



Weekly Roundup

...Reporting the state and national long-term care news

Please disseminate relevant information to the appropriate department.

- Administration Nursing Dietary Activities Social Services
 Rehabilitation Housekeeping Maintenance Laundry

Friday, February 12, 2021

STATE NEWS

More Fit Test Kits from ADPH have Arrived!

The Alabama Nursing Home Association received another shipment of Respiratory Fit Test Kits from the Alabama Department of Public Health. *Please call the ANHA at (334) 271-6214 to schedule a pick-up for your kit.*

At this time, the ANHA is not shipping kits to facilities and they are available for pick-up only. The ANHA will include extra bottles of sweet and bitter solutions with each kit. You may also consider having a related nursing home or a vendor pick up your facility's kit and deliver it to you. The kits are available for pick-up on a first-come, first-serve basis. The ANHA expects to receive more kits in the near future and will update you on availability.

OBRA PASRR Office Schedule for President's Day Holiday

The OBRA PASRR Office will be closed Monday, February 15, 2021. They will reopen Tuesday, February 16, 2021. The internet application will remain available for an immediate Level I Determination.

The Level I Screenings must be into the OBRA PASRR Office by 3:00 p.m. Friday, February 12, 2021, to help ensure a Level I Determination this business day.

Maintaining TBPs for Residents on Affected Units

As a follow-up to our February 11 Office Hours call, here is the CDC guidance that mentions maintaining Transmission-Based Precautions (TBPs) for those on the affected unit.

CDC Link: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-responding.html>

Under the sub section, Resident with new onset suspected or confirmed COVID-19 it states:

Maintain all interventions while assessing for new clinical cases (symptomatic residents):

- Maintain [Transmission-Based Precautions](#) for all residents on the unit at least until there are no additional clinical cases for 14 days after implementation of all recommended interventions.

- If testing is available, asymptomatic residents and HCP who were exposed to the resident with COVID-19 (e.g., on the same unit) should be considered for testing
- The incubation period for COVID-19 can be up to 14 days and the identification of a new case within a week to 10 days of starting the interventions does not necessarily represent a failure of the interventions implemented to control transmission.

We Need Your Help! SURVEY DUE FEB 26: Outstanding Issues: Provider Relief Fund (PRF) and Quality Incentive Payments (QIPs)

The American Health Care Association (AHCA) is working to address **outstanding (and not yet resolved)** PRF and QIP issues our provider members are facing. **AHCA has created this brief survey for your providers with these issues to fill out by Friday, February 26.** AHCA will work with Congress and new Biden Administration to attempt to resolve the issues submitted. This does not guarantee funding for the provider submitting the issue, but we will raise it to the appropriate decision makers if warranted. We would appreciate your help in completing the survey and complete all survey fields as noted.

ACCS Creates Medication Aide, Certified (MAC) Resource Webpage

The Alabama Community College System (ACCS) created a [resource webpage](#) for the Medication Aide, Certified (MAC) training program. The webpage gives an overview of the program, training and testing process. It lists the name, phone number and email address for the MAC contact at each community college.

The Alabama Nursing Home Association strongly encourages you to reach out to the appropriate community college contact if you have employees interested in the MAC training. Click [here](#) to view the page.

Medication Aide, Certified (MAC) info from the Alabama Board of Nursing

The Alabama Board of Nursing (ABN) website now features a page for Medication Aide, Certified (MAC): <https://www.abn.alabama.gov/mac/>. The left tab is primarily geared toward students and applicants for the MAC certification exam (MACE). The right tab will take applicants and employers to a list of all individuals who have completed the necessary training and passed the MACE exam. These individuals are eligible to take delegation of medication administration from licensed nurses under the rules established in [ABN Administrative Code §610-X-7-11](#).

A link to the code establishing MACs can also be found on this webpage under the Alabama MAC Rules section. If you have not done so already, please study those rules to avoid confusion regarding allowances and limitations under the program. For more information, the Alabama Board of Nursing said ANHA members can call 1-800-656-5318 and speak with Sammi Smith, Manager of the MAC program. You can also email her at MAC@abn.alabama.gov.

ANHA Winter Webinar Series

Register Today

The Alabama Nursing Home Association's Winter Webinar Series occurs every Wednesday from 1:30-2:30 p.m. and runs through March 10. Listed below are the programs and sponsors.

