



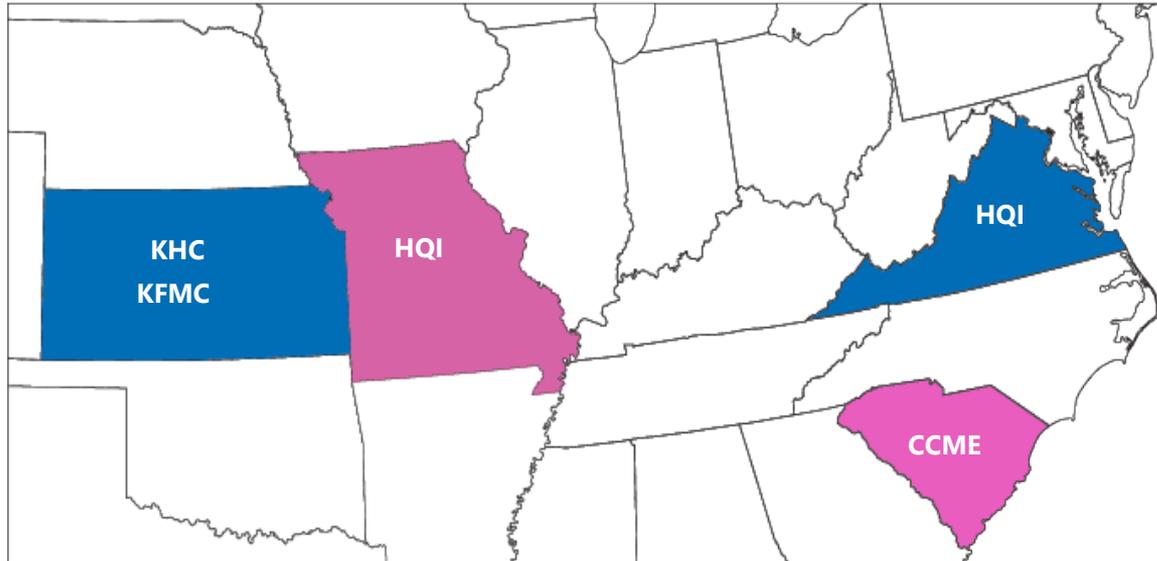
Health Quality Innovation Network

## Weekly Dose Office Hours

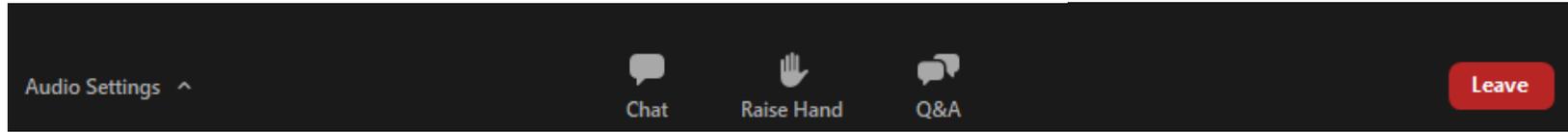
# We Can Boost the Boosters: What You Need to Know About COVID-19 Vaccines and Boosters

3/23/2022

# Health Quality Innovation Network



# Logistics – Zoom Webinar



To ask a question, click on the **Q&A** icon.

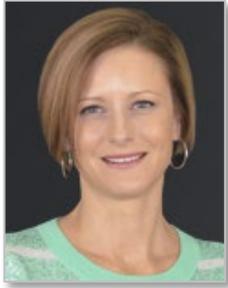
**Raise your hand** if you want to verbally ask a question.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.

# Your Team



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Quality Improvement  
Advisor

# Goals for Weekly Vaccine and Booster Education:

- Improving booster uptake
- Current knowledge updates
- A forum for vaccine and booster questions
- Interactive, peer-to-peer collaboration
- A “safe space” to talk
- Best practices and innovative idea sharing
- Tips for improving resident and staff safety

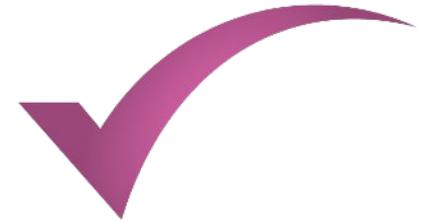


*The content presented in this webinar is based on COVID-19 information and guidance as of the date of this session.*

# Current Knowledge Update

## Learning Objectives

1. Provide updated guidance to inform booster vaccine administration
2. Make resources for optimizing booster uptake available for attendees
3. Provide tools for tracking administration of COVID-19 booster vaccines
4. Furnish opportunities for attendees to share their practices with each other and seek advice from others



# NH Vaccine Data is PUBLICLY AVAILABLE

Booster data is displayed with the other COVID-19 vaccination data on the [Medicare.gov Care Compare website](https://www.medicare.gov/care-compare).

- The vaccination section is located below the Star Ratings on Care Compare. Select “View Vaccination Rates.”
- Data is **updated every other Thursday** with the most recent available data. The display is delayed by a week and several days because of the validation and posting process. Updates will continue every other week.

## DETAILS

### COVID-19 vaccination and booster rates

The percent of residents and staff who are vaccinated for COVID-19 in the nursing home, as well as the percent of residents and staff with completed vaccinations who received boosters, along with the state and national rates.

