

PDPH/LTCF Conference Call – Friday, 10/27/23

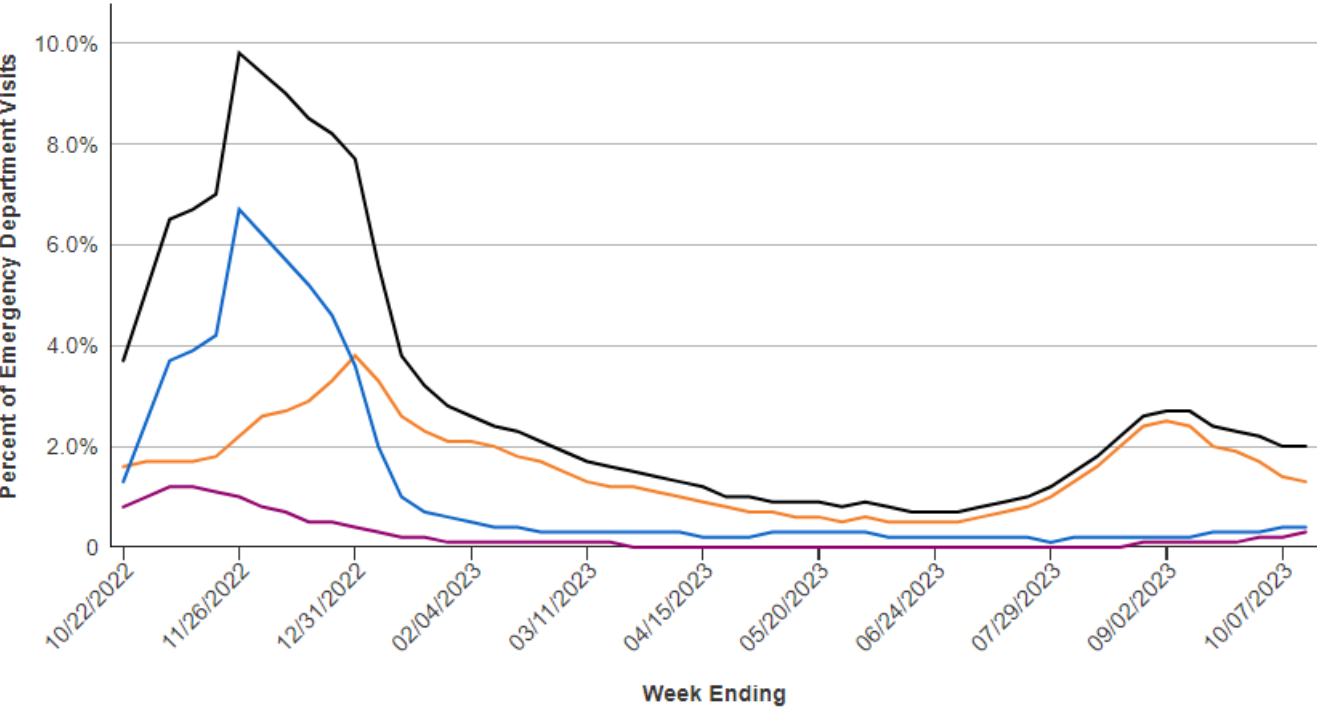
Agenda

- Respiratory Virus Surveillance Update
- New Guidance:
 - PAHAN 720: Guidance for Long-Term Care Facilities on Preparedness for the Upcoming Respiratory Season
 - PDPH Health Advisory 10/10/23: Update regarding Respiratory Syncytial Virus (RSV)
- Seasonal Influenza and Other Respiratory Viruses: Testing and Infection Prevention and Control Considerations
- SNF NHSN Reporting Updates
- Resources Reminders
 - LTC-CIP Sponsorship
 - Free APIC Membership Management
 - New Project Firstline Resources
- The Philadelphia Model: Addressing Serious Mental Illness in Long-term Care

Respiratory Virus Activity, US and Pennsylvania

State/Territory

United States



Percent of Total ED visits

End Date of Week: 10/14/23

COVID: 1.3%

Flu: 0.4%

RSV: 0.3%

Combined: 2.0%

COVID-19 Influenza RSV Combined

COVID-19, United States

COVID-19 Update for the United States

Early Indicators

Test Positivity >

% Test Positivity

9.5%

(October 8 to October 14, 2023)

Trend in % Test Positivity

-0.7% in most recent week



Aug 26, 2023

Oct 14, 2023

Emergency Department Visits >

% Diagnosed as COVID-19

1.3%

(October 8 to October 14, 2023)

Trend in % Emergency Department Visits

-11.9% in most recent week



Aug 26, 2023

Oct 14, 2023

Severity Indicators

Hospitalizations >

Hospital Admissions

16,158

(October 8 to October 14, 2023)

Trend in Hospital Admissions

-5% in most recent week



Aug 26, 2023

Oct 14, 2023

Deaths >

% of All Deaths in U.S. Due to COVID-19

2.5%

(October 8 to October 14, 2023)

Trend in % COVID-19 Deaths

+4.2% in most recent week



Aug 26, 2023

Oct 14, 2023

These early indicators represent a portion of national COVID-19 tests and emergency department visits. [Wastewater](#) information also provides early indicators of spread.

