

A photograph of two healthcare workers, a man and a woman, both wearing blue surgical caps and white face masks. They are dressed in light blue and green scrubs. The man is holding a blue clipboard and looking at it, while the woman stands beside him, also looking at the clipboard. The background is a bright, out-of-focus hospital setting.

Infection Prevention Post-Pandemic:

10 Tips

Table of Contents

What You'll Learn

2

Health Threats Beyond COVID-19

3

Combatting the Spread of Infectious Diseases

4

What You'll Learn

While the worst of the COVID-19 pandemic is behind us, the threat posed by infectious diseases, including new COVID-19 strains, remains. The pandemic shined a spotlight on the importance of effective infection prevention and control protocols in preventing the spread of infectious diseases and protecting vulnerable senior populations. Be better prepared for future outbreaks by learning how to assess your facility's policies and practices.



Health Threats Beyond COVID-19

It is estimated that
1 to 3 million

serious infections occur every year in:

- nursing homes
 - skilled nursing facilities
 - assisted living facilities
- CDC

Even before the pandemic, good infection control in long-term care was essential to preventing transmission of infectious diseases. And that holds true post-COVID-19 as well. As quickly as COVID-19 spread around the globe, another outbreak could be looming. In fact, some of the potential health hazards that already exist include:

Pneumonia: Pneumonia remains a leading cause of morbidity and mortality in older adults, with recent data from the CDC showing that hospitalizations for pneumonia among 65 to 84 year olds have increased. A person can spread the germs that cause pneumonia when they cough and expel the virus or bacteria.

Influenza A and B, including the A variant:

According to the CDC, an estimated 70-85% of seasonal flu-related deaths have been among people 65 and older and 50-70% of hospitalizations have occurred in this group. Bronchitis and pneumonia are the most common respiratory complications of influenza infection.

According to the CDC, two influenza A subtypes, (H1N1)pdm09 and H3N2, are the dominant strains as we approach the 2022 flu season. While a few cases of novel strains have been reported, they do not seem to spread easily from person to person.

Group A Streptococcus: This species of bacteria causes many different infections, such as strep throat and scarlet fever. When the bacteria enter the blood or muscle, severe, life-threatening infections like sepsis can occur. Residents in long-term care facilities are at increased risk of serious, invasive Group A streptococcus infections due to their advanced age and underlying medical conditions.

Norovirus: *Long-term care facilities are the most common settings for norovirus outbreaks.* In fact, according to a study in Clinical Infectious Diseases, norovirus GII, the most common genogroup, is often present in the air at facilities during outbreaks of the virus. Outbreaks can occur anywhere people gather or food is served since infected individuals can spread norovirus to others through close contact or by contaminating food and surfaces.

Over half

of all norovirus outbreaks reported in the US occur in long-term care facilities.

— CDC

COVID-19 Variants: Since Omicron surfaced in the fall of 2021, multiple subvariants have started to circulate. The BA.5 subvariant, which emerged in the summer of 2022, is the most contagious strain yet. It is also the predominant strain, causing about 80% of US COVID cases.

With the potential for infection outbreaks from contagious bacteria or viruses like these, it is critical for a facility to focus on prevention and preparedness.

Combatting the Spread of Infectious Diseases

Residents of long-term care facilities who are of advanced age and/or have underlying health conditions are at greatest risk of severe health consequences from infectious diseases. The need for robust prevention practices is paramount to minimize the impact of outbreaks. Moreover, preparedness can help your facility avoid steep fines following infection-control focused surveys.

Here are 10 tips to prevent an outbreak before it occurs:

- **Conduct a self-assessment:** Both CMS and LeadingAge offer self-assessment tools on their website to help you review your preparedness and gaps that need to be addressed.
- **Prepare for surveys:** Run mock surveys and maintain a survey book that is current and contains required documentation since infection control remained the number one tag cited last year in facilities.
- **Have a full-time, well-trained infection preventionist:** Required since November 2019, be sure you designate one or more individuals to lead your facility's infection prevention and control.
- **Ensure adequate resources:** To prevent transmission of infectious diseases, either by contact, air or droplets, ensure available protection for staff with the availability of PPE such as N95 masks and eye protection.





Combating the Spread of Infectious Diseases

- **Encourage vaccination:** All residents should receive flu, pneumonia, and COVID-19 vaccines per the recommended guidelines.
- **Perform active surveillance:** If there is illness activity in the local community, conduct active, daily surveillance among new and current residents, staff and visitors.
- **Test:** When a resident has signs or symptoms of a respiratory illness, administer influenza and COVID-19 testing per CDC guidelines or those from your state agency.
- **Establish infection prevention standards:** Create IPCP standards, policies, and procedures to comply with CMS mandates, and review them annually.
- **Educate:** While an outbreak can be easier to detect when residents become sick within a short period of time, it can be more difficult to identify when the time between cases is long. Instruct staff on how to recognize and report signs and symptoms of infectious diseases among residents and themselves.
- **Follow reporting requirements:** Be sure to notify local or state health departments of suspected outbreaks as required. Skilled nursing facilities must also report cases of COVID-19 to the CDC.

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