[View Vaccination Rates](#)

# Number of Fully Vaccinated Americans

Total Vaccine Doses		At Least One Dose	Fully Vaccinated	Booster Doses	Booster Eligible***
Delivered	694,288,735	<b>Fully Vaccinated* People</b>		Count	Percent of US Population
Administered	555,897,985				
<b>Learn more about the <a href="#">distribution of vaccines.</a></b>					
<b>216.4M</b> People fully vaccinated					
<b>95.5M</b> People received a booster dose**					
		Total	216,355,844	65.2%	
		Population ≥ 5 Years of Age	216,328,999	69.3%	
		Population ≥ 12 Years of Age	208,710,606	73.6%	
		Population ≥ 18 Years of Age	194,059,942	75.1%	
		Population ≥ 65 Years of Age	48,676,530	88.8%	

# Number of Boosted Americans

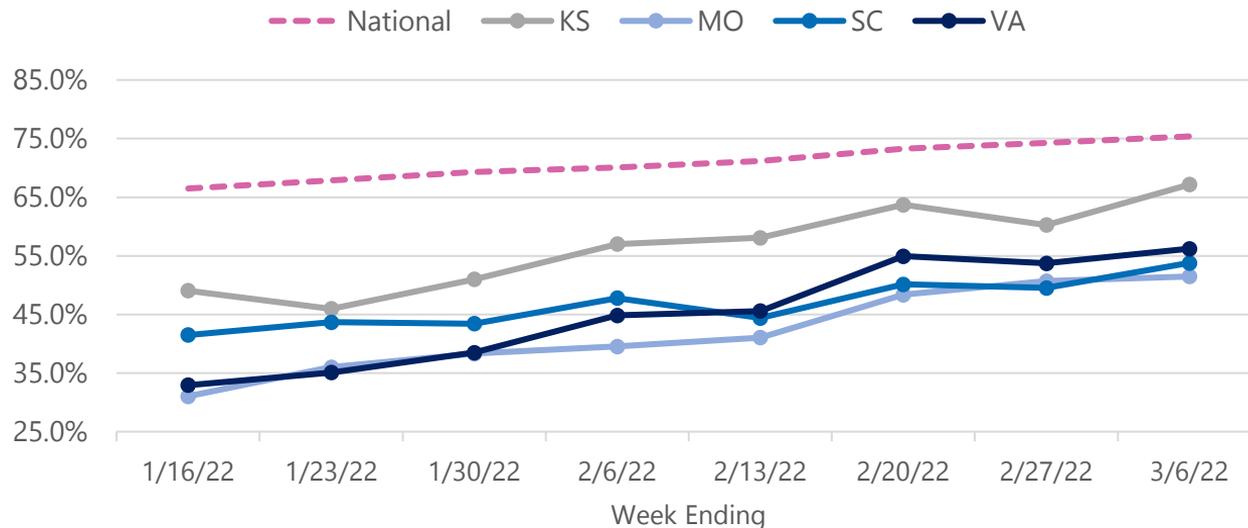
Total Vaccine Doses		At Least One Dose	Fully Vaccinated	Booster Doses	Booster Eligible***
Delivered	694,288,735	<b>Fully Vaccinated* People with a Booster Dose**</b>		Count	Percent of Fully Vaccinated*
Administered	555,897,985				
<b>Learn more about the <a href="#">distribution of vaccines.</a></b>					
216.4M People fully vaccinated					
95.5M People received a booster dose**					
		Total	95,499,589		44.1%
		Population ≥ 12 Years of Age	95,481,156		45.7%
		Population ≥ 18 Years of Age	92,253,537		47.5%
		Population ≥ 65 Years of Age	32,434,811		66.6%

# Booster Eligible: Where Leaders Can Help

At Least One Dose	Fully Vaccinated	Booster Doses	Booster Eligible***
<b>Eligible People, No Booster Dose</b> <b>(updated Wednesdays)</b>		Count	Percent
Total		88,264,737	49.9%
Population ≥ 12 Years of Age		88,264,737	49.9%
Population ≥ 18 Years of Age		80,653,779	48.6%
Population ≥ 65 Years of Age		14,722,545	33.7%

# Updated Local Booster Rates

**Percentage of NH Residents Who Received Additional or Booster Doses (Vaccine QII Booster Referrals)**



## Current Rates

National: 75.4%

KS: 78.5%

MO: 69.8%

SC: 69.0%

VA: 72.6%

## Relative Improvement

National: 13.4%

KS: 36.9%

MO: 65.9%

SC: 29.6%

VA: 70.6%

# Polling Question 1

Is your facility facing external barriers (i.e., family, social media or other external influences) to residents getting a booster vaccine?

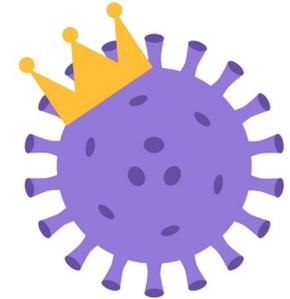
A. YES

B. NO



# What is COVID-19 Again?

- COVID-19 is a virus first identified in December 2019 in Wuhan, China that quickly spread throughout the world. There are seven human coronaviruses, the first was discovered in the 1960s.
- A virus is smaller than we can see – a small bit of genetic code, which is covered by a protective coat. Viruses cannot multiply alone, they must infect living cells and use them to make copies of themselves, while doing this, they damage that cell and usually the host.
- Other well-known viruses: HPV, adenoviruses (cause colds, sore throat, pink eye), hepatitis A-D, varicella-zoster (chicken pox and shingles), etc.



