Establishing an Infection Prevention Program, and conducting ongoing Infection Surveillance in the Nursing Home

4:00 – 5:00 PM ET

May 28, 2020
Introduction and Welcome!

Anita Monteiro
iQIIG Group Director,
CMS
Meet Your Speaker

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Infection Preventionist
Health Services Advisory Group
Establishing an Infection Prevention Program and Conducting Ongoing Infection Surveillance in the Nursing Home

Eli K. DeLille, MSN, RN, CIC, FAPIC
Infection Preventionist
Health Services Advisory Group (HSAG)
Objectives

• Identify basic components of an infection prevention (IP) program.
• Describe the best-practice strategies needed to establish an IP program.
• Recognize the key elements necessary for ongoing IP surveillance.
Regulatory Requirements

Infection Control 483.80 Requirements:
- Designated Infection Prevention and Control Officer (IPCO) with specialized training
- Infection Prevention and Control Plan (IPCP)

<table>
<thead>
<tr>
<th>Phase 1</th>
<th>Phase 2</th>
<th>Phase 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective November 28, 2016</td>
<td>Effective November 2017</td>
<td>Effective November 2019</td>
</tr>
<tr>
<td>• Isolation should be least restrictive for the resident</td>
<td>• Implement antibiotic stewardship</td>
<td>• Identify designated infection prevention lead</td>
</tr>
<tr>
<td>• Flu vaccination offered each year 10/1–3/31</td>
<td></td>
<td>• Designated infection prevention lead must participate on Quality Assurance Committee</td>
</tr>
<tr>
<td>• Annual review of policies</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Basics of IP

• Develop a system for preventing, identifying, reporting, investigating, and controlling infection and communicable diseases for all residents, staff members, and visitors.

• Establish goals and priorities for the program.

• Plan and implement strategies to achieve goals, monitor compliance, and respond to identified issues.
Current State

- Facilities put processes in place to meet phase-3 requirements
- COVID-19 control and mitigation efforts placed strain on both personnel and supplies
- Highlighted the need for more IP resources, and the response has been varied
  - Example A is a large, corporation-owned skilled nursing facility (SNF) that has a full-time nurse IP dedicated to the role
  - Example B is a small, privately-owned SNF that splits IP responsibilities between three staff members to meet full time requirements (DSD/DON/LVN*)

*DSD/DON/LVN=Director of Staff Development/Director of Nursing/Licensed Vocational Nurse
Step 1—CDC* IP Training

- Designated IP lead should complete the CDC IP Training
- Self-paced training designed for working staff
- Continuing education credit is earned upon completion of training

https://www.cdc.gov/longtermcare/training.html
Step 2—QIO*-Developed Nursing Home Checklist

- Standardizes essential components of an IP Program
- Ensures consistency of training across staff members
- Defined criteria
- Simple format

*QIO=Quality Improvement Organization

https://www.hsag.com/globalassets/qii/ipsorientationchecklistfinal.docx
Step 3—ICAR* Self Assessment

This tool is intended to assist in the assessment of infection control programs and practices in nursing homes and other LTCFs. If feasible, direct observations of infection control practices are encouraged. To facilitate the assessment, health departments are encouraged to share this tool with facilities in advance of their visit.

Overview

- Section 1
  - Facility Demographics
- Section 2
  - Infection Control Program and Infrastructure
- Section 3
  - Direct Observation of Facility Practices (optional)
- Section 4
  - Infection Control Guidelines and Other Resources

Infection Control Domains for Gap Assessment

- Infection Control Program and Infrastructure
- Healthcare Personnel and Resident Safety
- Surveillance and Disease Reporting
- Hand Hygiene
- Personal Protective Equipment (PPE)
- Respiratory/Cough Etiquette
- Antibiotic Stewardship
- Injection Safety and Point-of-Care Testing
- Environmental Cleaning

*ICAR=Infection Prevention and Control Assessment Tool for Long-Term Care Facilities (LTCFs)
### Infection Prevention Post-Acute Risk Assessment Prioritization Worksheet

<table>
<thead>
<tr>
<th>Risk Priority</th>
<th>Low, 1–4 Risk Score</th>
<th>Medium, 5–11 Risk Score</th>
<th>High, 12–18 Risk Score</th>
<th>Risk Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Risk event</td>
<td>Probability the risk will occur.</td>
<td>Potential severity if the risk occurs.</td>
<td>How well prepared is the organization?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>Med</td>
<td>Low</td>
<td>None</td>
</tr>
<tr>
<td>Value</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Example: Multiply the first section score (3) with the second section score (2), then multiply the sum (9) with the third section score (3) to get the total (27).</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>18</td>
</tr>
</tbody>
</table>

#### Staff Issues
- Hand Hygiene
- Isolation Procedures
- Standard Precautions
- Blood-Body Fluid Exposure
- Compliance Issues

#### Environmental Issues
- Lack of Cleaning
- Patient Care Areas
- Lack of Cleaning
- Patient Care Equipment
- Legionella
- Mold
- Aspergillosis

