



# SNF Honors Program

## 2024-2025 year

Presented by LA County Department of Public Health  
Acute Communicable Disease Control  
Healthcare Outreach Unit





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## SNF Honors Program Overview

The SNF Honors Program is designed to provide special recognition to LA County facilities for outstanding performance in public health engagement, vaccination coverage, infection prevention and control (IPC) program structure, and preventive action. The Honors Program cycles annually from August through May, and different criteria must be met to achieve recognition for each Program Category. SNFs will be newly recognized each year in as many Categories as they meet the Criteria for.



# 2024-2025 Program Categories

## Public Health Engagement

*Must meet ALL criteria*

- Facility contact form
- Ask an IP
- PSIE

## Vaccination Coverage

*Must meet at least TWO*

- HCP Influenza  $\geq 90\%$
- HCP COVID-19  $\geq 80\%$
- Resident COVID-19  $\geq 80\%$

## Infection Prevention & Control (IPC) Program Structure

*Must meet ALL criteria*

- One CBIC board-certified IP
- One IP at the SNF  $\geq 1$  year

## Preventive Action

*Must meet at least TWO*

- NHSN annual survey
- ICAR
- QAPI project A3 template
- Prospective MDRO PPS



# Criteria Requirements

Details about each Criteria needed for all Program Categories





# Public Health Engagement

*Must meet **ALL** criteria (3 requirements)*

- Annual Facility contact form must be completed April-May of 2025
  - The annual update form is not available until April 2025
  - An all SNF email will be sent with the contact form link
- Attend at least 6 [Ask an IP](#) sessions
  - At least 3 must be during 2024 and at least 3 must be during 2025
  - [Registration link](#)
- Enroll in Los Angeles County's Patient Safety and Information Exchange (PSIE)
  - *See the following slides for instructions for how to begin!*

## Register for PSIE to access MDRO patient history

- Up to 5 users per facility
- Focusing on those involved in infection prevention and control

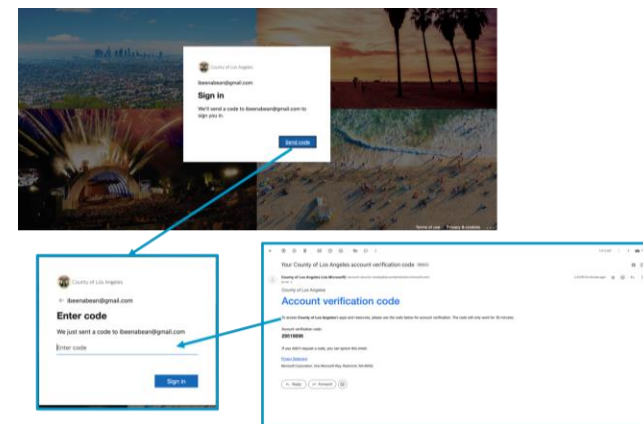
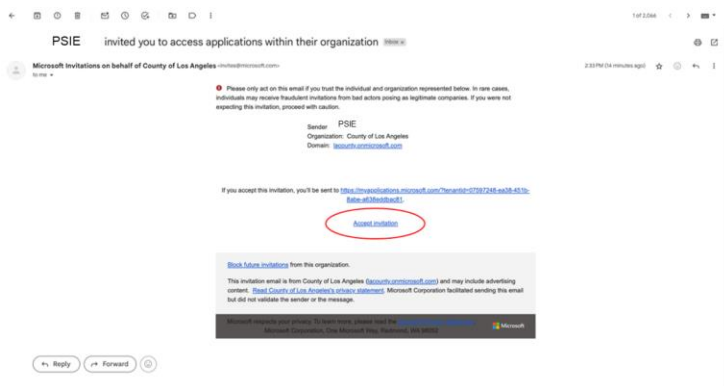
**To start registration for PSIE, email [PSIE@ph.lacounty.gov](mailto:PSIE@ph.lacounty.gov) for the form links below.**

1. Complete a registration form.
  - Applicants must use their facility email address to register.
  - Applicants can select more than one health care facility if applicable.
  - Please fill in the contact of your Administrator or Director of Nursing (DON) for Health Care Facility Administrator, even if it is yourself.
2. Sign and email Data User Agreement (a PDF form, best opened in Adobe Acrobat) to [PSIE@ph.lacounty.gov](mailto:PSIE@ph.lacounty.gov).
  - Each PSIE user will need to complete their own Data User Agreement, agreement cannot be signed for an entire facility.
  - Form requires your First/Last Name, your Title, and your Organization/Facility Name. Please sign on the line above your name.
3. Set up Microsoft Authentication to use County of Los Angeles apps upon approval (see next slide for more details).

