



Indiana
Department
of
Health

Infection Prevention Press

September 2023

COVID-19 Resources

By **Bethany Lavender, IP Epidemiologist**

The Indiana Department of Health has resources to help a long-term care facility with a COVID-19 outbreak .

- The [Infection Prevention COVID-19 Toolkit](#) provides optional resources to utilize during an outbreak
- Dr. Shireesha Vuppalanchi presented a COVID-19 guidelines refresher on the Aug. 24 Indiana Health Care Association (IHCA) Regulatory Round Up, which can be reviewed [here](#) (COVID-19 information begins on slide 30).
- Consider attending the [Weekly Regulatory Round-Up presented by IHCA](#). This is a great place to hear about important updates concerning LTC facilities. Previous handouts and recordings are available for review in the link above.
- If your facility is not currently registered to receive the Long-term Care Newsletter from IDOH's Long-term Care Division you can [sign up here](#). Back issues are available on the website.
- The Centers for Disease Control and Prevention (CDC) recommends everyone 6 months and older get an updated [COVID-19 vaccine](#) to protect against the potentially serious outcomes of COVID-19 illness this fall and winter. LTC facilities should obtain the updated COVID-19 vaccine through their pharmacy partnerships and offer it to all eligible residents.
- Facilities registered to [report to NHSN](#) should continue to report as required. More information about current NHSN requirements are available on the next page.
- Facilities should also report COVID-19 outbreaks to the state via [Gateway](#) per the current [outbreak reporting threshold definition](#).

If you have any questions please do not hesitate to reach out to your district infection preventionist. Our current team map and contact information can be found on our [IDOH Infection Prevention webpage](#).

If you have suggestions about what you would like to see in future editions of the IPP newsletter, email Bethany Lavender at BLavender@health.in.gov.

Reporting update

COVID-19 Reporting Changes Post-Federal Emergency

By Kiersten Hawkins, Senior NHSN Epidemiologist

Since the end of the federal emergency declaration, the National Healthcare Safety Network (NHSN) has implemented significant updates to enhance data collection and reporting. This article aims to highlight the key changes and implications for your facility.

1. Ongoing COVID-19 reporting requirements:

Despite the conclusion of the federal emergency, in collaboration with the federal government, the Centers for Medicare and Medicaid Services (CMS) continue to require COVID-19 reporting from healthcare facilities under the CMS' Conditions of Participation. This ongoing reporting ensures that critical data is collected to monitor the impact of COVID-19, identify potential outbreaks, and implement appropriate infection prevention and control measures. It is essential for healthcare facilities to maintain compliance with these reporting requirements to contribute to the broader surveillance efforts.

2. Refined reporting categories:

NHSN has refined the reporting fields for COVID-19 data to align with the changing landscape of the pandemic. Facilities are required to report data for residents, staff, and individuals under their care, focusing on key metrics such as cases, vaccination status, hospitalizations, supplies, and deaths. These refined categories enable a more targeted approach to surveillance and provide a clearer understanding of the virus's impact on different populations. Please note that the changes are based on the type of facility.

3. Updated reporting frequency:

In recognition of the changing dynamics of the pandemic, the reporting frequency for COVID-19-related data has been adjusted. This change allows for better tracking of trends, identification of potential hotspots, and prompt implementation of necessary interventions, while reducing the burden of reporting.

4. Streamlined data entry:

To facilitate efficient reporting, NHSN has made efforts to streamline data entry processes. Facilities can leverage electronic health record (EHR) data to populate certain fields, reducing the burden of manual data entry. This streamlining not only saves time but also minimizes errors, ensuring accurate and reliable reporting.

5. Updated Reporting Guidance:

NHSN has provided updated guidance documents to assist facilities in navigating the reporting changes effectively. These resources offer step-by-step instructions, clarifications on data elements, and answers to frequently asked questions. It is crucial for healthcare facilities to review and adhere to the latest guidance to ensure compliance and accurate reporting.

By embracing these reporting changes, healthcare facilities can continue to contribute to a robust surveillance system, enabling public health authorities to monitor the impact of COVID-19 and implement targeted interventions. Accurate and timely reporting remains a critical component of safeguarding the health and well-being of residents, staff, and the broader community.

We encourage all healthcare facilities to stay informed about reporting requirements and leverage the resources provided by NHSN to ensure compliance. Together, we can strengthen our collective response to the ongoing pandemic and protect those under our care.