CORONAVIRUS

# COVID-19: Things to Avoid

## Getting COVID-19

Stay up-to-date with vaccinations, use barriers to protect airways from droplets & follow infection prevention cleaning standards.

## Spreading COVID-19

Help prevent others from sickness, debilitation or possible death.

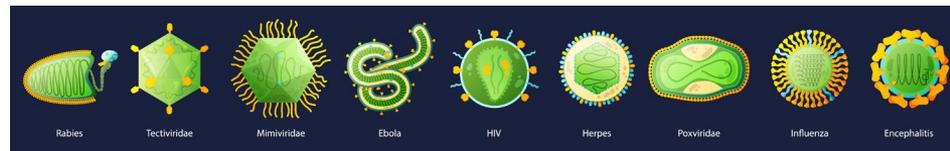
## Getting Long COVID

It can cause fatigue, cough, smell and/or taste loss, chest tightness, breathlessness, palpitations, myalgia and difficulty focusing that can last weeks or months. Although it's still being studied, the vaccine can prevent at least 50% of long COVID.

# Can't I Take an Antibiotic?

Antibiotics don't kill viruses. **Vaccines** can prevent viruses and make them potentially curable.

- Smallpox vaccine: Studied in the 1700s, mass produced by 1940s
- Polio vaccine: Licensed in the 1950s, Jonas Salk a hero
- Influenza vaccine: Changes yearly based on research
- Hepatitis B vaccine: Given at birth, can cure risk of Hep B, licensed in 1980s
- COVID-19 vaccines: Messenger RNA vaccine potential was discovered in the 1960s, used in Ebola and rabies, in 2019 a worldwide effort focused on a vaccine to prevent this devastating illness and mRNA was ready to help



[Vaccine History: Developments by Year | Children's Hospital of Philadelphia \(chop.edu\)](#)  
[The Long History of mRNA Vaccines | Johns Hopkins Bloomberg School of Public Health \(jhu.edu\)](#)

# Why the Massive Investment of Money, Technology and Research?



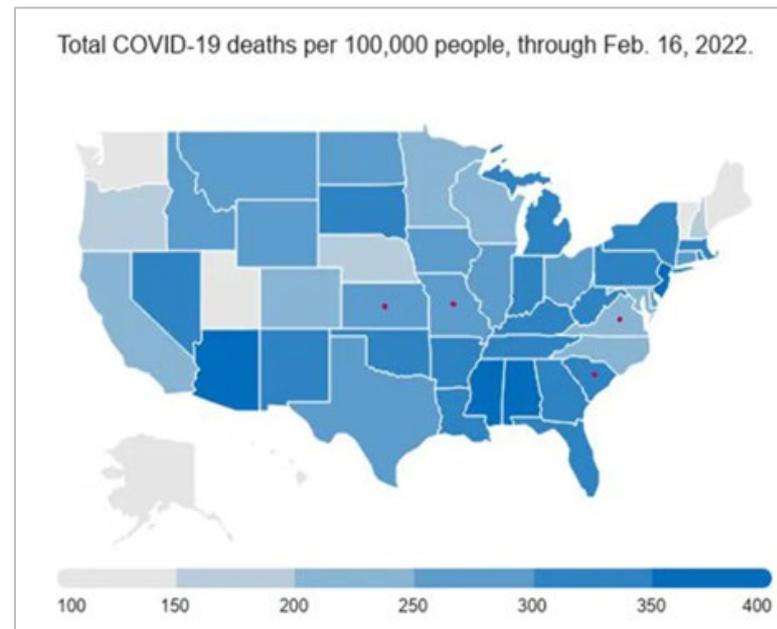
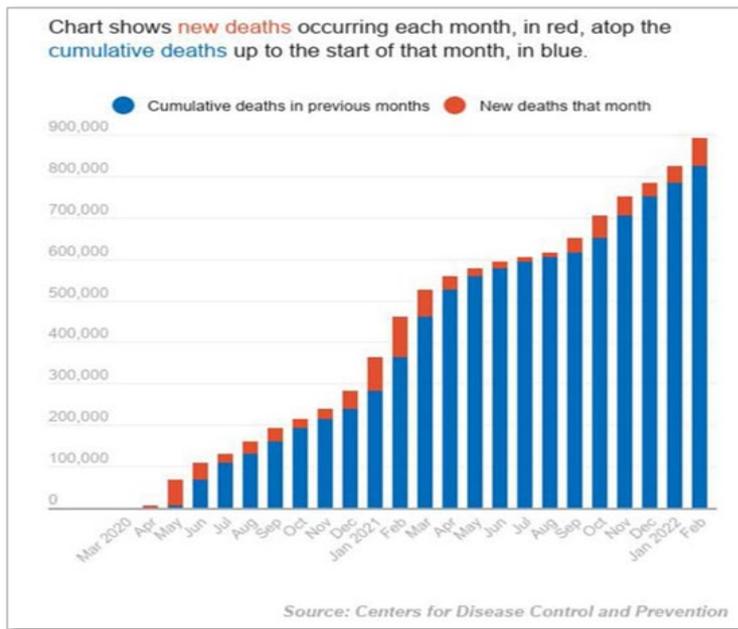
This was different.  
Infectious disease  
experts noted it  
was contagious  
and deadly.