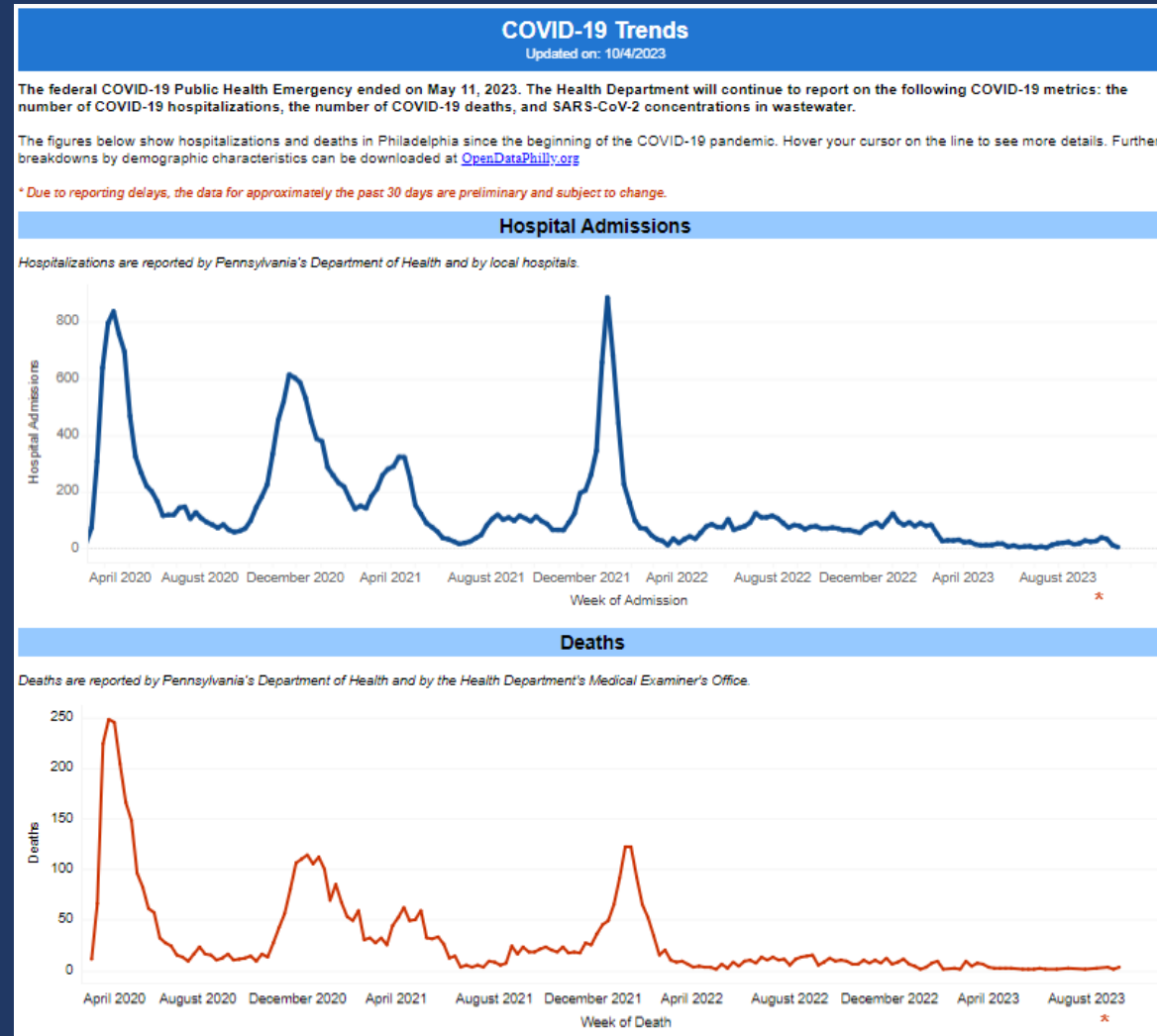
Total Hospitalizations

6,422,520

Total Deaths

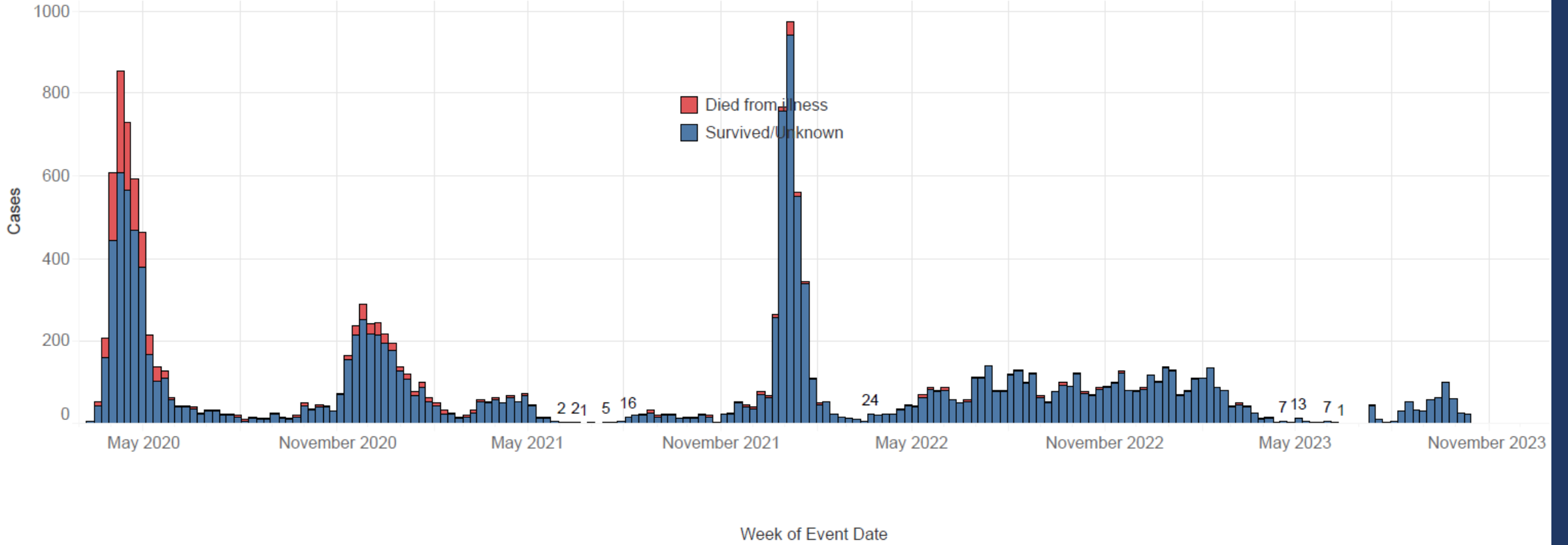
1,148,691

COVID-19, Philadelphia



Licensed Long Term Care Facility Epi. Curve

*All Cases (Confirmed & Probable) for Facility Type LTCF
*Includes Staff who could live out of jurisdiction
Updated: 10/24/2023



Guidance Updates

PA HAN 720

PDPH Health Advisory 10/10/23

PA HAN 720

**PENNSYLVANIA DEPARTMENT OF HEALTH
2023 – PAHAN –720 – 09 –29 - ADV**



Guidance for Long-Term Care Facilities on Preparedness for the Upcoming Respiratory Season

| | |
|------------------------|---|
| DATE: | 09/29/2023 |
| TO: | Health Alert Network |
| FROM: | Debra L. Bogen, M.D., FAAP, Acting Secretary of Health |
| SUBJECT: | Guidance for Long-Term Care Facilities on Preparedness for the Upcoming Respiratory Season |
| DISTRIBUTION: | Statewide |
| LOCATION: | n/a |
| STREET ADDRESS: | n/a |
| COUNTY: | n/a |
| MUNICIPALITY: | n/a |
| ZIP CODE: | n/a |

SUMMARY

- The respiratory virus season is imminent, and facilities should be prepared for concurrent activity of influenza, respiratory syncytial virus (RSV), and COVID-19.
- Long-term care facilities (LTCF) provide an optimal setting for the transmission of respiratory infections, with their residents being particularly vulnerable due to factors such as congregate living, frailty, and the presence of chronic comorbidities.
- LTCFs should:
 - Review and update their infection prevention and control plan.
 - Monitor community respiratory virus activity using the resources noted below.
 - Test residents with comprehensive respiratory virus panel tests especially when community respiratory virus activity is high.
 - Report laboratory-confirmed influenza and RSV cases and all outbreaks to Pennsylvania Department of Health (PA DOH).
 - Reporting of positive point-of-care tests for COVID-19 is mandated by some PA counties, and voluntary reporting is strongly encouraged in all other counties.
- LTCFs should be aware of all local, state, and federal report requirements.
- If you have any questions, please call PA DOH at 1-877-PA-HEALTH (1-877-724-3258) or your local health department.

