

Long-term Care NEWSLETTER

LTC Newsletter 2022-22 May 26, 2022

LTC Update:

- Policy and Procedure for Requesting Waiver of Disapproval of Nurse Aide Training
- Nurse Aides Experiencing Delays in Placement on the Registry
- COVID-19 Second Booster Guidance and "Up to Date" Status Update
- COVID-19 Rebound After Paxlovid Treatment

Policy and Procedure for Requesting Waiver of Disapproval of Nurse Aide Training

Facilities whose CNA training has been banned had the opportunity during the COVID-19 public health emergency to request a waiver and conduct abbreviated nurse aide training in their facility by an approved CNA training program, according to the <u>Order Authorizing Abbreviated Training of Certified Nurse Aides in Facilities Subject to CNA Training Bans</u>. <u>These waivers expire on July 1, 2022</u>. Any CNA training completed after July 1 must include the full CNA curriculum and consist of 105 hours of training.

Please review the new IDOH <u>policy and procedure</u> for facilities to request a waiver of disapproval of nurse aide training, in effect as of June 1. Facilities may request a waiver by emailing <u>ISDHLTCTrainingPrograms@ISDH.IN.gov</u> with the required information in the <u>checklist of information to request a waiver of disapproval of Nurse Aide Training and Competency Evaluation Program (NATCEP)</u>.

Please email Suzanne Williams at suwilliams@isdh.in.gov with any questions.

Nurse Aides Experiencing Delays in Placement on the Registry

If an individual nurse aide is experiencing a delay in being placed on the Nurse Aide Registry and it has been more than 30 days since they completed their training hours and successfully passed the CNA Competency Evaluation Examination, please contact Ivy Tech at CNA_QMA_testing@ivytech.edu.

If nursing facilities or training programs have questions or experience capacity issues in training and testing that will result in a delay for a nurse aide to meet the full requirements by October 6 (four months after the federal waiver ends), please keep a record and notify Suzanne Williams at suwilliams@isdh.in.gov.

COVID-19 Second Booster Guidance and "Up-to-Date" Status – Update

On May 20, the Centers for Disease Control and Prevention (CDC) strengthened its recommendation and <u>updated guidance</u> that the following people <u>should</u> receive a second COVID-19 booster dose:

- People ages 12 years and older who are moderately or severely immunocompromised
- People ages 50 years and older

CDC recommends a <u>second booster</u> of Pfizer or Moderna at least four months after an individual receives their first booster.

As a reminder, an individual is considered "fully vaccinated" two weeks after completion of the primary series. Moderate to severely <u>immunocompromised</u> individuals should receive an additional dose as part of the primary series to be considered fully vaccinated. <u>Under the new CDC</u> <u>guidance, an individual is now considered 'up to date' after receiving all doses in the primary series and all boosters that one is eligible for.</u>

Please offer a second booster to all the eligible residents and keep in mind that the new CDC definition of "up-to-date" is tied to many parts of current CDC and CMS guidance.

Facilities should immediately begin to implement the new definition for "up-to-date" as it pertains to CDC and CMS guidance related to infection control (e.g., masking, resident placement in transmission-based precautions, etc.). Before July 1, facilities must update relevant facility policies and offer additional boosters to eligible residents and staff.

Please contact svuppalanchi@isdh.in.gov if your facility is experiencing any barriers to offering the COVID-19 vaccine.

COVID-19 Rebound After Paxlovid Treatment

On May 24, CDC issued a <u>Health Alert Network (HAN) Health Advisory</u> to update healthcare providers, public health departments and the public on the potential for recurrence of COVID-19 or "COVID-19 rebound."

COVID-19 rebound has been reported to occur between 2 and 8 days after initial recovery and is characterized by a recurrence of COVID-19 symptoms or a new positive viral test after having tested negative.

Paxlovid continues to be recommended for early-stage treatment of mild to moderate COVID-19 among persons at high risk for progression to severe disease. Paxlovid treatment helps prevent hospitalization and death due to COVID-19.

A brief return of symptoms may be part of the natural history of SARS-CoV-2 (the virus that causes COVID-19) infection in some persons, independent of treatment with Paxlovid and regardless of vaccination status. Limited information currently available from case reports suggests that persons treated with Paxlovid who experience COVID-19 rebound have had a mild illness; there are no reports of severe disease. There is currently no evidence that additional treatment is needed with Paxlovid or other anti-SARS-CoV-2 therapies in cases where COVID-19 rebound is suspected.

People with recurrence of COVID-19 symptoms or a new positive viral test after having tested negative should restart isolation and isolate again for at least 5 days. Per CDC guidance, they can end their reisolation period after 5 full days if fever has resolved for 24 hours (without the use of fever-reducing medication) and symptoms are improving. The individual should wear a mask for a total of 10 days after rebound symptoms started.