#### Catastrophic Events
- Pandemic/Biological Event
- Internal Outbreak

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This material was prepared by Health Services Advisory Group, the Medicare Quality Innovation Network—Quality Improvement Organization for Arizona and California, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. C5-120706-T313K13035-14

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https://www.hsag.com/globalassets/qii/ipriskassesprioritizationfinal.docx
## Step 5—Develop a Customized Action Plan

### Infection Prevention and Control Post-Acute Plan Prioritized Risks, Goals, Strategies, and Implementation

**Pandemic Event (COVID-19 Preparation)**

<table>
<thead>
<tr>
<th>Nursing Home Name:</th>
<th>CCN*</th>
<th>Date:</th>
</tr>
</thead>
</table>

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Strategies, best practices, and metrics selected to address the infection prevention concern identified below are intended to be an initial guide only. A nursing home should perform an infection prevention analysis and risk assessment to customize a plan that will best meet the needs of their residents, staff members, and providers. For each prioritized area of concern, identify goals, strategies, responsible person(s), timeframe, and evaluation of effectiveness.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Root Cause</th>
<th>Strategies</th>
<th>Implementation</th>
<th>Action</th>
<th>Internal Nursing Home Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Area of Concern</strong></td>
<td>Survey Findings</td>
<td>Best Practices by Area of Concern</td>
<td>Responsible Person(s)</td>
<td></td>
<td>Evaluation of Effectiveness via Surveillance</td>
</tr>
</tbody>
</table>
| Pandemic Event (COVID-19 Preparation) | | 1. Implement the Centers for Disease Control and Prevention (CDC) COVID-19 control and mitigation strategies.  
- Educate annually, at hire, and when guidelines change regarding expectations of care.  
- Monitor compliance with screening residents/visitors/staff for symptoms.  
- Reinforce hand hygiene, transmission-based precautions, cohorting, and other best-practice interventions.  
- Ensure necessary care products are available to staff (personal protective equipment [PPE], cleaning supplies, hand hygiene products, etc.).  
- Reinforce strategies listed throughout this plan.  
2. Stay informed on current national and international COVID-19 literature and practice.  
3. See additional detail in COVID-19 mitigation plan. Available at: https://www.cdnh.ca.gov/Programs/CHC/QCP/CD PH%20Documents%20Library/APL-20-52-Attachment-01.pdf | Infection preventionists (IPs)  
Managers  
Staff | Implement plan strategies by [date].  
Monitor and improve processes as needed.  
Implement fully and accept as standard culture. | Maintain zero new confirmed COVID-19 cases in 2020 as reported to the CDC National Healthcare Safety Network (NHSN).  
Ongoing compliance with COVID-19 mitigation strategies.  
Report monthly progress to Quality Assurance & Performance Improvement (QAPI) Committee and HSAG. |

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https://www.hsag.com/globalassets/qii/capaipctoolpandemicfinal.docx
Nursing Home IP Template Action Plan

• Comprehensive Template Action Plan
• Each Topic Broken out Into Single Sheet
  – Antibiotic Stewardship
  – Catheter-Associated Urinary Tract Infections (CAUTIs)
  – Central Line-Associated Bloodstream Infections (CLABSI)
    • Coming Soon
  – Clean Resident Environments
  – Clostridioides difficile Infections (CDIs)
  – Hand Hygiene
  – Isolation and Standard Precautions
  – Pandemic Event (COVID-19) Preparation
  – Vaccinations
Step 6—Solicit Feedback

Can you name others?

- Infection Prevention Lead
- Director of Nursing and ADON
- Consultant Pharmacist
- Administrator
- QAA* Nurse
- Physicians, incl. Medical Director

Losben N. Delivering an Antimicrobial Stewardship Program to Your Facility: How to Lead and Where to Go. 2016.

*QAA=Quality Assessment and Assurance
Step 7—Keys to Implementation

- Educate staff members regarding expectations of care.
- Empower staff members to speak up if they identify a concern.
- Engage staff members, providers, and residents in IP practices.
- Modify the plan as necessary.
Step 8—Surveillance

• Process Surveillance
  – To identify whether staff implement and comply with policies and procedures

• Outcomes Surveillance
  – Collect data on individual resident cases and compare to standard definitions of infections (McGeers/NHSN*)

• Documentation
  – Infection control reports; identify trends and patterns

• Data Analysis

*NHSN=National Healthcare Safety Network
Summary

• Identify basic components of an IP program
  – Education and training on IP practices
  – Risk assessment/plan
  – Surveillance program
  – Engaged staff members, providers, and residents

• Describe the best-practice strategies needed to establish an IP program
  – CDC IP Training
  – ICAR Tool
Summary (cont.)

• Understand the key elements necessary for ongoing IP surveillance
  – Leadership support
  – Staff engagement
  – Concurrent and retrospective reviews
    • Standardized format
  – A process to escalate concerns
Thank you!

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Join Us!

Join us for the next Nursing Home Training Call on 6/4/2020 from 4:00-5:00pm ET
Details Forthcoming!
Thank You!

Your opinion is valuable to us. Please take a moment to complete the post event assessment here:

https://www.surveymonkey.com/r/DCZZ25Q

We will use the information you provide to improve future events.