Infection Prevention Rounding

Infection Prevention Boot Camp October 23, 2019

JILL LINDMAIR-SNELL, MSN, RN, CIC, FAPIC

Objectives

- Participants will be able to verbalize the importance of IP Rounding
- Participants will be able to identify best practices for IP Rounding
- Participants will be able to name areas where the IP Rounds
- Participants will be able to locate IP Rounding Resources



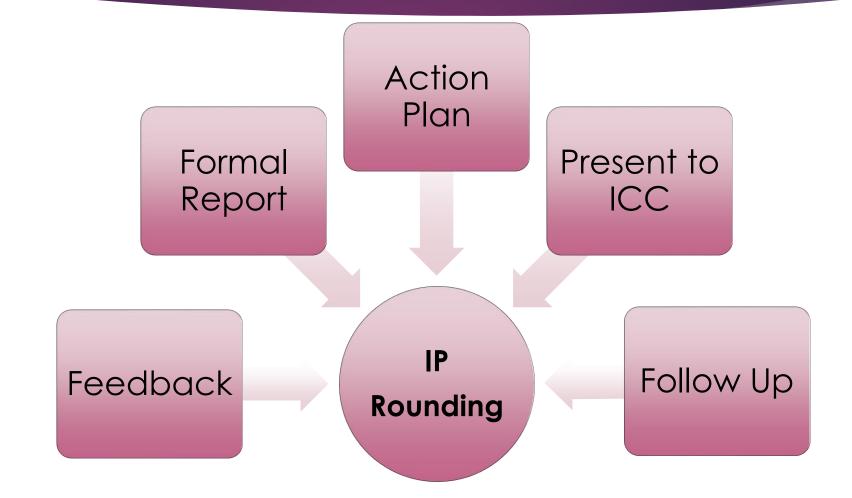
On any given day, about 1 in 31 hospital patients has at least one healthcare-associated infection.

CDC, October 2019

- Epidemiology & Surveillance
- Education
- IPC Rounding
- Cleaning, disinfection, sterilization
- Outbreak detection & management
- Emerging technologies
- Antimicrobial Stewardship
- Diagnostic Stewardship



"We're glad someone comes down here to see to what we do"



Standardized Tool

Frequency

Schedule

Multidisciplinary Team

Measurement

Announced vs. Unannounced

- Hand Hygiene
- PPE
- Housekeeping
- Expiration dates
- Storage
- Clean supply
- Soiled utility
- General facility