[COVID-19 Map - Johns Hopkins Coronavirus Resource Center \(jhu.edu\)](https://www.jhu.edu/coronavirus)

# I'm Vaccinated, Why Do I Need a Booster?

- It is common to need a booster with vaccinations and COVID-19 protection is no different.
- Protection from vaccines can be variable, so many vaccinations time boosters to make up for that waning protection.
- As with any illness, guidance is updated as we know more.
- Currently a person age 5+ is due for COVID-19 vaccination and should stay up-to-date.
- We can normalize this vaccine like we have with others, most vaccines in the U.S. need multiple doses to be effective

# Cautious Optimism as Vaccination Use Improves



[Charts Paint a Grim Picture 2 Years Into the Coronavirus Pandemic \(medscape.com\)](https://www.medscape.com)

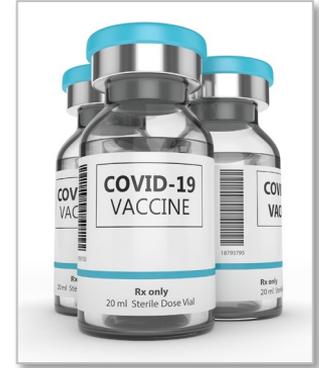
# We Have Done This Before, We Can Do It Again

Vaccine	Birth	2 Months	4 Months	6 Months	12 Months	15 Months	18 Months	4-6 Years	11-12 Years	14-16 Years
Hepatitis B	HB-1	HB-2		HB-3						
Diphtheria-Tetanus-Pertussis (DTP)		DTP	DTP	DTP	DTP or DTaP ≥ at 15 months			DTP or DTaP	Td	
<i>Haemophilus influenzae</i> type b		Hib	Hib	Hib	Hib					
Poliovirus		OPV	OPV	OPV				OPV		
Measles-Mumps-Rubella					MMR			MMR or MMR		

Pfizer-BioNTech <sup>[1]</sup>	Moderna <sup>[1]</sup>	Johnson & Johnson's Janssen <sup>[1,2]</sup>
<b>Ages Recommended</b> 5+ years old	<b>Ages Recommended</b> 18+ years old	<b>Ages Recommended</b> 18+ years
<b>Primary Series</b> 2 doses Given 3 weeks (21 days) apart <sup>[3]</sup>	<b>Primary Series</b> 2 doses Given 4 weeks (28 days) apart <sup>[3]</sup>	<b>Primary Series</b> 1 dose
<b>Booster Dose</b> Everyone ages 18 years and older should get a booster dose of either Pfizer-BioNTech or Moderna (COVID-19 vaccines) 5 months after the last dose in their primary series.	<b>Booster Dose</b> Everyone ages 18 years and older should get a booster dose of either Pfizer-BioNTech or Moderna (COVID-19 vaccines) 5 months after the last dose in their primary series.	<b>Booster Dose</b> Everyone ages 18 years and older should get a booster dose of either Pfizer-BioNTech or Moderna (mRNA COVID-19 vaccines) at least 2 months after the first dose of J&J/Janssen COVID-19 vaccine. You may get J&J/Janssen <a href="#">in some situations</a> .
Teens 12-17 years old should get a Pfizer-BioNTech COVID-19 Vaccine booster 5 months after the last dose in their primary series.		

# In the News

For some people (especially males 12-39 years old), an 8-week interval between the first and second mRNA vaccine doses may be determined by a clinician to be optimal.



This is not for those immunocompromised, adults 65 years and older, and others who need rapid protection due to increased concern about community transmission or risk of severe disease.

# Tool to Avoid COVID-19: Quarantine

Quarantine	No Need to Quarantine
Symptomatic residents, regardless of vaccination status	Exposed residents who are UP TO DATE on vaccination
Exposed residents, who are NOT UP TO DATE ON VACCINATION (even if the viral test is negative)	Exposed residents who have recovered from COVID-19 in the past 90 days
New admissions/re-admissions who are NOT UP TO DATE on vaccination (even if they had a negative test on admission)	New admissions/re-admissions who are UP TO DATE on vaccination
Residents who have left the facility for > 24 hours (regardless of reason) AND are NOT UP TO DATE on vaccination	Unexposed or asymptomatic residents
<ul style="list-style-type: none"> <li>• UP TO DATE: Person has received ALL recommended COVID-19 vaccines, INCLUDING any booster doses</li> <li>• Quarantine can be removed after:               <ul style="list-style-type: none"> <li>– 10 days if they do not develop symptoms</li> <li>– 7 days if they do not develop symptoms AND a viral test is negative</li> </ul> </li> <li>• Collect specimens to end quarantine 48 hours before planned end to quarantine</li> <li>• Count day of exposure as day 0 when determining length</li> </ul>	



## Polling Question 2

Is there resistance from staff or residents who are eligible for an additional dose?