For more information and detailed guidance, please visit the Centers for Disease Control and Prevention's NHSN [website](#) or reach out to the NHSN team at the Indiana Department of Health, using the contact information below.

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ATP Machines

Adenosine Triphosphate (ATP) Luminometers Available for LTC Facility Use

Article from the IDOH Long-term Care Newsletter

Please complete a short survey if you would like to receive ATP equipment for use in your long-term care facility. [Please complete the survey by Oct. 15](#) to ensure you are on the distribution list. Healthcare associated infections (HAIs) are a major public health issue. Proper environmental cleaning and disinfection in healthcare settings is crucial for reducing the risk of HAIs. Adenosine triphosphate (ATP) is the energy molecule found in all living cells and can be measured as a useful marker for bioburden. Evaluating cleaning practices with an ATP luminometer can help identify gaps of disinfection processes. Indiana Department of Health (IDOH) is purchasing ATP luminometers and swabs (together called ATP equipment) for long-term care facilities using funds provided by the Centers for Disease Control and Prevention. The long-term care (LTC) facilities that would like to receive the ATP equipment must fill out the survey by Oct. 15.

The ATP equipment will be delivered directly to the facility. Please gather the following information to answer the survey:

- Full name of the facility
- Exact shipping address
- Contact person's name, phone number, and email address
- Number of beds in the facility
- Number of ATP equipment requested
 - It is recommended to request for one unit if the facility has fewer than 100 skilled nursing beds and two units if more than 100 skilled nursing beds. Facilities with high infection control needs such as MDRO unit/ vent unit/ high MDRO infections may request for two units even if they have fewer than 100 beds.
- Each facility must complete the survey only once. If more than one survey is received, only the latest submission will be used in final planning.

Please note the following:

- Follow instructions provided by the manufacturer for use of ATP equipment
 - Use the swabs to evaluate the cleanliness after environmental cleaning.
 - Store the swabs at appropriate temperatures per the manufacturer guidance.
 - Once the packet of swabs is open, finish using the swabs within the time frames recommended by the manufacturer.
- Further education on how and where to use the ATP equipment will be provided at a later date by the manufacturer and/or IDOH's HAI-AR (Healthcare-Associated Infections. Antibiotic Resistance) team as needed.

Please email questions to IDOH Medical Director Dr. Shireesha Vuppalanchi at svuppalanchi@health.in.gov.

Vial Safety Do's and Don'ts

Safety Is Vital, Know How to Handle Your Vial

By Sara Reese, District 7 IP

Safe injection practices are one of the many important components of infection prevention and control programs. Medications and vaccines are manufactured in single-dose as well as multidose vials. Single-dose vials are meant for one person and for a single dose. Multidose vials contain more than one dose and can be used for more than one person.

Multidose vials are more susceptible to contamination than single-dose vials. This is because the multidose vial is accessed multiple times and is often used by multiple patients. Each time the vial is accessed, the risk of contamination increases. It is crucial that multidose vials be handled with specific practices to prevent contamination of the vial and to protect those receiving the injection from harm.

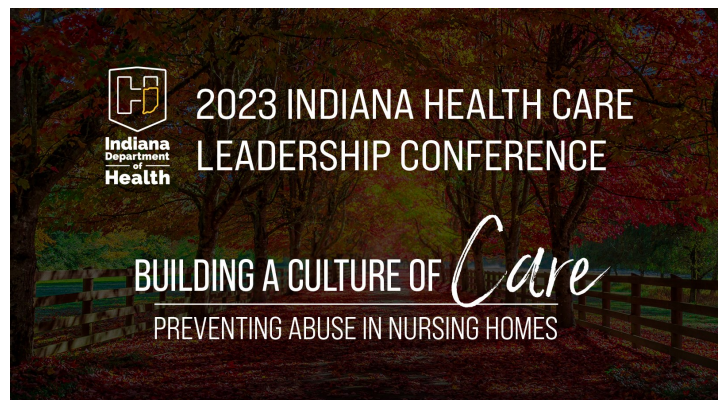
Vaccines are often manufactured in multidose vials. With the fall vaccination season fast approaching, below are some reminders of safe practices for handling multidose vials:

DO	DON'T
<ul style="list-style-type: none">• Prepare injections in a designated clean area• Verify if the vial is labeled for single multidose use• Dedicate multidose vials to a single patient when possible• Perform hand hygiene before touching the vial.• Check the appearance of the contents for unusual color, cloudiness, or other indications of contamination• Disinfect the vial stopper each time before accessing the vial• Write the date and time the vial was first accessed on the label• Use a brand-new needle and syringe for every dose• Follow manufacturer's instructions for storage	<ul style="list-style-type: none">• Prepare injections in patient care areas• Use single-dose vials for more than one dose or patient• Combine partial doses from multiple vials to make one dose• Use expired vials• Use the same needle to fill multiple syringes• Access the vial with a syringe before the disinfectant has dried on the vial stopper• Use vials that have been improperly stored

Register for the 2023 Indiana Health Care Leadership Conference!

