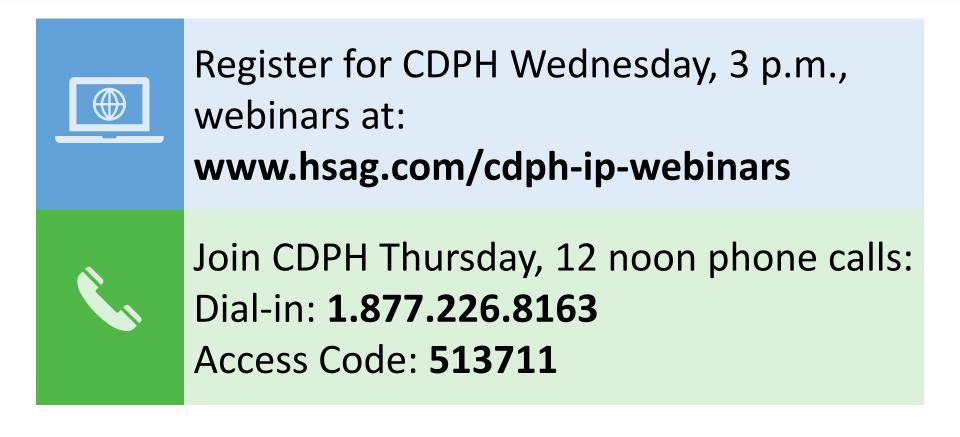


California Department of Public Health (CDPH) Infection Prevention Webinar

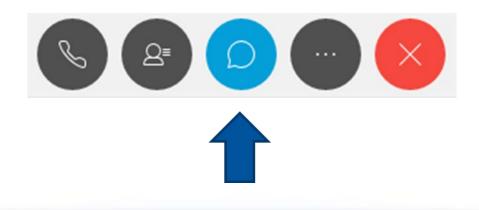
Wednesday, August 19, 2020

Upcoming



How to Find the Chat Button

- Scroll your mouse on the screen to see the menu at the bottom of the slide.
- Click on the button with a talking bubble to select the chat box.

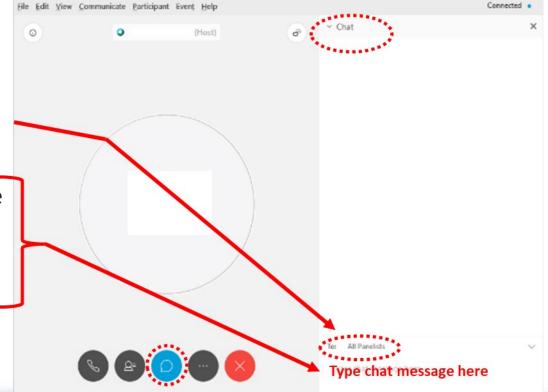


How to Submit a Question

- To submit a question, click on the Chat Button at the center of the bottom navigation buttons.
- 2. The **Chat** panel will open on your right.
- 3. Indicate that you want to send a question to **All Panelists**.
- 4. Type your question in the box at the bottom of the panel.
- 5. Press **Enter** on your keyboard to submit your question.

To connect to the audio portion of the webinar, please have WebEx call you.





Please Take 5 Seconds and Let Us Know



We want this call to be meaningful to you, so we need your input.

At the end of the webinar, you will be asked **one question** to determine if this call equipped your organization to manage COVID-19 and/or your infection prevention practices.