PDPH Health Advisory- 10/10/23



CHERYL BETTIGOLE, MD, MPH
Health Commissioner

Philadelphia Department of Public Health Division of Disease Control

SHARA EPSTEIN, MD
Medical Director, Division of Disease Control

LANDRUS BURRESS, DrPH
Director, Division of Disease Control

Health Advisory

Update regarding Respiratory Syncytial Virus (RSV)
October 10, 2023

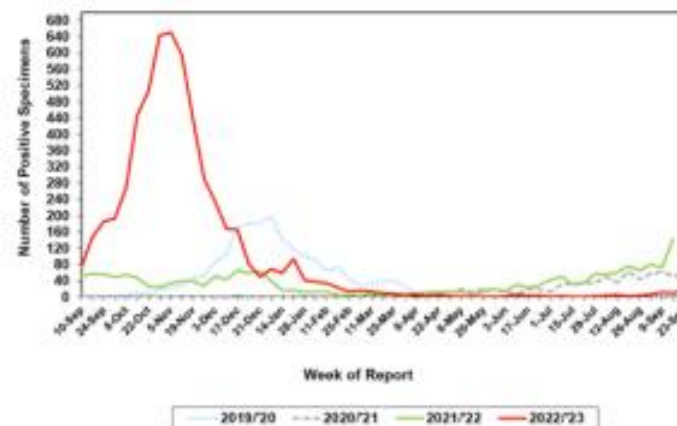
SUMMARY POINTS

- RSV infection is the leading cause of hospitalizations in infants.
- 60,000-160,000 adults 65 and older are hospitalized due to RSV infection each year.
- Vaccination of all pregnant individuals is recommended at 32-36 weeks of gestation to prevent RSV LRTI in infants. Immunization with monoclonal antibody is recommended for all infants less than 8 months of age whose parent didn't receive RSV vaccination during pregnancy.
- Infants with risk factors for severe RSV disease who are 8-19 months of age should receive monoclonal antibody.
- Vaccination for adults 60 and over is available with shared decision making.



Laboratory-Based Surveillance for RSV (Counts)
Philadelphia, 2019/2020 through 2022/2023 Seasons*

*Based on six hospital laboratories with RSV testing capabilities across respiratory virus seasons



PDPH Health Advisory- 10/10/23

RSV prevention in adults 60 and older

Two new vaccines against RSV are available for prevention of RSV LRTI in adults 60 and older. Arexvy (GSK) and Abrysvo (Pfizer) are both available as single dose IM vaccines. They each provide 80-90% protection against RSV LRTI during the year in which they are given. Protection is sustained, at a lower level the following year. There were six cases of rare neurologic events in the trials for these two vaccines. Clinicians are encouraged to discuss the vaccine with patients and used shared decision making in discussions about RSV vaccine for adults 60 and older.

SEASONAL INFLUENZA AND OTHER RESPIRATORY VIRUSES IN LTCFS: TESTING AND INFECTION PREVENTION AND CONTROL CONSIDERATIONS

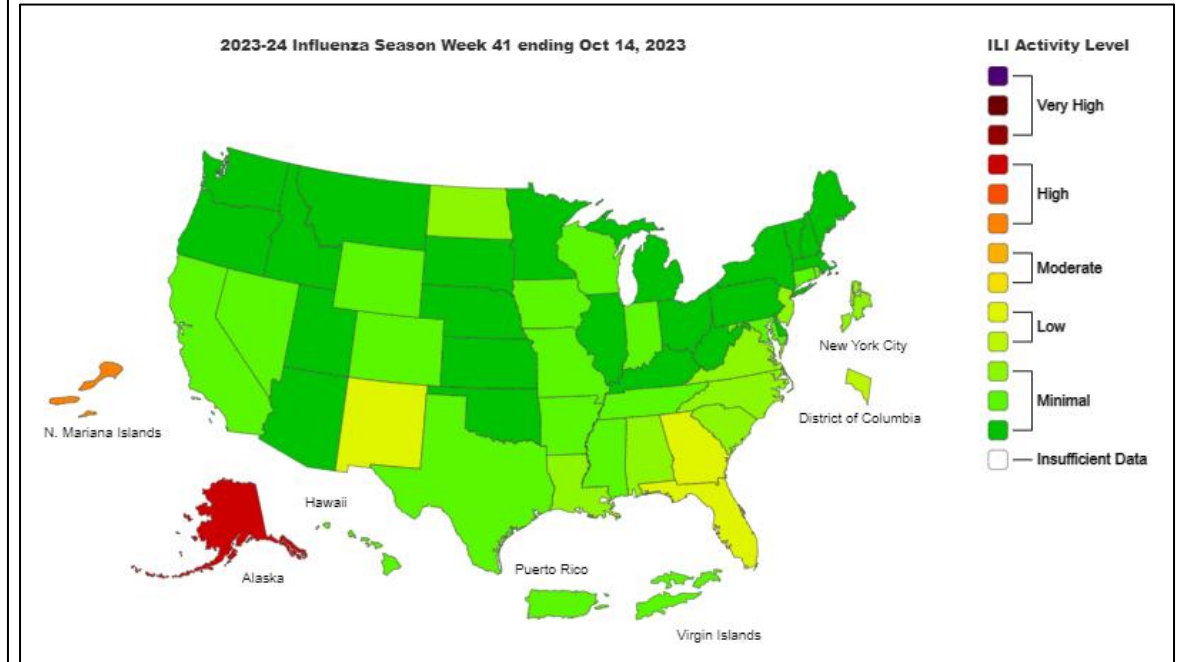
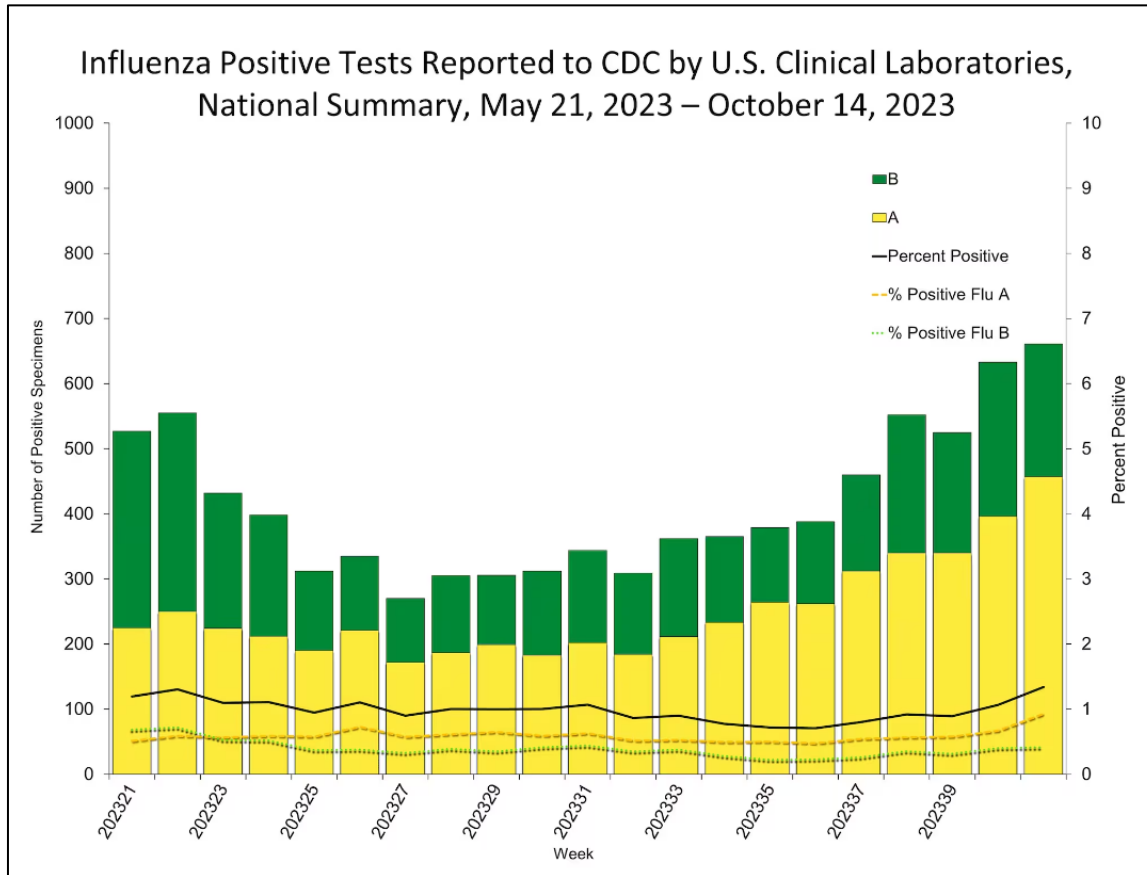
EMILY SCALZO, MPH

