



LTCF State Update Call

from the Tennessee Department of Health

TN

Tennessee Department of Health
December 11, 2024

Call Agenda

Announcements & Updates

- **Respiratory Illness Update & COVID-19 Reporting**
 - Ashley Gambrell, MPH
- **LTCF Data Trends and NHSN update**
 - Vicky Lindsey, RN, CIC
- **TDH Waterborne Program**
 - Emma Roth, MPH
- **Watch Coalition**
 - Vicky Lindsey, RN, CIC

Presentation(s)

- **2025 COVID-19 TDH Reporting Requirements**
 - Emily Gateley, MPH
- **HCW Attire and Pathogens-part 2**
 - Angela Camiolo Terry, RN, M.Ed, CIC
- **Wound Management in LTCF**
 - Erica Anderson, BSN, RN, CIC, CCHR-S
- **Questions**

Respiratory Illness Update



COVID-19 Trends in TN & US

- **Tennessee**

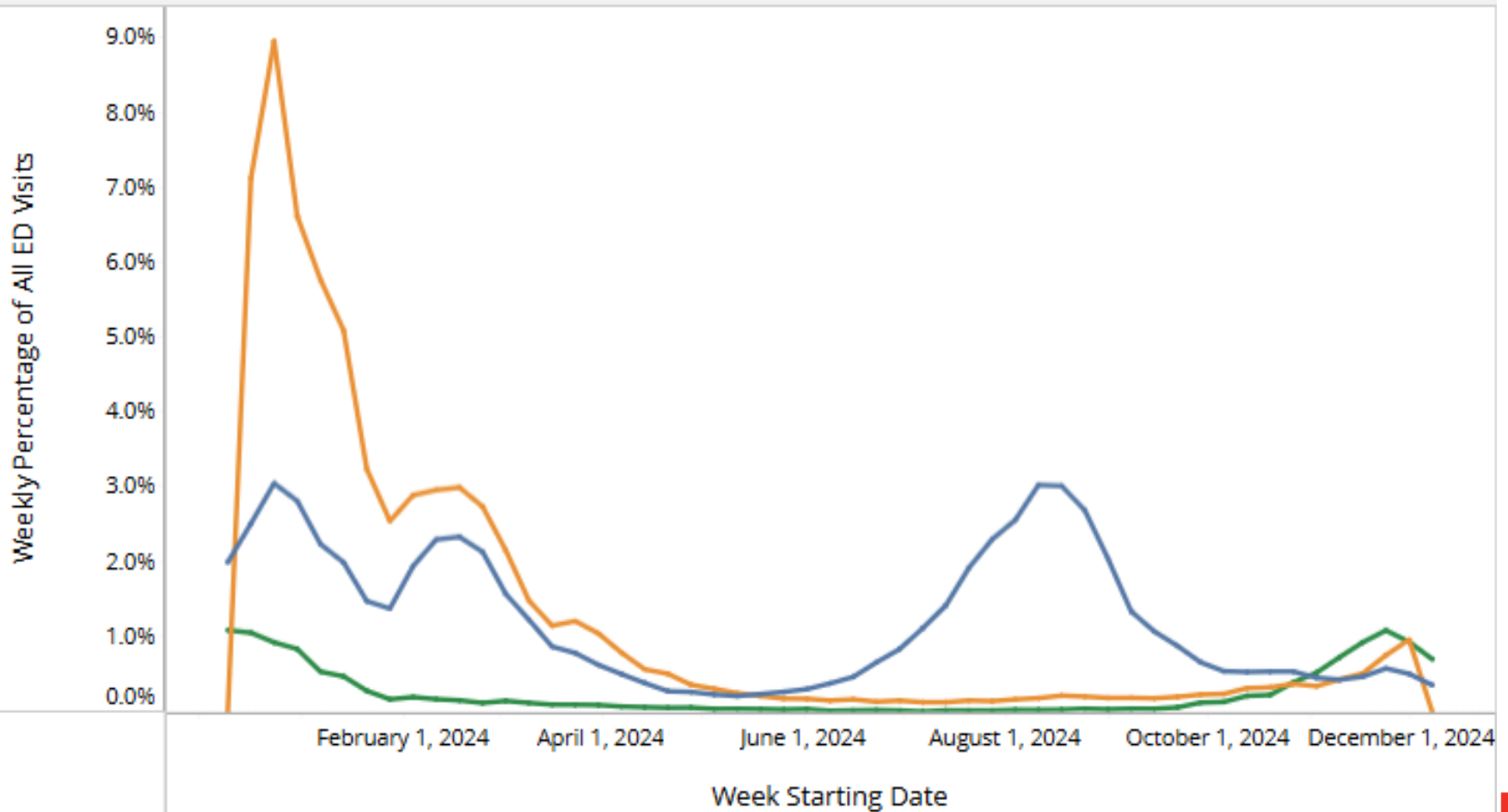
- New cases decreased ▼
(total ~ 212/week)
- Deaths stable ►
(total <5/week)

