The Roadmap to Success:

Prevention of Respiratory Infection

Improving Vaccination Rates in Long Term Care

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CENTERS FOR MEDICARE & MEDICAID SERVICES

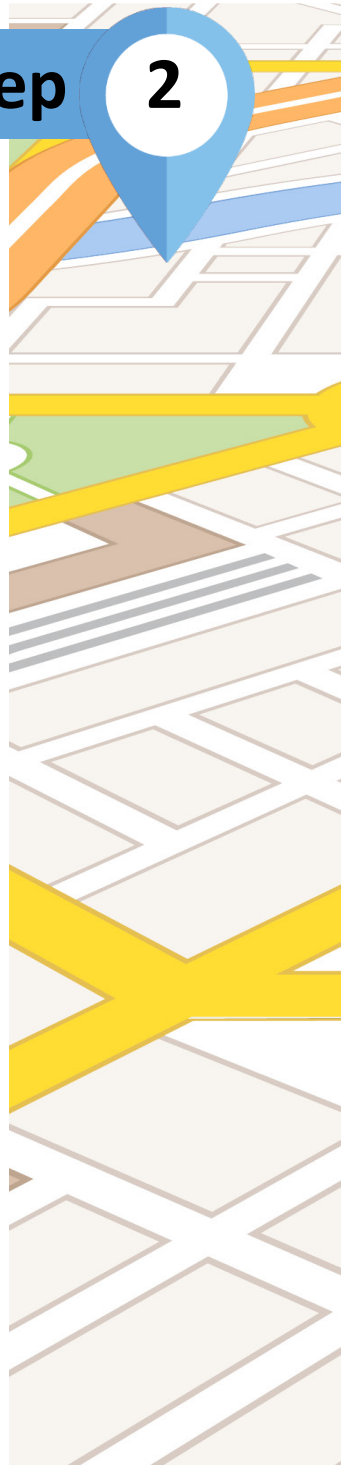
HSAG HEALTH SERVICES ADVISORY GROUP

Infection Prevention (IP) and Control—Step 1

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.	• Centers for Disease Control and Prevention (CDC)—Viral Respiratory Pathogens Toolkit for Nursing Homes • CDC—Clean Hands • HSAG—Process Measure Tracker and Trend Chart • CDPH—Adherence Monitoring IP Tools • CDC—Nursing Home (NH) Infection Control Assessment and Response (ICAR) Tool • HSAG—Quality Assurance & Performance Improvement (QAPI) Resources • CDPH—AB 1797 Immunization FAQs
☐	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.	

Determine Who Is Eligible for Vaccination—Step 2

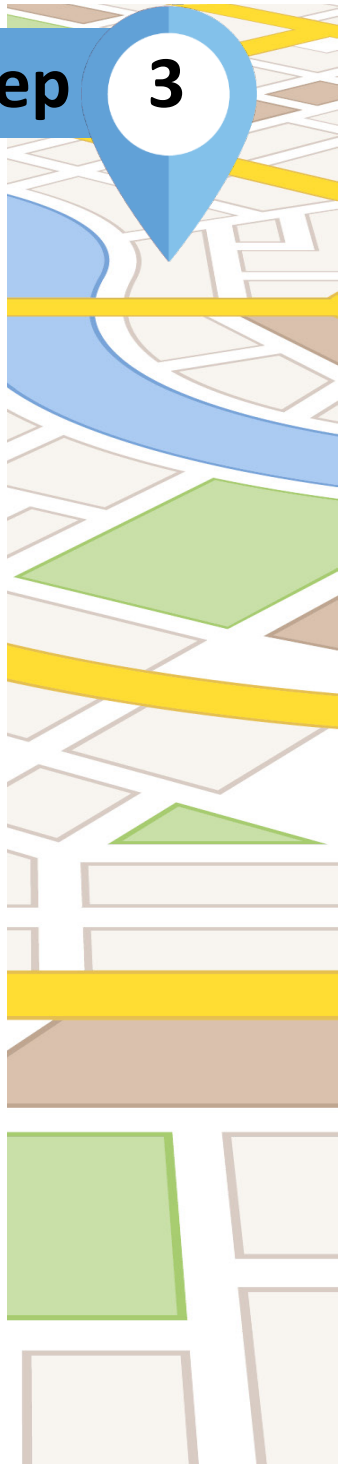


Rationale:

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.	• CDC—Respiratory Syncytial Virus (RSV) in Older Adults with Chronic Medical Conditions • CDC—Pneumococcal Vaccination Facts • CDC—Influenza Facts • California Immunization Resources – CAIR2 Portal and CAIR2 User Guide – RIDE – My Vaccine Record Infographic CA • Arizona Immunization Data Base – My IR QR Disclosure – Arizona State Immunization Information System (ASIIS) • California Department of Public Health (CDPH)—AB 1797 Immunization FAQs
☐	Develop or refine processes to monitor, track, and trend 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.	
☐	Develop process to educate staff and long-term residents annually.	