A. Yes

B. No



# Additional Dose Recommendations

The CDC and the FDA recommend an additional dose when eligible for those who are immunocompromised and ages 5 and older. This includes those who:

- Have been receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and are taking medicine to suppress the immune system
- Received a stem cell transplant within the last two years, or are taking medicine to suppress the immune system
- Are diagnosed with moderate or severe primary immunodeficiency (such as DiGeorge syndrome or Wiskott-Aldrich syndrome)
- Are diagnosed with HIV and have a high viral load or low CD4 count, or are not currently taking medication to treat HIV
- Are taking drugs like high-dose steroids or other medications that may cause severe suppression of the immune system

# Tools to Boost the Booster:

Plans, Documentation, Education

What have YOU tried?



# Polling Question 3

What have you tried to boost the booster? (multiple choices okay!)

- A. Nursing Home COVID-19 Vaccination Action Plan
- B. QAPI tools on your vaccination
- C. Vaccination Process Guide
- D. COVID-19 Vaccination Tracking Tool for Use in SNFs
- E. Simple Strategies for educational purposes



## Nursing Home COVID-19 Vaccination Booster Action Plan



Nursing Facility Name: Click to enter text.		CCN ID: Click to enter number.
Nursing Facility Address: Click to enter text.		
Primary Contact Name: Click to enter text. Email: Click to enter text.	Secondary Contact Name: Click to enter text. Email: Click to enter text.	
Primary NHCN User Name: Click to enter text. Email: Click to enter text.	Backup NHCN User Name: Click to enter text. Email: Click to enter text.	
<b>Nursing Facility Action Plan Information</b>		
Date Action Plan Initiated: Click to enter a date.		Resident Census: Click to enter number.
RESIDENTS	# of Residents Who Have Received COVID-19 Booster as of (today's date): Click to enter number.	
	# of Residents Eligible for COVID-19 Booster as of (today's date): Click to enter number.	
	# Residents Received Booster divided by # Residents Eligible for Booster = (enter calculation) % Rate Click to enter number.	
Current # of Residents with Medical Contraindication: Click to enter number. Religious Declination: Click to enter number.		
STAFF	# of Staff Who Have Received COVID-19 Booster as of (today's date): Click to enter number.	
	# of Staff Eligible for COVID-19 Booster as of (today's date): Click to enter number.	
	# Staff Received Booster divided by # of Staff Eligible for Booster = (enter calculation) % Rate Click to enter number.	
Current # of Staff with Approved Vaccination Exemptions: Medical: Click to enter number. Religious: Click to enter number.		
<b>Facility COVID-19 Booster Goal</b>		
Facility will achieve 90% Resident Booster Rate by (enter date): Click to enter date.		
<b>Root Cause Analysis – check all that apply</b>		
<input type="checkbox"/> Resident has medical beliefs for refusal	<input type="checkbox"/> Resident has religious beliefs for refusal	
<input type="checkbox"/> Resident expresses fear of vaccination/booster	<input type="checkbox"/> NHCN reporting has been delayed or there was issue with accuracy	
<input type="checkbox"/> Unable to obtain permission for administration of vaccination/booster from resident/resident representative	<input type="checkbox"/> Current staffing level impacts ability to have staff available to coordinate, order or administer vaccinations/boosters at this time	
<input type="checkbox"/> Delay in scheduling/administering vaccination/booster Describe: Click to enter text.		
<input type="checkbox"/> Limited availability/access to booster vaccinations Describe: Click to enter text.		
<input type="checkbox"/> Inadequate/incomplete record keeping of resident/staff vaccination Describe: Click to enter text.		
<input type="checkbox"/> Other: Click to enter text.		

- ✓ Create a plan
- ✓ Act on the plan
- ✓ Maintain the momentum
- ✓ Revisit the plan
- ✓ Edit the plan

# Identify the Action. Click on the Resource.

✓ When Complete	Action/Intervention
<input type="checkbox"/>	Accept resident's decision for exemption, and document in their care plan
<input type="checkbox"/>	While respecting resident's refusal, periodically review as part of the care plan process
<input type="checkbox"/>	Provide resident facts of benefit to vaccination/ booster in an understandable format [layman's language, large print, foreign language, etc.]
<input type="checkbox"/>	Facilitate face-to-face discussion with resident and attending physician on risks/benefits of vaccination/booster
<input type="checkbox"/>	Facilitate discussion with consultant pharmacist on risks/benefits of vaccination/booster to residents/staff
<input type="checkbox"/>	Collaborate with state and local health departments to identify additional resources for vaccines
<input type="checkbox"/>	Collaborate with local pharmacies and LTC pharmacies to promote access to vaccination/ booster



## Updating Policies & Procedures

- [COVID-19 Vaccine Booster Shots | CDC](#)
- [Vaccine Recommendations and Guidelines | ACIP](#)
- [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States | CDC](#) – Includes updated guidance for booster dose of COVID-19 vaccine following a primary vaccine series
- [Summary Document for Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States | CDC](#)

