

IMPORTANT SURVEY INFORMATION RELATED TO H1N1 INFLUENZA

May 26, 2009

Facilities & Corporate Offices:

Last week we provided the following information in UPDATE:

"CMS TRACKS H1N1 INFLUENZA AS A PART OF THE SURVEY PROCESS.....To assist surveyors to observe signs of the H1N1 flu virus infection, and proper facility etiquette, a guidance document for surveyors has been issued via S&C - 09-36. The link is provided below. To assist in reporting any impact to State survey activities and providers that have been affected by the H1N1 virus infection to the Centers for Medicare & Medicaid Services (CMS) Regional Office, a tracking tool has also been developed. For more information, go to http://www.cms.hhs.gov/SurveyCertificationGenInfo/downloads/SCLetter09_36.pdf. "

Based on discussions with our state survey agency I wanted to emphasize the following from the above document as well as remind you of the email and website posting sent to you containing the Interim Guidance on Prevention of Novel H1N1 Influenza Virus Infections in Long-Term Care Facilities (issued by the NC Statewide Program for Infection Control and Epidemiology and the NC Division of Public Health) - <http://www.unc.edu/depts/spice/> Go to LTC FACILITIES - INFECTION CONTROL to view guidance.

Surveyors have been trained on this " Interim Guidance " as well.

Surveyors will be looking for the following to be in place now:

1. Visual alerts (signage at entry points instructing patients/residents and visitors about facility policies, in the case of signs and symptoms of febrile respiratory illness; emphasizing appropriate respiratory hygiene/cough etiquette and hand hygiene.

2. Availability of materials for adhering to respiratory hygiene/cough etiquette including:

- Tissues and receptacles for used tissue disposal.

- Conveniently located dispensers of alcohol-based hand rub and/or adequate soap and disposable towels where sinks are available.

3. Adherence to respiratory hygiene/cough etiquette

- Staff, patients, and visitors should cover their nose/mouth when coughing or sneezing (the insides of elbows are preferable to hands when covering noses and mouths).
- Staff, patients, and visitors should use tissues to contain respiratory secretions and dispose of them in the nearest waste receptacle after use.
 - o Staff, patients, and visitors should perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic handwash) after having contact with respiratory secretions and contaminated objects/materials.

4. Patient Placement/Transport/Personal Protective Equipment (PPE). Facilities should have a plan in place to appropriately manage

- patients with confirmed, probable or suspected cases of H1N1 virus infection.
- nonsterile gloves, gowns, eye protection, and fit-tested
- disposable N95 respirators or equivalent

5. Facilities should have a policy for:

- communicating information about confirmed, probable or suspected cases of H1N1 virus infection to appropriate local health department.
- management of ill healthcare personnel (Guidance related to H1N1 virus infection can be found at http://www.cdc.gov/h1n1flu/guidelines_infection_control.htm.)

These issues fall under the requirements found at F441 - F444 for nursing homes.

Polly G. Welsh

Executive Vice President

North Carolina Health Care Facilities Association

5109 Bur Oak Circle · Raleigh, NC 27612

Tel: (919) 782-3827 · Fax: (919) 787-8418

E-mail: pollyw@nchcfa.org · Web: <http://www.NursingHomesNC.com>

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