

Reimbursement & Policy

COVID deja vu

With case counts on the rise and masks making headlines, everyone is experiencing a bit of COVID deja vu.

After dropping down to double-digit confirmed cases statewide in late June, July has reversed course. Today, Idaho saw 318 confirmed and probable cases. Hospitals are experiencing the same upward swing in hospitalizations, which is straining capacity in some facilities.

As the Delta variant continues to make its presence felt, masking is hot news once again. Today's [revised CDC guidance](#) includes recommending that fully vaccinated people wear masks in public indoor settings in places where transmission is substantial (50 or more cases per 100,000 people over seven days) or high (100 or more cases per 100,000 people over seven days). Current CDC data show 27 of Idaho's 44 counties are one of these two categories.

In addition to recommending indoor masks in certain areas, the CDC also advised:

- Fully vaccinated people might choose to wear a mask regardless of the level of transmission, particularly if they or someone in their household are immunocompromised or at increased risk for severe disease. Vaccinated people may also choose to wear a mask if others in their household are not fully vaccinated.
- Fully vaccinated people who have a known exposure to someone with suspected or confirmed COVID should be tested 3-5 days after exposure and wear a mask in public indoor settings for 14 days or until they receive a negative test result.
- Universal indoor masking for all teachers, staff, students, and visitors to schools, regardless of vaccination status.

The CDC also updated guidance for [implementing prevention strategies](#) and [issued a Health Advisory](#) which contains case and vaccination data over the last several weeks. Of note is the fact that cases have increased over 300% across the country from June 19 to July 23.

Vaccine requirements in healthcare

Yesterday, the Department of Veterans Affairs became the [first federal agency to require vaccinations](#) for a portion of its workforce. Vaccinations at medical facilities will be required for those who work, visit or otherwise provide direct patient care. The VA provides healthcare for more than nine million veterans, making it the largest health care system in the US.

The AHA, along with many other national healthcare associations, supported the requirement in a [recent statement that calls for more healthcare workers to be vaccinated](#) and backed mandatory vaccination policies in hospitals and health systems.

Vaccinated or not? Here's how it affects your COVID risk

Idahoans with COVID-19 vaccinations are much less likely to become sick, be hospitalized or die of COVID-19, according to data from the Idaho Department of Health and Welfare.

COVID-19	Among fully vaccinated	Among not fully vaccinated
Cases	74 per 100,000 people	1,583 per 100,000 people
Hospitalizations	5 per 100,000 people	96 per 100,000 people
Deaths	Less than 1 per 100,000 people	13 per 100,000 people

Based on Idaho data for March 15 - July 15 ~ produced by the Idaho Department of Health & Welfare.

Quality & Patient Safety

Nursing home best practices in the vaccine era

Although nursing homes provide services to a broad range of patients, long-term care (LTC) and skilled nursing facilities (SNF) alike have experienced disproportionate morbidity and mortality due to COVID-19. The COVID Tracking Project estimates that a staggering nearly [1 in 12 long-term care facility residents have died](#) of COVID-19; among nursing home residents, this figure is close to one in ten. Although only 1% of the U.S. population lives in a nursing home, these residents accounted for 34% of COVID-19 deaths.

Against this grim backdrop, COVID-19 vaccines became available to nursing home residents and staff in Idaho in December 2020, and COVID-19 deaths in this population began to decline. In the U.S., during the week December 20, 2020, [COVID-19 deaths among nursing home residents](#) were at an apex of 6,078 per week; deaths dropped to 880 per week two months later, and have been averaging about 100 per week in the past two months. This significant reduction in COVID-19 deaths among nursing home residents simultaneously belies that we are still not using all the tools available to protect these residents from premature death.

COVID-19 clinical trials did not include frail, older adult participants, who potentially have less robust immune response to vaccination than younger, healthier populations; as such, the efficacy of vaccines in these populations was considered an unknown. Recent studies of COVID-19 vaccination in nursing homes have, however, demonstrated that COVID-19 vaccination was highly efficacious in preventing severe disease. Cavanaugh et al. estimated that [vaccination was 86.5% protective against symptomatic illness among residents](#) and 87.1% protective among healthcare personnel (HCP) during an outbreak at a Kentucky SNF caused by an unvaccinated and symptomatic HCP.

Data from CMS indicate that [Idaho lags in nursing home HCP vaccinations](#), ranking 35th of U.S. states and territories and the District of Columbia, with only about one in two nursing home HCP being fully vaccinated. Although Idaho ranks 26th for the proportion of current residents with completed COVID-19 vaccinations, an estimated 18% of Idaho's nursing home residents are still not vaccinated against COVID-19.

Although COVID-19 outbreaks have occurred across a spectrum of nursing home conditions, those with staffing shortages and more crowded conditions might provide a particularly fertile environment for COVID-19 outbreaks – especially where staff are unvaccinated. Teran et al. describe [SARS-CoV-2 circulation in a Chicago SNF](#), where routine screening surfaced 627 SARS-CoV-2 infections; only 4% (N = 22) of these infections were found in fully vaccinated residents and staff, 23% in partially vaccinated individuals, and the bulk of infections (71%) were found in unvaccinated individuals. Beyond the known risk to residents, unvaccinated populations also give rise to SARS-CoV-2 variants of concern, e.g. the Delta variant, which are potentially more transmissible and more virulent.

Although vaccination is the most powerful infection prevention and control mechanism, it is [not the only one recommended for nursing homes](#). Breakthrough cases of COVID-19 in fully vaccinated nursing home residents highlight the need to also include "work restrictions, isolation and quarantine, routine testing of residents and staff members, and use of personal protective equipment, regardless of vaccination status." A detailed description of these recommendations are covered in the UpToDate article [COVID-19: Management in Nursing Homes](#).

Since the beginning of the pandemic in Idaho, there have been 9,719 diagnoses of COVID-19 among LTCF residents and staff members; 806 of these people died. Cases and outbreaks continue to be found in Idaho LTCF, even after COVID-19 vaccines became widely available. With increased vaccination and improved infection prevention and control, we have an opportunity to protect these vulnerable residents against preventable morbidity and premature mortality.

Correction ~ What about the denominator

In last week's article [What about the denominator](#), we mistakenly indicated that ten cases in a population of 50 is a rate of 20 per 1000 when it should have read 20 per 100.

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