- Wednesday, February 17 – TMC: Giving Census a Reboot
 - Register here: <https://attendee.gotowebinar.com/register/4241058652707794445>
- Wednesday, February 24 – 3M: Skin Tears: Identification, Prevention and Treatment
 - Register here: <https://attendee.gotowebinar.com/register/1513148313963218445>
- Wednesday, March 3 – HealthPro Heritage: Redesigning Tomorrow Together – A focus on a “Next Normal”
 - Register here: <https://attendee.gotowebinar.com/register/8373857879215742733>
- Wednesday, March 10 – Burr Forman: COVID-19 – Litigation, Regulation and Enforcement – The Challenges to Come”
 - Register here: <https://attendee.gotowebinar.com/register/2045626402132398605>

CARES Dementia Grant

The Alabama Nursing Home Association was made aware that facilities may be receiving invoices for the CARES Dementia Program once an employee completes the program. **DO NOT PAY** these invoices! The invoices are automatically generated from their system. The ANHA received invoices for all the facilities in the program and will be paying these on your behalf. We apologize for the inconvenience.

Alabama LTC COVID-19 Office Hours

The Alabama Nursing Home Association, Alabama Department of Public Health (ADPH), Centers for Disease Control & Prevention (CDC) and Alliant Health are committed to provide additional infection prevention and control support to nursing homes across the state. ADPH in collaboration with the Alabama Nursing Home Association, and Alabama’s Quality Improvement Organization (QIO) Alliant Health, wish to set up COVID-19 Office Hours for any facilities available to join for a 30-minute open discussion on **Thursdays from 11:30 a.m. – 12:00 p.m.** This will be an opportunity to ask questions and share ideas on best practices. Those joining can either email their questions to Katrina Magdon at kmagdon@anha.org and she will then ask during the call or you can type your question directly into the chat. Also, feel free to just speak up! We hope these calls have been beneficial to you.

To join the WebEx: When it’s time, join your Webex meeting [click here](#)
Meeting number (access code): 173 788 8316

Join by phone: (415) 655-0003, access code: 173 788 8316
Join from a video system or application: Dial [1737888316@allianthealthgroup.webex.com](tel:1737888316)
You can also dial 173.243.2.68 and enter your meeting number.

The February 11, 2021, Office Hours call presentation is attached.

COVID-19 Updates

Updated COVID Data Tracker: State Profile Report — The SPR provides easily interpretable information on key indicators for each state, down to the county level. For each state, this report provides a weekly snapshot in time that:

- Focuses on recent outcomes in the last seven days and changes relatively to the month prior

- Provides additional contextual information at the county level for each state, and includes national level information
- Supports rapid visual interpretation of results with color thresholds

To learn more, please visit: [COVID Data Tracker](#)

Medicare and Coronavirus (COVID-19)

Medicare wants to help protect you from COVID-19. According to the Centers for Disease Control and Prevention (CDC), older adults and people who have severe chronic medical conditions like heart, lung, or kidney disease seem to be at higher risk for more serious COVID-19 illness. This means that people with Medicare may be at higher risk. Medicare covers:

- [Lab tests for COVID-19](#)
- [FDA-authorized COVID-19 antibody \(or “serology”\) tests](#)
- [Monoclonal antibody treatments for COVID-19](#)
- [COVID-19 vaccines](#)

For the latest information about:

- How Medicare is helping during this public health emergency, go to [Medicare.gov/medicare-coronavirus](#).
- COVID-19 prevention, symptoms, and answers to common questions, go to [Coronavirus.gov](#).
- Public health and safety information from CDC, go to [CDC.gov/coronavirus](#).

What the U.S. Government is doing in response to COVID-19, go to [USA.gov](#).

Targeted COVID-19 Training for Frontline Nursing Home Staff and Management

The Centers for Medicare and Medicaid Services (CMS) is also offering targeted trainings to help nursing homes during the winter months of the pandemic. A series of scenario-based trainings are available to help meet the urgent and ongoing needs of nursing home managers and frontline staff. These free learning intensives are hosted on the CMS Quality, Safety & Education Portal (QESP). [Learn More](#) *Please note that the Targeted COVID-19 Training for Frontline Staff has been approved for 3 hours of CEU for nursing home administrators and the Targeted COVID-19 Training for Nursing Home Management has been approved for 4 hours of CEU for nursing home administrators.*

CMS-CDC Fundamentals of COVID-19 Prevention for Nursing Home Management

With COVID cases rising, preparing to keep residents and staff safe is critical. CMS is offering flexible, on-demand infection control training. Live Q&A sessions are also held twice a month on Thursdays at 3:00 p.m. CT. [Learn More and Register](#)

Project Firstline: Inside Infection Control Videos — CDC has a series of [videos](#) to learn the basic ideas behind infection control, how to prevent COVID-19, and how using infection control actions while you’re at work can protect you, your patients, your coworkers and your community. Currently, seven videos are available, with new releases planned on additional topics in the future.