ACUTE COMMUNICABLE DISEASE PROGRAM, DIVISION OF DISEASE CONTROL

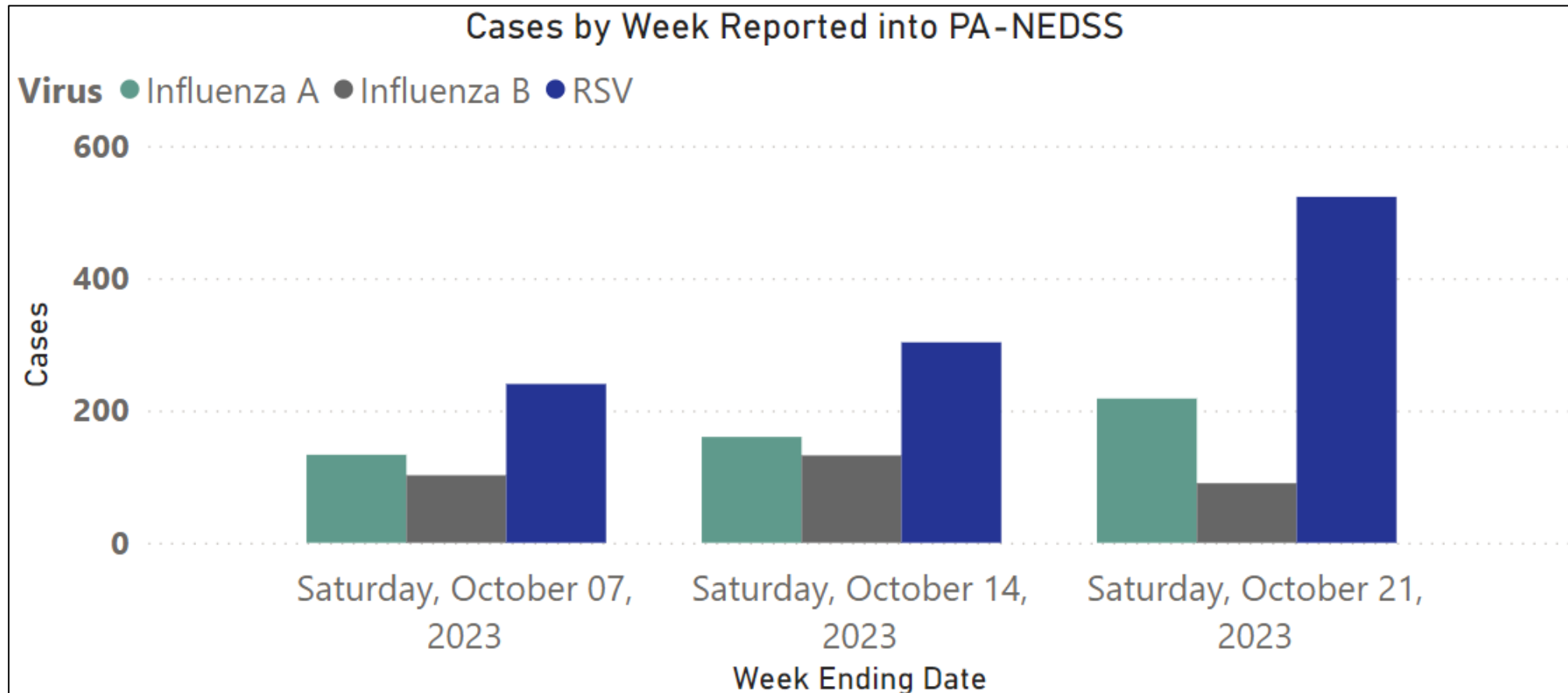


CITY OF PHILADELPHIA
DEPARTMENT OF
PUBLIC HEALTH
DIVISION OF DISEASE CONTROL

CURRENT INFLUENZA ACTIVITY IN THE US: 2023-2024 SEASON



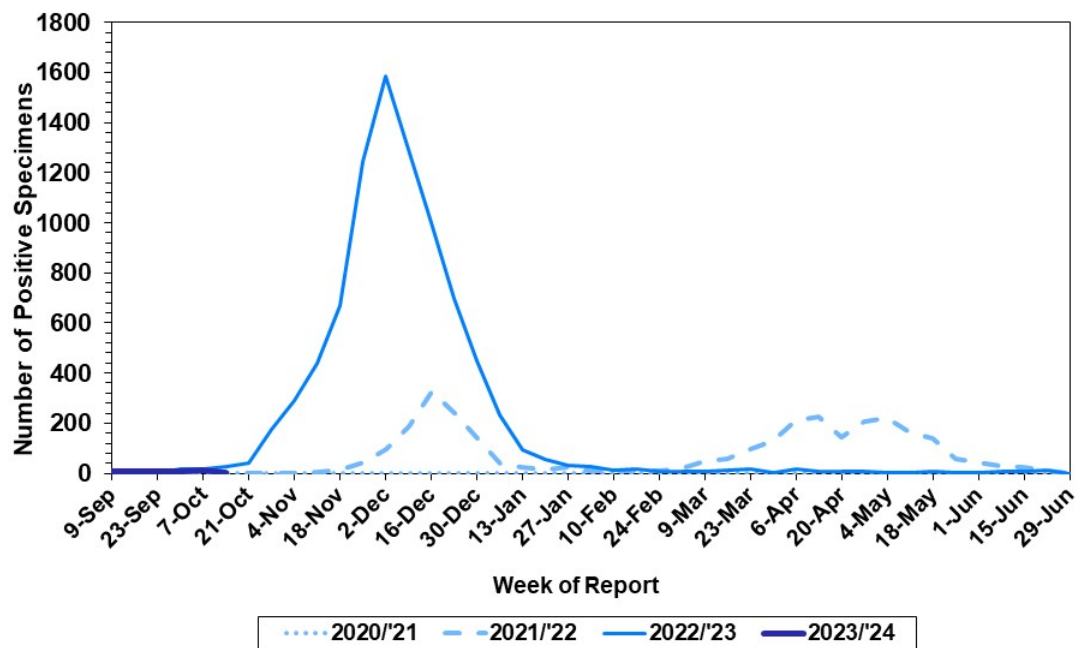
CURRENT RESPIRATORY VIRUS ACTIVITY IN PA: 2023-2024 SEASON



CURRENT INFLUENZA ACTIVITY IN PHILADELPHIA

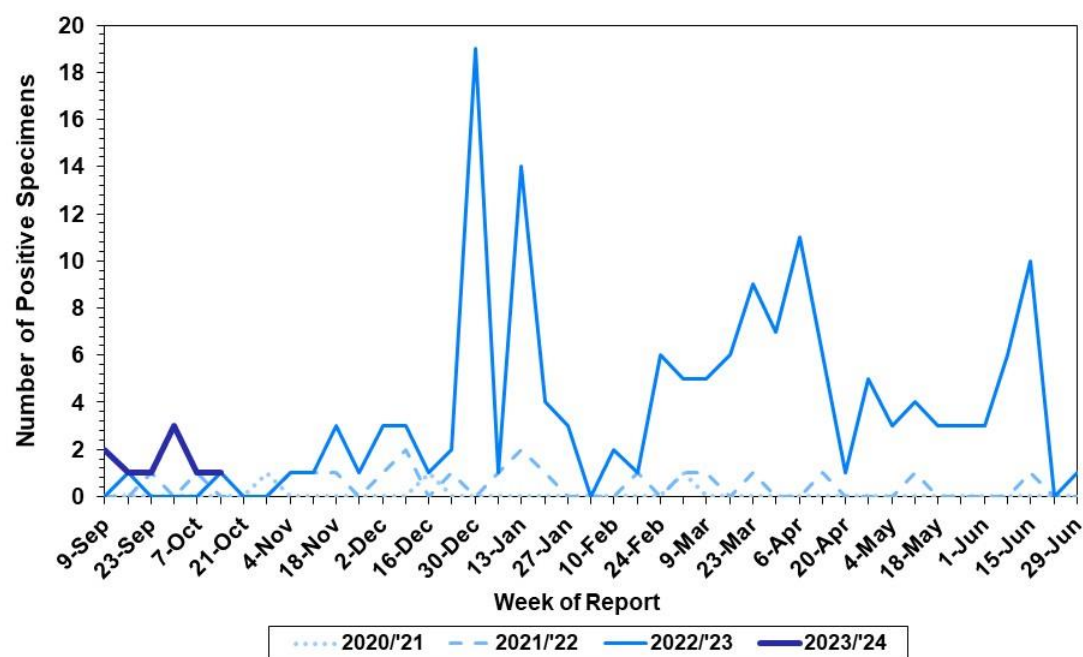
Laboratory-Based Surveillance for Influenza A Philadelphia, 2020/2021 through 2023/2024 Seasons*

*Based on select hospital laboratories participating in surveillance across respiratory virus seasons



Laboratory-Based Surveillance for Influenza B Philadelphia, 2020/2021 through 2023/2024 Seasons*

*Based on select hospital laboratories participating in surveillance across respiratory virus seasons

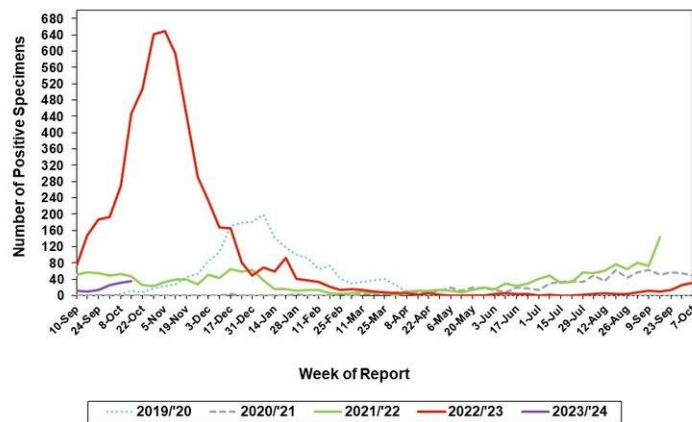


OTHER RESPIRATORY VIRUS ACTIVITY IN PHILADELPHIA



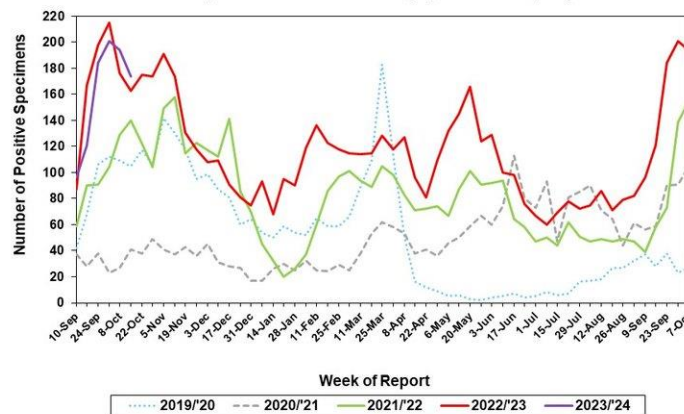
Laboratory-Based Surveillance for RSV (Counts)
Philadelphia, 2019/2020 through 2023/2024 Seasons*

*Based on six hospital laboratories with RSV testing capabilities across respiratory virus seasons



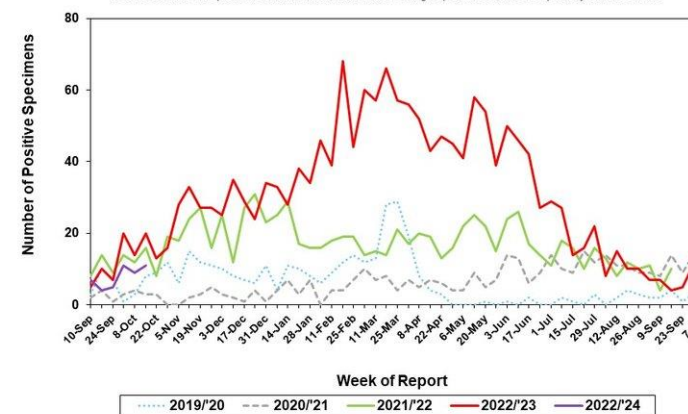
Laboratory-Based Surveillance for Rhinoviruses/Enteroviruses (Counts)
Philadelphia, 2019/2020 through 2023/2024 Seasons

*Based on three hospital laboratories with Rhinovirus testing capabilities across respiratory virus seasons



