

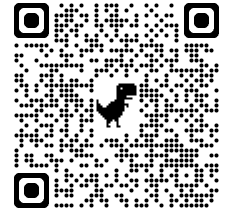
Join Our Nursing Home Listserv

A platform for nursing home team members to engage in two-way communication to ask questions, share resources and training opportunities. This listserv is very active and has proven to be a valuable resource for nursing home team members in the Dakotas. Join today.

Use the QR Code to Sign Up!



To ensure information and resources are available for all nursing home team members, we have decided to capture all news-related content for each month and share it in this newsletter, *Nuts & Bolts*. Please print this newsletter and share it with team members, post it in your break rooms or share via email.



Scan to access the entire newsletter

Upcoming Events

Visit the Great Plains QIN [Calendar of Events](#) for all upcoming events.

- [Weekly BOOST Sessions](#) | Thursdays at 4 pm CT

Listen to our Podcast – [Q-Tips For Your Ears](#)

Looking for health care information and quality resources? If so, you have landed in the right spot. Q-Tips For Your Ears is designed for everyone; the intent is to share basic information on topics that matter.

The Series was developed by Great Plains QIN Quality Improvement Advisors. We hope you find what you were looking for. We welcome suggestions for content; AND be sure to check back often for new Q-Tips For Your Ears episodes.



Nursing Home Quality Measure Video Series

The Great Plains QIN team created the Nursing Home Quality Measure Video Series to assist in understanding the MDS and claims-based Quality Measures that comprise the Nursing Home Quality Measure Star Rating.

The goal is for nursing homes to attain a Five Star Quality Measure rating. These short videos can be viewed individually or as a series. Each presentation has a transcript accompanying the slides. Visit our Web site to learn more and access the videos.

[Access the Quality Measure Video Series](#)

Person-Centered Dementia Care Trainings Offered Fall 2024

The North Dakota Dementia Care Services Program is offering a series of educational trainings to help individuals better understand how to implement person-centered care in all aspects of dementia care as well as learn appropriate dementia care techniques in line with nationally recognized [Alzheimer's Association Dementia Care Practice Recommendations](#) in 5 key topic areas:

1. Fundamentals of Person-Centered Care
2. Alzheimer's Disease and Dementia
3. Assessment and Care Planning
4. Dementia-Related Behaviors and Communication
5. Support of Activities of Daily Living (ADLs)

This program is FREE and 3 CEUs are available

September 2024

Person-Centered Dementia Care: Recommendations for Professionals – Virtual | Friday, September 13

9:00 a.m. – 12:00 p.m. (CST)

Presented by Joan Danks

[Register Today](#)

Person-Centered Dementia Care: Recommendations for Professionals (2- part virtual class)

Thursday, September 26 and Friday, September 27 | 10:00 – 11:30 a.m. (CST)

Presented by Lofty Loftesnes

[Register Today](#)

October 2024

Person-Centered Dementia Care: Recommendations for Professionals |

Tuesday, October 8 | 1:00 – 4:00 p.m. (CST)

Presented by Julie Praska-Moser

[Register Today](#)

Person-Centered Dementia Care: Recommendations for Professionals –

Thursday, October 24 | 1:00 – 4:00 p.m. (CST)

Presented by Vanessa Hoines

[Register Today](#)

November 2024

Person-Centered Dementia Care: Recommendations for Professionals

Monday, November 4 | 8:30 a.m. – 11:30 p.m. (CST)

Presented by Beth Olson

[Register Today](#)

Person-Centered Dementia Care: Recommendations for Professionals

Monday, November 18th | 9:00 a.m. – 12:00 p.m. (CST)

Presented by Carolina Zamarron

[Register Today](#)

This project is supported by funding through the North Dakota Department of Health & Human Services, Adult & Aging Services Section.

- The Alzheimer's Association offers a number of Alzheimer's and dementia [programs](#) available live.
- Access Alzheimer's and dementia education in [Spanish](#).



The Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support and

research. Their mission is to eliminate Alzheimer's disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health. Their vision is a world without Alzheimer's. Visit alz.org/mnnd or call the 24/7 Helpline 800/272-3900 for support.