DateClinic						
ITEM	ISSUE	DESCRIPTION	ITEM	ISSUE	DESCRIPTION	
		HAND HYGIENE			ISOLATION	
1		Hand Hygiene policy is followed	29		Isolation type is appropriate for diagnosis (contact, droplet, airborne, airborne strict)	
2		Direct patient caregivers are not to wear artificial nails. Natural nails are clean and short	30		Isolation signs are visible at the patient's room entrance	
3		There are adequate hand hygiene facilities including location/#sinks, soap, other products	31		If available, staff can identify negative pressure rooms and why they are used	
4		Products are not outdated	32		Staff is aware of the process to place patient in negative pressure, and to take them out (calling facilities). Staff can verbalize the process of visual checks and daily checks by facility.	
5		No lotion from home. Use approved and provided lotion only.	33		If no All rooms, staff is able to verbalize process of receiving patients w. airborne requirements	
6			34		Front entrance kiosk contains infection control information, tissues, mask gel and wastebasket	
		IV SAFETY-IF APPLICABLE	35		Patients with a possible communicable respiratory illness (measles TB) are placed in private room asa	
7		Spiked IV's are initialed and labeled with an expiration date 24 hours from time opened	36		Coughing patients are encouraged to sit away from other patients, as space allows	
8		Non-Spiked IV's removed from their outer bag are dated to expire 30 days from opening	37			
9		If removed from warmer, solutions for irrigation or injection must be used within 24hr of removal from warmer and not be re-warmed	38			
10		Clean IV pumps are stored in clean equipment room and plugged into wall when not in use	39			
11		IV sites are labeled with insertion date and time	40			
12		Unopened IV solutions in warmers must be kept in overwrap, expire in 14 days, and <,104°F.	41			
		PERSONAL PROTECTIVE EQUIPMENT and BBP EXPOSURE PREVENTION	42			
13		Personal protection equipment is available as needed				
14		PPE is appropriately utilized as the task indicates-Standard Precautions				
15		Sharps disposal containers are readily available at point-of-use and are not overfilled			EXPIRATION DATES	
16		Contaminated sharps are properly disposed of	43		Multi-dose containers are labeled appropriately (hydrogen peroxide, alcohol, surgical lube) when opened and dated to expire 28 days for date opened, and initialed	
17		Specimens are properly packaged for transport	44		Sterile water or irrigation bottles are not expired. Opened bottles are good for 24 hours and labeled as such.	
18		Biohazards are labelled with the universal biohazard symbol	45		Essential oils expire in 1 year	
19		Biohazard bags are not used to hold non-biohazard items	46		No products past their manufactures expiration dates	
20		Red bag waste is in a secure area.	47		Any point of care testing control solution & strips are initialed and marked with date opened. Glucometers cleaned after each patient use.	
21			48		All multi-dose vials of injectables exp 28 days after opening or exp date on vial, whichever is first. Exc for vaccines which are good until manufacturer's exp date.	
		GENERAL HOUSEKEEPING	49		Unoperied solutions for irrigation, if warmed, are initiated and dated with a 14 day exp. Temp <,140 e. flexible containers of 0.9%NaCl Irrigation,USP or plastic pour bottles such as Sterile water.	
22		Clinic is generally clean and uncluttered	50		Unopened solutions for injections, if warmed, are initiated and dated with a 14 day exp. Temp<,140 e. 5% Dextrose Injection,USP or 0.9%NaCl Injection USP	
23		Horizontal surfaces and ventilation grills are clean and free of dust	51		No outdated IV solutions	
24		Offices and workspaces are dusted and maintained – Employee	52		Opened bottle of prolystica marked with 12 week expiration date	
25		No dust is present above doors, pictures, lights, tops of ice machines - High dust areas	53			
26		Housekeeping carts are attended or locked in housekeeping closet				
27		Ice Machines are clean and free of lime build up				

5 Minute Rounding

IP Rounding Resources - APIC/CDC QUOT

INDIVIDUAL AUDITS

- Clean areas
- Dirty areas
- Hand Hygiene Supplies
- Isolation
- Isolettes/Bassinets
- Medication Areas
- Needlestick Prevention
- Nutrition Prep Areas
- PPE Supply
- Point of Care testing
- Vaccine storage areas
- Visitor Areas

SUITE TOOLS

- Ambulatory Care
- Critical Access Hospitals
- Device-Associated Infections
- High Level Disinfection
- ICU
- Medication Areas
- NICU
- PACU
- Transmission-based precautions





Inpt units

Med/Surg
ICU
NICU
Labor / Delivery
Emergency



Procedure areas

Surgery/SPD
GI
Bronchoscopy
Dialysis
Pain Management
Radiology



Outpatient

Physician Practices
Urgent Care
ASC
Sleep Centers
Wound Care









LAB



PHARMACY







REHAB



LAUNDRY

IP Rounding Resources - Isolation



- Appropriate Isolation Category
- Visible Signage
- PPE available
- Single room or cohort
- Hand Hygiene
- Patient/Family education
- Equipment cleaning

IP Rounding Resources CMS Worksheet – HOSPITAL - IC Worksheet

- Hand Hygiene (pg. 9)
- ▶ Injection Practices & Sharps Safety (pg. 11)
- PPE/Standard Precautions (pg. 14)
- Reprocessing of Semi- & Critical Equipment (pg. 19)
- Single Use Devices (pg. 27)
- Spinal Injection Procedures (pg. 38)
- Point of Care Devices (pg. 39)
- Precautions (pg. 40)
- Surgical Procedure (pg. 46)