The 2023 Indiana Health Care Leadership Conference is for long-term care providers. The conference will provide an opportunity for leadership at long-term care facilities to gather and obtain tools and resources needed to assist in caring for residents.

Attendees will receive up-to-date information to help improve residents' quality of life and quality of care through education and implementation of current evidence-based practices. The conference takes place at 8:30 a.m. Oct. 17, at the Biltwell Event Center. You can [view the agenda and register here.](#)



Tuberculosis

Frequently Asked Questions: Tuberculosis (TB)

(Note: This article was previously published. Links have been updated)

By [Kathy Chapuran, TB Health Educator](#)

What do you do when an individual has a positive tuberculin skin test (TST) or interferon gamma release assay (IGRA) result?

This means the person's body was infected with TB bacteria. Additional tests are needed to determine if the person has latent TB infection (LTBI) or TB disease. An individual with a positive screening test must be referred to a provider to have a chest x-ray and physical exam performed.

Additionally, you should educate the patient about LTBI and TB disease. [The Centers for Disease Control and Prevention's patient education series](#) is available in multiple languages.

Individuals with a positive screening test and no clinical or radiographic evidence of TB disease have LTBI. LTBI treatment should be discussed with the individual. Treatment is provided free to any patient in Indiana through their local health department. In addition, submit a LTBI report to the local health department.

If the chest X-ray is abnormal or if the patient has TB symptoms, continue the work-up. If TB disease is suspected, report the patient to the applicable local health department.

Additional information about reporting LTBI or TB disease can be found on the [IDOH tuberculosis webpage](#).

What options are available for TST training in Indiana?

The Indiana Department of Health offers a free online course on the [In-Train](#) platform that is a prerequisite for some TST training programs. [Here are the instructions for creating an In-Train account and taking the course](#).

After completing the online course, generally an in-person practicum is scheduled with a proctor to review key course content and practice TSTs. Check with your facility to learn if this process is in place and to find recommended instructors. One option an organization may consider is the American Lung Association, which has instructors throughout the state. Please see upcoming sessions [on their website](#) or reach out to TB-IN@Lung.org to schedule a session.

What are the Indiana long-term care rules for resident and staff screening?

Tuberculosis assessment and testing of long-term care residents

Admission

- A TB screening test must be completed within three months prior to admission or upon admission unless there is documentation of a previous positive TB test. Testing can be by a tuberculin skin test (TST) or an interferon-gamma release assay (IGRA) blood test, and the test used should be in accordance with updated [national guidance](#) based on the person's risk factors. Please see details of this change, which took effect in August 2021, [here](#).
- Routine or baseline chest X-rays are not required or recommended prior to or at the time of admission

Ongoing

- Any asymptomatic resident with a new positive TST or IGRA must have a medical evaluation and chest X-ray within one week.
- Residents with TB disease or latent TB infection need to be screened for HIV infection, and medical management may be altered in the presence of HIV infection.
- Periodic chest X-rays of persons with a history of positive TST or IGRA are not advised and are not necessary unless the individual develops signs and symptoms of TB disease.

Continued next page

Indiana long-term care rules - staff TB screening

Program advisory letters were issued by IDOH's Long-Term Care division in late 2019, updating expectations for Indiana licensed residential care and comprehensive care nursing facilities for preventing the transmission of *M. tuberculosis*. The updated guidelines indicate facilities may adopt a nationally recognized standard for TB screening for healthcare personnel and implement and follow the standard as written. The [nationally recognized program for employees](#) is located on the Centers for Disease Control and Prevention's website.

Several key points from the updated recommendations are as follows:

- A requirement for baseline testing of all health care personnel
- Encouragement of treatment for all health care personnel with untreated latent TB infection
- Annual TB screening no longer routinely recommended for most health care personnel unless occupational risk or ongoing exposure
 - Requirement for annual TB education for all health care personnel

Additional helpful TB links:

[TB Team Map & Contact Information](#)

[Division of Long-Term Care TB Prevention Program Advisory Letters](#)

[TB & Long-term Care Webinar from March 2022](#)

Can You Guess This Germ?