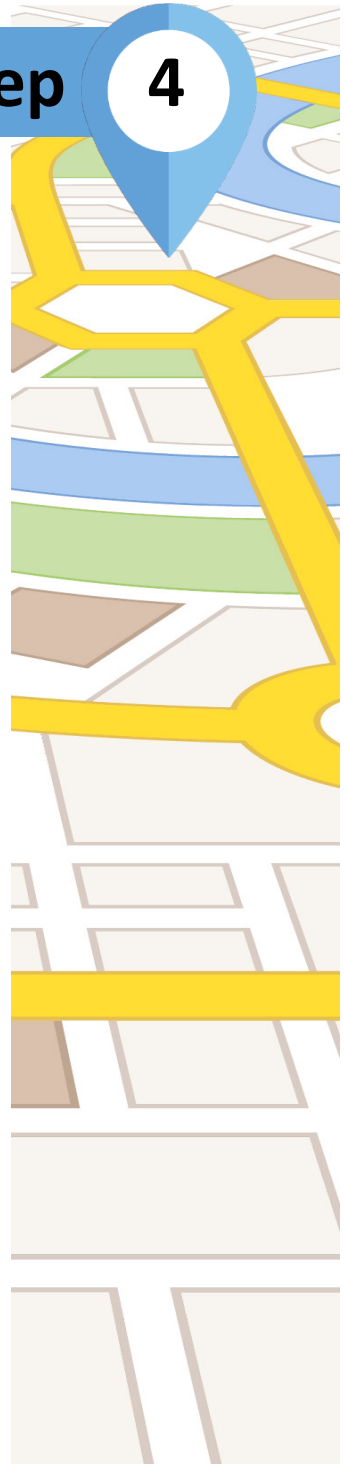
Improving Vaccination Rates Through Education—Step 3



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, misinformation, and fatigue. • Limited knowledge about current vaccines available. Incorporate motivational interviewing techniques when discussing vaccinations with staff, residents, and families. Use open-ended questions to explore vaccine concerns. – Provide education with permission and evidence-based information.	• HSAG—Motivational Interviewing Tip Sheet • HSAG—Motivational Interviewing Role Play Script • CDPH—Vaccine Guidance and Education Resources for LTCFs • CDC—Pneumonia Information • CDC—RSV Prevention
☐	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. – Setup a visual display to highlight progress towards reaching set goals that are visible to staff members and residents to celebrate success, large or small.	

Setting up a Vaccine Clinic—Step 4



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.	• CDC—immunizations for respiratory viruses' prevention
☐	• 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.	• EZIZ Vaccine Program

Creating, Monitoring, and Follow-up of an Ongoing Plan—Step 5

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.	• HSAG—QAPI Resources • HSAG—Performance Improvement Project Guide • Plan-Do-Study-Act (PDSA) Cycle Template • Stay Protected—Don't Wait Until It's Too Late to Vaccinate • Medicare—Compare Care Near You • Arizona Department of Health Services—Flu Preparedness • California Department of Public Health—Flu Preparedness • CDC—Flu & People 65 Years and Older • CDC—Pneumonia Causes, Risk Factors, Management, and Prevention • CDC—Pneumococcal Vaccination Recommendations • CDC—Preventing Respiratory Syncytial Virus (RSV) • CDC—RSV in Older Adults and Adults with Chronic Medical Conditions • CDC—National Healthcare Safety Network (NHSN) Surveillance Definitions for Specific Types of Infections • CDPH—Introduction to NHSN for Skilled Nursing Facilities
☐	Provide ongoing vaccine education.	
☐	Provide ongoing vaccine clinics and vaccination opportunities year-round.	
☐	Review of admission process to determine how vaccine education is provided and vaccine is offered.	
☐	Review on a quarterly basis which vaccines are due with the minimum data set (MDS), patient driven payment model (PDPM) and the Omnibus Budget Reconciliation Act (OBRA) process.	
☐	Review of new hire process to determine how vaccine education is provided and vaccine is offered.	
☐	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.	

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