Join the Conversation: Motivational Interviewing to Reduce Falls in Older Adults

Falls threaten the safety and independence for older Americans and can create a heavy economic and personal burden. National Falls Prevention Awareness Week will be observed September 23 – 27, 2024. Throughout September we will work to bring attention to the issue of falls and offer resources and tools to help educate and raise awareness related to falls prevention.

Falling is not a normal part of aging. Strength and balance exercises, managing your medications, having your vision checked, and making your living environment safer are all steps an individual can take to prevent a fall.

The South Dakota Falls Prevention Coalition is hosting a virtual Webinar on Motivational Interviewing to Reduce Falls in Older Adults. Jennifer Thiessen, RN, MS, COS-C with Avera@Home will lead the conversation. Continuing education credit is available. You do NOT need to work or live in South Dakota to attend; all are welcome!

Scan the QR code or click on the Register Today button below to get registered.

September 24, 2024 | 12:00 – 1:00 p.m. CT

[Register Today.](#)

Fall Prevention Awareness Week September 23-27, 2024

South Dakota Falls Prevention Coalition
Virtual Lunch and Learn Webinar

Motivational Interviewing to Reduce Falls in Older Adults

Jennifer Thiessen RN, MSN, COS-C
Avera@Home

September 24, 2024
12:00-1:00 pm CT

[Click Here](#) or [Scan to Register](#)



This session is approved for continuing education credits for South Dakota Licensed nursing home administrators and social workers. The South Dakota Association of Healthcare Organizations (SDAHO) an approved provider, will oversee the awarding of these credits.



The South Dakota Fall Prevention Coalition was launched by Sanford Health and South Dakota State University Extension in 2019. It is a volunteer-run organization. Members include a wide range of healthcare and community stakeholders. Explore the South Dakota State Falls Prevention Coalition [Web site](#) to better understand their goals, objectives, and activities, and learn how they educate their community about older adult falls.

Simple Interventions For The Management Of Respiratory Illnesses Could Support Antimicrobial Stewardship Efforts To Reduce Antibiotic Use

Researchers from the University of Southampton in the United Kingdom recently published results in *The Lancet Respiratory Medicine* journal from the Immune Defense trial. The study involved 13,799 adults at risk of adverse respiratory illness outcomes.

Conducted at 332 general practitioner practices, the participants were randomized to four intervention groups on a 1:1:1:1 basis—usual care, gel-based nasal spray, saline nasal spray, or a behavioral website promoting physical activity and stress management—and instructed to use the interventions at the first sign of symptoms or when they came into close contact with someone with a respiratory tract infection.

The primary outcome measured was the total number of illness days due to respiratory-tract illnesses over six months. Key secondary outcomes included days when work or normal activities were impaired, reported incidence of respiratory tract illness, possible adverse events, and use of antibiotics.

Key Study Findings:

- Gel-based and saline nasal sprays reduced illness duration to about 6.5 and 6.4 days, respectively, compared to 8.2 days with usual care.
- The digital behavioral intervention did not significantly reduce illness duration, but slightly reduced illness incidence.
- All interventions led to lower antibiotic use by up to 35% and fewer lost workdays.
- The most common adverse effect was headache or sinus pain, particularly in the gel-based spray group.

“Although respiratory tract infections are often caused by viruses, they are a significant driver of unnecessary antibiotic prescribing. Providers lack a fast, cost-effective way to distinguish viral from bacterial infections and they often feel pressured by patients to prescribe antibiotics. The study highlights the potential for these interventions to impact antimicrobial stewardship by reducing antibiotic resistance, adverse effects, such as *C. difficile*, and health care costs,” explained Carrie Sorenson, PharmD, Great Plains QIN Quality Improvement Advisor.



