

# Sustaining Infection Prevention in Long-Term Care: Partnerships, Workforce, and Practical Solutions

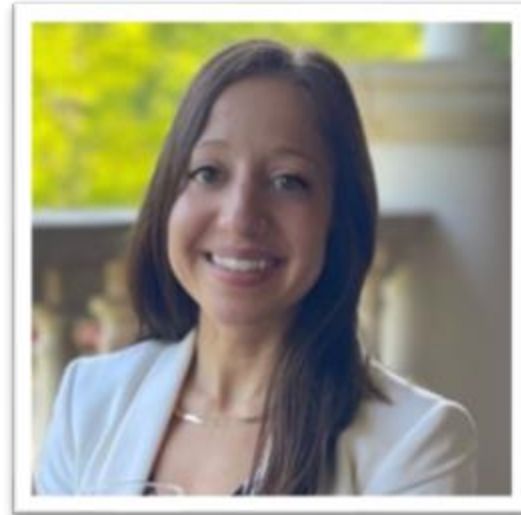
August 21, 2026  
1:00 – 2:00 PM ET



# NACCHO's PFL Team



**Christina Baum** *(she/her)*  
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# Webinar Logistics

- This webinar is being recorded, and the recording will be available in the NACCHO's Project Firstline Virtual Community.
- All participants are in listen only mode.
- Submit questions through the Q&A Box at any time. There will be time later in the presentation to address questions or as time allows.
- If you need technical assistance, please use the Q&A box.

# About NACCHO

NACCHO serves  
over 3,300 local health  
departments across the United  
States and is the leader in  
providing cutting-edge, skill  
building, professional  
resources and programs.

Our mission is to improve the  
health of communities by  
strengthening and  
advocating for local  
health departments.

- ✓ Advocacy
- ✓ Partnerships
- ✓ Funding
- ✓ Training and education
- ✓ Networking
- ✓ Resources, tools, & technical assistance

# NACCHO & Project Firstline

NACCHO's Project Firstline work aims to build the capacity of local health departments to deliver training and education to their community partners through the development and promotion of tools and resources.



# NACCHO's Project Firstline

Engage with NACCHO's Project Firstline! Sign up for **NACCHO's Project Firstline Newsletter** and join our **Virtual Community**

The **IPC Living Learning Network (LLN)** online community provides local health department staff opportunities to build subject matter expertise related to IPC.

All interested in IPC at the local level are welcome to join!



## NACCHO's Project Firstline

### [Communities of Practice](#)

NACCHO is proud to be a partner in CDC's Project Firstline. This community is designed to act as an extension of our IPC Living Learning Network (LLN), NACCHO's Project Firstline project participants, and all things healthcare IPC. The goal of this network is to bolster local health department capacity related to IPC by creating space for peer discussions, hosting expert presentations, and sharing CDC's Project Firstline training materials. Top topics include general IPC training and education, partnering with healthcare facilities to promote IPC best practices, and other healthcare associated infection (HAI) prevention tools and resources.

**member** last person joined one month ago

[Toolbox Keywords](#) [Infectious Disease](#) [Resource Type](#) [Online Training](#) [Webinars](#)

User Created [HAI](#)

# IPC Resource Library

## Infection Prevention and Control Resource Library

Infection prevention and control (IPC) describes a set of practices which aim to prevent the spread of infections, including healthcare-associated infections (HAIs) and emerging infectious diseases. NACCHO, with support from the Centers for Disease Control and Prevention's (CDC's) [Project Firstline](#), has compiled resources to enhance the capacity of local health department staff to address unique IPC needs in a range of high-risk settings. All tools included are free, however, a few may require you to be logged in to your MyNACCHO account to access. All resources were developed after 2016 with the majority of resources having been created between 2020 and 2022.

Suggestions for additional resources, as well as feedback on this resource library can be sent to [infectiousdiseases@naccho.org](mailto:infectiousdiseases@naccho.org).