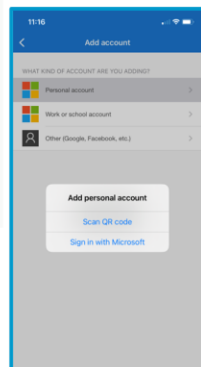
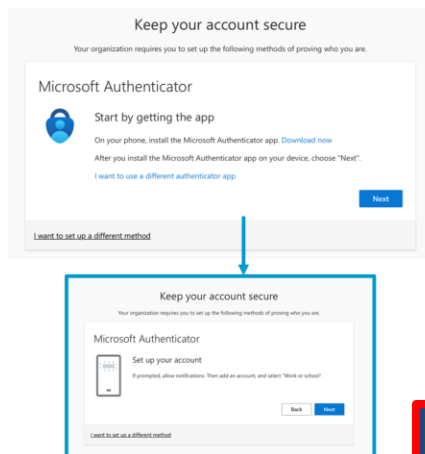
***Email [PSIE@ph.lacounty.gov](mailto:PSIE@ph.lacounty.gov) for more information!***

## Microsoft Authentication (final step for PSIE registration)

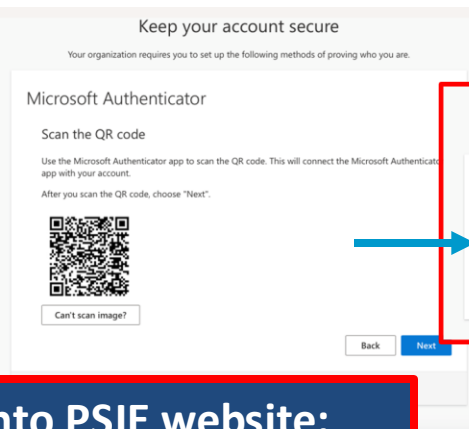
1. Accept email invitation from Microsoft Invitations
2. Follow email verification instructions



3. Download Microsoft Authenticator app



4. Scan the QR code on your computer screen to connect your Microsoft Authenticator app



**5. Ready to log into PSIE website:  
<https://dphpsieprod.azurewebsites.net>**





# Vaccination Coverage

*Must meet at least TWO criteria*

## **All vaccination coverage requirements are for the winter respiratory virus season October 2024 – April 2025\***

- Healthcare personnel (HCP) cumulative coverage rate for Influenza must be 90% or greater
  - Report one seasonal cumulative coverage into the HSP module in NHSN by the May 15 deadline
- HCP COVID-19 coverage rate for any one week during the season must be 80% or greater
  - Report COVID-19 vaccination into the NHSN LTCF Module weekly
- Resident COVID-19 coverage rate for any one week during the season must be 80% or greater
  - Report COVID-19 vaccination into the NHSN LTCF Module weekly

\*NOTE: Staff and Resident vaccination rates do not need to meet the rate threshold during the same reporting week.



## Vaccination Coverage *(continued)*

### *Additional notes*

- All vaccination data will be pulled directly from NHSN at the end of May 2025.
- Data will be analyzed and any facilities meeting the thresholds for each vaccination criteria will be recognized.
- For questions about NHSN reach out to the NHSN helpdesk email ([nhsn@cdc.gov](mailto:nhsn@cdc.gov)) or access the resources offered by HSAG.
  - Quick guide for NHSN COVID-19 reporting: <https://www.hsag.com/nhsn-help>
  - Register for an upcoming HSAG / CDPH IP webinar: <https://www.hsag.com/cdph-ip-webinars>
  - With further questions, email Simi Williams: [swilliams1@hsag.com](mailto:swilliams1@hsag.com)