Tools, Resources, Training

- [Connecting the Dots – Antibiotic Stewardship, Immunization, Sepsis](#)
- [Antimicrobial Stewardship | Agency for Healthcare Research and Quality](#)
- [Antibiotic Prescribing and Use](#)
- [CDC Symptom Relief for Viral Illnesses](#)
- [Core Elements of Antibiotic Stewardship | Antibiotic Prescribing and Use | CDC](#)
- [Antibiotic Resistance and Antimicrobial Stewardship | Health and Human Services North Dakota](#)

References: [Nasal sprays, behavioral steps cut sick days, antibiotic use in patients with respiratory illness | CIDRAP \(umn.edu\)](#)

Little, P., Vennik, J., and Rumsby, et al. (2024). Nasal sprays and behavioural interventions compared with usual care for acute respiratory illness in primary care: A randomised, controlled, open-label, parallel-group trial. *The Lancet Respiratory Medicine*, 12(8), 619-632. [https://doi.org/10.1016/S2213-2600\(24\)00140-1](https://doi.org/10.1016/S2213-2600(24)00140-1)

Influenza Significantly Increases Heart Attack Risk, Especially in Healthy People

A new study has uncovered a startling connection between influenza and heart attacks. Researchers found that people who contract the flu face a significantly heightened risk of experiencing a heart attack, particularly within the first week of illness.

Surprisingly, the study revealed that individuals without a pre-existing history of heart disease are at the highest risk. This unexpected finding challenges previous assumptions about who is most vulnerable to flu-related heart complications. Experts believe that influenza triggers many of harmful effects, including inflammation and blood clot formation, placing immense stress on the heart.

To combat this serious health threat, researchers emphasize the critical importance of annual flu vaccination for everyone, regardless of overall health. Additionally, they are investigating the potential benefits of short-term anticoagulant treatment for patients with severe influenza infections to help prevent heart attacks. These findings illustrate the need for broader public health measures to address the influenza epidemic and its potentially devastating consequences.

Access the [Medscape article](#) for more information.

Newly Updated CMS Targeted COVID-19 Training for Frontline Nursing Home Staff and Managers

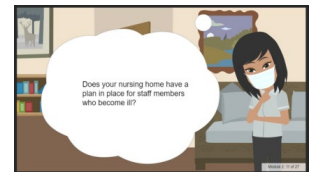
Learn about the importance of structured COVID-19 screening and surveillance for long-term care facilities and how immunization programs complement these activities through this no-cost, updated Quality, Safety & Education Portal (QSEP) [online training](#) developed by the Centers for Medicare & Medicaid Services (CMS).

View four key strategies in **Module 2: Screening and Surveillance** to keep COVID-19 from spreading in your nursing home. Master content at your own pace, learning anytime and anywhere, even on your mobile devices.

Module 2: Screening and Surveillance

Benefits for nursing home staff:

- Learn why infection screening and surveillance are important.
- Identify best practices for screening, surveillance and action planning.
- Apply recommendations from the Centers for Disease Control and Prevention (CDC) and CMS to current processes.

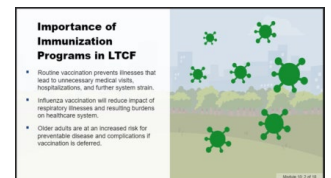


Nursing home residents are at an increased risk for preventable diseases and complications if they don't receive appropriate vaccinations. In **Module 10: Ensuring an Effective Immunization Program**, nursing home managers learn why structured immunization programs are important and how to start and maintain them.

Module 10: Ensuring an Effective Immunization Program

Benefits for nursing home managers:

- Learn the importance of immunization programs in long-term care facilities.
- Develop resident care policies for immunizations.
- Apply strategies for addressing vaccine misinformation.



Access the CMS Training for Frontline Nursing Home Staff and Management on-demand via [QSEP](#). Check out other resources to help implement this free, self-paced, scenario-based training available through [Quality Co-Op](#).

Surviving Sepsis: What Happens Afterwards?

Most people who survive sepsis make a full recovery, but it can take time and may involve long-term physical and emotional effects. These effects are sometimes called post-sepsis syndrome, a condition that affects up to 50% of sepsis survivors. It's important to understand that healing from sepsis often takes time and progress may be slow.

Post-sepsis symptoms may include weakness, tiredness and trouble moving around. Pain, weight loss, and sleep problems are also common. Sepsis can also affect mental health, including feelings of anxiety, depression, or confusion. It's important to recognize these emotional challenges are a normal part of recovery.

