

# 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



**Eli K. DeLille MSN, RN, CIC, FAPIC**  
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)

Phase 1	Phase 2	Phase 3
Effective November 28, 2016	Effective November 2017	Effective November 2019
<ul style="list-style-type: none"><li>• Isolation should be least restrictive for the resident</li><li>• Flu vaccination offered each year 10/1–3/31</li><li>• Annual review of policies</li></ul>	<ul style="list-style-type: none"><li>• Implement antibiotic stewardship</li></ul>	<ul style="list-style-type: none"><li>• Identify designated infection prevention lead</li><li>• Designated infection prevention lead must participate on Quality Assurance Committee</li></ul>

# 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.

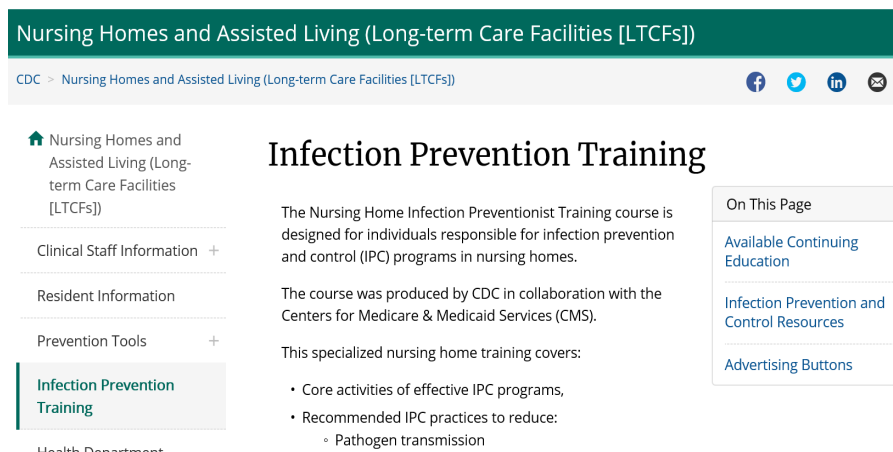
# Current State

- 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\*)



# 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



### Infection Preventionist Orientation Checklist

Name: \_\_\_\_\_  
Indicate date completed in the space provided. \_\_\_\_\_

**Departmental Organization**  
Provided by Administrator/Director of Nursing

\_\_\_\_\_ Review the Infection Prevention (IP) Scope of Responsibilities document.  
\_\_\_\_\_ Review the IP Program Risk Assessment.  
\_\_\_\_\_ Review the IP Plan and Goals.  
\_\_\_\_\_ Review the Pandemic Event Plan.  
\_\_\_\_\_ Review the Emergency Preparedness Plan (alignment to pandemic event).  
\_\_\_\_\_ Review the annual Tuberculosis Risk Assessment (work with local health department to determine prevalence).  
\_\_\_\_\_ Review the Quality Assurance & Performance Improvement (QAPI) function and metrics as it relates to IP.

**Infection Prevention Education**

\_\_\_\_\_ [California Department of Public Health Infection Prevention \(IP\) Series](#)  
\_\_\_\_\_ [Centers for Disease Control and Prevention \(CDC\) IP Training](#)  
\_\_\_\_\_ [Association for Professionals in Infection Control and Epidemiology \(APIC\)](#) self-study following core curriculum (requires membership, due to COVID-19 APIC has offered limited resources without membership requirement)

**Technological Skills**

\_\_\_\_\_ Computer literacy  
\_\_\_\_\_ Outlook email  
\_\_\_\_\_ Secure message  
\_\_\_\_\_ Surveillance software (if any)  
\_\_\_\_\_ Microsoft Word  
\_\_\_\_\_ Microsoft Excel  
\_\_\_\_\_ Microsoft PowerPoint  
\_\_\_\_\_ Intranet/Internet

**IP Surveillance**

\_\_\_\_\_ Laboratory alerts/reports

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# 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

# Step 4—Prioritize the Findings



## Infection Prevention Post-Acute Risk Assessment Prioritization Worksheet

Risk Priority	Low: 1–4 Risk Score				Medium: 5–11 Risk Score				High: 12–18 Risk Score			Risk Score
Risk Event	Probability the risk will occur.				Potential severity if the risk occurs.				How well prepared is the organization?			
	High	Med	Low	None	Life-threatening	Permanent Harm	Temporary Harm	None	Poorly	Fairly Well	Well	
Value	3	2	1	0	3	2	1	0	3	2	1	
Example: Multiply the first section score (3) with the second section score (3), then multiply the sum (9) with the third section score (3) to get the total (18).	X				X					X		18
Staff Issues												
Hand Hygiene												
Isolation Procedures												
Standard Precautions												
Blood/Body Fluid Exposures												
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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# 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)

Nursing Home Name: \_\_\_\_\_

CCN\*: \_\_\_\_\_

Date: \_\_\_\_\_

*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.*

Topic	Root Cause	Strategies	Implementation		Internal Nursing Home Goals
Area of Concern	Survey Findings	Best Practices by Area of Concern	Responsible Person(s)	Action	Evaluation of Effectiveness via Surveillance
Pandemic Event (COVID-19 Preparation)		<ol style="list-style-type: none"> <li>Implement the Centers for Disease Control and Prevention (CDC) COVID-19 control and mitigation strategies. <ul style="list-style-type: none"> <li>Educate annually, at hire, and when guidelines change regarding expectations of care.</li> <li>Monitor compliance with screening residents/visitors/staff for symptoms.</li> <li>Reinforce hand hygiene, transmission-based precautions, cohorting, and other best-practice interventions.</li> <li>Ensure necessary care products are available to staff (personal protective equipment [PPE], cleaning supplies, hand hygiene products, etc.).</li> <li>Reinforce strategies listed throughout this plan.</li> </ul> </li> <li>Stay informed on current national and international COVID-19 literature and practice.</li> <li>See additional detail in COVID-19 mitigation plan. Available at: <a href="https://www.cdph.ca.gov/Programs/CHQC/LCP/CDPH%20Document%20Library/AFL-20-52-Attachment-01.pdf">https://www.cdph.ca.gov/Programs/CHQC/LCP/CDPH%20Document%20Library/AFL-20-52-Attachment-01.pdf</a></li> </ol>	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.

Infection Prevention and Control Post-Acute Plan

\*CCN= Centers for Medicare & Medicaid Services (CMS) Certification Number

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# 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



# 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

# 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!

Eli K. DeLille, MSN, RN, CIC, FAPIC  
[edelille@hsag.com](mailto:edelille@hsag.com)



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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.