Disclaimer: The positions and views expressed in these materials do not necessarily represent the official positions of CDC.

Page last updated in July 27, 2022.

**BEST PRACTICES AND GUIDANCE**

PRACTICAL TOOLS

**TRAINING**

**COVID-19**

**ANTIMICROBIAL RESISTANCE**

This section of NACCHO's IPC Library contains presentations, handbooks, and tools for understanding and communicating IPC guidance and best practices. Tools can be sorted by alphabetical order in each column. Click the resource title to directly view the resource. Please note this section includes tools for general healthcare settings (not facility specific) and for long term care facilities.

| TITLE                                                                                      | RESOURCE TYPE | AUDIENCE                    | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------|---------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <a href="#">Standard Precautions and Transmission-Based Precautions</a>                    | Quick guide   | General healthcare facility | This quick facility reference guide developed by Ingham County Health Department explains the "standard" and "transmission-based" precautions for healthcare personnel in residential facilities and links to CDC resources for both categories.                                                                                                                         |
| <a href="#">OSHA Small Entity Compliance Guide for the Respiratory Protection Standard</a> | Guidance      | Workplace                   | This OSHA compliance guide for the respiratory protection standard submitted by Fort Bend County Health & Human Services is intended to assist program administrators, employers who need to develop a program, employees who may be required to wear respirators, and licensed medical professionals who must evaluate an employee's ability to wear respirators, among |

Compilation of resources to enhance the capacity of LHD staff to address unique IPC needs in a range of high-risk settings.



Poll



# APIC Overview



**Deb Burdsall**

PhD, RN-BC, CIC, LTC-CIP, FAPIC  
Infection Preventionist and APIC President Elect

## Infection Prevention & Control in Long Term Care

Deb Patterson Burdsall PhD, RN-BC, CIC, LTC-CIP, FAPIC



The presenter is the President Elect of APIC with no other conflicts of interest.  
Some images created with assistance of Copilot and ChatGPT

# Collaboration

*Stronger Together for Safer Communities*

**NACCHO**<sup>®</sup> NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS

N / About / Our Leadership Share: in    

ABOUT MEMBERSHIP EVENTS OUR WORK RESOURCES

### Our Leadership

NACCHO supports local health departments in protecting and improving the health of communities nationwide.

 <https://www.naccho.org>

 ASSOCIATION FOR PROFESSIONALS IN INFECTION CONTROL AND EPIDEMIOLOGY

Membership ▾ Education ▾ Research ▾ Practice Resources ▾ Career Development ▾ Public Policy ▾

## Who We Are

APIC is the nation's leading association for infection preventionists, advancing science, education, and practice to reduce healthcare-associated infections and improve patient safety.



 <https://apic.org>



United in our mission to advance public health and infection prevention in long term care and across all settings.



# What is long term care?

*Long term care provide services, both medical and personal care, to people who are unable to live independently. It is estimated that 1 to 3 million serious infections occur every year in:*

- *nursing homes*
- *skilled nursing facilities*
- *assisted living facilities”*

Source: CDC. <https://www.cdc.gov/longtermcare/index.html>





# Goal:

## Provide a safe, competent, person-centered care

Infection prevention protects residents, staff, and visitors—every interaction, every time.



