

CARE FOR OUR SENIORS ACT

CLINICAL: ENHANCE THE QUALITY OF CARE Enhancing Infection Prevention Standards in Nursing Homes

Background

Effective infection prevention and control practices in nursing homes provide a safer and healthier environment for residents that improve quality of life. Infection Preventionists (IPs) and effective infection prevention and control programs can decrease infection rates and health care acquired infections, improve attention to hand hygiene and transmission-based precautions, improve employee health, and reduce hospitalizations and adverse events among nursing home residents.

When the federal government first proposed requiring each nursing home to designate one individual (a clinician who worked at least part-time) as the facility's IP in 2015, the American Health Care Association (AHCA) and LeadingAge supported this requirement and advised the Administration at the time that this professional would need to devote more time to the role. We suggested that the Centers for Medicare and Medicaid Services (CMS) allow facilities to designate one or more individuals as IPs, so these professionals could cover for each other and work together during outbreaks. Those recommendations were reflected in the final rule, issued in October 2016, and went into effect November 2019. Since then, AHCA has helped train more than 3,000 IPs across the U.S.

While some facilities have designated one or more part-time, specially trained IPs, others have full-time IPs, or have IPs fulfill a broader role, with duties such as staff educator or supervisor. Prior to COVID-19, nursing homes already experienced a nationwide shortage of registered nurses (RNs) and other challenges in recruiting qualified staff, including IPs. The pandemic has only exacerbated these workforce challenges. The increased demand for resources and dedicated, specially trained IPs, which are most often fulfilled by a RN, have critically strained nursing homes.

The Commission for Safety and Quality in Nursing Homes released its [analysis](#) of nursing home response to the pandemic in September 2020 and highlighted: "Workforce educators with expertise in infection prevention and control are insufficiently used in nursing homes." The COVID-19 pandemic requires us to reflect upon whether the current regulation is adequate to ensure staff with expertise in infection prevention and control are effectively used in nursing homes.

Proposed Solution

Create an evidence-based standard for staffing infection preventionists in each nursing home where the amount of time required for an IP is correlated with meaningful environmental factors.

Additionally, AHCA and LeadingAge recommend:

- The amount of time required for an IP is adjusted based on each facility's bed count, demographics of the facility's surrounding area, individual factors contributing to infection control risk levels, and corporate or other support resources.
- Flexibilities for smaller and rural facilities.
- A diverse group of professionals be allowed to serve as an IP with training as described in current regulation.
- A phased-in requirement to give nursing homes time to recruit and train without threat of penalty for noncompliance.
- The IP is recognized in the CMS Payroll-Based Journal as a role centered around resident care.

Steps to Implement

- Provide loan forgiveness for RNs in long term care (LTC) and to other professionals (such as those with a public health degree) who serve as IPs in nursing homes
- Offer grants to pay for initial and ongoing continuing education units/training for IPs
- Provide tax incentives or accreditation recognition for professional schools whose graduates work as an IP in nursing homes
- Require states to incentivize enhanced infection prevention through state quality payment programs
- Create national database of IPs for networking and recruiting
- Provide value-based purchasing incentive for nursing homes with a full-time IP on staff
- Ensure the Nurse Licensure Compact is available in every state to be able to "share" RNs across state borders
- "Train the Trainer" supports from state public health officials to help nursing home providers adapt to IP turnover or other emergent issues

Funded By: Medicaid payment policy