

Interim Committee on Aging

Topic One

OCTOBER 13, 2016

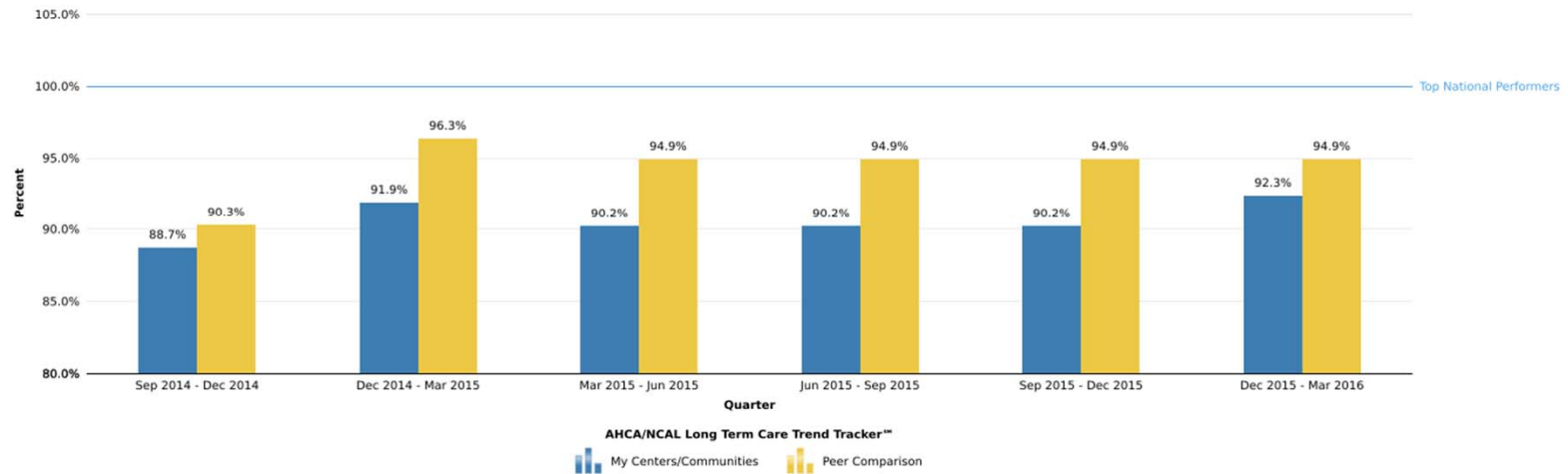
Texas Health Care Association

- ▶ Founded in 1950
- ▶ Comprised of several hundred licensed non-profit and for-profit skilled nursing facilities (SNFs), specialized rehabilitation facilities and assisted living facilities in Texas.
 - ▶ Nursing and Assisted Living Members
 - ▶ Long Term Care Business Members

Texas NH Influenza Vaccination Rates

Quality Measure (All) Report: LS Influenza Vaccination - 1 Quarter View

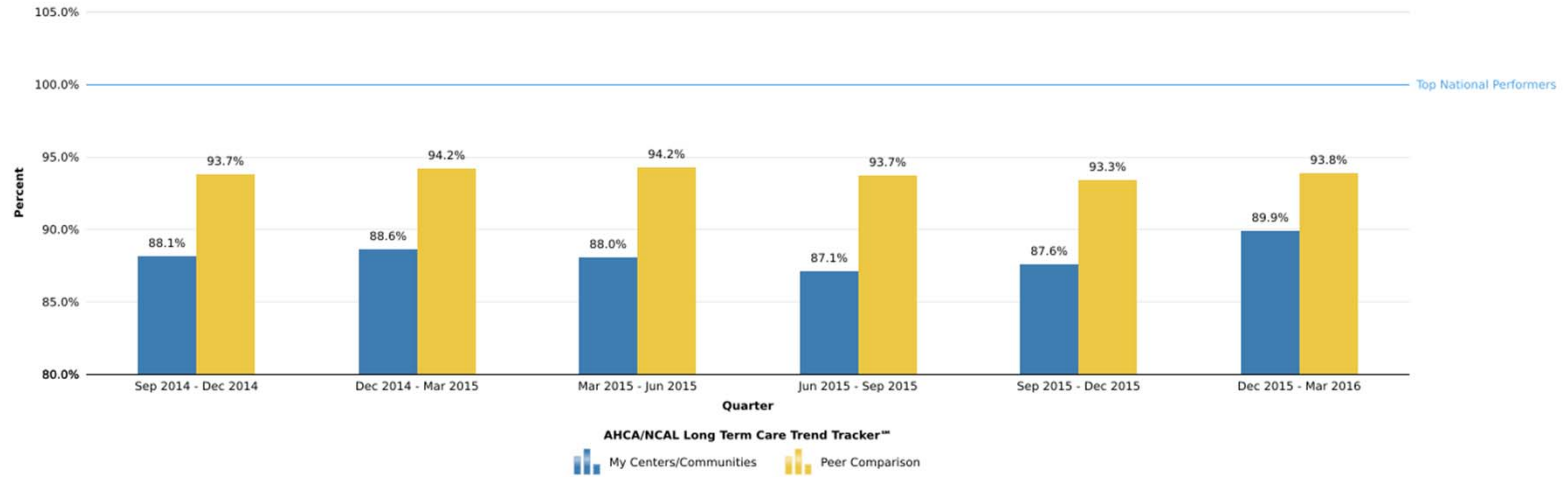
Your entire organization chosen. Peer geography: Entire nation. No peer type restriction. Centers from My Org are not included in peer group.



