



Missed the [Healing and Improving Ourselves and Our Places of Work as We Recover from COVID-19](#) webinar with Jon Ulven, PhD, Sanford Health, Fargo/Moorhead? Use the link to access the recording and handouts. *Participants of the live event gave excellent reviews.* The information provided key strategies to help recover from a stressful experience and tips to improve the health of our teams and workplace.

## Education and Resources

[Visit our GPQIN Event Calendar](#) for upcoming and past events.

### Thursday's Boost with Your QIO | Thursdays at 4:00 pm CT

A 30-minute informal education and office hours format session - for ND & SD nursing homes only. **Only need to register once.**

[Register Here](#)

**Infection Control in Respiratory Therapy Practices** hosted by Great Plains QIN & SD Project Firstline  
**June 21, 2022 | 3:00-4:00 pm CT**  
[Details and registration](#)

[Great Plains QIN Nursing Home Quality Webpage](#)

[CMS Toolkit on State Actions to Mitigate COVID-19 Prevalence in Nursing Homes](#)

[The National Partnership – Dementia Care Resources](#)

[CMS Targeted COVID-19 Training for Frontline Nursing Staff and Management:](#) Scenario-based online trainings | on-demand

## COVID-19 Pandemic is Not Over Just Yet

Reminder: the COVID-19 pandemic is not over yet. As one of 12 QIN-QIOs across the United State and Territories, **Great Plains QIN is hearing from our QIN-QIO colleagues across the country they are seeing a LARGE uptick in COVID-19 cases in the nursing homes**, which means there is an uptick in the community.



North Dakota and South Dakota get a **warning** as typically these outbreaks begin on the east and west coast and move inward and up.

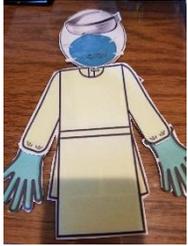
Be vigilant with your infection prevention and control practices.

- Ensure staff know how to don/doff their PPE appropriately
- Everyone performs hand hygiene per CDC guidance
- Ensure cleaning/disinfection shared resident equipment is being done
- Confirm COVID policies are up to date
- Vaccinate/Boost your residents and staff
- Ensure visitors understand their role in keeping loved ones and vulnerable people safe
- Remind staff what they do outside of the nursing home affects those they care for inside

### What can you do now?

- Review [CDC guidance](#) for Long-Term Care Facilities
- Monitor your [COVID-19 by County/Community Level](#)
- Have staff complete the [CMS COVID-19 Nursing Home Training – QSEP Training](#)
- Review and utilize the [GPQIN NH COVID-19 Key Resource Document](#)
- Audit the infection prevention and control by setting goals, auditing and using the [GPQIN Performance Tracker](#). See [video tutorial](#)
- Educate residents, families, and visitors by using the editable [GPQIN COVID-19 Letter Template](#)

- Complete an [Infection Prevention and Control Assessment & Response Tool](#) (ICAR)-complete yourself or invite outside resource with fresh eyes to complete. Free ICAR assessments available in ND and SD.  
\*North Dakota ICAR contacts- [Faye Salzer](#) or [Nicole Lennick](#)  
\*South Dakota ICAR contacts: [Kipp Stahl](#) or [Cheri Fast](#)



## A New Way to Teach Proper PPE Donning and Doffing with Paper Dolls

SMP Health - St. Catherine North & South Campus initiated a creative way to ensure understanding of proper donning and doffing techniques. This paper doll exercise helps team members demonstrate how to use PPE correctly.

Chelsea Ertelt, RN, is part of the Admissions and Infection Control Team at SMP Health. Ertelt shared, *“It is important to think outside of the box when assessing your performance and providing education to staff. We utilized a PPE donning and doffing game where staff had a paper doll and all the required PPE for droplet precautions. Staff were asked to demonstrate donning and doffing of PPE on the paper doll in proper order. Our team enjoyed this activity, and it was a new way to engage them in learning about a repeat topic.”*

*“The reason I like this exercise is that it makes our staff think. Along with the activity, we ask questions to ensure PPE is being taken off correctly, i.e., the gloves are over the cuffs and the gowns are taken off by rolling it down and not touching the outside of the gown.”*

[Access the donning and doffing paper doll tabletop exercise](#) (also includes instruction for use)

**POP QUIZ:** Can you spot what is wrong on the paper doll (pictured above)? Answer at end of newsletter.

## Using Personalized Music | Music & Memory South Dakota

Submitted by Jess Danko, Coordinator, Music & Memory South Dakota

Music unlocks an opportunity for everyone to correlate life events and sounds. The brain is a powerhouse that when engaged with musical tunes has an ability to deliver positive outcomes that can be beneficial to all. Research indicates that this is a high reality for those suffering with health barriers due to dementia. By utilizing music to liven those senses, an ability to aid sufferers of the disease is evident. The music becomes a form of wellness that has proven positive outcomes.