Prevent Infections



Promote Hand Hygiene



Ensure a Clean Environment



Protect Everyone

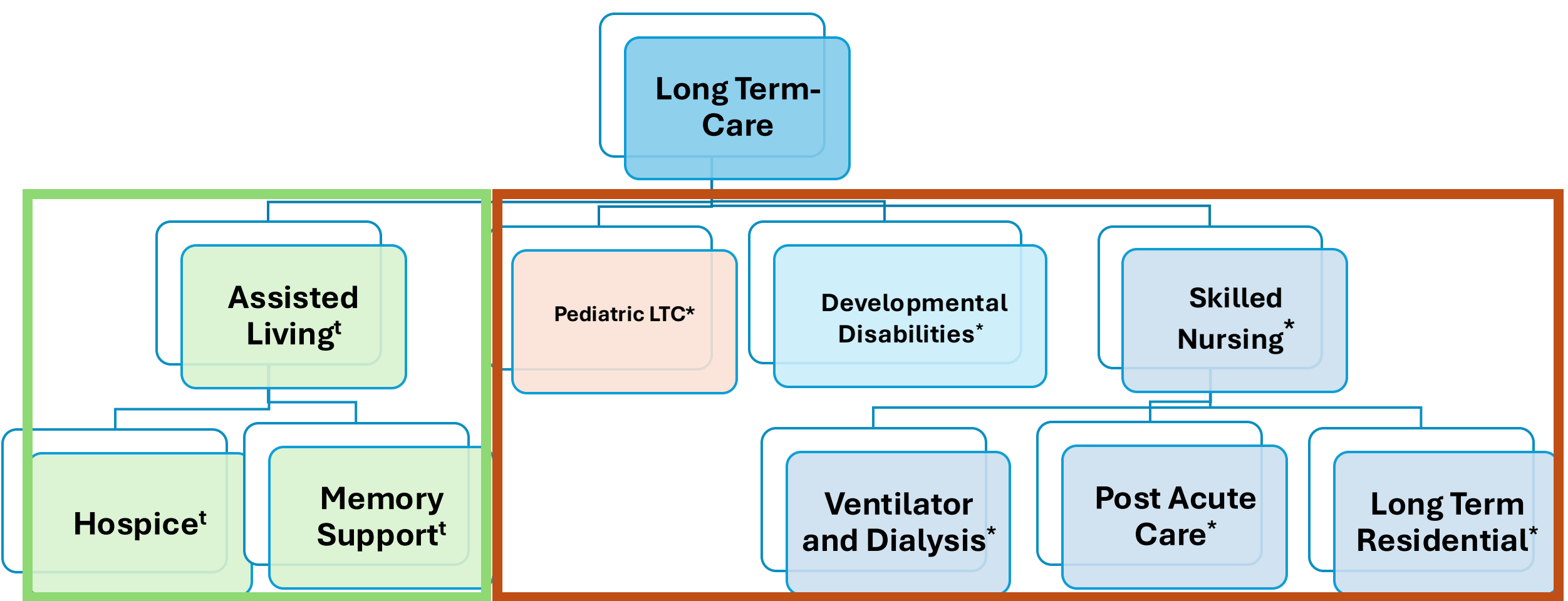


Respect Dignity and Choice



Better IPC.  
Better Care.

Healthier Communities.



## Continuum of Long Term-Care

<sup>t</sup> State Licensure

<sup>\*</sup> State Licensure and Federal Certification



# WHY THIS MATTERS NOW



## 1. INCREASING RESIDENT/PATIENT/CLIENT ACUITY

More complex conditions, more devices, more risk.



## 2. REGULATORY PRESSURE

State rules and CMS requirements (F880, F881) demand compliance and accountability.



## 3. WORKFORCE CHALLENGES

Recruitment, retention, and training continue to strain a limited workforce.



## 4. POST-COVID EXPECTATIONS

Elevated awareness, higher standards, and ongoing vigilance.



*The need is greater. The stakes are higher.  
Strong infection prevention protects lives.*

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# THE CHALLENGES



## 1. BALANCING ROLES:

### *Regulatory Public Health and Supportive Public Health*

Navigating enforcement responsibilities while fostering collaboration and improvement.



## 2. GAINING ACCESS:

### *Getting a Foot in the Door of Long-Term Care*

Building credibility and trust to open doors and create opportunities for meaningful engagement.



## 3. BUILDING RELATIONSHIPS:

### *Sustaining Long-Term Relationships with High-Turnover Facilities*

Creating consistent connections despite leadership and staffing changes.