Introductions



CDPH Update

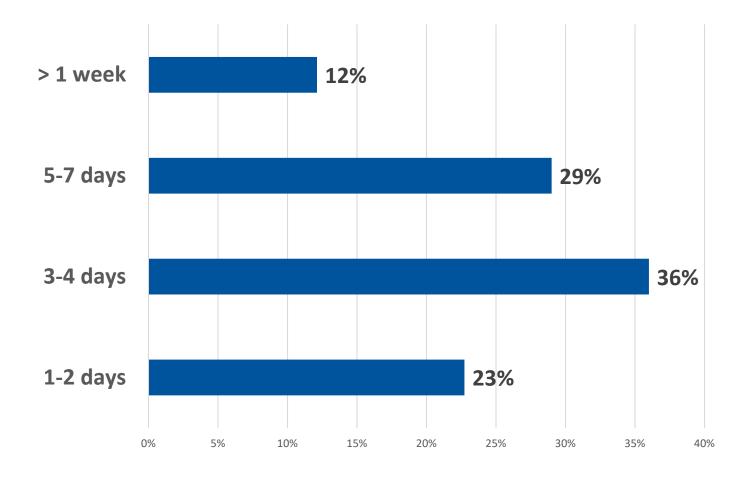


Poll #1 (choose 1)

What is your facility's current COVID-19 situation?

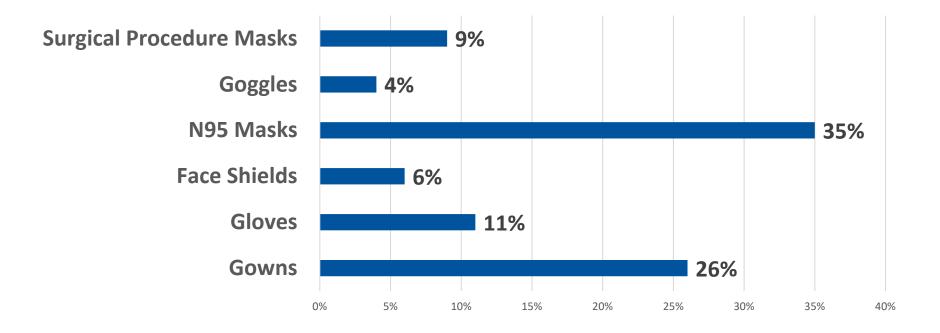
- a. Our nursing home has been COVID-19 free since the beginning.
- b. Our nursing home had COVID-19 positive cases (either staff or resident) but is now COVID free.
- c. Our nursing home is currently experiencing its first COVID-19 outbreak.
- d. Our nursing home currently has a COVID-19 outbreak, but it is not the first one.
- e. Does not apply.

August 12 Poll Results: Testing Turnaround Time





August 12 Poll Results: PPE with Access Barrier



Non-PPE items with access barrier: Antibacterial hand sanitizer for wall units, alcohol swabs, and disinfectant wipes, etc



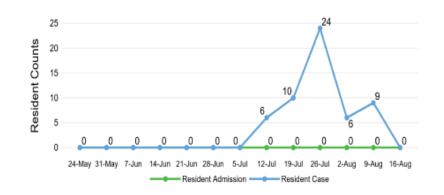


Quality Improvement Innovation Portal (QIIP) Enrollment



Facility-Specific COVID-19 Run Chart

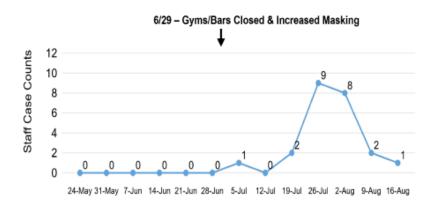
Resident: COVID-19 New Laboratory Positive Case Counts Resident: COVID-19 Death Counts



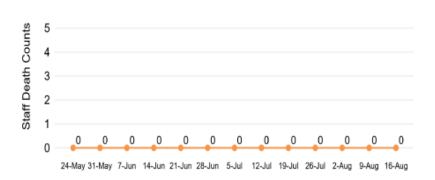


24-May 31-May 7-Jun 14-Jun 21-Jun 28-Jun 5-Jul 12-Jul 19-Jul 26-Jul 2-Aug 9-Aug 16-Aug

