



Indiana State
Department of Health

LONG TERM CARE NEWSLETTER

ISDH Long Term Care Newsletter
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Today's Issue:

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Social Media Concerns

In recent years the use of social media has become very popular and provided new opportunities for communication. Social media is easy to use. It is, however, also easy to misuse. Long term care providers need to take an active role related to the risks of social media.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) established individual privacy and security standards that health care providers are obligated to protect. The Centers for Medicare and Medicaid Services (CMS) identified concerns related to privacy and exploitation in their proposed rule changes for nursing homes. Their proposed rule stated that "When these regulations were originally implemented, social media and the wide use of cellular and personal electronic devices were not a major concern or topic of consideration in the protection of residents. These advances in technology have made it easier to invade someone's privacy and therefore increase the risk of exploitation." To address social media concerns, new definitions of "abuse", "neglect", and "exploitation" are included in the proposed rules.

In a December 21, 2015, a ProPublica article, "[Inappropriate Social Media Posts by Nursing Home Workers. Detailed](#)", discussed incidents where photos or videos of nursing home residents were shared through social media. Long term care facilities should review policies and provide staff training to continue to protect resident's privacy, dignity and rights.

CPR - 2015 Highlights

The American Heart Association's "[Guidelines Updates for CPR](#)" summarize the key issues and changes from the *2015 American Heart Association (AHA) Guidelines Update for Cardiopulmonary Resuscitation (CPR) and Emergency Cardiovascular Care (ECC)*. The highlights focus on recommendations that will result in significant changes in resuscitation practice or resuscitation training. Rationales for the recommendations are provided. Below is a list of some of the changes for the Adult - Basic Life Support for

Health Care Professional.

Adult - Basic Life Support (BLS) for Health Care Professional
Rescuer(s) Should:
Perform chest compressions at a rate of 100-120/min
Compress to a depth of at least 2 inches (5cm)
Allow for full chest recoil after each compression (avoid leaning on chest)
Minimize pauses in compression (not > 10 seconds)
Ventilate adequately (2 breaths after 30 compressions , delivered over 1 second & causing chest to rise)

Infection Control and Prevention

CDC Health Advisory Network (HAN)

Seasonal influenza contributes to substantial morbidity and mortality each year in the United States. CDC estimates that in the 2014-2015 season there were approximately 19 million influenza-associated medical visits and 970,000 influenza-associated hospitalizations.

The spectrum of illness thus far for the 2015-2016 season has ranged from mild to severe and is consistent with other influenza seasons. Although influenza activity nationally is low compared to this time last season, it is increasing and some areas of the United States are experiencing high activity. Further increases are expected in the coming weeks.

The CDC has received reports of severe influenza illness and reminds clinicians to treat suspected influenza in high-risk outpatients, those with progressive diseases, and all hospitalized patients with antiviral medication as soon as possible regardless of negative rapid influenza diagnostic test (RIDT) results and without waiting for RT-PCR testing results. Early antiviral treatment works best but treatment may offer benefit when started up to 4-5 days after symptom onset in hospitalized patients. Early antiviral treatment can reduce influenza morbidity and mortality.

Attached is the [CDC Health Alert - Flu Season Begins: Severe Influenza Illness Reported](#) from February 1, 2016.

ISDH Epidemiology Resource Center HAI Website

The [Indiana State Department of Health \(ISDH\) Healthcare Associated Infection](#) website has been updated to include the following toolkits:

- [CDC Carbapenem-resistant Enterobacteriaceae \(CRE\) Toolkit](#)
- [CDC Methicillin-resistant Staphylococcus aureus \(MRSA\) Prevention Toolkit](#)
- [CDC Clostridium difficile Toolkit](#)
- [CDC HAI Prevention Tools for Long Term Care Facilities](#)

Each toolkit was created by the Centers for Disease Control and Prevention. The [CDC HAI Prevention Tools for Long Term Care Facilities](#) includes *The Core Elements of Antibiotic Stewardship for Nursing Homes* that adapts the CDC Core Elements of Hospital Antibiotic Stewardship into practical ways to initiate or expand antibiotic stewardship activities in nursing homes. Any action taken to improve antibiotic use is expected to reduce adverse events, prevent emergence of resistance, and lead to better outcomes for residents.