## 4. STRENGTHENING TOGETHER:

### *Maintaining and Growing Partnerships*

Leveraging partnerships to share resources, align goals, and drive lasting impact.



***Our strength is in our collaboration.***

***Stronger partnerships. Stronger communities. Safer residents.***

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 **APIC**  
Association for Public Health

# Long Term Care Facilities

| Type of Facility           | Approximate Number (U.S.) | Key Characteristics                                                                    |
|----------------------------|---------------------------|----------------------------------------------------------------------------------------|
| Skilled Nursing Facilities | Over 14,000 ↓             | Post acute care, 24/7 nursing, CMS-regulated                                           |
| Assisted Living            | Over 30,000 ↑             | Social model, state-regulated<br>Care is similar to skilled nursing homes 20 years ago |

<https://www.cdc.gov/nchs/fastats/nursing-home-care.htm>

<https://www.consumeraffairs.com/assisted-living/statistics.html>

<https://www.cdc.gov/nchs/fastats/residential-care-communities.htm>

<https://www.kff.org/medicaid/a-look-at-nursing-facility-characteristics>



## The Large Burden of MDROs in Nursing Homes

| Facility Type                               | Documented MDRO                                                                            | Actual MDRO                                                                                |
|---------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Nursing Homes<br>(n = 14)                   | 17%<br>  | 58%<br> |
| Ventilator-Capable Nursing Homes<br>(n = 4) | 20%<br> | 76%<br> |

McKinnell JA et al, Clin Infect Dis. 2019; 69(9):1566-1573



Known MDRO



No Known MDRO

## Baseline Environmental Contamination of Three Nursing Home: 2024

Over 38% of all participant rooms having at least one surface contaminated with an MDRO (either MRSA, VRE, or resistant Gram-negative bacteria)  
Over 15% of bedrails and bed controls contaminated  
Over 14% of privacy curtains contaminated