Nursing facilities across the nation that are utilizing personalized music programs such as the nationally acclaimed [Music & Memory](#) program, are seeing astonishing results. Health difficulties, which are often prominent to residents in care facilities, have been seen to promote improvement in dementia, eating, behaviors, medication use, movement and more. The individuals participating the program, have been given the opportunity to awaken parts of the brain through music. Individualized playlist for each participant in the program seems to speak right to the heart and head of each program participant.

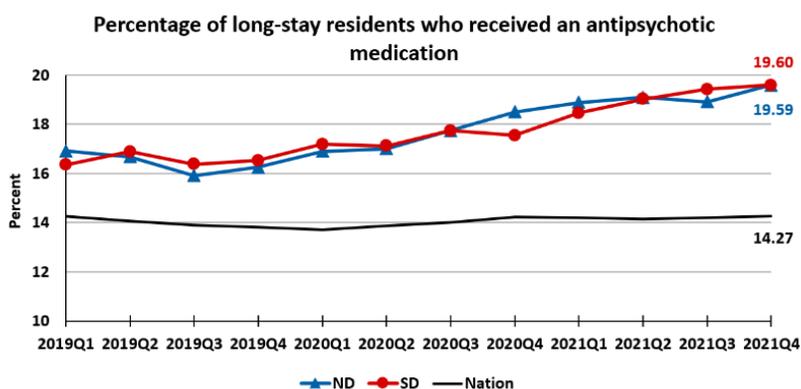


In a recent survey, success stories were shared about how Music & Memory South Dakota is working in nursing home across South Dakota. Evidence has shown that each person can have varying results but those that are see success make the program worth the effort. For example, a veteran in one facility was having difficulty

with walking. The activities director reported, “we played marine marching music and he started marching and walking more normal.” Personalized playlists, including music, such as the marine marching music, triggered a response that was of high benefit to the individual. Just as music can help with movement, it can also help with reducing the use of antipsychotic medications.

## Reducing Antipsychotic Medication Use: The Resident Prioritization Tool Can Help Identify Where to Start

The Biden Harris Administration is working on major nursing home reform. Amongst the many reform ideas, is reinforcing safeguards against unnecessary medications and treatments. Specifically, the plan mentions to identify problematic diagnosis and to refocus efforts to bring down inappropriate use of antipsychotic medications<sup>1</sup>.



Data Source: Nursing Home Minimum Data Set (MDS) 3.0

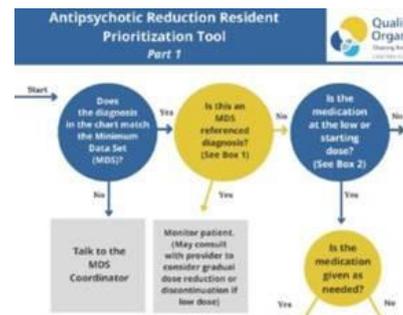
North Dakota and South Dakota are approaching near 20% antipsychotic medication rates, which puts both states among the highest in the nation. The national average is 14%<sup>2</sup>. It is inevitable, states with high rates will be tasked to focus on reducing these medications.

A recent [national study](#) published in the Journal of Post-Acute and Long-Term Care Medicine (JAMDA), surveyed 3,526 nursing homes to comprehensively explore inappropriate psychotropic medication use deficiency, F-758 citations, in caring for nursing home residents with dementia. The three most common reasons for F-758 citations included 1) failure to identify and/or monitor behavioral symptoms; 2) attempt gradual drug reduction; and 3) maintain 14-day limitations on PRN psychotropic orders. This study suggests areas for improvement that could potentially reduce inappropriate psychotropics which includes supporting quality of dementia care workforce and improving cooperation within healthcare staff and professionals to ensure proper nonpharmacologic and pharmacologic interventions.<sup>3,4</sup>

**Do you know what your facility antipsychotic medication rate is?** If it is over 12%, there is a very good chance you can find several reduction opportunities. It is also likely a F-758 citation may be looming in your future with continued high antipsychotic medication use.