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop C2-21-16 Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Survey & Certification Group

Ref: S&C: 15-43-ASC

DATE: June 26, 2015

TO: State Survey Agency Directors

FROM: Directo

Survey and Certification Group

SUBJECT: Advanced Copy - Update to Ambulatory Surgical Center (ASC) Infection Control

Surveyor Worksheet (ICSW)

https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-15-12-Attachment-1.pdf

IP Rounding Resources ASC Infection Control Surveyor Worksheet



IP Program
Hand Hygiene
Injection Practices
Sterilization/HLD
Environmental Cleaning
Point of Care Devices

1. Ambulatory Surgery Center Infection Control Surveyor Worksheet https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107 exhibit 351.pdf

IP Resources for Peri-op Areas:

AAMI:

- Comprehensive guide to steam sterilization and sterility assurance in health care facilities (ST79)
- Chemical sterilization and high-level disinfection in health care facilities (ST58)
- ► Flexible and semi-rigid endoscope reprocessing in healthcare facilities (ST91)
- APIC
 - ▶ Infection Preventionist Guide to the OR (2018)
- AORN:
 - ► Guidelines for Perioperative Practice
- CDC Guideline for Disinfection and Sterilization
- Disinfection & Sterilization
 - https://disinfectionandsterilization.org/

IP Rounding: Peri-operative Services

Pre-op

- HH
- Med administration
 - IV Fluids!
- Surgical site marking
- Point of care testing
- Equipment cleaning
- Clean storage
- Linen
- Environment

Intra-op

- HH/Surgical Scrub
- Asepsis
- Surgical site prep
- Draping
- Med administration
- Sharps safety
- Room turnover
- Instrument reprocessing

Post-op

- HH
- Med administration
- Equipment cleaning
- Isolation
- Soiled utility
- Patient food/refrigeration
- Staff eat/drink
- Environment

IP Rounding Resources Sterile Processing

Point of Use Decontamination Washer

Prep & Pack Sterilization Sterile Storage

Sterilization SPS Medical Sterilization Audit Checklist http://www.ascquality.org/Library/sterilizationhighleveldisinfectiontoolkit/Sterilization%20Audit%20Checklist%20SPSmedical.pdf

IP Rounding Resources – High Level Disinfection/Sterilization

Standard IC.02.02.01
Reducing the risk of infection associated with medical devices



Reprocessing: High Level Disinfection and Liquid Sterilization Process—"Dirty" Area Using Chemical Soak Method

HLD-2

Instructions: Use this card and the one that precedes collectively. Observe area where instruments are reprocessed by a soaking method using a liquid chemical germicide. For each category, record the observation Sum all Yes and No responses. Divide by sum of "Yes" + "No".

Equipment Reprocessing – Dirty Area			Summary of Observations			
8	Are chemical potency test strips stored appropriately and labeled with "opened" and "use by" dates?		Yes		No	
9	Are opened liquid chemical containers labeled with the date opened and the use-by date?	0	Yes		No	
10	Do log books show test strip quality control recording?		Yes		No	
11	Do log books show results of liquid chemical germicide potency testing?		Yes		No	
12	Are spill kits readily available?		Yes		No	
13	Are safety data sheets (SDS, formerly known as MSDS) available for the chemicals used in the area?		Yes	0	No	
14	Are instrument instructions for use (IFUs) readily available for each equipment item reprocessed in the area?		Yes		No	
TOTAL						

IP Rounding Resources – High Level Disinfection

https://www.cdc.gov/infectioncontrol/pdf/QUOTS/High-Level-Disinfection-Suite-P.pdf

IP Rounding – HLD Areas

 IFU
 Staff competency
 PPE / HH
 Pre-cleaning
 Transportation

 Cleaning
 Reprocessing
 Storage
 Documentation
 Physical Environment

Maintenance

Reprocessing failures

IP Rounding - Disinfection

Spaulding Classification

Classification	Critical	Semi - Critical	Non - Critical		
Patient Contact	Sterile tissue/cavities, Bloodstream	Mucous membranes/non- intact skin	Intact Skin		
Process	Sterilization	HLD/Sporicidal chemical	Low level disinfection		
Examples	Surgical instruments, implants	Flexible endoscopes, laryngoscopes, respiratory equipment	BP cuffs, wheelchairs, etc.		