# Epidemiology and transmission dynamics of multidrug-resistant organisms in nursing homes within the United States

Received: 10 September 2024

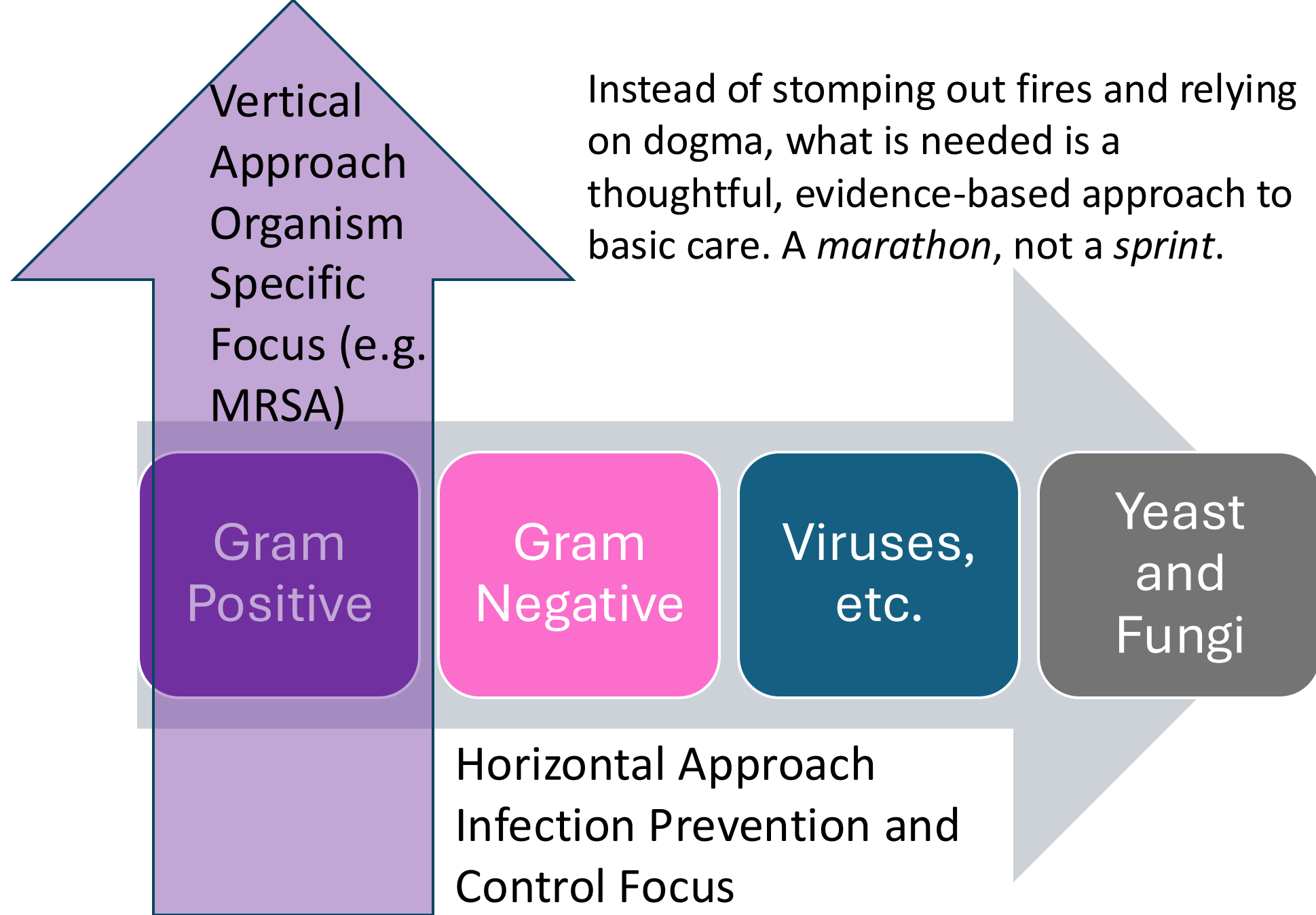
Accepted: 25 February 2025

Published online: 13 March 2025

 Check for updates

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Nursing home (NH) residents in the United States routinely attend interactive visits for services such as therapy or dialysis, creating opportunities for pathogen transmission. A paucity of studies exist which delineate spread of pathogens beyond residents' in-room environment. In this prospective cohort study, we recruited 197 newly-admitted residents across three Veterans Affairs NHs to characterize multidrug-resistant organism (MDRO) prevalence, acquisition, and transmission. Participant hands, nares, groin, and seven environmental surfaces were swabbed during 758 regularly scheduled in-room visits; participant hands, healthcare personnel hands, and equipment were swabbed during 345 unscheduled interactive visits. We demonstrate that baseline MDRO colonization and new acquisition is common, and one in six interactive visits result in MDRO transmission. Whole genome sequencing on a subset of participants enabled us to identify sources of transmission where it was unknown using microbiologic methods alone. Our results illustrate MDRO transmission pathways and highlight the need for innovative, multidisciplinary interventions.





## 1. GENERAL VACCINE ADMINISTRATION



## 2. SOURCE CONTROL / PERSONAL PROTECTIVE EQUIPMENT



### Acceptable Alternative PPE – Use Facemask



[cdc.gov/COVID19](https://www.cdc.gov/COVID19)



## 3. DETECTION, ISOLATION, SCREENING AND SURVEILLANCE



## 4. HAND HYGIENE



Clean hands save lives.



## 5. SURFACE CLEANING / DISINFECTING



Clean surfaces. Safer environment.



## 6. VENTILATION / AIR FILTRATION / WATER MANAGEMENT



Clean air. Safe water. Healthy residents and staff.