It's essential to remember that even with these challenges, many people improve over time with proper care and support. Healthcare providers must work closely with patients and their families to help people recover as fully as possible. Support can include physical therapy, counseling, and other support services.

Sepsis Survivor Survey

In 2023, Sepsis Alliance surveyed 3,131 self-identified sepsis survivors to better understand their diagnosis process, lingering effects, and life after sepsis. These learnings will help Sepsis Alliance, other patient advocacy groups and healthcare professionals to better serve sepsis survivors. Access the full article and survey details [here](#).

Life After Sepsis Video

This new informational video helps explain the common symptoms patients experience after surviving sepsis. Produced by Sepsis Alliance and the Society of Critical Care Medicine, [Life After Sepsis](#) provides practical tips for sepsis patients to follow so they can get stronger, avoid readmission to the hospital, and lead life to its fullest. By understanding the unique challenges of sepsis recovery, we can provide the best possible care for survivors.

Additional Sepsis Resources:

- [CDC Managing Recovery from Sepsis](#)
- [Sepsis STOP and TELL Tool](#)
- [Sepsis Toolkit For Skilled Nursing And Long-Term Care](#)

Urinary Tract Infections (UTIs): A Growing Threat to Our Elderly Patients

A recent global study spanning 204 countries revealed a startling truth: Urinary Tract Infections (UTIs) are on the rise.¹ This alarming trend is directly linked to increasing life expectancy as older individuals are significantly more susceptible to these infections. Unfortunately, the consequences of UTIs in the elderly are severe, often leading to sepsis, septic shock, and tragically, death.

UTIs are not only becoming more common, but also deadlier. A study analyzing urine cultures between 2005-2006 and 2010-2011 showed a disturbing increase in bacterial resistance to fluoroquinolones. This means our go-to antibiotics are becoming less effective, making UTIs even harder to treat.²

Why are the elderly particularly vulnerable? Factors such as frequent use of urinary catheters, asymptomatic bacteriuria, and incomplete bladder emptying contribute to their heightened risk. This is why it's crucial to minimize catheter use and encourage proper voiding posture. As healthcare professionals, we have a responsibility to protect our elderly patients from this growing threat. Rigorous adherence to aseptic techniques during catheter insertion is paramount. If there's any doubt about maintaining a sterile environment, stop the procedure immediately. Remember, every breach in sterility increases the risk of infection.

By staying informed, following best practices, and prioritizing patient safety, we can significantly reduce the incidence and severity of UTIs in our facilities.

For ideas on how to prevent and treat UTIs, review these tools:

- [UTI Prevention Tips For Providers](#)
- [UTI Prevention Tips For Patients](#)
- [Can You Treat a Urinary Tract Infection \(UTI\) Without Antibiotics?](#)

Source:

1. [Disease burden and long-term trends of urinary tract infections: A worldwide report](#)
2. [Susceptibility to antibiotics in urinary tract infections in a secondary care setting from 2005-2006 and 2010-2011, in São Paulo, Brazil: data from 11,943 urine cultures – PubMed \(nih.gov\)](#)

NHSN Weekly Reporting – Noncompliance Fines Can Add Up Quickly!

The National Healthcare Safety Network (NHSN) is the nation's most widely used healthcare-acquired infection (HAI) tracking system. The system provides data needed to identify problem areas and a means to measure the progress of prevention efforts.

There is no cost to users with the **BIG** exception that if a nursing home facility does not submit the federally mandated required weekly information on certain COVID-19 data; the nursing home can and will incur financial fines, called civil money penalties (CMPs), as outlined in the Centers for Medicare & Medicaid Services (CMS) [QSO-20-29-NH](#).

Over the last several years, the COVID-19 data that was initially required to be reported has been revised and shortened but nonetheless, reporting is **STILL** required for every nursing home in the nation every 7 days. The required modules

for reporting Long Term Care Facility (LTCF) COVID-19 data are the [COVID-19/Respiratory Pathogens Module](#) and the [COVID-19/Respiratory Pathogens Vaccination Module](#).