Available videos include:

- Episode 1: What's the Goal of Infection Control?
- Episode 2: SARS-CoV-2? COVID-19? What's the Difference?
- Episode 3: What's a Virus?
- Episode 4: What's a Respiratory Droplet? Why Does it Matter?
- Episode 5: How do Viruses Make You Sick?
- Episode 6: How Do Viruses Spread from Surfaces to People
- Episode 7: How does COVID-19 spread? A Review

To learn more about Project Firstline, please visit: www.cdc.gov/ProjectFirstline

Testing Frequency Guidance

The latest CMS Rates of county positivity are posted [here](#).

NATIONAL NEWS

Changes to CDC Quarantine Guidance for Vaccinated Staff

This week, the Centers for Disease Control and Prevention (CDC) revised its [guidance](#) on quarantining after exposure for staff members who have completed vaccination. The new guidance indicates that vaccinated persons with an exposure are not required to quarantine if they meet all of the following criteria:

- Are fully vaccinated (i.e. more than two weeks following receipt of the second dose in a two-dose series, or more than two weeks following receipt of one dose of a single-dose vaccine)
- Are within three months following receipt of the last dose in the series
- Have remained asymptomatic since the current COVID-19 exposure

This guidance applies to health care workers only and does not apply to residents of long-term care facilities due to the increased risks for severe disease and death and the unknown effectiveness of the vaccine in this population. The CDC recommends that residents continue to quarantine following exposure to someone with suspected or confirmed COVID-19, and only suggest lifting this requirement to mitigate critical issues (such as limited bed capacity).

The CDC recommends that vaccinated individuals continue to follow all other guidance to prevent the spread of COVID-19, such as mask wearing, social distancing and handwashing because the risk of transmission from vaccinated individuals to others is still uncertain.

ANHA has been in touch with ADPH and will let you know if we hear more regarding this issue.

Potential Next Steps Following Vaccine Clinics

As the COVID-19 vaccine rolls out in long term care facilities, many questions have arisen about when we will see changes to restrictions on visitation, dining, and other activities, as well as guidance on testing, PPE, and other infection control measures. CMS and CDC have indicated they will not issue changes to this guidance until we know more about the real-world impact of the vaccine.

Through clinical trials, these vaccines have been proven to be extremely effective at preventing illness caused by COVID-19, but we do not yet know whether individuals who are vaccinated can still contract COVID-19 (without symptoms) and spread it to others. So, if a vaccinated visitor enters the facility, it's possible they could spread COVID-19 to others. This is why CMS and the CDC are hesitant to modify guidance at this time.

For the health and safety of our residents and staff, the American Health Care Association (AHCA) supports this position. However, we are asking the federal agencies for data and funding to prioritize this research. In a [letter](#) to Dr. Rochelle P. Walensky, Director of the CDC, AHCA formally requested this support, explaining the burden that these restrictions place on residents and staff of long-term care.

AHCA is also conducting research of our own to help answer these important questions. In a recent [analysis](#), we found that COVID-19 cases decreased at a faster rate among nursing homes that had completed their first vaccine clinic, compared to nearby nursing homes that had not yet administered the vaccine. This is promising news, but still requires further analysis.

We understand the toll that visitation restrictions and infection control measures have in long term care. Prolonged isolation of our residents impacts their health and well-being, and the infection control measures place a heavy burden on facilities. However, we also know COVID-19 poses a serious threat to our residents and staff. So, for now, providers must remain vigilant in their adherence to CDC and CMS guidance and on infection control principles such as handwashing, social distancing, mask wearing and testing.