## COVID-19 Vaccine & Booster Access

- [How Jurisdictions Can Ensure COVID-19 Vaccine Access for Staff and Residents in Long-term Care Settings | CDC](#)
- [How to Request a COVID-19 Vaccination Clinic On-Site or in a Retail Pharmacy Location | CDC](#)
- [Long-Term Care Contacts | Association of Immunization Managers](#)
- [Booster Clinics Pharmacy Partnerships | LeadingAge](#)
- [Vaccine Administration Process Guide | HQIN](#)

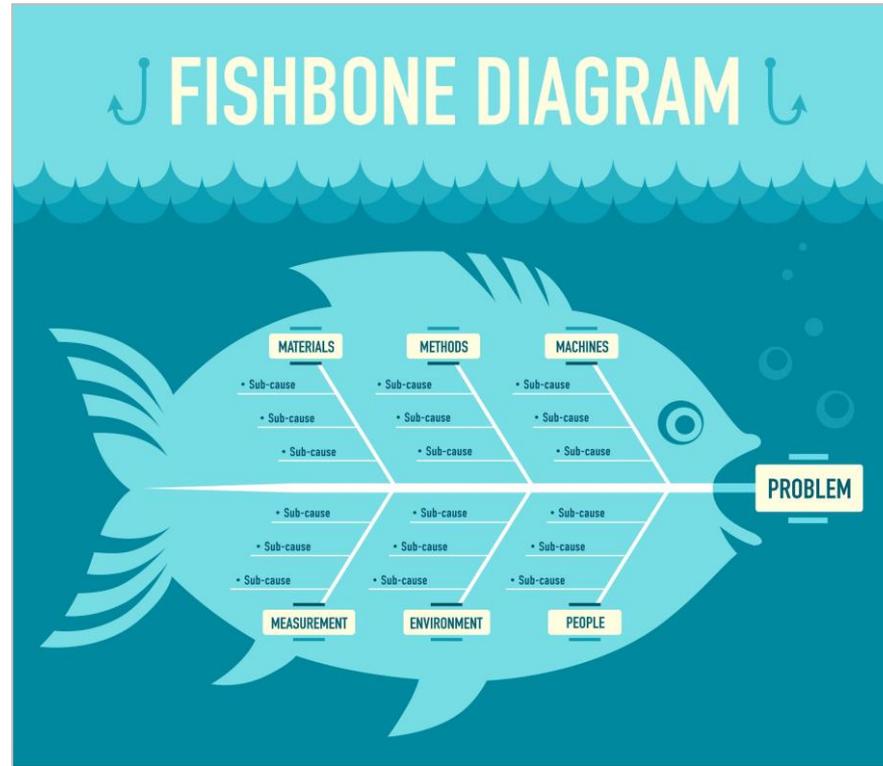
## COVID-19 Vaccine & Booster Clinical Education

- [COVID-19 Vaccine Booster Shots | CDC](#)
- [COVID-19 Vaccines for Long-term Care Residents | CDC](#)
- [Considerations for COVID-19 Vaccination in Moderately or Severely Immunocompromised People | CDC](#)
- [Why Get Boosted? Poster | AMDA](#)

## COVID-19 Vaccine & Booster Education for Staff to Discuss Boosters with Residents & Responsible Parties

- [Updated Toolkit: COVID-19 Booster Dose Messaging and Outreach Tools | Public Health Communications Collaborative](#)

# QAPI Tools



# Vaccine Administration Process Guide

## A Checklist for Long-Term Care Facilities

Long Term Care Facilities (LTCF) should ensure they have an agreement in place for ongoing COVID-19 vaccination with their LTCF pharmacy provider or another designated provider [Long-Term Care Pharmacies Participating in the Federal Retail Pharmacy Program](#).

### Pre-Vaccination Administration:

- Establish facility points of contact (POCs), one of whom should be a licensed nurse, to communicate with and coordinate vaccination administration with the pharmacy provider.
  - Primary POC Name: \_\_\_\_\_
  - Secondary POC Name: \_\_\_\_\_
  - \* *Best practice recommendation: designate a primary and secondary POC (e.g., administrator, director of nursing, or the infection preventionist) to receive notifications from your pharmacy provider.*
- Determine which manufacturer's COVID-19 vaccination/boosters, influenza, and pneumonia vaccines your pharmacy will stock i.e., Pfizer, Moderna, Janssen, high dose quadrivalent fluzone, PCV13, PPSV23, etc.
- Notify your pharmacy provider when the need for vaccination administration of residents and/or staff is identified. Notify your pharmacy of the number of vaccines needed for each brand of COVID-19 vaccines.
- Screen all residents and staff to determine who is eligible to receive vaccinations. Screening should include prior immunization, medical precautions, and/or medical contraindications.