IP Rounding: Ultrasound Probe

Where is the probe used?

What type of procedures?

Is there a potential for exposure to blood during procedure?

What is the process for determining if sheath is intact?

Is there an IFU for the sheath?

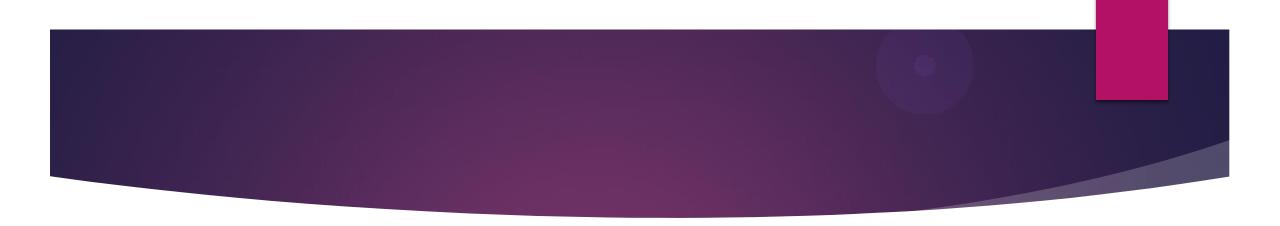
What is process after sheath removal?

IP Rounding Resources: Ultrasound Probes

IP Questions	Department Answers
Tell me more about how this probe is being used during	The probe is used during procedures in interventional
a procedure.	radiology.
What types of procedures is the probe used for?	Angiograms, venograms, biopsies, line placements, paracentesis, thoracentesis
What type of contact does the probe have with the patient?	None, we use a sterile sheath
What is the process for determining if the sheath is intact?	Observation during procedure and visual inspection upon completion of the procedure.
Is there an IFU for the sheath? What does it state?	Not available from the manufacturer
Is there a potential for exposure to blood during any of these procedures?	Only if the sheath has been punctured
What is the process after sheath removal?	Disinfection per the IFU.

IP Rounding: Ultrasound Probes

CDC **FDA** "For clinical applications of a semi-critical or critical "Ultrasound probes used during surgical procedures can contact sterile body sites. These probes can be covered nature (intraoperative, transrectal, transvaginal, with a sterile sheath to reduce the level of transesphageal, or biopsy procedures), labeling should contamination on the probe and reduce the risk for recommend, when appropriate, the use of sterile, infection. However, because the sheath does not legally-marketed probe sheaths. Note that the use of sheaths does not change the type of reprocessing that completely protect the probe, the probes should be is recommended after each use." sterilized between each patient use as with other critical items. If this is not possible, at a minimum the probe should be high-level disinfected and covered with a sterile probe cover." "Do not use a lower category of disinfection or cease to "Probe used in a semi-critical application should be follow the appropriate disinfectant recommendations cleaned and sterilized or at least received high-level disinfection after use even if a sheath was used. Probes when using a probe cover because these sheaths and condoms can fail." used for critical applications should be cleaned and sterilized after use even if a sterile sheath was used. Sheaths can fail during use and contamination may not be easily visible." Rutala, WA, Weber, JD. Healthcare Infection Control Practices Food and Drug Administrations (FDA). Information for Manufacturers Advisory Committee (HICPAC) & Centre for Disease Control and Seeking Marketing Clearance of Diagnostic Ultrasound Systems and Prevention (CDC). Guideline for Disinfection and Sterilization in Transducers (2008). Pages 17 and 57. Healthcare Facilities. 2008. Pages 19 and 89.