**Yes...our nursing home antipsychotic medication rate is running high ... now what?** “Questions I often hear from nursing homes that are wanting to work on reducing antipsychotic medications use is ‘Where do we start? Who should we focus on first?’

Great Plains QIN recently updated the [Antipsychotic Reduction Resident Prioritization Tool](#) and developed a [Video Tutorial](#) on how to use the tool. This tool provides an easy-to-use algorithm to identify where to begin gradual dose reductions and which residents to start with.





*As with many things, to keep motivation and efforts moving forward, one typically needs a win. This tool will help you pinpoint those potential first easy 'wins' before advancing to more challenging situations in reducing antipsychotic medications in your nursing home,"* says Lori Hintz, RN, CADDCT, Quality Improvement Advisor, Great Plains Quality Innovation Network.

[The National Partnership to Improve Dementia Care in Nursing Homes](#) has a comprehensive resource list broken down in several categories from assessment and practice guidelines, training, webinars, initiatives, and innovations.

For more information on antipsychotic medication reduction ideas, contact a [Great Plains QIN Nursing Home Quality Improvement Advisor](#).

#### Sources

1. [White House Fact Sheet: Protecting Seniors by Improving Safety and Quality of Care in the Nation's Nursing Homes](#) | February 28, 2022
2. [CMS.GOV; MDS Frequency Report Nursing Home](#) | Updated December 2021
3. [Deficiency Citations on Inappropriate Psychotropics Use Related to Care for Behavioral Symptoms of Dementia](#) | Authors: Jung Min Yoon, PhD, RN; Alison M. Tinkoff, ScD, MPH, RN, FAAN; Elizabeth Galik, PhD, CRNP, FAAN, FAANP; Carla L. Storr, ScD, MPH; Nancy B. Lerner, DNP, RN, CDONA; Nicole Brandt, PharmD, MBA, BCGP, BCPP, FASCP; Shijun Zhu, PhD, DrE | Published: May 11, 2022DOI:<https://doi.org/10.1016/j.jamda.2022.04.006>
4. [F-tags study reveals common misuses of psychotropic drugs in LTC](#); McKnights Publication | May 13, 2022

## **Make Sure Your Influenza and Pneumococcal Vaccination Quality Measures Data is Current! Strive for 100%**

The Vaccination Quality Measures (Influenza and Pneumococcal) are the easiest to impact when a facility is looking to improve their Resident Care QMs. **You** have control to assure that 100% of your residents meet the QM as being "assessed and appropriately given" the vaccination.

**The Influenza QMs are calculated only once per year!** The calculation begins on July 1 of a given year and ends on June 30 of the subsequent year and reports data for residents who were in the facility for at least one day during the target period of October 1 through March 31. **The rate will remain on [CMS Care Compare](#) for the entire next year.**

Now is the time to assure the Influenza QM and Pneumococcal QM accurately reflects the vaccination status of your residents. Great Plains QIN has resources to assist you in getting the highest vaccination rate possible – **100%**!

- [Influenza Quality Measure Coding Tip \(GPQIN\)](#)
- [Pneumococcal Quality Measure Coding Tips \(GPQIN\)](#)
- [Vaccination Quality Measure Checklist \(GPQIN\)](#)
- [Electronic Vaccination Tracking Log \(GPQIN\) -updated 4/28/22](#)
- [Nursing Home Vaccination Change Package \(GPQIN\)](#)
- [Nursing Home Quality Measure Video Series \(GPQIN\)](#)
- [Improve Your Vaccination Quality Measures – Grab the Low Hanging Fruit Webinar - May 25, 2021](#)



## Did You Notice a Change in Your Overall Quality Measure Five Star Rating in April?

Effective with the April 2022 refresh, CMS is implementing planned, regular increases to the Quality Measure (QM) rating thresholds, increasing each rating threshold by one-half of the average improvement in QM scores since the last time the thresholds were set. For the April 2022 refresh, the average improvement was determined from the period of April 2019 – January 2022. The new rating thresholds are shown in Table 6 of the [Care Compare NH Five Star Quality Rating System: Technical User's Guide April 2022](#).