Laboratory-Based Surveillance for Respiratory Adenovirus (Counts)
Philadelphia, 2019/2020 through 2023/2024 Seasons

*Based on three hospital laboratories with Adenovirus testing capabilities across respiratory virus seasons



LONG TERM CARE FACILITY INFLUENZA OUTBREAKS

- What is considered an influenza outbreak?
 - **One** case of laboratory confirmed influenza in a LTCF
 - Suspected outbreak: Two or more residents ill with influenza-like illness (ILI) occurring within 72-hours, who are in close proximity to each other
 - Outbreak conclusion: considered 7 days after onset of last influenza case or two incubation periods after last case of respiratory illness
- LTCFs should call 215-685-6741 during business hours or report through their PDPH COVID Outbreak Response Coordinator

TESTING

- Since we are seeing co-circulation of these viruses in the community, consider testing symptomatic persons for both SARS-CoV-2, influenza, and other respiratory viruses
- For residents or staff with acute respiratory illness:
 - Order multiplex nucleic acid detection assay for influenza and SARS-CoV-2
 - Single-plex is okay if multiplex not available (might need two respiratory specimens)
 - Molecular tests for influenza have better sensitivity and are recommended over antigen tests
 - False negative results may occur with rapid antigen tests for influenza
- PDPH can assist with respiratory panel testing of NP swabs for residents who are SARS-CoV-2 and influenza negative