Toolkit available:

www.ultrasoundinfectionprevention.org

IP Rounding Resources - Dialysis



https://www.cdc.gov/dialysis/index.html

IP Rounding Resources – Laundry

- Healthcare Laundries Accreditation Council (HLAC)
 - Standards Manual
 - Standards Checklist
 - Sample Policy & Procedure
 - https://www.hlacnet.org/
- CDC "Guidelines for Environmental Infection Control in Health-Care Facilities"
 - ► Equipment, handling, process Pg. 153
 - ▶ Water Temp for Laundry pg. 63
 - https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf
- Round annual w/ EVS

IP Rounding Resources – Dietary

Food storage

Food Handling Cleaning & Sanitizing

Garbage

Pest Control

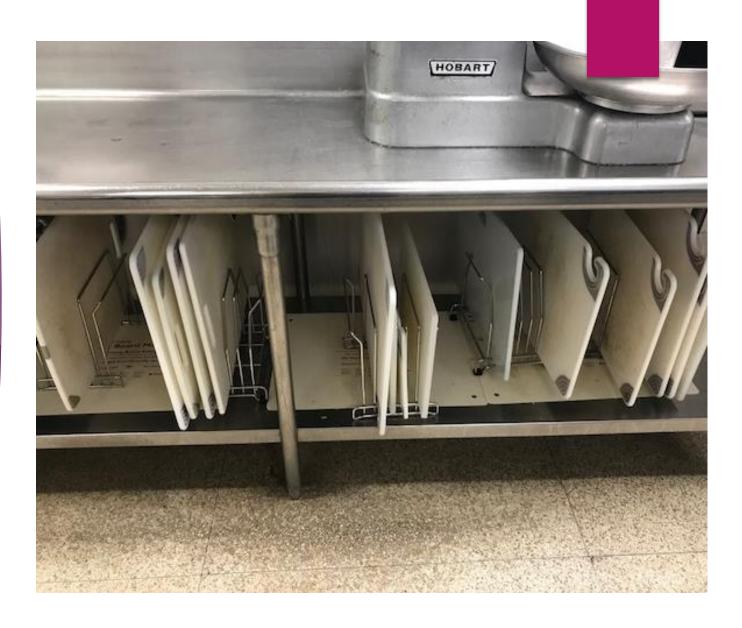
Environment

Worker Appearance

State of WI. Department of Agriculture - Wisconsin Food Code https://datcp.wi.gov/Pages/Programs_Services/FoodCode.aspx

IP Rounding Resources – Dietary







Rounding Together



Mop bucket



Janitor's Closet

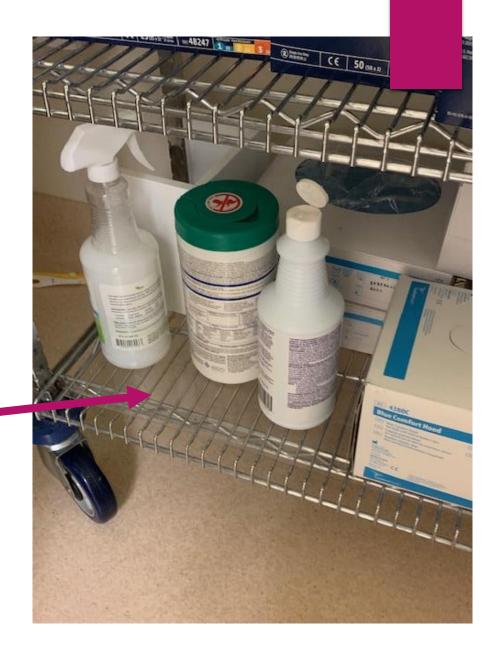
Is this room + or – pressure?