Table 6

Point Ranges for the QM Ratings (as of April 2022)

QM Rating	Long-Stay QM Rating Thresholds	Short-Stay QM Rating Thresholds	Overall QM Rating Thresholds
★	155–477	144–488	299–966
★★	478–574	489–585	967–1,160
★★★	575–655	586–674	1,161–1,330
★★★★	656–746	675–762	1,331–1,509
★★★★★	747–1,150	763–1,150	1,510–2,300

Note: the short-stay QM rating thresholds are based on the adjusted scores (after applying the factor of 1,150/800 to the unadjusted scores)

For example, prior to April 2022, the minimum points for a 5-star rating in the **overall QM domain**, was 1475 points. With the April 2022 refresh, the new minimum points needed for a 5-star rating in the **overall QM domain** is 1510 points. Note the point thresholds for **individual QM's** are **not** changing.

To really dig into how the 5-Star Rating System is calculated, refer to the [Care Compare NH Five Star Quality Rating System: Technical User's Guide April 2022](#). It is not easy reading, but even skimming over this User's Guide will help shed light on the methodology.

Additional QM Resources: [SNF Quality Reporting Program 05/2022 v1.10 Section 13](#)



### News, Updates, Tips

#### National Healthcare Safety Network Long-Term Care Quick Links

[Vaccination Weekly HCP & Res COVID-19 Module Main Webpage](#)

[COVID-19 LTCF Module Main Webpage](#)

[Data Quality Alerts: Weekly COVID-19 Vaccination Modules](#)

[Data Quality Alerts: COVID-19 Pathways Module](#)

[Frequently Asked Questions: COVID-19 Data Document](#)

[NHSN Point of Care Testing Reporting Tool FAQ's](#)

[NHSN LTC COVID-19 Module How to Re-Assign the FacADM](#)

[NHSN LTC COVID-19 How to Add a User](#)

#### New User TIP! Use Legal Names

When adding a “new NHSN user” to your facility –use the “new user’s” legal name so the identity proofing process goes smoother. Example: Use the name on their driver’s license or passport. Don’t assume, ask the “new user” what their legal name is.

#### NHSN Q&A's:

**Q1:** Regardless, of the module (Surveillance Pathway, Weekly HCW/ Resident Vaccination Module) what if there are no changes to my data from one week to the next? Do I still have to report?

**A1:** Yes. It is a requirement to report at least every 7 days for the Surveillance Pathway Module and every week for Weekly Vaccination Module regardless of if there were no changes.

- For the *Surveillance Pathways* report just what happens from report to report – in the case of no changes – put zeros in the appropriate boxes.
- For the *Weekly Vaccination Module* – report cumulative numbers (a running total). If there were no changes to the data for the week– report the same numbers as the previously reported week.

**Q2:** How should we categorize individuals who do not want to disclose their vaccination status?

**A2:** Report these individuals in question 3.3 under “Unknown COVID-19 Vaccination Status.”



## CDC, CMS, OSHA Resources and Updates

### Centers for Disease Control & Prevention (CDC)

[Interim IPC Recommendations for Healthcare Personnel During COVID19 Pandemic](#) 2/2/22

[Stay Up to Date with Your Vaccines](#) 1/16/22

[Ending Isolation & Precautions for People w COVID-19: Interim Guidance](#) 1/14/22

[Interim Guidance for Managing Healthcare Personnel w SARS-CoV-2 Infection/Exposure](#) 1/21/22

[Strategies to Mitigate Healthcare personnel Staffing Shortages](#) 1/21/22

[COVID Data Tracker - Check your community transmission rate. Updated Daily at 8pm](#)

[Interim IP Control Recommendations to Prevent SARS-COV-2 Spread in NHs](#) 2/2/22

[Strategies for Optimizing the Supply of N95 Respirators](#) 9/16/2021

[Selected Adverse Events Reported after COVID-19 Vaccination](#) 1/24/22

[FAQs about COVID-19 Vaccination in LTCFs](#) 9/9/21

[COVID -19 Vaccines for LTC Facility Residents](#) 1/21/22

### Centers for Medicare & Medicaid Services (CMS)

[QSO-22-15-NH-NLTC-LSC PHE Waivers Update](#) 4/7/2022

[QSO-22-09-ALL Guidance for IFR COVID19 Health Care Staff Vaccination](#) 4/5/2022

- [LTC and SNF Attachment A- Revised](#)