We remain hopeful these vaccines will ultimately prove to be effective and allow us to open back up. Members can support efforts to meet this goal, including:

- Continue to promote vaccine uptake among residents and staff: These vaccines are going to be most effective if the vast majority of staff and residents are vaccinated. Check out AHCA's [#GetVaccinated](#) campaign for tools and resources on promoting vaccine uptake.
- Complete NHSN vaccine reporting module: Completing this information will provide CDC with the necessary data to evaluate vaccine effectiveness in LTC. More information can be found [here](#).
- Continue to support residents, families and staff experiencing the impact of these restrictions: We encourage members to review the [CMS visitation guidance](#) as it provides guidance and ideas on allowing safe visitation for residents, including compassionate care visits where appropriate. Continue to check county rates as the vaccine rolls out to the public. There is increased flexibility as cases decrease allowing more options for a person center approach when applying this guidance.

Thank you for everything you do to protect the lives of residents every day!

CDC FAQ on Third Vaccine Clinic

The Centers for Disease Control and Prevention's (CDC) Long-Term Care (LTC) Pharmacy Partnership Program provides three COVID-19 vaccination clinics for LTC facilities enrolled in the program. As many LTC facilities are closing in on their third clinic, questions have arisen whether residents and staff will be able to receive a first dose of the vaccine at the third and final

clinic. The American Health Care Association (AHCA) has been actively working with CDC, CVS, and Walgreens on this issue.

CDC policy is to optimize vaccine access for residents and staff, which means delivering the first dose of either vaccine at the third clinic. However, the pharmacies will defer to state/jurisdictional guidance. So, if your state health department decides not to allow first doses at the third clinic in all cases, for example, the pharmacy will follow that guidance.

If residents and staff receive the first dose of the vaccine at the third clinic, it's important to determine how they will access the second dose. For assistance in securing the second dose on behalf of staff or residents, providers should:

- Contact their state public health department for more information on vaccine availability.
- Call one of the retail pharmacies involved in the CDC's [Federal Retail Pharmacy Program](#). Retail pharmacies participating in the program vary by state and territory, visit the [CDC website](#) to find out which pharmacies are participating in your state.

If you are in a state that is delivering the Pfizer-BioNTech vaccine through the Pharmacy Partnership, it will be more challenging to access a second dose due to the unique cold chain storage requirements. If all potential options for administering the second dose have been exhausted, clinical leadership may consider the following:

- Counseling residents to finish the vaccine series using the Moderna vaccine. The Advisory Committee on Immunization Practices [recommends](#):
 - *“In exceptional situations in which the first-dose vaccine product cannot be determined or is no longer available, any available mRNA COVID-19 vaccine may be administered at a minimum interval of 28 days between doses to complete the mRNA COVID-19 vaccination series.”*
- Delay timing of the second dose administration up to 6 weeks (42) days. CDC guidance dictates that in situations where it is not feasible to adhere to the recommended interval (21 days for Pfizer and 28 days for Moderna, the second dose can be administered to 6 weeks (42 days) after the first.

[Click here to read the FAQ's we received from CDC](#). This information has been obtained from the AHCA and we understand that they are not posted to the CDC website.

The Alabama Nursing Home Association continues to advocate your behalf regarding vaccine distribution after the Federal Pharmacy Partnership concludes. We will update you as more information is obtained regarding how our state will address this issue.

Point of Care Test Reporting Trainings February 2021 Updates

The NHSN team will offer trainings providing basic guidance for data entry for the NHSN Long-term Care Facility COVID-19 Point of Care (POC) Test Reporting Tool as well as tool updates released on February 4, 2021. The trainings may be a live presentation or a previously recorded presentation, but all sessions will allow for submission of audience questions with NHSN staff response. A recorded webinar will be posted for on-line viewing.

The NHSN option enables nursing homes to enter POC laboratory test data into the NHSN application. NHSN, in turn, will report the nursing home POC laboratory test data electronically to the public health agency, state or local, that has jurisdictional authority and responsibility to receive and use the nursing home's data. Deidentified nursing home POC laboratory data will also be reported via existing public health reporting mechanisms to the US Department of Health and Human Services in accordance with the U.S. Coronavirus Aid, Relief, and Economic Security (CARES) Act requirements.

Topic: Point of Care Test (POCT) Reporting Tool for COVID-19 - Updates

Date: Friday, February 12, 2021

Time: 12:00 – 1:00 p.m. CT

Register in advance for this webinar:

https://cdc.zoomgov.com/webinar/register/WN_dp03SRQnSYeOfcBFy2CAmQ

After registering, you will receive a confirmation email containing information about joining the webinar.