# CORE INFECTION PREVENTION PRACTICES

*Evidence-Based. Consistent. Everyone's Responsibility.*



## Infection Preventionist in LTC per CMS

- *“Infection Preventionist (IP)”: Term used for the person(s) designated by the facility to be responsible for the infection prevention and control program. (Please refer to F882 for further information on the IP.).... The intent of this regulation is to ensure that the facility designates a qualified individual(s) onsite, who is responsible for implementing programs and activities to prevent and control infections.”*

[https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap\\_pp\\_guidelines\\_ltc.pdf](https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltc.pdf)





# INFECTION PREVENTIONIST ROLES



## ACUTE CARE IPs

Focused Major Roles within IPCP:

- More complex Infection Prevention and Control Program components (e.g. ICU, Sterile Reprocessing, OR)
- Quality
- NHSN
- Departmental Responsibilities
- Inpatient/Outpatient
- Ambulatory Surgical Centers



## LONG TERM CARE IPs

Multiple Major Roles: IPCP +

- Director of Nursing (DON)
- Assistant Director of Nursing (ADON)
- Quality Assessment and Assurance/NHSN
- Occupational/Employee Health
- Inservice Coordinator
- Resident Assessment Instrument/ Minimum Data Set (RAI/MDS)
- Other duties as assigned including staff nurse as needed



***Roles differ. Impact is the same.***  
*Every Infection Preventionist protects people, supports care, and saves lives.*



# STATE DIFFERENCES

- We see very different models across states, for example some require dedicated **infection preventionists** while others often do not.

How do these differences in staffing expectations and regulatory requirements **impact infection prevention capacity and outcomes?**



## Staffing Models Vary

Some states mandate dedicated IPs; others allow multiple roles or none.



## Regulatory Requirements Differ

Requirements for training, qualifications, and authority are not consistent.



## Impact on Capacity

Differences influence infection prevention infrastructure, resources, and support.



## Impact on Outcomes

Variation can contribute to different levels of quality, safety, and risk.



*Understanding these differences is the first step toward building stronger, more consistent infection prevention systems nationwide.*





# INFECTION CONTROL CITATIONS VARY BY STATE

Three-Year Comparison (April 1, 2022 – March 31, 2025)\*



## 5 STATES WITH THE FEWEST IPC CITATIONS

(F880, F881, F882 Combined)

| State    | Certified Nursing Homes | F880 (Infection Control Program) | F881 (Antibiotic Stewardship) | F882 (IP Requirements) | TOTAL IPC CITATIONS (F880+F881+F882) | CITATIONS PER 100 FACILITIES |
|----------|-------------------------|----------------------------------|-------------------------------|------------------------|--------------------------------------|------------------------------|
| Alaska   | 20                      | 7                                | 1                             | 0                      | 8                                    | 40.0                         |
| Vermont  | 34                      | 9                                | 1                             | 1                      | 11                                   | 32.4                         |
| Wyoming  | 36                      | 10                               | 0                             | 1                      | 11                                   | 30.6                         |
| Hawaii   | 42                      | 11                               | 1                             | 1                      | 13                                   | 31.0                         |
| Delaware | 44                      | 11                               | 3                             | 0                      | 14                                   | 31.8                         |



## COMPARISON STATES

(Maryland, Illinois, California, Washington)

| State      | Certified Nursing Homes | F880 (Infection Control Program) | F881 (Antibiotic Stewardship) | F882 (IP Requirements) | TOTAL IPC CITATIONS (F880+F881+F882) | CITATIONS PER 100 FACILITIES |
|------------|-------------------------|----------------------------------|-------------------------------|------------------------|--------------------------------------|------------------------------|
| Maryland   | 233                     | 307                              | 66                            | 28                     | 401                                  | 172.1                        |
| Illinois   | 667                     | 1,311                            | 155                           | 86                     | 1,552                                | 232.7                        |
| California | 1,162                   | 3,402                            | 336                           | 82                     | 3,820                                | 328.7                        |
| Washington | 425                     | 593                              | 66                            | 27                     | 686                                  | 161.4                        |



Citation frequency varies dramatically across states—*reflecting differences in facility performance, survey activity, enforcement practices, or all three.*



Public health partners must understand not only where facilities are struggling—but *the regulatory environment in which their Infection Preventionists work.*

\*Source: CMS Health Deficiencies Dataset (r5ix-sfxw), deficiencies cited between 04/01/2022 and 03/31/2025.  
CMS Provider of Services File (4pq5-n9py), March 2026 (certified nursing homes).