[QSO-20-38-NH IFR COVID19 PHE re LTC Facility Testing Requirements](#) 3/10/2022

[QSO-20-39-NH Nursing Home Visitation COVID19](#) 3/10/2022

[Nursing Home Visitation FAQ's](#) 3/10/22

[QSO-22-10-ALL Vaccination Expectations for Surveyors Performing Federal Oversight](#) –1/25/2022

[QSO-22-08-NH Nursing Staff Turnover and Weekend Staffing Levels](#) 1/7/2022

[QSO-22-02-ALL Changes to COVID19 Survey Activities & Increased Oversight in NH's](#) 11/12/21

[QSO-20-31-All: Revised COVID-19 Survey Activities, Enhanced Enforcement for Infection Control deficiencies & QI Activities in Nursing Homes](#) 1/4/2021



### When Should I Get a COVID-19 Booster?

Boosters are an important part of protecting yourself from getting seriously ill or dying from COVID-19. They are recommended for most people. The CDC has an [interactive tool](#) to help determine when you (or your child) can get one or more COVID-19 Boosters.

### Great Plains QIN Campaign | Become a COVID-19 Vaccination Booster Champion!



Great Plains QIN has launched a campaign to celebrate and recognize North Dakota and South Dakota organizations with high staff COVID-19 booster vaccination rates - **COVID-19 Staff Vaccination Booster Champions**. Organizations will be considered a *Booster Champion* when 75% or greater of their staff have received the first booster. A *Booster Champion Certificate* and a customizable press release is provided to *Booster Champions* to be used with local media, shared on the organization's website or social media platform and in an organization's newsletter. Access the current list of [Booster Champions](#) and their shared best practices. **To participate**, submit current staff booster rate [here](#).

# WE ARE PROJECT FIRSTLINE



## North Dakota Project Firstline Updates

NDDoH Project Firstline is launching a new **series of infection prevention and control trainings**; available to all frontline healthcare workers and students.

### Recognizing Risk Using Reservoirs Training Sessions

**Session 1: What does it mean to recognize risk?**

Tuesday, June 14, 12:00 pm- 1:00 pm CT

**Session 2: How germs make people sick**

Tuesday, June 21, 12:00 pm – 1:00 pm CT

**Session 3: Recognizing risk using reservoirs**

Tuesday, June 28, 12:00- 1:00 pm CT

Live training sessions will be offered online  
Continuing education credits offered through ND  
Board of Nursing. Approved for ND EMS LCCR/ICCR.

Register: [www.health.nd.gov/projectfirstline](http://www.health.nd.gov/projectfirstline)

Questions? Email: [dohpfl@nd.gov](mailto:dohpfl@nd.gov)



## South Dakota Project Firstline Updates

### Infection Control in Respiratory Therapy Practices

June 21, 3:00 pm – 4:00 pm CT

Speaker, **Jessica Danko, MSHA, RRT**

SD Project Firstline

[Webinar details and registration](#)

Hosted by Great Plains QIN and SD Project Firstline



Having worked the frontlines through a pandemic, Jessica Danko has a broad knowledge of firsthand respiratory therapy best practices. She understands the day-to-day operations and therapy delivery with an attention to infection control.

*“Infection control practices, when delivering respiratory treatments, are key to ensuring that patients and residents are receiving the safest and best possible outcomes that assist in their ability to breath well,”* states Jessica.

In summary, the presentation will include the prevalence of respiratory infections, explore commonly used respiratory treatments for these infections and introduce infection prevention practices with respiratory therapy treatments such as nebulizers and inhalers.

Visit [sdprojectfirstline.org](http://sdprojectfirstline.org) and follow us on [Facebook](#).



## Congratulations South Dakota Project Firstline! Finalist for the APIC Film Festival. Cast your Vote!

[South Dakota Project Firstline's Introductory Video - Failure is not an Option](#) has been selected as a finalist for the #APIC Film Festival, a national infection control conference! *“5 videos were chosen from across the country that highlight how you are making infection prevention you’re your intention,”* says Cheri Fast, PFL program manager. Friends from around the Huron, Chamberlain and DeSmet area are featured.

You can see all the finalist videos and vote here: [APIC 2022 Film Festival](#). You may only vote once. Voting closes at 1:00 PM CT, June 14, 2022.



What a great impactful video that includes community members from the Huron, Chamberlain and DeSmet areas. **Please cast your VOTE for South Dakota Project Firstline’s video!**





### Pop Quiz Answer from Page 2:

This paper doll has one glove under her the gown sleeves - should be both gloves going over the gown sleeves.

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