# Use Your Bulletin Board to Shine a Light on Your Progress

*It doesn't need to be fancy!*





# Calculates Doses Due

Manufacturer (dropdown)	1st Dose Date REFUSED (mm/dd/yyyy)	1st Dose Administered: (mm/dd/yyyy)	Adverse Event (Reaction) to 1st Dose? (dropdown)	1st Dose Received (Autopopulated Column)	2nd Dose Due (Autopopulated Column)
Pfizer-BioNTech		12/15/2020	NO	YES	1/5/2021
Pfizer-BioNTech		12/15/2020	NO	YES	1/5/2021
Pfizer-BioNTech		12/20/2020	NO	YES	1/10/2021
N/A	12/22/2020			NO	
N/A	12/25/2020			NO	
Moderna		1/1/2021	NO	YES	1/29/2021
Moderna		1/3/2021	NO	YES	1/31/2021
Moderna		1/10/2021	NO	YES	2/7/2021
Pfizer-BioNTech		1/14/2021	NO	YES	2/4/2021
Pfizer-BioNTech		1/18/2021	NO	YES	2/8/2021
Moderna		1/20/2021	NO	YES	2/17/2021
Pfizer-BioNTech		1/25/2021	NO	YES	2/15/2021
Janssen/Johnson & Johnson		3/1/2021	NO	YES	N/A



# Calculates Boosters Due

ADDITIONAL DOSE/BOOSTER (if applicable)								
Additional Dose/Booster Name	*Eligible to Receive Additional Dose/Booster?	Additional Dose/Booster Vaccination Status (dropdown)	Additional Dose/Booster Reason for Refusal	Additional Dose/Booster Date REFUSED (mm/dd/yyyy)	Additional Dose/Booster Administered: (mm/dd/yyyy)	Vaccine Lot #	Diluent Lot # (if known)	Adverse Event (Reaction) to Additional Dose/Booster? (dropdown)

## Captures Reason for Refusal

*Including medical contraindication and religious exemption for any dose*

1st Dose Reason for Refusal, e.g. declined, medical/religious exemptions (dropdown)

N/A

Offered and Declined

Medical Contraindication

Religious Exemption

# Educational Resources

## Think About It...

*An annual flu shot is the best way to prevent influenza and protect yourself, family, and residents.*

### Why Take the Vaccine?

- Getting vaccinated will help keep you, your family, and your residents healthy.
- The flu can spread in a hospital, and you can get very sick, or even die, otherwise.
- You can get sick with the flu even if you are not in a hospital.
- If you become sick with the flu, you can spread it to others.

### The Facts

- Getting a flu shot can help prevent you and your residents from getting sick from the flu.
  - Getting a flu shot can help prevent the spread of illness, even if you are not in a hospital.
  - It is essential to protect yourself and your residents from illnesses like the flu.
  - The flu vaccine is safe and effective.
1. Standard Precautions for All Patient Care  
<http://bit.ly/2Kx33j1>
  2. Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings  
<http://bit.ly/2lwYP8M>
  3. Nursing Home Training Sessions  
<http://bit.ly/2WY100y>
  4. Simple Strategies for Preventing Infections: Know WHEN to Practice Hand

**For more information, consult the following resources:**

### Every Resident, Every Time: Standard Precautions

By practicing the following standard infection control precautions with every resident, every time, you are proactively protecting yourself and your residents from the spread of infection:

1. Wash hands after contact with blood, body fluids, secretions, excretions and contaminated objects whether or not gloves are worn.
2. Wear clean gloves when touching blood, body fluids, secretions, excretions and contaminated items (i.e., soiled gowns).
3. Wear a mask, eye protection or a face shield if splashes or sprays of blood, body fluids, secretions or excretions are expected.
4. Wear a clean, non-sterile gown if resident care is likely to result in splashes or sprays of blood, body fluids, secretions or excretions. The gown is intended to protect clothing.
5. Carefully handle resident care equipment that is soiled with blood, body fluids, secretions or excretions to prevent the transfer of microorganisms

[Simple Strategies for Encouraging Staff to Receive the Influenza Vaccine | HQIN](#)

[Simple Strategies - Every Resident, Every Time | HQIN](#)

# Share What is Working or What is Difficult for Your Team!



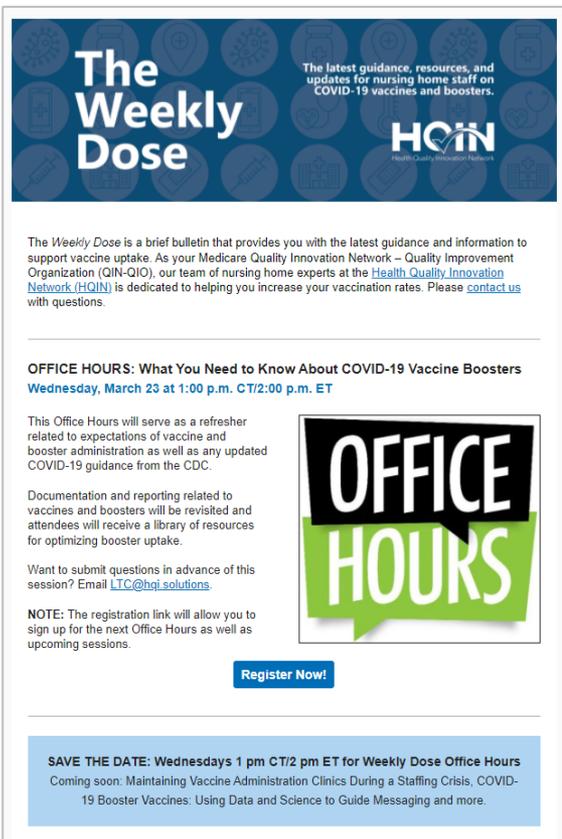
**Raise your hand** to verbally ask a question



**Type a question** by clicking the **Q&A** icon

*Don't hesitate to ask a question after the webinar is over.  
Email [LTC@hqi.solutions](mailto:LTC@hqi.solutions) or your HQIN Quality Improvement Advisor.*

# Did YOU Get Your Weekly Dose?



**The Weekly Dose**

The latest guidance, resources, and updates for nursing home staff on COVID-19 vaccines and boosters.

