

ISDH Long Term Care  
Newsletter Issue # 09-24  
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## Restraint Use Continues to Decline

The Indiana State Department of Health (ISDH) is pleased to report a continued decline in the use of restraints in Indiana long term care facilities. In 2005 the Centers for Medicare and Medicaid Services (CMS) selected pressure ulcers and restraints as goals for their Government Performance Responsibility Act (GPRA) initiative. CMS GPRA data for the first quarter of 2009 shows that physical restraint use declined in Indiana to a rate of 2.8% from the previous quarter rate of 3.1%. Since the beginning of 2008, Indiana's rate of restraint use has fallen from 4.4% to 2.8%. That is below the national rate of 3.6% and the CMS Region V rate of 3.2%.

In March 2008, the ISDH conducted a Long Term Care Leadership Conference on reducing the use of physical restraints. Speakers discussed best practices and participants were provided with tools to assist in the reduction of restraints. The ISDH congratulates long term care providers for their efforts and accomplishments in reducing restraints.

Since 2003 restraint use in Indiana long term care facilities has decreased from 6.0% to 2.8%. Indiana is currently fourth in CMS Region V in restraint use. Minnesota and Wisconsin have rates of 1.8 and 1.4.

## H1N1 Update

Indiana H1N1 Update: July 23, 2009

The Indiana State Department of Health reports a total of 291 confirmed cases of the pandemic H1N1 in the state. There have been two deaths associated with the pandemic H1N1 influenza in Indiana since April 20, 2009.

According to the Centers for Disease Control and Prevention (CDC), severe disease and death caused by pandemic H1N1 flu thus far have affected younger adults, children, pregnant women, and persons of all ages with certain underlying medical conditions. The virus has also caused numerous outbreaks in schools and summer camps.

"There are a lot of unknowns about the upcoming flu season, but what we do know is how to prevent the spread of influenza," said State Health Commissioner Judy Monroe, M.D. "I want to remind the public we are in a pandemic and the best way to protect yourself, your family, and your community from the spread of the H1N1 flu virus is to practice the three C's: Clean, Cover, and Contain. We need every Hoosier to

clean by properly washing their hands, cover their cough or sneeze with a tissue or a sleeve, and contain germs by staying home if they are sick."

CDC H1N1 Update:

Q. What are the plans for developing novel H1N1 vaccine?

A. Vaccines are the most powerful public health tool for control of influenza, and the U.S. government is working closely with manufacturers to take steps in the process to manufacture a novel H1N1 vaccine. Working together with scientists in the public and private sector, CDC has isolated the new H1N1 virus and modified the virus so that it can be used to make hundreds of millions of doses of vaccine. Vaccine manufacturers are now using these materials to begin vaccine production. Making vaccine is a multi-step process which takes several months to complete. Candidate vaccines will be tested in clinical trials over the few months.

Q. When is it expected that the novel H1N1 vaccine will be available?

A. The novel H1N1 vaccine is expected to be available in the fall. More specific dates cannot be provided at this time as vaccine availability depends on several factors including manufacturing time and time needed to conduct clinical trials.

Q. Will the seasonal flu vaccine also protect against the novel H1N1 flu?

A. The seasonal flu vaccine is not expected to protect against the novel H1N1 flu.

Q. Can the seasonal vaccine and the novel H1N1 vaccine be given at the same time?

A. Clinical trial results will be necessary to confirm that novel H1N1 and seasonal vaccine will be safe and effective if given at the same time. We expect the seasonal vaccine to be available earlier than the H1N1 vaccine. The usual seasonal influenza viruses are still expected to cause illness this fall and winter. Individuals are encouraged to get their seasonal flu vaccine as soon as it is available.

Q. Who will be recommended as priority groups to receive the novel H1N1 vaccine?

A. Based on what we're currently seeing with respect to the virus and epidemiologic data, states, communities, and health care providers should begin planning strategies for how they will vaccinate younger people (children and younger adults), pregnant women, healthcare personnel, and people who have underlying health conditions. The Advisory Committee on Immunization Practices (ACIP) and other federal advisory bodies will continue to monitor the virus and review epidemiologic data over the summer. We'll be looking to the ACIP and other stakeholders, as well as the public, as we move forward in our planning. It is possible that vaccine priority groups will differ from earlier guidance as more data becomes available however it's very important for planning to continue based on information currently available.

Q. Where will the vaccine be available?

A. Every state is developing a vaccine delivery plan. Vaccine will be available in a combination of settings such as vaccination clinics organized by local health departments, healthcare provider offices, schools, and other private settings, such as pharmacies and workplaces.

