

Long-Term Care Survey Alert

Infection Control: Get A Jumpstart On Immunizations Before Flu, F Tags Catch Up With You

Beware: CMS will soon be tracking your immunization track record.

CMS is getting serious about boosting flu and pneumonia immunizations in nursing homes. And your facility should, too, if it wants to prevent these life-threatening diseases--and stay in the Medicare and Medicaid programs.

"The **Centers for Medicare & Medicaid Services** takes immunizations extremely seriously--as a matter of life and death ...," emphasized **Stephen Jencks**, director of quality coordination for the agency, during a Sept. 8 Webcast on evidence-based practices for immunizations and coding instructions for the new MDS Section W, which captures flu and pneumococcal vaccination rates in nursing homes.

New Rule Puts Teeth Behind Immunization Push

You can bet CMS means business. The agency published a proposed rule saying a nursing facility must, as a condition of participation in Medicare and Medicaid, provide residents flu and pneumococcal vaccination unless the residents or their designated decision-makers refuse--or the immunizations are contraindicated. "That means that facilities will be surveyed for their compliance with the immunization requirements" once the rule goes into effect, attorney **Carol Loepere**, with **Reed Smith** in Washington, DC, tells **Eli**. Look for the final rule sometime this year, according to the CMS Webcast.

Facilities must educate residents or their legal representatives about the risks and benefits of the immunizations before administering them. But "there are no federal requirements to obtain written consent for the resident" to receive the vaccination, said the **Centers for Disease Control & Prevention's Ray Strikas, MD**, during the Webcast. In fact, "obtaining written consent can present a barrier to timely administration of vaccines."

Efficiency tips: Stellar Maris nursing home in Timonium, MD, assesses residents' immunization status at admission or even as part of the preadmission process and obtains consent for the flu immunization for the entire facility stay, according to the Webcast. Nurses follow-up on instances where the facility didn't obtain consent.

Both CMS and the CDC also recommend facilities use standing orders for the vaccinations whenever possible. Standing order programs authorize pharmacists and nurses to administer immunizations according to the physician- or institution-approved protocol without a doctor exam, according to the Webcast.

Ready, Set, Educate

The rule requires facilities to offer the influenza vaccine during the flu season annually (Oct. 1 through March 31). Staff should also counsel and educate residents or their decision-makers who refuse a flu shot.

Problem: Just one vocal resident who spreads myths about flu-shot dangers can trigger wider spread resistance to your immunization program. For example, Webcast presenter and medical director **Ernestine Wright, MD**, relayed how one resident refused the flu shot because she had a bad reaction to one 25 years ago. The resident also encouraged other cognitively aware residents to refuse the vaccination.

Solution: Wright explained to the residents how the vaccine has since been purified and is much safer today, emphasizing that she had received it herself. A relationship of trust with the residents can help encourage them to take

the vaccine, she added.

Watch Out for These Additional Mandates

The government's other strategies to boost immunization rates include:

- Requiring facilities to report residents' flu and pneumonia immunization status on the MDS via Section W, which goes into effect Oct. 1.
- Using the MDS-reported data to report immunization rates for nursing homes on the Nursing Home Compare Web site.
- Providing technical assistance and tool kits through the state-run quality improvement organizations.
- Encouraging staff to get immunized to protect residents who refuse or cannot receive immunizations--or those who don't have a full response to the vaccination. "Residents' response to the vaccine isn't perfect," said Webcast presenter **Susan Levy, MD**. "So the critical piece is to get staff vaccinated because [they] are usually the ones who give residents the flu usually--or visitors."

Tip: If you can't determine a resident's vaccination status, go ahead and provide the flu and pneumococcal vaccinations--if they aren't contraindicated and the resident or his authorized decision-maker agrees, according to the Webcast.

Need help with Section W? Review the August 2005 RAI manual update for instructions on how to complete Section W at www.cms.hhs.gov/quality/mds20/rai0812upd.pdf.

Editor's note: For detailed instructions on completing Section W, see the November 2005 MDS Alert. For subscribing information, call 1-800-874-9180.

For an inside look at lessons learned by two nursing facilities that managed an influenza outbreak last year, see the November Long-Term Care Survey Alert.