HQIN  
Health Quality Innovation Network

The *Weekly Dose* is a brief bulletin that provides you with the latest guidance and information to support vaccine uptake. As your Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO), our team of nursing home experts at the [Health Quality Innovation Network \(HQIN\)](#) is dedicated to helping you increase your vaccination rates. Please [contact us](#) with questions.

**OFFICE HOURS: What You Need to Know About COVID-19 Vaccine Boosters**  
Wednesday, March 23 at 1:00 p.m. CT/2:00 p.m. ET

This Office Hours will serve as a refresher related to expectations of vaccine and booster administration as well as any updated COVID-19 guidance from the CDC.

Documentation and reporting related to vaccines and boosters will be revisited and attendees will receive a library of resources for optimizing booster uptake.

Want to submit questions in advance of this session? Email [LT\\_C@hqin.solutions](mailto:LT_C@hqin.solutions).

**NOTE:** The registration link will allow you to sign up for the next Office Hours as well as upcoming sessions.

[Register Now!](#)

**SAVE THE DATE: Wednesdays 1 pm CT/2 pm ET for Weekly Dose Office Hours**  
Coming soon: Maintaining Vaccine Administration Clinics During a Staffing Crisis, COVID-19 Booster Vaccines: Using Data and Science to Guide Messaging and more.

The Centers for Disease Control and Prevention (CDC) has provided options for long-term care administrators and managers to consider when [coordinating access to COVID-19 vaccines](#) for residents and staff.

Learn about the state and local immunization programs available in your area that can assist you with vaccine administration in the community or on-site.

[Visit CDC's COVID-19 Access in LTC Setting Webpage](#)

# Weekly Dose Office Hours: Communication Bites for Staff

Being "Up To Date" with COVID-19 vaccines is important in creating a safe environment for everyone!



## VIRA, the COVID-19 Vaccine Chatbot Now in Español on WhatsApp!

VIRA is now available on WhatsApp at +1 410-401-0306 or via the link, [bit.ly/VIRA-whatsapp](https://bit.ly/VIRA-whatsapp) or QR code below!



Use the chat feature on WhatsApp to find reliable info on the COVID-19 vaccines in both [English](#) and [Español](#)!

Scan Here



### How to Use VIRA on WhatsApp:



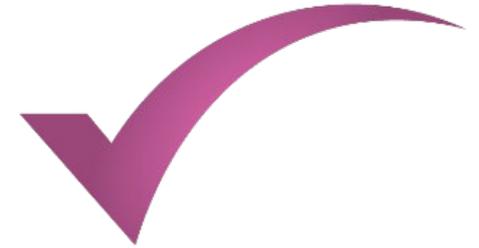
- To access VIRA, scan the QR code above with your smartphone or enter the phone number above into the chat feature of WhatsApp.
- Once there, type "hello".
- VIRA will respond by asking what brought you in and providing a list of responses.
- Choose from the list and start asking your COVID-19 vaccine questions!

# Have questions? VIRA has answers!

# Building On Your Resources

## HQIN Resources

- [Nursing Home COVID-19 Vaccination Booster Action Plan and Resources](#)
- [Vaccine Administration Process Guide](#)
- [COVID-19 Vaccination & Booster Tracking Tool](#)
- [COVID-19 Vaccine Educational Resources for Long Term Care Facilities](#)
- [Simple Strategies for Encouraging Staff to Receive the Influenza Vaccine](#)
- [COVID-19: Best Practices for Patient Communication](#)
- [Staff Mental Health Wellbeing Action Plan Template](#)
- [Simple Strategies – Staff Mental Health](#)
- [Staff Mental Health and Wellbeing Resources](#)
- [Pause for Prevention Module 8: Caring for Yourself During an Infectious Disease Outbreak or Pandemic](#)
- [COVID-19: Best Practices for Patient Communication Fishbone Diagram \(hqin.org\)](#)



# Additional Resources

- [V-safe Poster](#)
- [COVID-19 Vaccine Booster Shots](#)
- [Booster Clinics Pharmacy Partnerships](#)
- [ACIP Vaccine Recommendations and Guidelines](#)
- [Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States](#)
- [Summary Document for Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized or Approved in the United States](#)
- [Vaccinations and Older Adults | National Institute on Aging \(nih.gov\)](#)
- [Well-Being Concepts | HRQOL | CDC](#)
- [qapiataglace.pdf | CMS](#)



**Next Session:**

**Rebuilding Trust, Partnering  
for Improved Outcomes**

**Wednesday, March 30**

**2:00 p.m. EST | 1:00 p.m. CST**



# FOR MORE INFORMATION

Call 877.731.4746 or visit [www.hqin.org](http://www.hqin.org)

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From HQIN:

To all essential care giving teams  
supporting residents and families,

*Thank you for attending*