- **U.S.A.**

- Wastewater remain low
- Emergency remain low
- Hospitalizations remain low
- Deaths remain low

Syndromic Surveillance

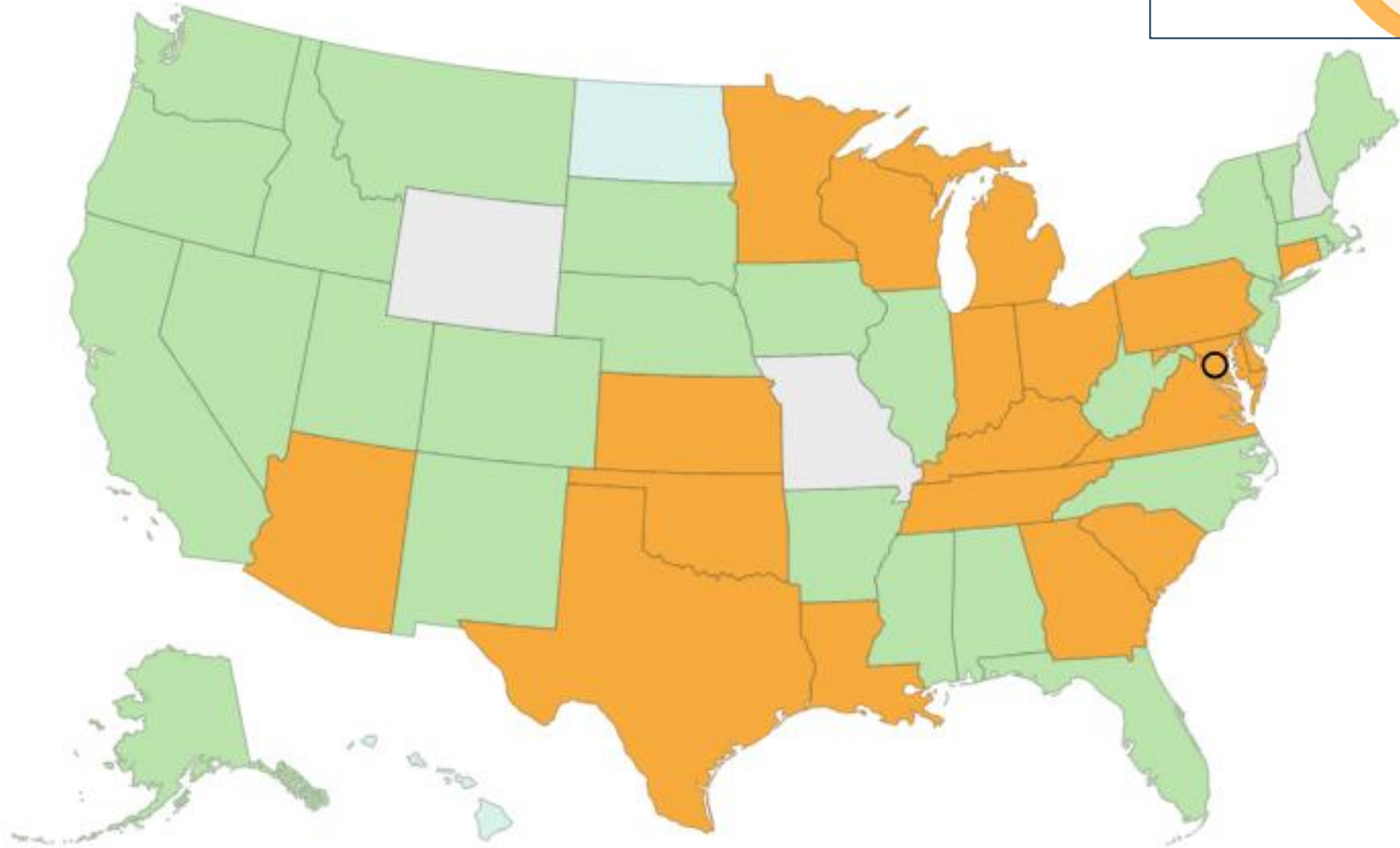
Statewide Weekly Percentage of ED Visits with Viral Respiratory Illness
Discharge Diagnosis Codes