Name that germ!

For some people, this virus causes a short-term illness, but for more than half of people who become infected it becomes a long-term, chronic infection. People with this chronic disease can often have no symptoms and don't feel sick. When symptoms appear, they often are a sign of advanced liver disease. There is no vaccine for this virus.

Symptoms: Many people with this virus do not have symptoms and do not know they are infected. When symptoms do appear they are yellow skin or eyes, not wanting to eat, upset stomach, throwing up, stomach pain, fever, dark urine, light-colored stool, joint pain, and feeling tired.

Risk Factors: Most people become infected with this virus by sharing needles, syringes, or any other equipment used to prepare and inject drugs. Although uncommon, people can become infected when healthcare professionals do not follow the proper steps needed to prevent the spread of bloodborne infections. Other ways to contract the virus are getting tattoos or piercings from an unlicensed facility, during birth from their mother, sex with an infected individual, and using items with an infected person's blood on it such as glucometers, fingernail clippers, and razors.

Transmission: Avoid reusing needles and use standard precautions when coming in contact with bodily fluids such as blood.

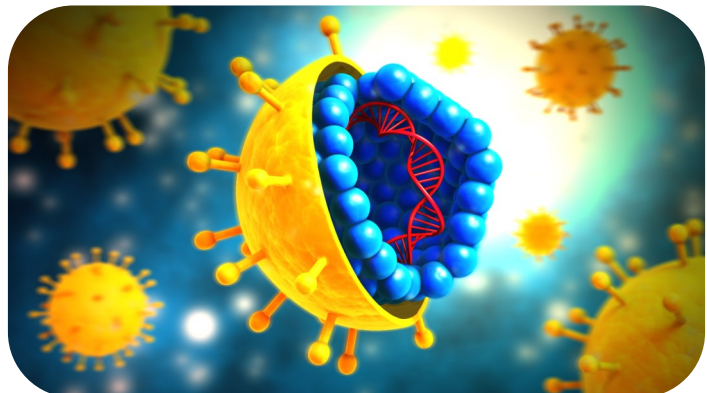


Image source: CDC

Answer: hepatitis C virus (HCV)

IP Education

What YOU Need to Know about Infection Prevention is a free, online five-module course addressing various aspects of infection prevention and control. The course was made possible by a collaboration between the [Indiana Department of Health](#) (IDOH), the Centers for Disease Control and Prevention's [Project Firstline](#), and the [University of Indianapolis Center for Aging & Community](#).

The five modules are:

- How Does Science Work?
- How Do I Know What Guidelines to Listen To?
- Using Clinical Guidelines Beyond the Clinic
- Recognize Infection Risks in Healthcare
- *Candida auris*: Stopping the Spread

The modules were developed after a learning needs assessment to obtain input from Indiana stakeholders about their wishes for further education in infection prevention. The goal of the learning needs assessment was to engage frontline professionals across the state and hear their preferences on needed training topics, preferences for learning and delivery format, and what kind of post-training support would be beneficial. CAC conducted the learning needs assessment in two parts. An electronic survey was distributed by IDOH to multiple distribution lists and partner organizations for frontline professionals to complete. CAC also hosted four virtual town halls and invited frontline professionals to join.

Participants will learn about the scientific method, its steps and why scientific knowledge evolves. In another module, trusted and reliable sources of infection prevention information for healthcare workers are identified. Participants will learn how clinical guidelines can help them stay healthy outside of the clinic and how to recognize an infection risk and take actions to mitigate that risk. And in another module, the risks presented by the organism *Candida auris* are explained and infection control actions to prevent its spread are outlined.

Each module includes a video, learning activity, quiz and a downloadable handout. Participants who complete the five modules and pass a final exam will be awarded a Certificate of Completion. To register for the course, visit <https://store.uindy.edu/> and search for "What YOU Need to Know About Infection Prevention."

September is Sepsis Awareness Month

By Mary Enlow, District 10 IP with CDC Information

What is sepsis?

Sepsis is the body's extreme response to an infection. It is a life-threatening medical emergency. Sepsis happens when an infection you already have triggers a chain reaction throughout your body. Most cases of sepsis start before a patient goes to the hospital. Infections that lead to sepsis most often start in the lung, urinary tract, skin, or gastrointestinal tract. Without timely treatment, sepsis can rapidly lead to tissue damage, organ failure, and death.

How can I get ahead of sepsis?