ABBOTT Testing Specimen Collection Update

As reported last week, the Alabama Nursing Home Association (ANHA) was made aware that Abbott posted an updated Product Insert for the Abbott BINAXNOW™ COVID-19 AG Card dated 12/2020. The package inserts on the tests currently sent are dated 8/2020. We understand that Abbott has reached out to facilities regarding the new procedure for specimen collection and handling.

The ANHA encourages you to retrain your staff on the new outlined procedure for specimen collection and handling. More information can be found at [NAVICA APP & BinaxNOW™ COVID-19 Ag | Abbott Point of Care Testing \(globalpointofcare.abbott\).](#)

BD Requests Feedback for Survey on Long Term Care Provider Testing

BD is seeking feedback from long term care providers on their experiences with COVID-19 testing through this [brief survey](#). They ask that you take five minutes to answer the survey about your current approaches to testing staff and residents, as well as any barriers you have been encountering.

The survey is available [here](#). BD appreciates your feedback.

CDC Updates Guidance on Antigen Testing in Long Term Care Facilities

The Centers for Disease Control and Prevention (CDC) recently updated its [guidance on antigen testing in long term care facilities](#). Click here for a [Summary of the CDC guidance](#).

Of important note, the CDC modified the [algorithm on interpreting antigen tests](#) to include:

- When to perform confirmatory PCR tests:
 - Asymptomatic people who test antigen positive should have a confirmatory test performed.

- Symptomatic people who test antigen negative should have a confirmatory test performed.
- What to do with discordant results.
- Additional new variables to the decision-making process (outbreak, close contact or no outbreak).
- Additional guidance on infection control measures to take in response to test results. Facilities should adhere to this new guidance when using antigen tests.

OSHA Required 2020 Injury and Illness Data Due March 2

The U.S. Department of Labor’s Occupational Safety and Health Administration (OSHA) reminds employers the agency is collecting calendar year 2020 Form 300A data due by March 2, 2021. Per OSHA, employers have an obligation to report and record work-related COVID-19 cases. Additional information on OSHA’s guidance for recording and reporting COVID-19 cases can be found in this [AHCA/NCAL OSHA resource](#).

OSHA electronic submissions are required of establishments with 250 or more employees currently required to keep OSHA injury and illness records and establishments with 20-249 employees classified in specific industries with historically high rates of occupational injuries or illnesses. Skilled nursing facilities, assisted living, and IDD providers are all included in this per [OSHA](#). Visit the [Injury Tracking Application Electronic Submission of Injury and Illness Records](#) to OSHA for more information.

OTHER NEWS

Infection Prevention “Surveillance, Tracking and Reporting” (STAR) Facilities Shop Talk - NHSN User Group Training & Real-Time Technical Assistance

February 18, 2021, 1:00 p.m. CT

Join the Alliant Quality team to walk through common use cases in NHSN and review any updates to the NHSN system. We will conduct a live question and answer session to help with your immediate needs in accessing, using, and improving NHSN reporting.

****Special Guests**** Robert Maxwell and Andrew Turner, both User Support Specialists with CACI, subcontractor to Leidos, Contractor for the National Healthcare Safety Network (NHSN) NCEZID, Division of Healthcare Quality Promotion (DHQP), National Center for Emerging and Zoonotic Infectious Disease, Centers for Disease Control and Prevention

[REGISTER TODAY](#)

ahcancaLED Releases New Training: Person Centered Care in a PDPM World

AHCA/NCAL has released a new four-module webinar series on ahcancaLED that trains staff about how to deliver person centered care under the Patient Driven Payment Model (PDPM). [Person Centered Care in a PDPM World](#) is built to train senior staff about delivering short-stay post-acute person-centered care and position them to then train facility staff. State affiliates

automatically receive 40 percent of AHCA/NCAL's net revenue on all sales of this product in their respective states.

About the Course

This course shows how person-centered care is at the core of PDPM and can improve care practices that lead to better patient outcomes. Designed to be appropriate for all facility staff, the first three modules can be done as a team or individuals. These three modules examine the person-centered care framework, making personal preference determinations and challenges in delivering personalized care to short stay residents. The last module is divided into four separate presentations that can be used to train various staff members including administrators, professional staff, CNAs and other essential staff with content specifically designed to are designed to promote team application of the concepts into clinical practice and elevate person-centered care throughout the organization.