Bottom Line

Nationally,
**Respiratory
Illness**
causing people to
seek healthcare is

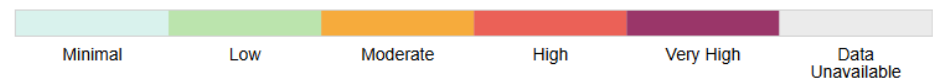
MODERATE



Territories

- AS
- GU
- PR
- VI

Acute Respiratory Illness



Additional Resources

- **TDH Resources**

- [TDH Respiratory Viral Illness Webpage](#)
- [TDH Influenza Information](#)

- **CDC Resources**

- [Protect yourself from COVID-19, Flu, and RSV](#)
- [Respiratory Illnesses Data Channel](#)
- [Infection Control: Severe acute respiratory syndrome coronavirus 2 \(SARS-CoV-2\)](#)
- [Interim Guidance for Managing Healthcare personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2](#)



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LTCF COVID-19 Updates

Vicky Lindsey, RN, CIC | Tennessee Department of Health | Communicable and Environmental Diseases and
Emergency Preparedness

NHSN Reporting

Reporting in Tennessee, most recent week November 16-November 22, 2024

Number of facilities reporting	285
Total Residents in LTCF	24,580
Residents Up-to-date Covid19 vaccine	6,865
Residents who have received Influenza Vaccine	10,146
Residents who have received RSV Vaccine	1,167
Confirmed Covid19 Resident Cases	64
Number of Residents who received UTD vaccine 14 days before + test	0
Hospitalized and + test in the last 10 days	2



LTCF NHSN Updates

Vicky Lindsey, RN, CIC | Tennessee Department of Health | Communicable and Environmental Diseases
and Emergency Preparedness

LTC Facility Acute Respiratory Illness Data Reporting

Respiratory Pathogens Reporting Requirement Changes for Residents

- **Beginning January 1, 2025, facilities are *required* to report:**
 - **COVID-19,**
 - **influenza, and**
 - **RSV data weekly for residents,**
 - **including vaccination status, cases (overall and by vaccination status), and hospitalizations with confirmed cases (overall and by vaccination status).**

Version Changes

Old (Current) Version

New Resident Cases (Positive Tests) and Hospitalizations During the Week of Data Collection	
3. Resident Cases (Positive Tests):	
3a. *COVID-19: Residents with a Positive Test	
3ai. ** Number of residents in Question #3a who received the up to date COVID-19 vaccine 14 days or more before the positive test	
3b. Influenza: Residents with a Positive Test	
3bi. ** Number of residents in Question #3b who received this season's annual influenza vaccine (YYYY-YYYY) 14 days or more before the positive test	
3c. RSV: Residents with a Positive Test	
3ci. ** Number of residents in Question #3c who received RSV vaccine 14 days or more before the positive test	

New (Future) Version

New Resident Cases (Positive Tests) and Hospitalizations During the Week of Data Collection	
3. Resident Cases (Positive Tests):	
3a. *COVID-19: Residents with a Positive Test	
3ai. ** Number of residents in Question #3a who received the up to date COVID-19 vaccine 14 days or more before the positive test	
3b.*Influenza: Residents with a Positive Test	
3bi. ** Number of residents in Question #3b who received this season's annual influenza vaccine (YYYY-YYYY) 14 days or more before the positive test	
3c.*RSV: Residents with a Positive Test	
3ci. ** Number of residents in Question #3c who received RSV vaccine 14 days or more before the positive test	

LTC Facility Acute Respiratory Illness Data Reporting

- **COVID-19 Vaccination Reporting Requirement Changes for Healthcare Personnel (HCP)**
- **Beginning January 1, 2025, facilities are *no longer required* to report COVID-19 vaccination data for HCP every week.**
- **LTCFs are still required to report HCP COVID-19 vaccination data for one week per month, due on a quarterly basis, as part of a CMS Quality Reporting Program.**
- **The week-end date determines which month a week is included in. For example, reporting data for the week of January 27, 2025 through February 2, 2025, counts as submitting data for a week in February.**