1. **Prevent** infections
2. **Practice** good hygiene
3. **Know** the signs and symptoms of sepsis
4. **Act** fast

[CLICK HERE](#) for the CDC's 2023 sepsis toolkit

**PREVENT INFECTIONS THAT
CAN LEAD TO SEPSIS.**



**GET AHEAD
OF SEPSIS**

KNOW THE RISKS. SPOT THE SIGNS. ACT FAST.



Infection Prevention Week

International Infection Prevention Week (IIPW): Celebrate the FUNdamentals of Infection Prevention

Article from APIC

October 15-21 | "Celebrate the Fundamentals of Infection Prevention"

International Infection Prevention Week (IIPW) is an annual observance to recognize the importance of infection prevention in improving healthcare and saving lives.

Make the Most Out of YOUR IIPW

Ensure that APIC's message reaches the masses by sharing valuable resources through spreading the word in eNewsletters and social media. Check out our [promotional toolkit](#) for all the resources you need to participate! [Download web logos and graphics.](#)

Resources for IIPW and Beyond

Explore all of our [infection prevention infographics](#) and [infection prevention updates](#) from this year and past years.

CELEBRATE the
FUNDAMENTALS of



Project Firstline Training

Article from CDC's Project Firstline

CDC Project Firstline continues to build on our infection control Micro-Learn Training series with the release of our newest topic on cough and congestion. Just in time for the upcoming respiratory virus season, healthcare leaders and training facilitators can incorporate the new [Cough and Congestion Micro-Learn](#) into their team meetings or huddles. This micro-learn topic reinforces common infection risks associated with cough and congestion, so healthcare workers can take practical steps to stop the spread of germs and protect patients and themselves from viral respiratory infections, like flu, RSV, and COVID-19.

As a reminder, each micro-learn package includes a user guide, discussion guide, and ready-to-use job aid, making it easy for healthcare leaders to fit infection control training into their busy schedules.

[Download](#) and share available trainings on what to do when you see blood, rash, and cough and congestion from [Project Firstline](#). Stay tuned for new topics coming soon!



The Power To Stop Infections. Together.



Links and References

If you are viewing this newsletter online, you can open the [links](#) throughout by clicking on them. If you are viewing in printed form the full URLs are below:

COVID-19 Resources for LTC Facilities

1. Infection Prevention COVID-19 Toolkit: <https://www.in.gov/health/idepd/files/IDEPD-COVID-19-IP-Toolkit-9.1.23.pdf2>.
2. COVID-19 Guidelines PowerPoint: <https://www.ihca.org/wp-content/uploads/2023/08/8-24-23-handout-UPDATED.pdf>
3. IHCA's Weekly Regulatory Round-up: <https://www.ihca.org/regulatory-roundup/>
4. Long-term Care newsletter sign-up: <https://www.in.gov/health/ltc/contact/newsletters/>
5. COVID-19 vaccines: <https://www.cdc.gov/media/releases/2023/p0912-COVID-19-Vaccine.html>
6. LTCF NHSN Reporting: <https://www.cdc.gov/nhsn/ltc/covid19/index.html>
7. IDOH's Gateway: <https://gateway.isdh.in.gov/Gateway/SignIn.aspx>
8. Outbreak Reporting Threshold/Reporting Guidelines: <https://www.in.gov/health/ltc/files/Revised-Reporting-Chart-9-9-23-Updated-2023-08-24-23-handout-UPDATED.pdf>
9. Revised-LTC-COVID-19-Reporting-Guidance-Chart-7-12-23.pdf
10. Infection Prevention Webpage: [infections-and-antimicrobial-resistance-epidemiology/infection-prevention/](https://www.cdc.gov/infection-prevention/)

Important COVID-19 Reporting Changes in NHSN Post-Federal Emergency: Ensuring Continued Surveillance and Safety Measures:

1. CDC's NHSN Website: <https://www.cdc.gov/nhsn/covid19/index.html>

Adenosine Triphosphate (ATP) Luminometers Available for LTC Facility Use

REDCap Survey to receive an ATP Machine: <https://redcap.isdh.in.gov/surveys/?s=49TCNRK7JA48WHTM>

Safety is Vital, Learn How to Handle Your Vial

Reference- CDC Multi-dose vial information: https://blogs.cdc.gov/safehealthcare/multi-dose-vial-safety-reminders/?ACSTrackingID=USCDC_493-DM110662&ACSTrackingLabel=Check%20out%20the%20latest%20Safe%20Healthcare%20Blog%20post%20on%20Multi-Dose%20Vial%20Safety%20from%20CDC%E2%80%99S%20Project%20Firstline&deliveryName=USCDC_493-DM110662