What are the Requirements and Potential Fines?

- Facility must report at least once every 7 days
- CMS will impose a per day (PD) CMP of \$1000.00 for one day for the failure to report that week; reporting deadline is Sunday at 11:59 pm ET
- For each subsequent week the facility fails to submit the required report, the noncompliance will result in additional one-day PD CMP imposed at amount increased by \$500.00 and for every subsequent week that data is not reported, the CMP will increase by \$500.00
- The fines stack upon each other up to a maximum of \$10,000 per incident

Example:

- Miss first reporting week – \$1000 CMP
- Miss the 2nd week – \$1000 + \$500 = \$1500 CMP
- Miss the 3rd week – \$1500 + \$500 = \$2000 CMP
- Miss the 4th week – \$2000 + \$500 = \$2500 CMP

Using this example; the total in CMP fines over the course of missing 4 weeks would total \$7,000!

Using the example above: facility got back on track for timely reporting, but misses another reporting week three months later; the one-day PD CMP to be imposed now would be \$3000! (which is \$500.00 more than the last imposed PD CMP amount of \$2500)

- Facility is cited for F884 at scope and severity level F; however, no plan of correction is required
- Facility has an opportunity to dispute the CMP imposed through the Independent Informal Dispute Resolution (IIDR) process and appeals must be filed 60 days from the date of the CMS letter

How is Facility Notified of a CMP Enforcement?

The facility is notified from CMS via the iQies system. Look under the “facility folder” for any notifications/enforcement imposition letters. Make a habit to check the “facility folder” at least weekly and especially if you know you are outside of the 7-day reporting window. There has been some incidences that notification came via an email or in the mail, but typically, the enforcement notices are found in the iQies system in your “facility folder”. The enforcement letter will provide instructions for payment of fine and the IIDR process should you wish to dispute.

Common Reasons for NHSN Reporting Noncompliance and Best Practices to Prevent CMP

Noncompliance Reasons	Prevention Actions
<p>Inconsistent and incomplete data collection</p>	<p>Ensure all areas in the calendar of each required module show a green bar. This confirms report submitted for that reporting week (it does not necessarily indicate the exact date the report was submitted). If you see a tan colored bar – report has not been successfully submitted for that reporting week. Double check data entered to ensure it meets data field requirements. If a data field requires a number, even if the number is zero, then “0” must be entered in the system or it will flag as missed data.</p>
<p>Not reporting data at least once every 7 days</p>	<p>Consider reporting at least twice a week. Some facilities are reporting every day. If you do change the day of when you report; understand you may have to report twice in the same reporting period to stay within that 7 day reporting window. <i>The COVID19 Pathogen Pathway module is the module that requires the every 7 day reporting; the Weekly COVID Vaccination module goes by weekly reporting period.</i></p>

<p>Current NHSN data submitter unexpectedly does not submit (i.e. illness, vacation, no longer at facility)</p>	<p>Ensure that a minimum of 2 staff members have access to your facility’s NHSN account at all times and that they understand how to submit a report. Document who in facility has NHSN access and who is the designated NHSN Facility Administrator (only the NHSN Fac Adm can add new facility users)</p>
<p>NHSN access issues – technical issues and can not get logged in</p>	<p>If you have 3 unsuccessful log in attempts – the system will lock you out for 2 hours. Either wait the 2 hours and attempt again or email samshelp@cdc.gov or call SAMS at 1-877-681-2901 and request to unlock facility account. Reboot your computer Reset your password if able Use a fresh SAMS/ NHSN log in link Clear your computer’s cache and cookies on your computer’s browsers If you have exhausted the above tips and still unsuccessful in access, contact the Service Now Help Desk: The helpdesk portal is called ServiceNow; however, you can only use this if you can get past the first sign in page when you initially log into SAMS. If you can access the ServiceNow link – then use this route and it seems the responses are quicker. ServiceNow instructions here: NHSN SN Customer FAQs (cdc.gov). If you can not access the ServiceNow link; then email both samshelp@cdc.gov and nhsn@cdc.gov. SAMS and NHSN can determine what side the problem is arising from. SAMS also has a phone number 1-877-681-2901. Do not hesitate to use the phone number. Provide any screen shots of what you are seeing and attach to your email help request. Explain the issue, the date and steps taken to resolve along with your full contact information and facility you are associated with. Then SAVE ALL CORRESPONDENCE! <i>This supporting documentation could be used if you need to dispute a CMP that may be imposed for reporting noncompliance – it verifies that you reached out for assistance.</i></p>

