



Pikes Peak Ethics Committee Meeting

- First Friday of every month at noon.
- Please consider bringing a case to the meeting. It's a great opportunity to discuss difficult cases with your peers in LTC, share experiences, and learn from each other.
- Email me if you would like to be added to our email list to receive the agenda and reminders about the meeting.
- <https://zoom.us/j/97461641616?pwd=YPPjU1ZHMG3bTChSVxAcD9gb39qVaY.1>

Falls: Special Focus for Surveyors

- CMS is prompting our Colorado surveyors to pay special attention to falls.
 - The average number of falls is higher in Colorado than the national average.
 - Colorado avg 49%; National avg 44%
- REMEMBER: **LPNs are not licensed to assess post-fall or other acute episodes.** They are supposed to assess only stable situations.

[Fall Evaluations](#)

Regulatory Updates

- Ensure Vaccine documentation: Offer vaccinations, track declination/agreement for vaccine, when vaccinations are given, vaccine clinic dates, etc....***
- Ensure the correct diet orders and textures upon admission. Do NOT give a regular diet to someone who is supposed to have a modified texture! ***



[Diet Texture Modifications](#)

- IFU - Instructions for Use - All medical devices and equipment have IFUs and organizations are expected to follow those instructions for use.
- Ensure we have a facility map outlining where the oxygen is stored, emergency exits, firewalls, etc...
- Enhanced Barrier Precautions and Group A Strep
 - Consider having individualized wound care supplies for each individual patient. Each patient can have their own supply box.
 - Be aware of continued surveillance for Group A Strep.



Top 10 citations 2025

- 1. Abuse and Neglect
- 2. Free of Accident Hazards/ Supervision/ Devices
- 3. Infection Prevention & Control

Year Type: Calendar Year
 Year: 2025
 Month: Full Year

Tag #	Tag Description	# Citations	% Providers Cited	% Surveys Cited
Totals represent the # of providers and surveys that meet the selection criteria specified above.			Colorado Active Providers = 212	Total Number of Surveys = 545
F0600	Free from Abuse and Neglect	84	28.8%	15.4%
F0689	Free of Accident Hazards/Supervision/Devices	79	32.1%	14.5%
F0880	Infection Prevention & Control	56	24.1%	10.3%
F0812	Food Procurement, Store/Prepare/Serve Sanitary	34	15.1%	6.2%
F0684	Quality of Care	28	12.7%	5.1%
F0677	ADL Care Provided for Dependent Residents	27	12.7%	5.0%
F0760	Residents are Free of Significant Med Errors	24	9.9%	4.4%
F0761	Label/Store Drugs and Biologicals	22	10.4%	4.0%
F0658	Services Provided Meet Professional Standards	21	9.9%	3.9%
F0679	Activities Meet Interest/Needs Each Resident	19	8.5%	3.5%

Vaccination Documentation

- Please make sure that we have offered vaccinations to all of our patients and documented either acceptance or refusal of vaccinations for COVID, Influenza, and Pneumonia.
 - **ONE COVID SHOT** < 64 y/o
 - **Immunocompetent individuals aged 5 to 64 years** - Individuals in this age group receive **one** 2025-2026 formula COVID-19 vaccine dose. This includes individuals who have already received prior vaccine doses.
 - **TWO COVID SHOTS** > 65 y/o OR **IMMUNOCOMPROMISED**
 - **Immunocompetent individuals aged 65 years or older** - Individuals in this age group receive **two** 2025-2026 formula COVID-19 vaccine doses, **with the second given approximately six months (and a minimum of two months) after the first.**
 - **Individuals aged six months and older with immunocompromising conditions** - Individuals with immunocompromising conditions receive **at least two 2025-2026 formula COVID-19 vaccine doses**, with the second given at least two months after the first. We individualize the decision to give additional doses



New “Up-to-Date” Definition

Nursing homes should immediately begin to use the new definition for reporting COVID-19 vaccination status for both residents and HCP in NHSN. If they have already submitted data for previous weeks (starting December 30, 2025), facilities may go back in NHSN and edit data for the quarter.