Janitor Closet



Storage Areas:

- Liquids below solids
- Solid bottom shelf liner in place





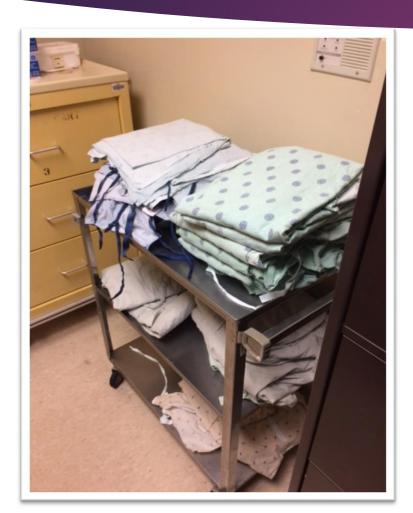


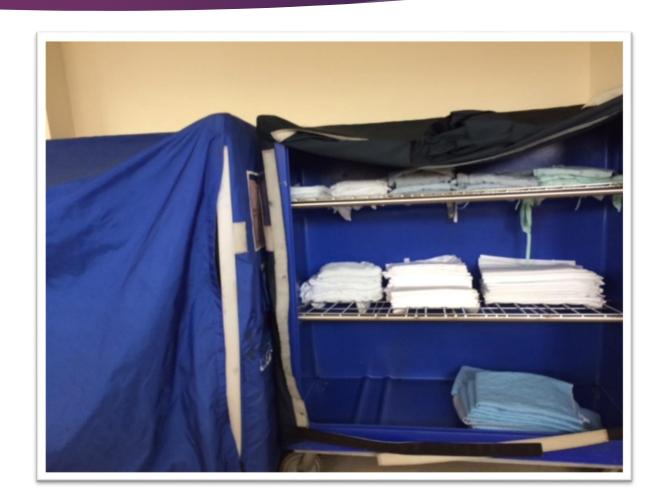




Soiled Utility Area

Linen







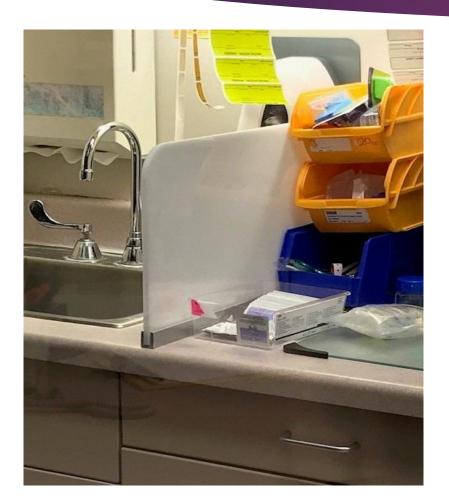
Sharps Container





ICU

Hand Washing Sink



"Hand washing facilities should also be situated to avoid splashing - suggesting at least 36 in from patients or clean supplies, or equipped with a splash guard to avoid splash contamination"

Bartley, 1999. pg 165

APIC State-of-the-Art Report: The role of infection control during construction in health care facilities



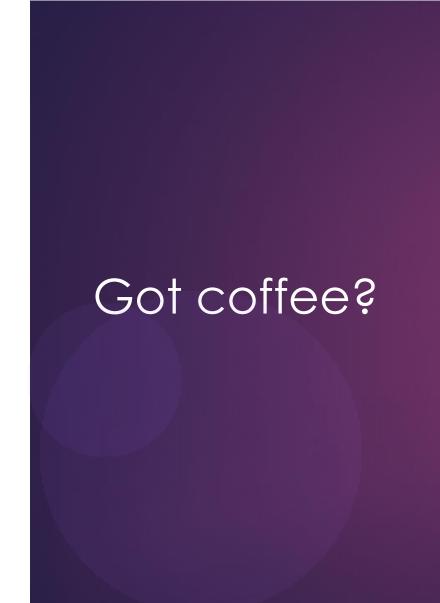
How many paper towels do you need?