LTC Facility Acute Respiratory Illness Data Reporting

- **Beginning the first week of reporting for Quarter 1 2025 (December 30, 2024 – January 5, 2025), individuals aged 65 years and older and those who are moderately or severely immunocompromised are up to date when they have received 2 doses of the 2024-2025 COVID-19 vaccine or received 1 dose of the 2024-2025 COVID-19 vaccine in the past 6 months.**
- **There is no change to the up to date definition for individuals younger than 65 years. Therefore, individuals aged less than 65 years are up to date when they have received 1 dose of the 2024-2025 COVID-19 vaccine (any time since it was approved in August 2024).**

LTC Respiratory Data Reporting - Webinars

NHSN LTCF Component: Respiratory Pathogens and Vaccination Updates

- **When: Wednesday, December 11, 2024, at 1:00 PM Eastern Time (US and Canada)**

https://cdc.zoomgov.com/webinar/register/WN_XUstZ8zQTRG5WqqygPwShA

- **When: Tuesday, January 7, 2025, at 1:00 PM Eastern Time (US and Canada)**

https://cdc.zoomgov.com/webinar/register/WN_Sd8zLQXEQCWI9vKCrfJcpw#/registration

LTC Facility Acute Respiratory Illness Data Reporting

- **Timeline December 2024 – January 2025**
 - **December 11: NHSN Long-Term Care Respiratory Reporting Training**
 - **January 1, 2025: Effective date for reporting**
 - **Mid-late January: New data will be posted on NHSN website**

[Calendar Year\(CY\)2025 Home Health Prospective Payment System Final Rule Fact Sheet \(CMS-1803-f\)](#)

LTC Facility Acute Respiratory Illness Data Reporting

- They are also finalizing that, in the event of a declared national public health emergency (PHE) for an acute respiratory illness, there may be additional categories or reporting required, such as:
 - reporting data up to a daily frequency and additional or modified data elements relevant to the PHE-including but not limited to:
 - relevant confirmed infections,
 - supply inventory shortages,
 - staffing shortages,
 - relevant medical countermeasures and
 - therapeutic inventories.

2024 LTC Annual Facility Survey

- **The 2024 Long Term Care Annual Facility Survey will become available in the NHSN application, January 2025. Facilities that currently, or plan to, participate in the Healthcare Associated Infection (HAI) modules, such as urinary tract infections, laboratory-identified events for C. difficile and/or multidrug resistant organisms, and/or prevention process measures are required to complete the survey by March 1, 2025.**
- **Facilities that complete the annual survey help drive significant improvements within the NHSN surveillance system, enabling the development of targeted resources, surveillance guidance, and meaningful performance comparisons among Long-Term Care Facilities.**

2024 LTC Annual Facility Survey

- Here are a few reasons why completing the 2024 Annual Facility Survey is important:
- **Infection Prevention & Control**: The survey provides valuable data to help identify areas where LTCFs may need additional support in infection prevention and control activities.
- **Antibiotic Stewardship**: It offers insights into the resources needed to implement or improve antibiotic stewardship programs, which are vital for resident safety and effective care.
- **Resident and Care Services**: It helps gather essential information about types of residents your facility serves, as well as specific care services provided.

2024 LTC Annual Facility Survey

- ***Please note*** that for facilities primarily reporting in the Respiratory Pathogens Vaccination module, the annual survey is not mandatory. However, we strongly encourage all Long-Term Care Facilities (LTCFs) to complete the survey, as it provides valuable benefits, as outlined above, for your facility.
- If you have questions, please contact NHSN-ServiceNow and include “*2024 LTCF Annual Facility Survey*” in the subject line. The portal can be accessed [here](#) or through your SAMS account. After logging into SAMS, the NHSN-ServiceNow link is located at the bottom of the page.