Register for the 2023 Indiana Health Care Leadership Conference:

1. Conference webpage: <https://host.regform.com/the-indiana-healthcare-leadership-conference/>

Frequently asked questions: tuberculosis (TB)

1. CDC patient education series: https://www.cdc.gov/tb/education/patient_edmaterials.htm
2. IDOH tuberculosis webpage: https://www.in.gov/health/idepd/tuberculosis/information-for-health-professionals/#Reporting_Forms
3. In-Train platform: <https://in.train.org>
4. Instructions for creating an In-train account: <https://www.in.gov/health/idepd/tuberculosis/training-and-education/tb-skin-test-trainingvalidation/>
5. American Lung Association: <https://www.lung.org/local-content/in/tb-education>
6. Tuberculosis Assessment and Testing of LTC Residents: <https://www.in.gov/health/cshcr/files/IDOH-LTC-Resident-TB-Assessment-and-Testing-Advisory-Letter.pdf>
7. National guidance: <https://www.cdc.gov/tb/publications/guidelines/pdf/ciw778.pdf>
8. August 2021 updates: <https://www.in.gov/health/files/LTC-Newsletter-2021-39.pdf>
9. CDC's nationally recognized program for employees: <https://www.cdc.gov/tb/topic/testing/healthcareworkers.htm>
10. TB team contacts: <https://www.in.gov/health/idepd/files/tb/TB-Regional-Map.pdf>
11. IDOH LTC Prevention Program Advisory Letters: <https://www.in.gov/health/cshcr/health-care-facility-information-center/>
12. TB & LTC Webinar: <https://www.youtube.com/watch?v=WWP7404cnd0>

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Can You Guess This Germ?

1. Reference: <https://www.cdc.gov/hepatitis/hcv/index.htm#:~:text=Hepatitis%20C%20is%20a%20liver,to%20prepare%20and%20inject%20drugs.>
2. Photo: [https://www.cdc.gov/nchhstp/newsroom/images/2016/HCV-virus-highres.png?_ =83632](https://www.cdc.gov/nchhstp/newsroom/images/2016/HCV-virus-highres.png?_=83632)

What You Need to Know About Infection Prevention

1. IDOH- <https://www.in.gov/health/>
2. Project Firstline- <https://www.cdc.gov/infectioncontrol/projectfirstline/>
3. University of Indianapolis Center for Aging & Community- <https://uindy.edu/cac>
4. Register for the Course- <https://store.uindy.edu/>

September is Sepsis Awareness Month

1. CDC's Sepsis Toolkits: <https://www.cdc.gov/sepsis/index.html>

International Infection Prevention Week: Celebrate the FUNdamentals of Infection Prevention

1. APIC's IIPW Toolkits: <https://t.e2ma.net/click/8txmtj/g0f398/kvavtqb>
2. IIPW logos and graphics: <https://t.e2ma.net/click/8txmtj/g0f398/0nbvtqb>
3. IP infographics: <https://t.e2ma.net/click/8txmtj/g0f398/w8cvtqb>
4. Infection prevention updates r/t IIPW: <https://infectionpreventionandyou.org/iipw/>

CDC Project Firstline Micro-Learn: Respiratory Infection Prevention and Control Training

1. Cough & Congestion Micro-Learns: https://www.cdc.gov/infectioncontrol/pdf/projectfirstline/PFL-CoughandCongestion-508.pdf?ACSTrackingID=USCDC_2104-DM112333&ACSTrackingLabel=NEW%20Respiratory%20Infection%20Prevention%20and%20Control%20Training%20Available!&deliveryName=USCDC_2104-DM112333
2. Download available trainings: https://www.cdc.gov/infectioncontrol/projectfirstline/healthcare/training.html?ACSTrackingID=USCDC_2104-DM112333&ACSTrackingLabel=NEW%20Respiratory%20Infection%20Prevention%20and%20Control%20Training%20Available!&deliveryName=USCDC_2104-DM112333#anchor_46297
3. Project Firstline: https://www.cdc.gov/infectioncontrol/projectfirstline/?ACSTrackingID=USCDC_2104-DM112333&ACSTrackingLabel=NEW%20Respiratory%20Infection%20Prevention%20and%20Control%20Training%20Available!&deliveryName=USCDC_2104-DM112333

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