospitals and nursing homes. Instead,
health care settings should continue to use community
transmission rates and continue to follow the CDC's
infection prevention and control recommendations for
health care settings.

7

Q&A: Two continued....



There is a slight delay with the data and may take a week to update, but the data usually catches up. The CDC uses two units of measurement to determine transmission rate,

% positivity and case rate/100k.

Example:

Population = 2,337

1 case/2,337 population x 100k = 42 cases/100k, which is "moderate" 3 cases/2,337 population x 100k = 128 cases/100k, which is "high"

The CDC uses whichever metric is higher so both your % positivity and case rates per 100k must decrease.

See guidance in QSO-20-38-NH – revised March 10th – page 6.

Q&A: Three



Q: Do unvaccinated staff need to wear N95s?

A: Wyoming and Alaska State Survey Agency (SSA) have confirmed that an N95 is one of the recommendations (not a requirement). It is important to make sure that your policy and procedure manual address this.

Q&A: Four



Q: Speaking of policy and procedures, what do I need to have in mine regarding the vaccine mandate?

A: Policy and procedures need to include all Centers for Medicare & Medicaid Services (CMS) requirements to address the vaccine mandate and exemptions such as:

 Having a process for ensuring all staff received their first dose by Feb. 14, 2021 (Montana, Wyoming and Alaska); Jan. 27, 2022 (Hawaii) and that all staff have received their second dose by March 15, 2022 (Montana, Wyoming and Alaska); Feb. 28, 2022 (Hawaii)

10

Q&A: Four continued...



- Including a process for implementing additional precautions intended to mitigate the transmission of COVID-19 for all staff who are not fully vaccinated
- Process for tracking and securely documenting vaccination status of ALL staff
- Process for tracking and securely documenting any staff who have obtained booster vaccinations, as recommended by the CDC
- Process by which staff may request an exemption from the vaccination requirements AND a process for tracking and securely documenting information provided by staff who have requested and the facility that has granted the exemption

Q&A: Four continued...



- Process ensuring all documentation, which confirms recognized clinical contraindications for the vaccination that supports the staffs request for exemption, have been signed and dated by a medical practitioner (must be maintained)
- Process for tracking and securely documenting the vaccination status of staff for whom the vaccination must be temporarily delayed
- Must have contingency plans for staff who are not fully vaccinated
- Review Attachment A for additional policy/program requirements and considerations

12

Resources

CDC COVID-19 Data Tracker

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

QSO - 22-09-ALL

https://www.cms.gov/files/document/qso-22-09-all-injunction-lifted.pdf

QSO - 22-07-ALL

https://www.cms.gov/files/document/qso-22-07-all.pdf

QSO - 20-39-NH

https://www.cms.gov/files/document/qso-20-39-nh-revised.pdf

QSO - 20-38-NH

https://www.cms.gov/files/document/qso-20-38-nh-revised.pdf







Why be an IP at this moment in time?

Pam Webb, RN, MPH, CIC Infection Prevention Consultant pwebb@bresnan.net phone# 406-750-6230



Why do I want to be an IP?



Pam Webb, RN, MPH, BSN, CIC Infection Prevention Consultant

- A.K.A
 - Bug Queen
 - The Germinator
 - Auntie Pam
 - Pammy
 - Hey Red!

Infection Preventionist Skills/Competencies

Surveillance and epidemiologic investigation

Data collection and analysis (including information technology expertise, data extraction and audits)

Microbiology

Emerging infectious diseases

Infectious disease transmission

Infection prevention and mitigation strategies

Environment of care (construction, environmental services, water management plan, HVAC systems)

Education and research

Management and communication

Leadership and program management

Process improvement and implementation science

Employee and occupational health

Cleaning, sterilization, disinfection, asepsis

Emergency preparedness

Pandemic planning and infection prevention

Leadership Skill Set

Being, Not Just Doing

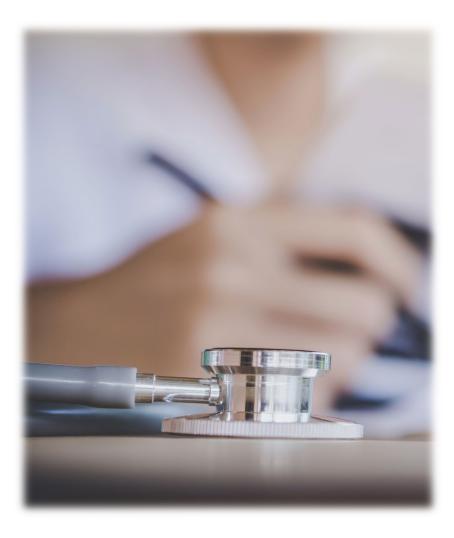
Interpersonal and intrapersonal skills	Being curious	Self-assessment	Self-reflection	Emotional intelligence
Empathy	Communication	Educator	Influencer	Conflict management
Delegation	Financial stewardship	Colleagues – who do you learn from? Grow the people around you!	Intuition	Foresee trends

My Leadership Philosophy

Plant the seed...
and it will grow...



Recommended Resources



- Association for Professionals in Infection Control and Epidemiology (APIC) Membership – national and local chapter
- Certification in Infection Prevention and Control (CIC)
 - Luz Caceido CIC Epidemiologist
 - Patty Montgomery APIC Puget Sounds
- Control of Communicable Diseases Manual
- APIC online text
- Ready Reference for Microbes
- Leadership coach
- CDC guidelines
- National Healthcare Safety Network (NHSN) training
- Self-study

Why do I want to be an IP at this moment in time?

Simply put, it's the best job in the world!







Thank you!

Join us next week: Wednesday, April 6, 2022.

This material was prepared by Mountain-Pacific Quality Health, a Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO), under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 12SOW-MPQHF-AS-NH-03/22-121