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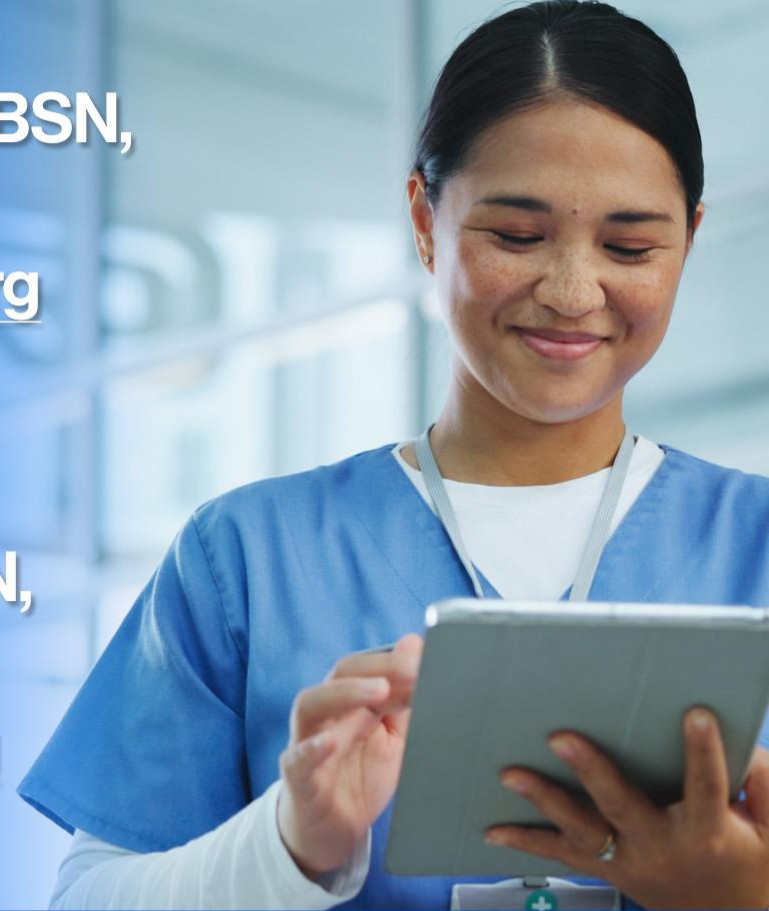
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**Qsource is currently recruiting
for our CSC | CMP Initiative**

www.qsource.org

Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF)



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Scan QR code to
sign up for the
COE-NF newsletter



June is National Post-Traumatic Stress Disorder Awareness Month



Understanding Post-Traumatic Stress Disorder

Post-Traumatic Stress Disorder (PTSD) is a brain disorder that some people develop after experiencing or witnessing a terrifying traumatic event. A traumatic event in this context refers to threatened loss of life, actual loss of life, a serious injury, physical or sexual violence, or learning that such an event happened to a close family member or friend.

Common examples of traumatic events include:

- Military Combat
- Natural Disaster
- Assault/Abuse
- Mass Violence
- Witnessing a traumatic event



An event may be traumatic for one person and not for another. Not everyone exposed to a traumatic event will develop PTSD.

A person with PTSD experiences intense fear and other symptoms during and long after the traumatic event has ended. Symptoms may start immediately after the event or, in some cases, months or even years later. Symptoms generally fall into the following categories:

Re-experiencing: Having flashbacks, reliving, or distressing dreams.



Changes in mood and thoughts: Inability to remember details of the event, feeling guilty or ashamed or losing interest in activities.

Avoidance: Avoiding reminders of the event, or even talking about the event.



Increase in arousal and reactivity: Feeling angry or irritable, being overly watchful and having difficulty sleeping.

Diagnosis with PTSD

PTSD diagnosis is confirmed by a qualified clinician, collaborate with the resident and their family to protect the resident, identify strategies to manage their symptoms, include the strategies in the care plan and them to the team. Facility staff should connect the resident to appropriate mental health and community resources. High-quality, free apps, such as PTSD Coach, are also helpful.

For more information and resources, visit www.nursinghomebehavioralhealth.org



Mental Health Services Administration. Post-Traumatic Stress Disorder. <https://www.samhsa.gov/trauma>. What is Post-Traumatic Stress Disorder?

Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF). This work is made possible by the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the author(s) and do not necessarily represent the official views of the SAMHSA.



The COE-NF developed the following resources for nursing facilities to use in educating the team about behavioral health conditions.

[Home - COE-NF \(nursinghomebehavioralhealth.org\)](http://www.nursinghomebehavioralhealth.org)



December Educational Events



JOIN OUR UPCOMING VIRTUAL EDUCATION EVENTS

- ACCME & NAB credits will be offered -



Question, Persuade, Refer (QPR)

Suicide Prevention
Registration is limited.