Q. Are there other ways to prevent the spread of illness?

A. Take everyday actions to stay healthy.

- o Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- o Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hands cleaners are also effective.
- o Avoid touching your eyes, nose or mouth. Germs spread that way.
- o Stay home if you get sick. CDC recommends that you stay home from work or school and limit contact with others to keep from infecting them.

Follow public health advice regarding school closures, avoiding crowds and other social distancing measures. These measures will continue to be important after a novel H1N1 vaccine is available because they can prevent the spread of other viruses that cause respiratory infections.

Q. What about the use of antivirals to treat novel H1N1 infection?

A. Antiviral drugs are prescription medicines (pills, liquid or an inhaled powder) that fight against the flu by keeping flu viruses from reproducing in your body. If you get sick, antiviral drugs can make your illness milder and make you feel better faster. They may also prevent serious flu complications. This fall, antivirals may be prioritized for persons with severe illness or those at higher risk for flu complications.

[Read full article>>](#)

For more information on H1N1 situation, please visit [www.Flu.gov](http://www.Flu.gov)

## Recalls

Medtronic and FDA notified healthcare professionals and patients of a Class I recall of Medtronic Kappa Series 600/700/900 and Sigma Series 100/200/300 pacemakers due to a failure of the devices to pace the heart. Patients with malfunctioning pacemakers may experience a return of symptoms associated with abnormal heart rate, such as fainting or lightheadedness. In rare cases, pacemaker-dependent patients may experience serious injury or even death. These devices may fail due to a separation of wires that connect the electronic circuit to other pacemaker components, such as the battery. Most of the pacemakers affected by this recall have been implanted in patients for five years or longer. To determine if a pacemaker is part of this recall, contact Medtronic at 1-800-505-4636.

- [Read the complete MedWatch 2009 Safety Summary, including links to the FDA news release, recall notice and consumer information.](#)

Teva Pharmaceuticals USA issued a voluntary user level nationwide recall of Propofol injectable Emulsion 10 mg/mL vials. The firm's press release is at the FDA website at:

- <http://www.fda.gov/Safety/Recalls/ucm172474.htm>.

Brookstone Pharmaceuticals issued a voluntary recall of all lots of Brookstone Pharmaceuticals' Concentrated Acetaminophen Drops in 16 ounce bulk containers. The firm's press release is at the FDA website at:

- <http://www.fda.gov/Safety/Recalls/ucm171780.htm>.

Respironics California, Inc. and FDA notified healthcare professionals of a Class I recall of the BiPAP Focus Non-Invasive Ventilator System, model number PCM120PS18-2315P. Power supply failures have occurred on some ventilators. This product was distributed from August, 2006 through April 11, 2008.

- [Read the complete MedWatch Safety summary, including a link to the FDA Recall notice.](#)

The Consumer Product Safety Commission announced the recall of 94,000 dual sensor smoke alarms.

The recall indicates an electrostatic discharge can damage the unit, causing it not to warn consumers of a fire. The smoke alarms were marked with the UL Listing Marks for the United States and Canada. The recall can be viewed at:

- <http://www.cpsc.gov/cpsc/pub/prerel/prhtml09/09266.html>.

## CMS Updates

CMS Survey and Certification Memo 09-47: Intermediate Care Facilities for the Mentally Retarded (ICF/MR): Clarification of Protection of Client's Rights at 42 CFR §483.420(a)(4) - Ensure Right to Manage Financial Affairs (7/10/09). Surveyors currently cite a deficiency during the ICF/MR survey process if every client in the facility does not have a formal money management program in place. The regulations at 42 CFR 483.420(a)(4) state that clients in the ICF/MR must be allowed to manage their financial affairs and be taught to do so to the extent of their capabilities. The determination as to the appropriateness of a formal money management program for an ICF/MR client is based upon the results of a comprehensive functional assessment and a consensus by the interdisciplinary team. [CMS Survey and Certification Memo 09-47](#) is attached.

F441 Update: Transmittal 51 of the CMS Manual System, Pub 100-07, State Operations Provider Certification, "Interpretive guidelines for Long-Term Care Facilities," Tag F441", "was released on July 20, 2009 and will be effective September 30, 2009. [Transmittal 51](#) (2009) is attached.

That is all for this week. Best wishes for the week.

Terry Whitson  
Assistant Commissioner  
Indiana State Department of Health

The logo for the Indiana State Department of Health features a green gradient background. The words "Indiana State" are in a smaller font above the larger, bold words "Department of Health".

Indiana State  
Department of Health

Visit the ISDH Pressure Ulcer Resource Center  
at <http://www.in.gov/isdh/24558.htm/>