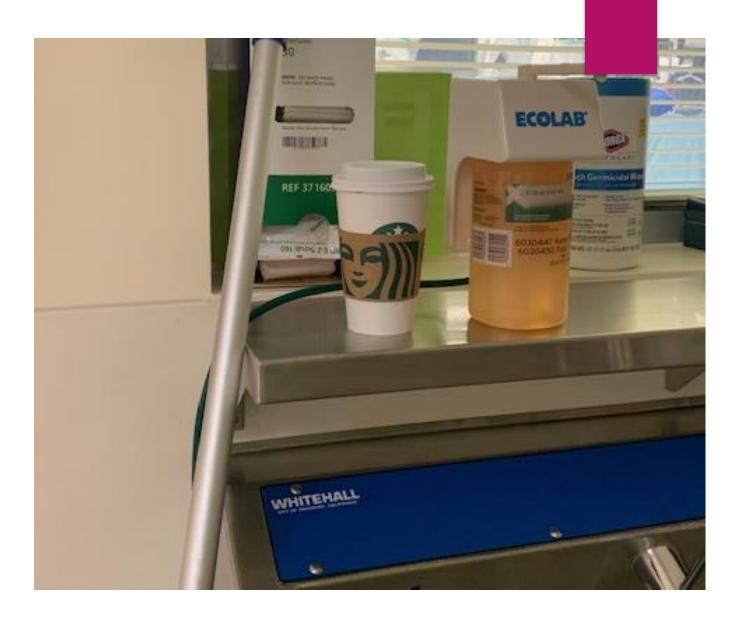


Locker Room











Operating Room



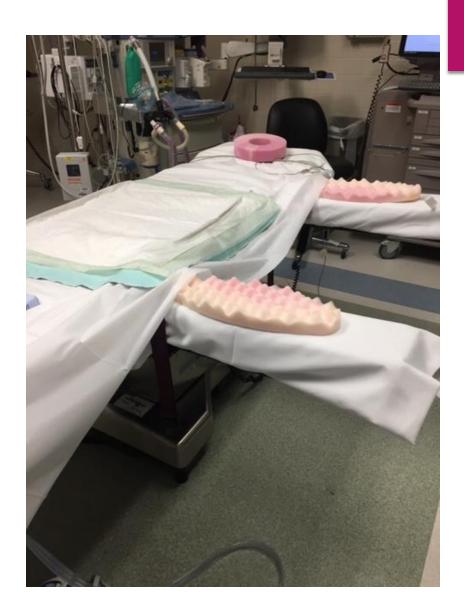
Positioning Device

- ► Torn
- ► Tape Residue



OR

Positioning Devices





Sterile Processing Dept.

Instrument tap and plastic dipping material are used to identify instruments. They wear out over time and need to be inspected every time the instrument is processed, replace as often as needed.

AAMI (2017), ST 79, pg. 40



Refences

- ► APIC. Infection preventionist competency model. https://apic.org/professional-practice/infection-preventionist-ip-competency-model/
- ▶ Bartley, J. (1999). APIC state of the art report: The role of infection control during construction in health care facilities. American Journal of Infection Control, 28; 156 235.
- Centers for Disease Control. (2007). Guideline for isolation precautions: preventing transmission of infectious agents in healthcare settings. https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html
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- Centers for Medicare and Medicaid Service s (CMS). Ambulatory Surgery Center Infection Control Surveyor Worksheet https://www.cms.gov/Regulations-and-Guidance/Manuals/downloads/som107_exhibit_351.pdf
- ► Centers for Medicare and Medicaid Services (CMS). Hospital Infection Control Worksheet. Retrieved from https://www.cms.gov/medicare/provider-enrollment-and-certification/surveycertificationgeninfo/downloads/survey-and-cert-letter-15-12-attachment-1.pdf
- State of WI. Department of Agriculture Wisconsin Food Code https://datcp.wi.gov/Pages/Programs Services/FoodCode.aspx
- ▶ Ultrasound Infection Prevention Toolkit. (2019). https://www.ultrasoundinfectionprevention.org/