Tuesday, December 10, 2024
2-3:30 p.m. ET

Speaker: Holly Pounders

REGISTER HERE:
https://bit.ly/COEQPR_12-10-24

Supporting Healing from Grief and Loss in Nursing Facilities

Thursday, December 12, 2024
2-3 p.m. ET

Speaker: Diana Padilla, MCPC, CARC, CASAC-TASAP

REGISTER HERE:
<https://bit.ly/SupportHealingGriefandLoss>

Holiday Seasonal Depression: Ways to Support Nursing Facility Residents

Tuesday, December 17, 2024
2-2:30 p.m. ET

Speaker: Bryan G. Stephens, MA, MBA, CPCPS, LPC

REGISTER HERE:
<https://bit.ly/HolidaySeasonalDepressionNFR>

Treating Older Adults in Recovery - Grief and Complex Bereavement in Older Adult Community

Thursday, December 19, 2024
2-3 p.m. ET

Speaker: Dr. Malcolm Horn, Ph.D., LCSW, MAC, SAP

REGISTER HERE:
<https://bit.ly/TreatOlderAdultsinRecovery>

Mental Health First Aid (MHFA)

Registration is limited.
Friday, December 20, 2024
11 a.m. - 4:30 p.m. ET

Speaker: Marti Vogt

TO REGISTER:
To register for the Mental Health First Aid training, click here - https://bit.ly/MHFA_RegistrationForm



AUDIENCE:
All nursing facility staff.

This event is hosted by the Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF).

This publication was made possible by grant number 1H798MD87155 from the Substance Abuse and Mental Health Services Administration (SAMHSA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Substance Abuse and Mental Health Services Administration.



nursinghomebehavioralhealth.org

SCAN ME



Scan the QR Code to register for trainings





TM

TDH Waterborne Program

Emma Roth, MPH | Tennessee Department of Health | Communicable and Environmental Diseases and
Emergency Preparedness

TDH Waterborne Program Update – 12/11/2024

Legionellosis Cases	HC-Associated Legionellosis Cases	Deaths
126 +7	17* +0	7* +0

Updates:

- 1 year ago: 143 cases, 19 healthcare-associated, 4 deaths
- Happy Holidays!



**data current as of November, pending update*

We're here to help.

Please reach out if you have any questions regarding *legionella*, water management programs, etc.

Legionella.Health@tn.gov

615-741-7247





Watch Coalition



Register Now



SCAN THE QR CODE ABOVE.

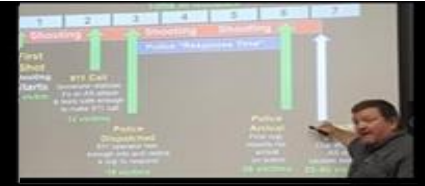
LIMIT 120 SPOTS FOR EACH CLASS



The Active Shooter Problem

5-Presentation Series

Humboldt, TN



January 21-22, 2025
 Open to the public
Free to attend –
Humboldt Medical Center
 Conference Center
 3525 Chere Carol Rd.
 Humboldt, TN 38343
 All presentations are R-Rated due to topic



Speaker: Ed Monk has been researching the Active Shooter threat and providing training to counter it for over 16 years. He speaks to and trains law enforcement agencies, schools, universities, churches, businesses and conferences nationwide. Ed is a retired Army officer, former schoolteacher, and current law enforcement officer and firearms trainer. His formal education includes a BS in US History from West Point, an MS in Education from Kansas State University, and he is a graduate of the US Army's Command & General Staff College.

Tuesday, January 21, 2025
 9am-12:30pm

A Broad Study of the Active Shooter Problem
 & How to Minimize Victims

2:-4pm

Considerations for Armed Responders to Active Shooters

6-9pm

A School-Focused Study of the Active Shooter
 & How to minimize victims

Wednesday, January 22, 2025
 9am-12:30pm

A School-Focused Study of the Active Shooter
 & How to minimize victims

1:30-4:30pm

Critical Law Enforcement Lessons-Learned
 from Active Shooter Attacks



Respiratory Virus Reporting Requirements

Changes for 2025

What we will NOT be covering

- **NHSN Reporting requirements**
 - Please follow CMS regulations & Guidance for your facility type
 - LTCFs still have required reporting in the Respiratory Pathogens & Vaccination (RPV) module
- Any of your **federal, regulatory, or other licensing requirements**

What we ARE covering

- **State / TDH reporting requirements**
 - [2025 Reportable Diseases & Conditions List](#)
 - List is updated annually