There is a quiz at the end of each of the first three modules that learners must complete with a score of 80% or higher. There also is a final exam at the end of last four-part module that individuals must also pass with a score of 80% or greater in order to receive 5.25 NAB approved CEs for administrators and 4.0 CEs for nurses through the Iowa Board of Nursing.

Course Objectives

Upon completion, the learner will be able to:

1. Recognize how person-centered care is the core of the PDPM payment model.
2. Define the core components of person-centered care.
3. Consider best practices to incorporate person-centered care into everyday interactions and care plans for short-stay residents.
4. Identify tools to assess person-centered care practices.
5. Review the key components of teamwork and communication required for person-centered care.
6. Review of activities and other programs that can impact facility-wide adoption of person-centered care.

Why the Focus on Person-Centered Care for Short-Stay Patients

PDPM was implemented to focus payment for rehabilitative episodes of care on individual needs and preferences to implement more person-centered care delivery. Since the PDPM model was a wholesale shift in payment and delivery, initial training mechanisms focused on the new system components. Now that those payment components have been adopted, education and training on best-practices for implementing person-centered care should be reviewed to fully adopt CMS's vision for the PDPM model.

Cost and Registration Options

The cost of this program is \$350 AHCA members and \$650 for non-members. Individuals may register for this course and group/team registrations are available by following these [group registration instructions](#). Discounts are available when registering five or more individuals.

NEW TRAINING EVENT – Section M: Skin Conditions - Assessment and Coding of Pressure Ulcers/Injuries Web-Based Training

The training can be accessed via the [Skilled Nursing Facility Quality Reporting Program Training](#) webpage.

NEW TRAINING – From Data Elements to Quality Measures – Cross-Setting QRP Web-Based Training

The Centers for Medicare & Medicaid Services (CMS) is offering a web-based training course that provides a high-level overview of how data elements within CMS patient/resident assessment instruments are used to construct quality measures (QMs) across post-acute care (PAC) settings. The PAC settings included are those covered under the Centers for Medicare & Medicaid Services (CMS) Quality Reporting Programs (QRPs) for Home Health Agencies (HHAs), Inpatient Rehabilitation Facilities (IRFs), Long-Term Care Hospitals (LTCHs) and Skilled Nursing Facilities (SNFs). Information covered will include a short review of the QRPs' cross-setting quality measures (QM), how data elements feed into these cross-setting QMs, how QMs are calculated and appear on QM reports and how to access and use this data for quality improvement. The training can be accessed via the [Skilled Nursing Facility Quality Reporting Program Training](#) webpage.

New FREE Resource: Coping with COVID

We wanted to let you know that the American Health Care Association (AHCA) has created a free resource for facilities to share with their residents' families who are struggling to understand the challenges of Coping with COVID. The YouTube video is about 25 minutes long and covers a gamut of information that is directly aimed at the families and how they can support their loved ones, their community, and the facility. The thought process is that facilities can share this YouTube video with families so that they can understand the grief and trauma that is associated with COVID and the challenges of keeping the virus from spreading. More information can be found on our website which is located here: <https://educate.ahcancal.org/CopingWithCovid>.

Please feel free to pass on this free member benefit with your residents' families.

A New Infection Control Program Designed for Skilled Nursing and Assisted Living Staff

The [AHCA/NCAL Infection Control Certificate Program](#) features two main areas.

Five eLearning modules that provide basic knowledge in the following areas:

1. Infection Prevention and Control for All Staff
2. Coronavirus Disease (COVID-19)
3. Personal Protective Equipment (PPE)
4. Hand Hygiene
5. COVID-19: PPE Guidance for Use

Five eCompetencies™ with evidence-based digital checklists that allow evaluators to confirm step-by-step knowledge and competency for:

1. Personal Protective Equipment (PPE): Applying and Removing

2. Handwashing
3. Surgical Face Mask: Application and Removal
4. N95 Respirator Application and User Seal Chec
5. Cleaning and Disinfecting Environmental Surfaces

Lean more at AHCAinfectioncontrol.com.

Alabama Nursing Home Association

4156 Carmichael Road ♦ Montgomery, AL 36106 ♦ PH: (334) 271-6214 ♦ FAX: (334) 244-6509

Links:

Alabama Nursing Home Association <http://www.anha.org>

AL Board of Examiners of Nursing Home Administrators <http://www.alboenha.alabama.gov>

AL Department of Public Health <http://www.alabamapublichealth.gov>

CMS <http://cms.gov>