Texas NH Pneumococcal Vaccination Rates

Quality Measure (All) Report: LS Pneumococcal Vaccination - 1 Quarter View

Your entire organization chosen. Peer geography: Entire nation. No peer type restriction. Centers from My Org are not included in peer group.



Current Requirements

Develop and implement a policy to protect a resident from vaccine preventable diseases in accordance with Texas Health and Safety Code, Chapter 224.

- ▶ Require employees, contractors and other individuals providing direct care to residents to receive specified vaccines for preventable diseases.
- ▶ Procedures to verify that employees, contractors and other individuals have complied with the policy.
- ▶ Procedures for the facility to exempt individuals listed above from the required vaccines for the medical conditions identified as contraindications or precautions by the CDC and or conscience or religious beliefs.
- ▶ Procedures exempt individuals must follow to protect residents from exposure to vaccine preventable diseases, such as the use of protective equipment (gloves and masks).

Current Requirements

A facility must offer vaccinations to residents in accordance with an immunization schedule adopted by the Advisory Committee on Immunization Practices of the CDC.

Pneumococcal

- ▶ All residents 65 years of age or older who has not received the vaccination
- ▶ All residents younger than 65 years of age, who has not received the vaccination but is a candidate for it because of chronic illness.
- ▶ Must be offered to a current resident of a facility and to a new resident at the time of admission.

A vaccination must be completed unless a physician has indicated that the vaccination is medically contraindicated or the resident refuses the vaccination.

- ▶ Policies and Procedures to educate residents or their legal representatives regarding the benefits and potential side effects of the vaccine.

Current Requirements

Influenza

All residents and employees in contact with residents must be offered an influenza vaccination, unless the vaccination is medically contraindicated by a physician or the employee or resident has refused the vaccination.

- ▶ Influenza vaccinations for all residents and employees in contact with residents must be completed by November 30th of each year.
- ▶ Employees hired or residents admitted after this date and during the influenza season (through March of each year) must receive influenza vaccine unless previously exempt.
- ▶ Policies and Procedures to educate residents or their legal representatives regarding the benefits and potential side effects of the vaccine.

NEW Requirements of Participation

Themes in the Rule

- ▶ **Person-Centered Care**
- ▶ **Staffing & Competency**
 - ▶ Training and the need for competency specific skills and procedures
- ▶ **Quality of Care & Quality of Life**
 - ▶ Care Planning
 - ▶ Emphasis on patient goals and their involvement in decision making
- ▶ **Changing Patient Population**
 - ▶ Behavioral Health
- ▶ **Focus on Adverse Events**
 - ▶ Medication related
 - ▶ QAPI
 - ▶ **Infection prevention**
- ▶ **Increase monitoring of facility, staff and residents**

3 Phase Implementation: Phase 1

Effective November 28, 2016

- Resident Rights and Facility Responsibilities *
- Freedom of Abuse Neglect and Exploitation*
- Admission, Transfer and Discharge*
- Resident Assessment
- Comprehensive, Person-Centered Care Planning*
- Quality of Life
- Quality of Care*
- Physician Services
- Nursing Services*

3 Phase Implementation: Phase 1

- Pharmacy Services*
- Laboratory, radiology and other diagnostic services
- Dental Services*
- Food and Nutrition*
- Specialized Rehabilitation
- Administration (Facility Assessment= Phase 2)*
- Quality Assurance and Performance Improvement*-QAA Committee
- **Infection Control – Program***
- Physical Environment*

Phases 2 and 3

Phase 2 Effective November 2017

- Behavioral Health Services
- Quality Assurance and Performance Improvement – QAPI Plan
- **Infection Control – Facility Assessment and Antibiotic Stewardship**
- Physical Environment – smoking policies

Phase 3 Effective November 2018

- Quality Assurance and Performance Improvement – Implementation of QAPI
- **Infection Control – Infection Control Preventionist**
- Compliance of Ethics
- Physical Environment – call lights at resident bedside
- Training

Recommendations

- ▶ Convene an adhoc workgroup of providers, agency and managed care staff to identify root cause for vaccination non-compliance (e.g. resident refusal, hx of adverse events post vaccine, documented contraindications) and recommend next steps in improving vaccination compliance.
- ▶ Assess the effectiveness of the CMS Requirements of Participation regarding Infection Control after full implementation.