- **Respiratory Viral Illness (RVI)**
 - Including Flu, RSV, COVID
 - Changes to requirements for COVID-19 reporting in 2025

2025 TDH Reporting Requirements

- **No longer required reporting**
 - Individual cases / positive labs for COVID-19
- **Required Reporting**
 - *Some* deaths
 - All outbreaks of respiratory viruses (COVID-19, Flu, & RSV)

RVI associated Deaths

- **Reportable Deaths:**
 - **By phone next business day; submit [PH-1600](#) within 1 week**
 - Pediatric (<18 years old) deaths
 - Influenza
 - COVID-19
 - Respiratory syncytial virus (RSV)
 - Pregnancy-associated
 - Influenza
- **For all other deaths: follow your normal process**

Clusters / Outbreaks

- **The following respiratory clusters should be reported to public health within 1 week:**
 - In high-risk congregate settings including LTCFs, an outbreak of two or more epidemiologically linked individuals with the same test-confirmed bacterial or viral infection (including influenza, RSV and COVID-19) within a 7-day period.
 - In other healthcare and non-healthcare settings, a respiratory outbreak of a sudden increase in cases of pneumonia or acute respiratory illness for a 7-day period with no known cause, which disrupts normal operations.

How to report RVI

- **Routinely**
 - Continue routine NHSN and other reporting
- **If you have a reportable RVI-associated death**
 - Phone next business day; PH-1600 within 1 week
 - Work with your local health department
- **When you have an outbreak**
 - Within 1 week
 - Work with your local health department, OR
 - Respiratory Viral Illness Outbreak Team
 - RVI.Health@tn.gov

Summary – For 2025

- **Keep doing your NHSN and any CMS required reporting**
- **Keep Reporting to TDH**
 - *Some RVI associated deaths*
 - *All outbreaks of respiratory viruses (COVID-19, Flu, & RSV)*
 - 2+ cases in 7 days, report to TDH
- **Stop reporting to TDH**
 - Individual case forms for COVID-19

Additional Info

TDH Reportable Diseases Information

<https://www.tn.gov/health/cedep/reportable-diseases.html>

Respiratory Viral Illness Outbreak Team

RVI.Health@tn.gov



Healthcare Pathogen Statements

The fashion of bacteria, viruses, fungi and ectoparasites

Part II

Disclaimer

- In the absence of precise guidance for healthcare worker attire outside the operating room, we will review available guidance and apply critical thinking to raise awareness for healthcare worker safety with focus on reducing the risk of pathogen transmission.
- This is not a rule, standard, or official guideline.

Objectives

- Identifying opportunities for pathogen contamination and transmission via HCW attire
- Promote the acceptance and use of PPE
- Infer safe practices for safe home laundering
- Recognize additional infection prevention and control practices with impact to workers, patient/residents, and visitors (“nuggets”)

Not So Simple

Understanding Where Germs Live and How They Spread



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



Pathogens To Go

Pathogens isolated from healthcare worker attire:

- *Staphylococcus aureus*
- *Streptococcus*
- *Methicillin-resistant Staphylococcus aureus (MRSA)*
- *Vancomycin-resistant enterococci (VRE)*
- *Extended spectrum b-lactamase producing bacteria (ESBL)*
- *Carbapenem-resistant Acinetobacter baumannii (CRAB)*
- *Candida* species, including *Candida auris*
- Gram-negative bacilli-
Escherichia, Proteus, Enterobacter, Klebsiella, Citrobacter, Yersinia, Shigella, and Salmonella, Pseudomonas aeruginosa, Acinetobacter baumannii, Burkholderia cepacia, Burkholderia pseudomallei, Stenotrophomonas., Alcaligenes, and Moraxella.
- *Clostridioides difficile*

For more reading, search for pathogens on healthcare worker attire- many articles!

(Not So) Brief Encounters

- Bedrails- challenging when in the up position, especially so for shorter staff.
- Encounters/room entry- repeated, lengthy, engaging or involved cares.
- Longer stays- risk of environmental contamination increases with longer stays, and various visitors.
- Squatters, campers- come to stay and bring all sorts of adventure.
- Do Not Disturbs- refuse housekeeping, linen changes, personal hygiene.
- Facility Environmental- Air, Water

Where Do We Go Now

From the pickup to the transfer...

