

Moving Needles Project Newsletter

! PROJECT UPDATES: **WHAT'S NEW WITH MOVING NEEDLES**

Moving Needles has developed immunization in-service slides and a supervisor training module for facility administrators and staff. These address vaccination information and recommendations for PALTC residents and staff. Prior to developing the trainings, a survey of frontline staff was conducted to gauge attitudes around vaccination, and professional training and education preferences. A total of 200 staff from nursing homes, assisted living, home health, and other long-term care settings responded to the survey. Results indicated staff prefer job-related training and education to be provided by their direct supervisor or facility administrator.

Respondents reported being motivated to protect themselves and others from illness. At the same time, they lack confidence in the effectiveness of vaccines and view vaccination as a personal decision separate from their employment.

The in-service aims to neutralize the topic of vaccinations, while also emphasizing actions staff can take to protect themselves and residents in a higher risk environment. These resources can be found here on the [Moving Needles Website](#).

PILOT FACILITY SPOTLIGHT

Name: Genesis - River City
Type of Facility: Skilled Nursing, Assisted Living, Independent Living
Number of Beds: 184
Total Number of Employees: 142
Location: Decatur, Alabama

The Moving Needles project has given our facility better insight for promoting vaccination health among our families, residents, and employee population. One of the greatest factors in the Moving Needles Project, which has proven to be very beneficial, is incorporating a peer champion.



At left, Tourie Davis, RN (left), gives an immunization to William Ballard, Assistant Administrator at River City

The peer champion has been passionate about sharing her story and experience. She has been a listening ear to staff's concerns and reservations with complying. We are getting the "YES!" Overall, the communication, education, and connection has eased the apprehension by building trust. Also, we have found that focusing on one vaccine at a time works well with long term care, but for short term care we strive to get residents vaccinated, if eligible, before discharge.

- Angela Orr, Infection Preventionist



Do You Know Your Recommended Vaccines?

Respiratory Syncytial Virus (RSV) is a common, infectious respiratory virus. It usually causes mild, cold-like symptoms. While most people recover from RSV without complications, it can cause serious illness and require hospitalization, particularly for infants and older adults. RSV is spread by direct contact with the virus, such as from the cough or sneeze of an infected person, or from contact with an infected surface. The CDC identified adults living in nursing homes and long-term care facilities as having an increased risk for severe RSV infection and complications, including hospitalization and death. RSV can spread quickly in long-term care settings. Each year between 60,000 and 160,000 older adults are hospitalized and 6,000-10,000 die due to RSV infection.

A new single-dose vaccine that prevents severe RSV is available for adults 60 and older. The CDC recommends adults 60 and older make the decision about the vaccine together with their healthcare provider after discussing the benefits and risks.

For more information about RSV and the CDC's recommendation for the RSV vaccine see <https://www.cdc.gov/rsv/index.html>.

Featured Resource

RSV Fact Sheet

AMDA

DESCRIPTION

AMDA developed this fact sheet to provide information on Respiratory Syncytial Virus Infection (RSV) and how residents of post-acute and long-term facilities can protect themselves and their loved ones.

WHY IT'S IMPORTANT

Residents of post-acute and long-term care facilities are an identified risk group for serious infection and complications due to RSV. This fact sheet describes the disease, and how an effective vaccine can provide protection.

HOW TO ACCESS

[FAQ about RSV](#)



TIPS & TIDBITS

AMDA continues to gather and share lessons learned from Round 1 of the project. For this second in the series of "Best Practices" we highlight:

Addressing Vaccine Hesitancy in Staff

- Separate those who are not getting vaccinated because of access or convenience barriers from those with philosophical or religious objections. For the first group, consider improving access where possible. For the second group, consider peer champions, education, and a specific follow-up process.
- Consider incentives that build community and camaraderie, making vaccination the norm and part of the organization's culture. T-shirts that celebrate vaccination are successful motivators. Monetary incentives such as gift cards meet the wishes of some communities. Show you appreciate your frontline staff and their circumstances by taking the time to ask what may be motivating.



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