RESPONSE TO INFLUENZA CASES DURING THE COVID PANDEMIC

- Place symptomatic residents in Transmission-Based Precautions using all recommended PPE for care of a resident with suspected SARS-CoV-2 infection
- Test any resident with symptoms of COVID-19 or influenza for both viruses
- Placement Decisions
 - Residents confirmed to have SARS-CoV-2 infection should be placed in a single room, if available, or housed with other residents with only SARS-CoV-2 infection. If unable to move a resident, he or she could remain in the current room with measures in place to reduce transmission to roommates (e.g., optimizing ventilation).
 - Residents confirmed with influenza only should be placed in a single room, if available, or housed with other residents with only influenza. If unable to move a resident, he or she could remain in the current room with measures in place to reduce transmission to roommates (e.g., physical barriers, antiviral chemoprophylaxis).
 - For those with influenza only, use droplet and standard precautions with eye protection.
 - Residents with symptoms of acute respiratory illness who are determined to have neither SARS-CoV-2 infection nor influenza should be cared for using Standard Precautions and any additional Transmission-Based Precautions based on their suspected or confirmed diagnosis

ANTIVIRAL USE IN RESPONSE TO INFLUENZA CASES

- Antiviral Treatment for Influenza Cases
 - Antiviral treatment can reduce the severity and duration of influenza illness.
 - Treatment should be initiated within 2 days of symptom onset; however, it is still beneficial when given later in the course of progressive illness.
- Antiviral Chemoprophylaxis for Persons Exposed to Influenza
 - Antiviral prophylaxis with oral oseltamivir or baloxavir should be started as early as possible in all eligible exposed residents (who have no contraindications), and residents on outbreak-affected units, regardless of vaccination status.
 - Chemoprophylaxis should continue for at least 2 weeks, until 7 days after the onset of illness in the last known case.
 - Chemoprophylaxis should be offered to staff that are unvaccinated or have underlying medical conditions. Staff members who are initially vaccinated at the time of an outbreak, and have no underlying conditions, require chemoprophylaxis only for the 2-week period following vaccination.

OTHER MEASURES

- Promote influenza vaccination among residents and staff.
 - Fall 2023 COVID-19 vaccine and RSV vaccine should also be promoted
- Encourage good hand hygiene and covering coughs and sneezes
- Routinely clean commonly used objects and surfaces
- Consider masking during respiratory virus season
 - Mask and social distance during an influenza outbreak
- Ensure staff and visitors stay home if sick

CDC: VIRAL RESPIRATORY PATHOGENS TOOLKIT FOR NURSING HOMES

PREPARE for respiratory viruses

- Vaccinate
- Allocate resources (such as PPE, alcohol-based hand sanitizer)
- Monitor and mask
- Educate
- Ventilate
- Test and Treat

RESPOND when a resident or HCP develops sign or symptoms of a respiratory virus infection

- Apply transmission-based precautions
- Test
- Provide treatment and prophylaxis
- Investigate

CONTROL respiratory virus spread when transmission is identified

- Notify PDPH
- Implement initial control attempt
- Apply additional control measures, if needed

INFLUENZA RESOURCES

- Influenza Guidance (Patient Placement, Testing, and Clinical Management)
 - CDC Influenza Outbreak Management in LTC and Post-Acute Care Facilities:
<https://www.cdc.gov/flu/professionals/infectioncontrol/ltc-facility-guidance.htm>
 - CDC Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating:
<https://www.cdc.gov/flu/professionals/diagnosis/testing-management-considerations-nursinghomes.htm>
 - CDC COCA Call: Preparing for the Upcoming Respiratory Virus Season: Recommendations for Influenza, COVID-19, and RSV Vaccines for Older Adults:
https://emergency.cdc.gov/coca/calls/2023/callinfo_091923.asp

RESPIRATORY VIRUS SURVEILLANCE DASHBOARDS

■ Philadelphia

- Influenza: <https://hip.phila.gov/data-reports-statistics/influenza/>
- Other Respiratory Viruses: <https://hip.phila.gov/data-reports-statistics/otherrespiratoryviruses/>

■ Pennsylvania

- All Respiratory Viruses: <https://www.health.pa.gov/topics/disease/Flu/Pages/2023-24-Flu.aspx>

■ United States

- Influenza: <https://www.cdc.gov/flu/weekly/fluactivitysurv.htm>
- Other Respiratory Viruses: <https://www.cdc.gov/surveillance/nrevss/index.html>
- All Respiratory Viruses, ED Visits: <https://www.cdc.gov/respiratory-viruses/data-research/dashboard/most-impacted-emergency-department-visits.html>



Department of
Public Health

CITY OF PHILADELPHIA

SNF NHSN Reporting Updates

October 27, 2023

NHSN – COVID-19

- CDC recommended new 2023-2024 Updated COVID-19 Vaccines on 9/12/2023
- **New Definition of up to date (UTD) with COVID-19 vaccine**
 - Received a 2023-2024 Updated COVID-19 Vaccine
 - or**
 - **Received bivalent COVID-19 vaccine within the last 2 months
- New definition of UTD with COVID-19 vaccines was applied to NHSN surveillance beginning the week of **September 25, 2023**.

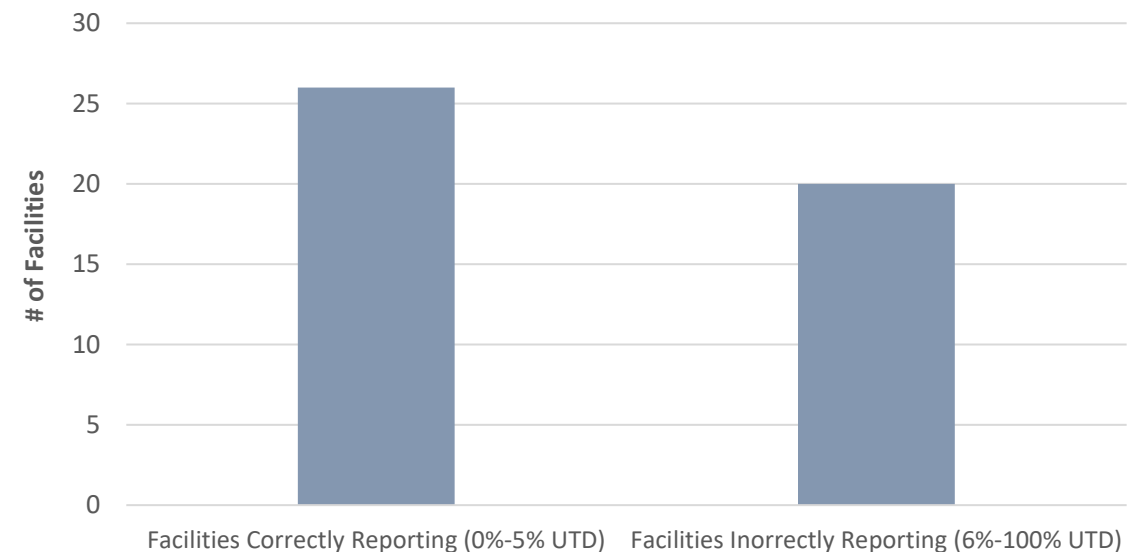
NHSN – COVID-19

- Under new definition, most will not be UTD until they receive the updated 2023-2024 COVID-19 vaccine

Data Quality Check

- Graph uses Philadelphia SNF resident vaccination data from surveillance week 9/25/23 - 10/1/23
- We estimate that almost half (20) of all Philadelphia SNFs were reporting incorrectly (more than 5% of residents are UTD).