# INFECTION CONTROL CITATIONS:

## 5 States with the Most vs. Key Comparison States

Three-Year Comparison (April 1, 2022 – March 31, 2025)\*



### 5 STATES WITH THE MOST IPC CITATIONS (EXCLUDING CALIFORNIA AND ILLINOIS) (F880, F881, F882 COMBINED)

| STATE        | CERTIFIED NURSING HOMES** | F880 Infection Control Program | F881 Antibiotic Stewardship | F882 IP Requirements | TOTAL IPC CITATIONS (F880+F881+F882) | CITATIONS PER 100 FACILITIES |
|--------------|---------------------------|--------------------------------|-----------------------------|----------------------|--------------------------------------|------------------------------|
| Texas        | 1,174                     | 2,374                          | —                           | —                    | 2,374                                | 202.2                        |
| Ohio         | 915                       | 1,578                          | 221                         | —                    | 1,799                                | 196.6                        |
| Missouri     | 483                       | 931                            | 112                         | 62                   | 1,105                                | 228.8                        |
| Pennsylvania | 1,114                     | 827                            | 66                          | 40                   | 933                                  | 83.7                         |
| Florida      | 696                       | 670                            | 92                          | 51                   | 813                                  | 116.8                        |

— = Data not in top 10 states for that F-tag.



### KEY COMPARISON STATES (Maryland, Illinois, California, Washington)

| STATE      | CERTIFIED NURSING HOMES** | F880 Infection Control Program | F881 Antibiotic Stewardship | F882 IP Requirements | TOTAL IPC CITATIONS (F880+F881+F882) | CITATIONS PER 100 FACILITIES |
|------------|---------------------------|--------------------------------|-----------------------------|----------------------|--------------------------------------|------------------------------|
| Maryland   | 220                       | 66                             | —                           | —                    | 66                                   | 30.0                         |
| Illinois   | 668                       | 1,311                          | 155                         | 86 ★                 | 1,552                                | 232.7                        |
| California | 1,162                     | 3,402                          | 336                         | 82                   | 3,820                                | 328.7                        |
| Washington | 194                       | 95                             | 66                          | —                    | 161                                  | 82.9                         |



#### What the data show:

- Substantial variation in IPC citation frequency across states.
- Raw counts reflect volume; **per-100-facility rates** reflect **citation intensity**.



#### Illinois Leads the Nation for F882:

86 citations for **IP Requirements**—more than any other state.

Strong reminder: **Supporting Infection Preventionists matters** for residents and for compliance.

\* Source: CMS Health Deficiencies Dataset (r5ix-sfxw), deficiency citations between 04/01/2022 and 03/31/2025.

\*\* Source: CMS Provider of Services File (4pq5-n9py), March 2026 (certified nursing homes).



Citation frequency reflects survey activity and state enforcement practices as well as facility performance. Data do not prove that one state has better or worse infection prevention than another.

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**APIC**  
Association for Professionals in Infection Control and Epidemiology

- ME: I'm re-reading. So, the image generator is a fan of bootstrapping, eh? LOL
- ChatGPT: 🤔🤔🤔 **Apparently it is!**  
Give the image generator four verified numbers and a blank cell, and it says, *"I understand statistics. I shall estimate the remainder."*

**NO. YOU SHALL NOT.** 🤔

It is actually a perfect illustration of why we've been separating **analysis from design**. The image generator is terrific at composition, hierarchy, icons, spacing, and making our slides look polished. But it sees a table and wants to make the table *look complete*. It doesn't understand that, in our world, a dash meaning **"not independently verified"** is vastly preferable to a beautifully typeset hallucination.