# Infection Prevention & Control (IPC) Program Structure

*Must meet **ALL** criteria (2 requirements)*

- At least **1** Infection Preventionist (IP) must be certified by the Certification Board of Infection Control and Epidemiology (CBIC)
- At least **1** IP who has worked at the facility for at least 1 year

Certified is defined as holding any of the following nationally recognized credentials in infection control:

- a-IPC: Associate – Infection Prevention and Control
- CIC: Certification in Infection Control
- LTC-CIP: Long-Term Care Certification in Infection Prevention
- BCIDP: Board Certified Infectious Disease Pharmacist

A **survey** will be distributed in April 2025 asking:

- IPs to submit a screenshot of their CBIC certification when they log in
- How long the IP(s) have worked at the facility



# Preventive Action

*Must meet at least **TWO** criteria*

## NHSN Annual Survey

- *See the following slides for instructions on how to begin*
- Submit the annual survey in NHSN by March 25, 2025

## Preventive ICAR

- Use [this form](#) to request an [ICAR visit](#) with the IPs from Public Health
- ICAR must be completed no later than May 15, 2025

## QAPI Project A3 Template

- *See the following slides for instructions on how to begin*
- Complete QAPI project and submit A3 by April 30, 2025

## Prospective MDRO PPS

- *See the following slides for instructions on how to begin*
- Request and complete the PPS no later than May 15, 2025

# NHSN Annual Survey (Preventive Action)



- The NHSN Annual Survey is **not required** by CMS
- Completing the Annual Survey allows LTCFs to report into the HAI modules (healthcare acquired infections: MDROs, CDs, etc) *if they choose to*
- The Annual Survey can be completed by **any** LTCF with NHSN access, but *it must be added first* (see link below for how to add the Survey)
- [This NHSN LTCF Annual Facility Survey Review PDF](#) explains how to add and complete the Annual Survey in NHSN
  - If your SNF plans to complete this Criteria for the Preventive Action Component of the SNF Honors Program, please *follow the steps in the Review document linked above.*
  - Completing the Annual Survey must be done all at once (progress cannot be saved) but should not take very long if all the necessary information is gathered in advance.
- It is recommended to print out the paper version of the LTCF Annual Survey ahead of time to ensure all data is available when completing the survey electronically in NHSN
  - [LTCF Annual Facility Survey instructions PDF](#)
  - [LTCF Annual Facility Survey printable PDF](#)

The QAPI Project A3 Template requires facilities to develop and implement a Quality Assurance and Performance Improvement (QAPI) project. This Criteria will take time and participation from all levels of leadership at the facility.

LA County DPH hosted a 9-month program for SNFs beginning summer 2022 called Transforming Nursing Home Care Together (TNT). This program aimed to empower SNF staff to initiate and maintain quality improvement projects within their facilities, helping to enhance resident care and family satisfaction.

- The [TNT webpage](#) hosts all [session recordings](#) as well as a [list of resources](#) for any SNF to access and use
  - If your facility participated in TNT or is familiar with how to begin and implement a QAPI project, [the A3 template is here](#) (linked in the resources section of the webpage)
  - To learn about QAPI and quality improvement for your facility, begin with the [weekly recordings from Unit 1](#)

To complete the A3 Template the facility needs to progress through all stages of their QAPI project. However, it is okay to submit a completed A3 Template even if your facility is still fine-tuning things related to the project.

Facilities will receive an email in May 2025 with instructions for how to submit their QAPI Project A3 Template for review.

- How can it benefit you:
  - Implementing proactive point prevalence surveys (PPS) for targeted MDROs can significantly enhance your facility's ability to detect and manage these organisms internally. By increasing awareness of MDRO status for patients and residents, especially during transfers, you not only improve your facility's infection control but also contribute to reducing the regional prevalence of CPOs.
- What to expect:
  - Swabs and shipping supplies will be delivered free-of-charge by Public Health.
  - Your facility will swab residents and ship specimens. In-service provided.
  - Infection control expertise and support will be available.
- Where to request:
  - LACDPH MDRO PPS Request Form:  
[https://www.surveymonkey.com/r/LACDPH\\_PPS](https://www.surveymonkey.com/r/LACDPH_PPS)



# Questions?

Email [LACSNF@ph.lacounty.gov](mailto:LACSNF@ph.lacounty.gov)