Philadelphia SNF Resident Covid-19 Vaccination Reporting on October 1, 2023



* 5% is chosen as the cutoff point because we estimate that to be the number of residents who may be UTD due to having received the bivalent COVID-19 vaccine in the past two months

NHSN – COVID-19

- Due to new definition, most will not be UTD until they receive the updated 2023-2024 COVID-19 vaccine
 - Normal and expected
 - Facilities should report zero (0) UTD in the highlighted field until individuals receive the 2023-2024 updated COVID-19 vaccine.



October 2023

Weekly COVID-19 Vaccination Cumulative Summary for Residents of Long-Term Care Facilities (CDC 57.218, Rev 9)

1 page *required for saving

| | |
|---|---------------------|
| Facility ID#: | |
| Vaccination type: COVID-19 | |
| Week of data collection (Monday – Sunday): | Date Last Modified: |
| Cumulative Vaccination Coverage | |
| <p>Note: Facilities submit Weekly COVID-19 Vaccination Cumulative Summary data by completing the questions on this form. As of March 28th, 2022, facilities also have the option to use the Person-Level COVID-19 Vaccination Forms and select the “view reporting summary and submit” to submit these data. Using the person-level forms is recommended to ensure that individuals who are up to date with COVID-19 vaccination are categorized appropriately according to their vaccination dates.</p> | |
| 1. *Number of residents staying in this facility for at least 1 day during the week of data collection | |
| 2. *Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines. | |
| <p>Please review the current definition of up to date: Key Terms and Up to Date Vaccination</p> | |
| 3. *Cumulative number of residents in Question #1 with other conditions: | |
| 3.1. *Medical contraindication to COVID-19 vaccine | |
| 3.2. *Offered but declined COVID-19 vaccine | |
| 3.3. *Unknown/other COVID-19 vaccination status | |

NHSN Resources – COVID-19

Access to **training materials** for facilities:

- Slide set for COVID-19 Surveillance Definition Change – September 2023
[COVID-19/Respiratory Pathogens Vaccination webpage](#)
- Materials pertaining to Healthcare Personnel COVID-19 Vaccination Data Reporting
[HPS | Weekly HCP COVID-19 Vaccination | NHSN | CDC](#)

NHSN Updates – New Optional Reporting of Influenza and RSV

Optional weekly influenza and RSV vaccination reporting for LTCF Residents

- NHSN “LTCF Component” page -> “COVID-19/Respiratory Pathogens” tab -> Select “Vaccination-Residents”
- Required to report COVID-19 residents' data before entering Influenza/RSV vaccination data
- Definition of Up to Date:
 - 2023-2024 Influenza - Received an influenza vaccine any time from when it first became available since September 2023
 - RSV - Received RSV vaccination any time from when it first became available in August 2023

NHSN Updates – New Optional Reporting of Influenza and RSV

Optional influenza and RSV case reporting for LTCF Residents

- Facility can choose reporting frequency
- NHSN “LTCF Component” page -> “COVID-19/Respiratory Pathogens” tab -> Select “Pathway Data Reporting” -> Date on Calendar -> “Influenza/RSV” tab
- Updates implemented into NHSN on 10/23/23
- Resources:
 - Training Slides: [COVID-19/Respiratory Pathogens Module webpage](#)
 - Office Hours: Optional Reporting of Influenza and RSV Cases and Vaccinations for LTCF Residents
 - Nov 15, 2023, 02:00 PM Eastern Time
 - Register: https://cdc.zoomgov.com/webinar/register/WN_s8SMWxtkS8GrSGn7qiAJbA



Department of
Public Health

CITY OF PHILADELPHIA

LTC-CIP Sponsorship and APIC Membership

NEW Sponsorship Opportunities

- PDPH is offering resources to help long-term care Infection Preventionists obtain certification (LTC-CIP) through APIC and CBIC
- Eligibility:
 - Employed by a Philadelphia long-term care facility
 - Completed post-secondary education in a health-related field*

**including but not limited to medicine, nursing, laboratory technology, public health, or biology. Post-secondary includes public or private universities, colleges, community colleges etc.*



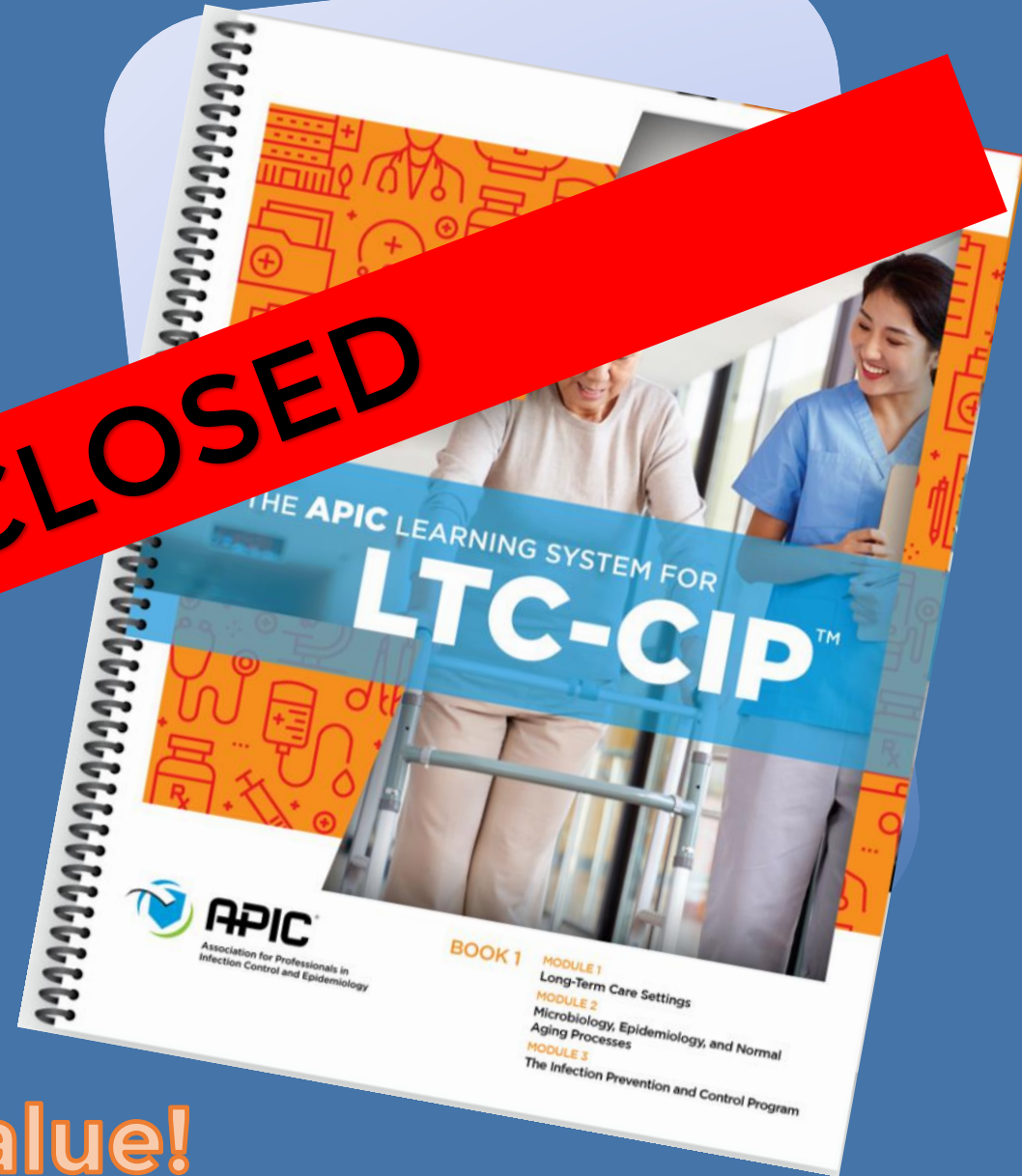
LTC-CIP Prep Course

November 13 – 15 | Virtual | 9:00 am – 6:00 pm

- ✓ Led by experienced certified instructors
- ✓ Sample test questions & progress checks
- ✓ Real-time Q&A & discussion
- ✓ Online access to the APIC Learning System for 1 year
- ✓ A practice exam concludes the course with scoring

Registration CLOSED

REGISTRATION CLOSES 10/15



Over \$1500 in value!