The Centers for Disease Prevention and Control (CDC) has revised the definition for what is considered up to date for the COVID-19 vaccine for both residents and healthcare personnel (HCP) via the National Health Safety Network (NHSN). **This change impacts reporting data beginning Q1 2026 (December 29, 2025, through March 31, 2026).**

Individuals are considered Up to Date with COVID-19 Vaccines during the surveillance period of 12/29/25 – 3/29/26, if they meet the following criteria:

Ages 65+ :

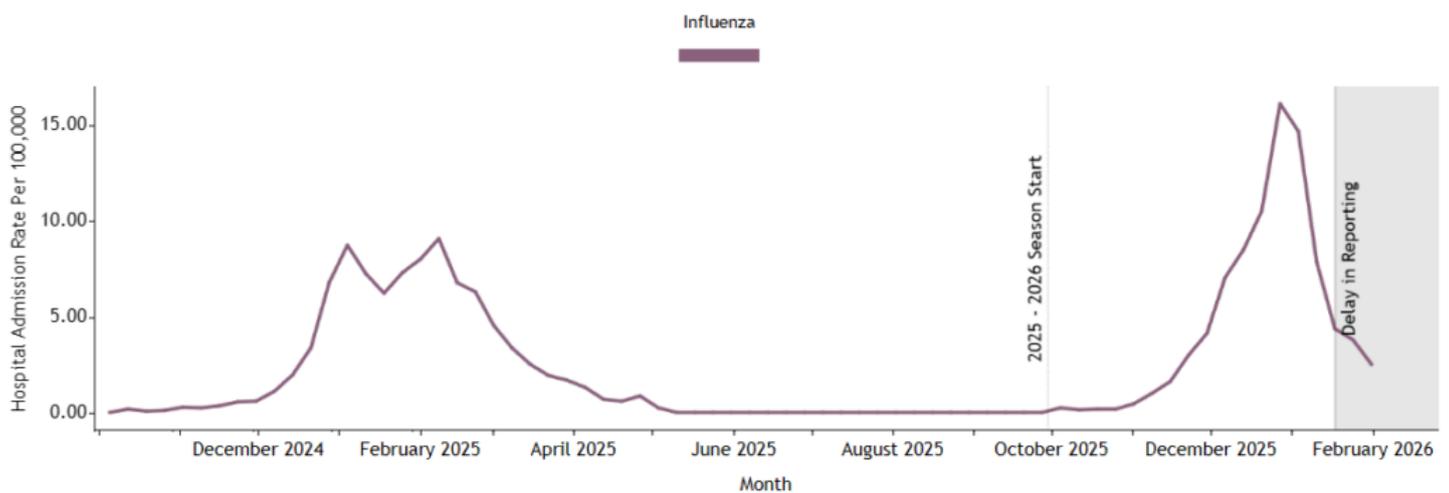
- 2 doses of the 2025-2026 COVID-19 vaccine, or
- 1 dose of the 2025-2026 COVID-19 vaccine within the past 6 months.

Ages <65 :

- 1 dose of the 2025-2026 COVID-19 vaccine.