Staff: COVID-19 New Laboratory Positive Case Counts



Staff: COVID-19 Death Counts





To Access The QIIP Portal For Facility Report

| Quality Improve Organizations Sharing Knowledge. Improving | Health Care. | ADVISION CODE | | | |
|--|---|--|--|---|----------------------------|
| CENTERS FOR MEDICARE & MEDIC | AID SERVICES | | novation Pr | ortal (QIIP) Administrator | Form |
| HSA | G Quality Improv | ement and Ir | movacion re | nitiatives on which you are working. I ude the ability to complete assessmen | The HSAG QIIP will |
| | us centralized place for in | nformation in suppo | rt of the quality in | initiatives on which you are welling ide the ability to complete assessmen | ts, track interventions, |
| | | | | | |
| and view your perior | liance dusine | | | Admir OIIP Admir | ustrator(s) and return the |
| To get access to your | weekly COVID-19 Trend | d Report please fill | out the short form | below to designate your Quint ons, contact Joel at 818.940.5354. | |
| completed form via e | man to seer theight | | <u>H</u> | | |
| Add edit, and remove users within the a | | | | | |
| A | rmance reports and date | poards. | • | Upload/submit data. | |
| Attest to the | completion of activities. | | | | |
| Complete as | sessment forms. | | | These add additional rows | to the table as needed if |
| | | | | cillues. Flease and | |
| Facility Informa | MS Certification Numbe | r (CCN) and facility | y name for your la | | |
| Facility Informa Please provide the C | MS Certification Numbe has more than one facili | r (CCN) and facility <mark>ty.</mark> | y name for your la | acilities. Please add additional rows | |
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| CCN | Facility | / Name | | | |
| CCN | Facility | / Name | | | |
| CCN | Facility (s) Information | y Name | ate the table below | 7. HSAG recommends having at least | |
| CCN | Facility (s) Information | y Name | ate the table below | 7. HSAG recommends having at least ge. | two staff members assigned |
| CCN | (s) Information HSAG QIIP Administrate or role per facility so ther | / Name or(s), please comple e is no lapse in Adn | ate the table below | 7. HSAG recommends having at least | |
| CCN | Facility (s) Information | y Name | ete the table below ninistrator coverag | 7. HSAG recommends having at least ge. | two staff members assigned |
| CCN Administrator To designate your to the Administrator | (s) Information HSAG QIIP Administrate or role per facility so ther | / Name or(s), please comple e is no lapse in Adn | ete the table below ninistrator coverag | 7. HSAG recommends having at least ge. | two staff members assigned |
| CCN Administrator To designate your to the Administrator | (s) Information HSAG QIIP Administrate or role per facility so ther | / Name or(s), please comple e is no lapse in Adn | ete the table below ninistrator coverag | 7. HSAG recommends having at least ge. | two staff members assigned |



Registration Invitation to QIIP

- New users will receive a QIIP registration email. The email will be sent from <u>appdevsupport@hsag.com</u> with a registration link.
- The registration link will expire in 72 hours. If you are unable to register within the 72-hour period, you can either:
 - Click on the "Forgot Password" link on the Secure Login page.
 - Reply to the original registration email and a new link will be sent.



Registration Email

Hello John Doe,

You have been invited to register to use the secure HSAG Quality Improvement Innovation Portal (QIIP). The HSAG QIIP will allow you to view your performance dashboards, access reports, submit data, complete assessments to enhance your QI efforts, and track interventions.

When you register, please enter your email address and create your own password. There is no initial default password when you first access the HSAG QIIP.

Please register within 72 hours of receiving this email.

Click here to register.

If you have questions about this email, please contact appdevsupport@hsag.com.

CONFIDENTIALITY NOTICE: This communication, including any attachments, may contain confidential information and is intended only for the individual or entity to which it is addressed. Any review, dissemination, or copying of this communication by anyone other than the intended recipient is strictly prohibited. If you are not the intended recipient, please contact the sender by reply email and delete and destroy all copies of the original message.



Create and Confirm Password

| New Password Confirm Password Submit | New User Registration someuser@email.com |
|--------------------------------------|---|
| | Confirm Password |

- Passwords must:
 - Be at least 8 characters long
 - Have at least one digit
 (0–9)
 - Have at least one lowercase letter (a–z)
 - Have at least one uppercase letter (A–Z)
 - Have at least one special character like (!#\$%^&*(),.?)