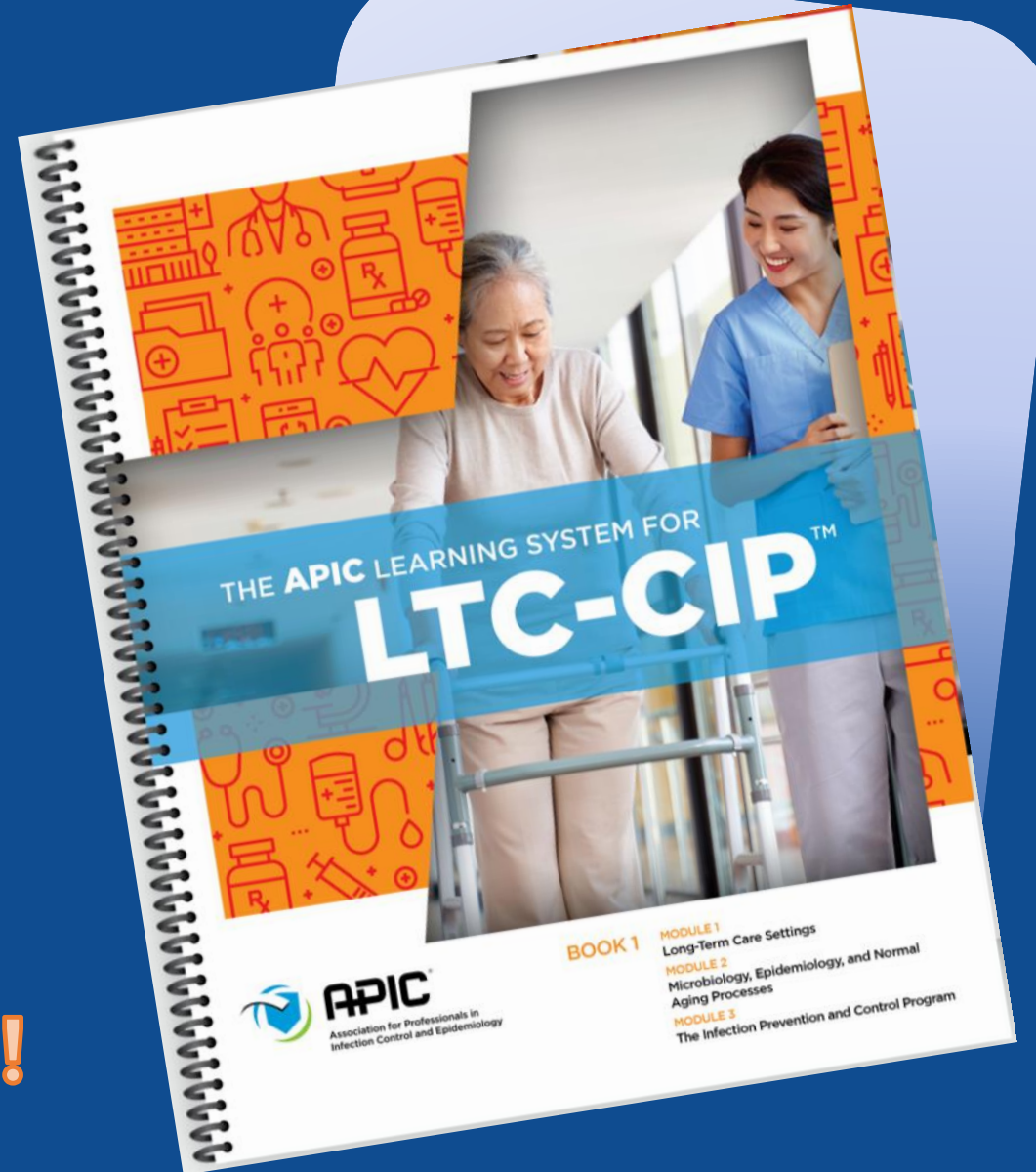


LTC-CIP Prep Course

Self - Study Option

- ✓ Online access to the APIC Learning System for 1 year
- ✓ Learning modules
- ✓ Practice Questions
- ✓ Flashcards
- ✓ Flexible & on-demand format

Over \$695 in value!





LTC-CIP Exam

PDPH Scholarship

Enhance your career with certification:

- ✓ All application & exam fees included
- ✓ The exam:
 - ✓ 150 multiple choice questions
 - ✓ 180 minutes
 - ✓ Test remotely or in-person
- ✓ Additional exams are NOT covered



Over \$400 in value!

Interested? Email Us

- Email HAI.PDPH@phila.gov
 - Include which programs you are interested in, name, credentials, employer, and proof of employment*

**Proof of employment may include a letter or email from facility leadership or human resources confirming your role as an IP*



APIC Membership

For SNF Infection Preventionists

Connecting LTCF IPs to a professional organization offers:

- Online educational resources
- Online peer community and support
- Local chapter networking opportunities and LTC Focus Group support

PDPH Organizational Membership (annual):

- One membership per facility
- Can be transferred to a new IP
- Link to sign up:

<https://app.smartsheet.com/b/form/3e8cffae22f84c2692ee614321f816f0>



Over \$200 in value!

Project Firstline Resource Highlights

- New Micro-Learn Topic Available Now!
 - Project Firstline has expanded the [Infection Control Micro-Learn](#) training series to help educate healthcare workers on what to do when they see a patient with a draining wound.
 - Access the new [Draining Wound Micro-Learn](#)

Micro-Learns

Use Project Firstline's short, adaptable micro-learn training resources to educate your team on a variety of infection control topics. The micro-learns are a series of guided discussions that connect infection control concepts to immediate, practical value, so healthcare workers can recognize infection risks and take action to stop the spread of germs. Incorporate these quick, in-person trainings into your next team meeting or huddle.



- [Infection Control Actions to Stop the Spread of Respiratory Viruses in Health Care](#)
 - Access Project Firstline's resources for infection control measures to prevent and slow the spread of respiratory infections in your facility.

Improve Antibiotic Use, Improve Health Equity



Go Purple for
USAAW!

Antibiotic
Stewardship
LTCF
Resources



SCAN ME

<http://tiny.cc/AS-Resources>

U.S. Antibiotic Awareness Week: Nov. 18 - 24, 2023



www.cdc.gov/drugresistance/usaaw

@CDC_AR
(X formerly Twitter)

#AntimicrobialResistance
#USAAW23
#WAAW



Department of
Public Health

CITY OF PHILADELPHIA

Thank you!

Next call Friday, December 1, 2023 @ 11:00 AM