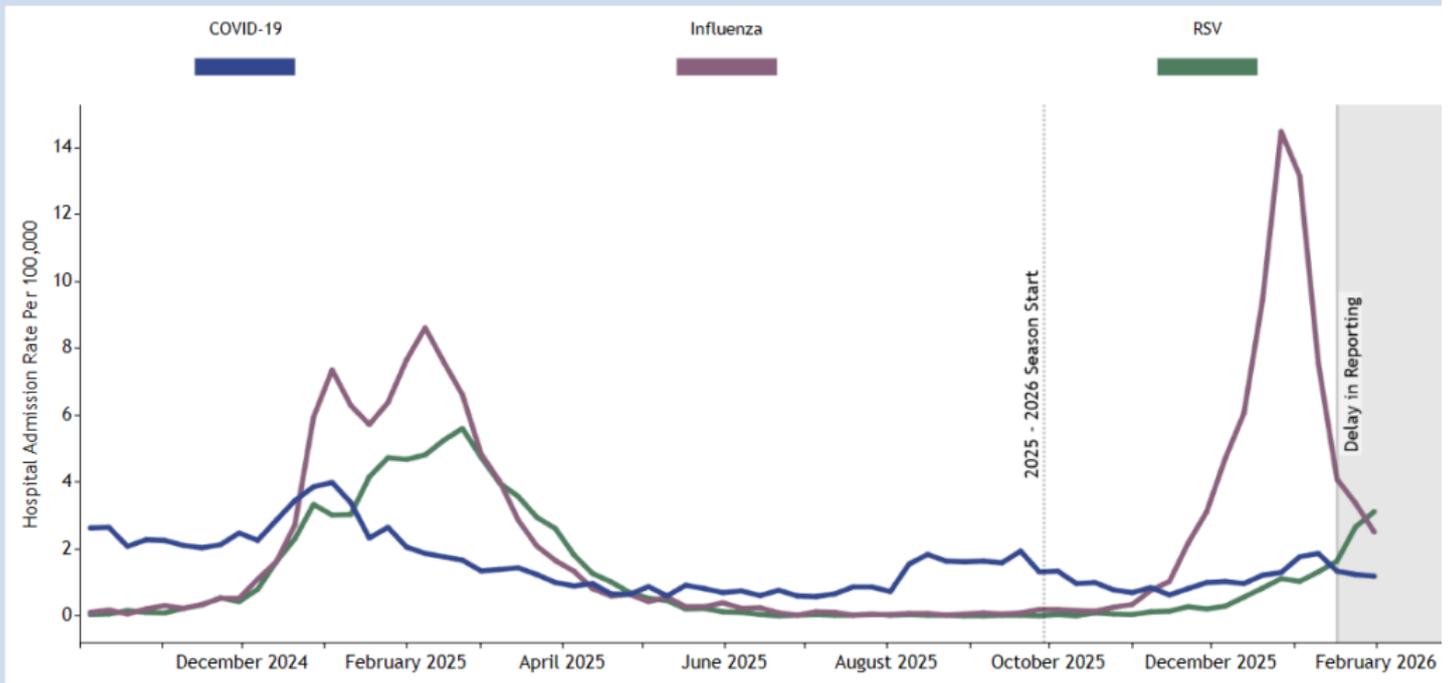
COVID/Influenza/RSV

- Influenza cases may have peaked and seem to be trending down.
- RSV cases are trending upward.
- [COVID-19, influenza, and RSV resources for residential and long-term care facilities | Colorado Department of Public Health and Environment](#)





Colorado COVID-19, RSV, Influenza Hospital Admission Rates by Week of Admission



Hospital admission data are preliminary and subject to change as more data become available. In particular, case counts and rates for recent hospital admissions are subject to lag. Delay for case identification and reporting may increase around holidays or during periods of increased hospital utilization. As data are received each week, prior case counts and rates are updated accordingly.

Tapering Antidepressants: What Strategy Works Best?

For adults with remitted [depression](#), gradual tapering of antidepressant medication, alongside psychological support, prevents relapse to a similar extent as continuing antidepressants at full therapeutic doses, while abrupt or fast discontinuation should be avoided, a new analysis showed.

Slow tapering with support could prevent one relapse in every five people compared with abrupt stopping or fast tapering, investigators estimated, adding that the findings point to a need for updated evidence-based guidelines that encourage regular treatment review and effective deprescribing when appropriate.

Residential and LTC Facility Call Slides– CDPHE

- **Following your manufacturer’s Instructions for Use (IFU)**
 - Pam Fricke, CDPHE HAI/AR Program, Infection Preventionist



- **Invasive group A Streptococcus in LTCFs**

- Cayla Mayle, HAI Prevention and Response Epidemiologist

- **Viral respiratory disease updates**

- Deborah Aragon, FluSurv-NET and Response Unit Manager

[1_14_2026 RLTCF All FacilitiesDownload](#)