# STABILITY MATTERS

## Infection Preventionist Retention Impacts Infection Prevention

Strong, stable Infection Preventionists are essential for effective IPC programs and resident safety.



### 54.7%

of LTC facilities experienced at least one Infection Preventionist turnover within the preceding 24 months.<sup>1</sup>



### 45.7%

of facilities with IP turnover said turnover impeded full implementation of the infection prevention and control program.<sup>1</sup>



### 36.9% → 41.0%

Estimated probability of receiving an infection-control citation increases from very low to very high nursing staff turnover.<sup>2</sup>



### Turnover Has a Real Impact

- ✓ Higher nursing staff turnover is associated with more infection-control citations and broader citation scope.<sup>2</sup>
- ✓ Facilities reported an average of 3 or more Infection Preventionists over a 3-year period in 24.6% of nursing homes (2018).<sup>3</sup>
- ✓ CMS now includes total nursing staff turnover in the SNF Value-Based Purchasing Program.<sup>4</sup>

### WHAT HELPS INFECTION PREVENTIONISTS STAY?<sup>5</sup>



Leadership  
Stability



Reasonable  
Workload



Professional  
Development



Career Advancement  
Opportunities



Organizational  
Support & Recognition



Flexible Scheduling  
& Support



Supporting the Infection Preventionist isn't just workforce development.  
*It's infection prevention.*



CDC's 2026 NHSN LTCF Annual Facility Survey now asks facilities how many times the Infection Preventionist role turned over in the previous year.<sup>6</sup>

Sources: 1. Rutala WA, et al. *Infect Control Hosp Epidemiol*. 2020;41(1):81-87. 2. Neprash HT, et al. *Infect Control Hosp Epidemiol*. 2022;43(2):190-197.  
3. Jacobson DJ, et al. *Am J Infect Control*. 2020;48(10):1174-1180. 4. CMS. SNF Value-Based Purchasing Program. 2025.  
5. Andres M, et al. *Am J Infect Control*. 2025;53(7):706-713. 6. CDC. NHSN LTCF Annual Facility Survey (2026).

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# Roadmap to Safer Nursing Homes



[Home](#) > [For Media](#) > [Newsroom](#)

## APIC and AAPACN Release New Infection Prevention Resources for Skilled Long-Term Care Facilities



*Tools provide guidance on how to implement enhanced barrier precautions*

**Arlington, Va., December 10, 2024** – The Association for Professionals in Infection Control and Epidemiology ([APIC](#)) in collaboration with the American Association of Post-Acute Care Nursing ([AAPACN](#)), has released a practice guidance tool and resource guide to help healthcare personnel in skilled long-term care facilities implement enhanced barrier precautions (EBP).



<https://apic.org/news/apic-and-aapacn-release-new-infection-prevention-resources-for-skilled-long-term-care-facilities/>

Thank you so much for still being here!!!  
Public health and infection prevention are  
journeys, not a sprint.

# Moderated Panel



**Deb Burdsall**

PhD, RN-BC, CIC, LTC-CIP, FAPIC  
Infection Preventionist and APIC President Elect



**Geraldine Hidalgo**

MPH, LPN, CIC  
Biological Scientist IV, Polk County Health Department (FL)



**Megan Westcott**

MPH, CDI  
Community Health Coordinator/Epidemiologist, West  
Hartford-Bloomfield Health Department (CT)

# Audience Q&A



# What's next? Connect with us!



NACCHO



@nacchoalerts



Join NACCHO's Project Firstline Virtual Community



Complete the webinar evaluation

# THANK YOU!

Thank you to our speakers and to all of you for joining us!

Please take a moment to complete the evaluation.  
It will pop up after you leave the webinar.