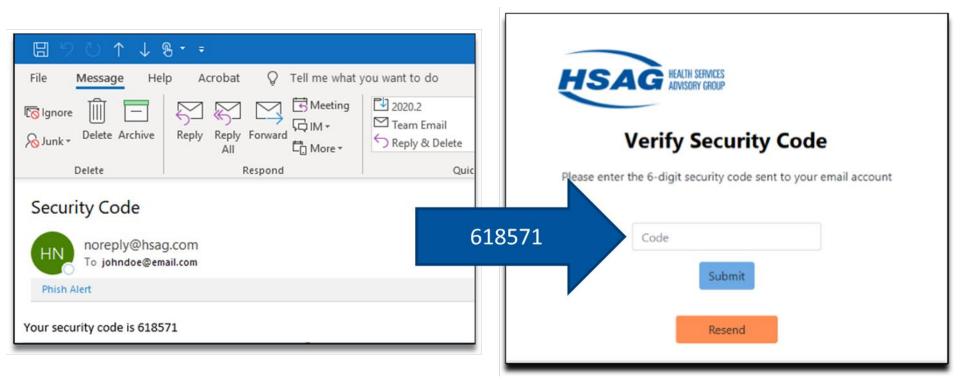
Login Instructions

• Visit: <u>https://qiip.hsag.com</u>

| HSAG HEALTH SERVICES ADVISORY GROUP | HSAG HEALTH SERVICES ADVISORY GROUP | |
|--|--|------------|
| Sign in with your Email Address | Sign i heidijhop@gmail | |
| Email Address | Password | |
| Email Address Forgot Password Next | Forgot Password | Back Login |

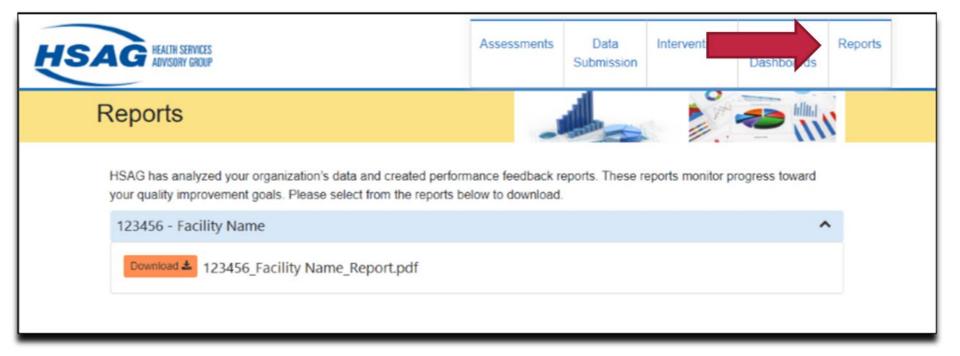


Login Instructions (cont.)





Accessing Your Report







Cal OSHA Update



CDPH and CALTCM Presentation

Poll #2: (check all that apply) For Those Facilities That Had COVID-19 in the Building

What do you believe was the most significant factor in controlling COVID-19 in your facility?

- a. Full-time infection preventionist (IP)
- b. Screening all staff at the door at the beginning of the shift
- c. Abundant PPE¹
- d. Timely lab results
- e. Cohorting early

- f. Strong administrative support for the IP
- g. Medical director involvement
- h. Consultation from L&C²
- i. Consultation from local public health
- j. Consultation from state HAI³ program
- k. Other

- 1. PPE=personal protective equipment
- L&C=licensing and certification
 - 3. HAI=healthcare-associated infection
- 22

Questions?







This material was prepared by Health Services Advisory Group, the Medicare Quality Innovation Network-Quality Improvement Organization for Arizona and California, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. CA-12SOW-XC-08192020-01