The [Long-term Care Facilities \(LTCF\) Component | NHSN | CDC](#) resource webpage was recently redesigned to make navigation to all the individual NHSN modules for long-term care easier with just a click including how to add a new facility user and much, much, more.

“Ftag 884 for NHSN noncompliance reporting citations is the top Ftag that is cited throughout the nation. The fines imposed can significantly affect a facility’s financial bottom line. Having a consistent workflow and embedded processes in your facility can greatly decrease the chances of incurring a CMP for Ftag 884,” added Lori Hintz, RN, BSN: Quality Improvement Advisor with Great Plains QIN. For assistance or questions, please contact Lori Hintz at lori.hintz@greatplainsqin.org.



National Immunization Awareness Month: Highlighting the Value of Connections

August is National Immunization Awareness Month (NIAM). NIAM raises the awareness about why vaccines are important for people of all ages and how they can help prevent serious, sometimes deadly, diseases and illnesses. During NIAM, Great Plains QIN will be sharing resources and spotlighting healthcare providers and their efforts to highlight the importance of vaccines.

We recently connected with Dawn Birkeland, LPN, the assistant director of nursing and infection preventionist with Bethel Lutheran Home and Rehabilitation Center in Willison, ND. Birkeland was recently invited to attend the Vaccine Access Cooperative (VAC) for Adult Immunizations Frontier/Heartlands Region Meeting of the Association of Immunization Managers (AIM), which includes the states of North and South Dakota. This meeting is an opportunity to share best practices and lessons learned with improving adult immunizations in addition to individual states developing action plans to address adult immunizations in their states.



“My role is to provide education to our staff, residents and families in regards to our Immunization/Vaccine Program offered. I work closely with our medical director and pharmacist to ensure vaccines are available. I then coordinate with our nursing staff to assess and administer all vaccines to our residents and staff accordingly,” Birkeland shared. She continued, “My administrator called me up one day and told me of this opportunity to attend the VAC Meeting. I was delighted to attend. The invite was extended to Bethel Lutheran Home based on the high vaccination rate we were able to achieve after initial resistance to the COVID-19 vaccine.”

As we approach August and NIAM, we will begin our immunization education at Resident Council Meetings and also our all staff meetings. We will remind our teams that it is time to start thinking about fall vaccines and what that will look like this year for our facility.

Attending a meeting of this type is so valuable in many ways. I was able to connect with key individuals who have had the same struggles we have faced with managing adult vaccine programs in a long-term care setting. One of the key take-aways for me was to continue to improve relationships between the care settings in which vaccines are offered. We are all striving for the same outcome, so if we continue to communicate and build relationships, we are most likely to achieve the goals set.”

Immunization Resources

- [NIAM Toolkit for Reaching Healthcare Professionals](#)
- [NIAM Toolkit for Reaching Parents and Patients](#)
- [Fostering a Culture of Immunization in Your Practice \(Online Training\)](#)

The Association of Immunization Managers (AIM) is dedicated to establishing a nation free of vaccine-preventable disease. AIM members are the leaders of state, local, and territorial immunization programs—directing the public health efforts designed to keep children and adults vaccinated and protected against disease. Since 1999, AIM has provided a national voice for immunization programs and a forum for program managers to learn from each other, confront challenges, and achieve success. Since its inception, AIM has gathered and shared information with its members on policy implementation, legislative issues, programmatic successes, and more.



Questions for Our Team?

If you have questions for our team or ideas for news stories, please contact a member of our team. Visit the [Who We Are Page](#) of our Website for all team members. Visit our [Website](#) to learn more.