- Patient/Resident rooms
- Nursing/Documentation Stations
- Breakrooms/Cafeteria
- Waiting Areas
- Vehicles
- Community- school, church, sports, restaurants, grocery, DAYCARE
- Friends/Family
- HOME

Thank You!

The more you know...

HAI.Health@TN.gov



Wound Management in Long-Term Care Facilities

Learning Objectives

- Define types of wounds
- Summarize infection prevention considerations

What Is A Wound?

- Disruption of the normal structure and function of the skin and soft tissue architecture.
 - Acute
 - Surgical vs. nonsurgical



What Is A Wound?

- Chronic

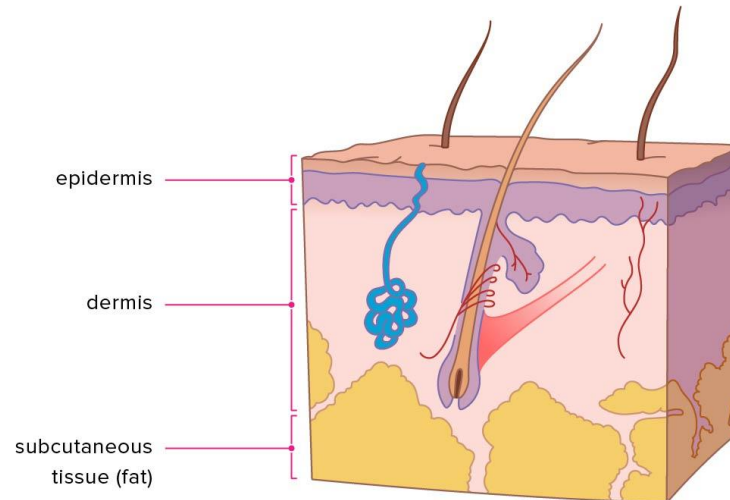


What Is A Wound?

- Superficial



- Deep



Wound Management IP Considerations

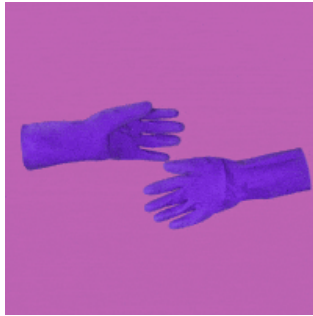
- Follow appropriate hand hygiene guidelines
 - 5 moments of hand hygiene



Wound Management IP Considerations

- PPE

- Gloves? ✓



- Eye & face protection ?



- Gown ?



Wound Management IP Considerations

- Supplies



Conclusion

- Wounds can be acute or chronic, surgical or non-surgical, and superficial or deep.
- Proper hand hygiene is the most important step in wound management.
- PPE like gowns and eye/face protection might be necessary.
- Supplies should be placed on a clean, disinfected surface in the resident room.
- Multi-use creams and lotions should be left on the wound care cart.
- Bandage scissors must be cleaned and disinfected between uses.



Questions?
HAI.Health@tn.gov

References

- Armstrong, D. G., & Meyr, A. J. (2024, October 28). *Principles of acute wound management*. UpToDate. <https://www.uptodate.com/contents/principles-of-acute-wound-management>
- Centers for Disease Control and Prevention. (2023, January 27). *Infection control assessment and response (ICAR) tool for general infection prevention and control (IPC) across settings module 8: Wound care facilitator guide*. <https://www.cdc.gov/infection-control/media/pdfs/IPC-mod8-wound-care-508.pdf>
- Evans , K., & Kim, P. J. (2024, November 8). *Overview of treatment of chronic wounds*. UpToDate. <https://www.uptodate.com/contents/overview-of-treatment-of-chronic-wounds>
- Wound, Ostomy, and Continence Nurses Society and the Association for Professionals in Infection Control and Epidemiology, Inc. (2024). *Clean Versus. Sterile: Management of Chronic Wounds*. Mt. Laurel, NJ: Author.

Questions

- **Submitted questions**
- **Chat box questions**

Contact Information

- **NHSN Related**
 - Vicky.Lindsey@tn.gov
- **Infection Prevention**
 - HAI.Health@tn.gov
- **Legionella Questions**
 - Legionella.Health@tn.gov
- **Antimicrobial Stewardship**
 - Cullen.Adre@tn.gov
- **General / Other**
 - Ashley.Gambrell@tn.gov
- **Next Call: January 8, 2025**

Data Dog Update Corner:

Don't forget, this
call is monthly
now!

