



HEALTH QUALITY INNOVATORS

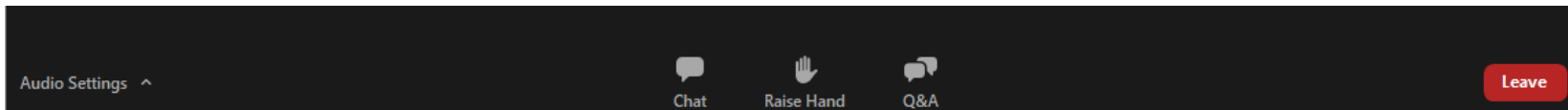


Monthly Office Hours – Strategy and Policy Development

June 15, 2023

The Adult Day Center Model Infection Control and Prevention Policies grant was awarded to LeadingAge Virginia in 2022 from the Virginia Department of Health Office of Epidemiology with funding from the CDC under Federal Award Identification Number NU50CK00055.

Logistics – Zoom Meeting



To ask a question, click on the **Q&A** icon.

Raise your hand if you want to verbally ask a question.

Resources from today's session will be posted in **Chat**.

You may adjust your audio by clicking **Audio Settings**.

You have been automatically muted with video turned off.

Your HQI Team



Sheila McLean
MBA, LNHA, CPHQ
Project Director



Allison Spangler
BSN, RN, RAC-CT, QCP
Project Manager



Felicity Wood
MS, LNHA
Consultant

Project Foundations

Project Funding Source

LeadingAge Virginia has received funding from the Centers for Disease Control and Prevention (CDC) through the Virginia Department of Health (VDH) to develop infection prevention and control policies for adult day centers in Virginia. LeadingAge Virginia and Health Quality Innovators (HQI) have partnered on this grant project.

Goals of the Project

- Develop policies that reflect current best practices for infection prevention and control (IPC) in adult day centers (ADCs) and that are in accordance with state regulations/standards
- Provide policies that can be customized to meet the unique needs of all licensed ADCs in Virginia
- Support implementation of these policies

What Project Success Looks Like

- Consistent IPC policies
- Increased capacity to prevent/control infections
- Preparedness to respond quickly and appropriately to disease threats
- Decreased risk of ADC-acquired infections

Summary from May Office Hours

Policy Analysis

What is policy analysis?

- Review/comparison of current policy
- Research policy options
- Identification of options for future policy
- Determination of most effective and efficient options



Access the May Office Hours
Slides and Recording

Polling Question

What prompts you to review your existing policies?

1. Survey citation
2. Regulations and standards changed
3. Model policies are now available
4. Reviewed at least annually



Strategy & Policy Development: Why Is It Important?

Virginia Adult Day Center Model Infection Control and Prevention Policies Grant *Strategy and Policy Development Tip Sheet*

What is Strategy and Policy Development?
Strategy and policy development is planning how to develop, draft, and prepare for implementation of your policy.

Why is Strategy and Policy Development Important?
In order to put a policy into action, you must create a strategy and draft the policy first.

Creating a strategy and drafting the policy can help you make the policy option you selected actionable. This process may look different depending on the policy you selected.

Who Should be Involved in Strategy and Policy Development?

People who can help design your strategy are the people whose jobs or lives might be affected by the policy

These individuals can develop communication strategy and materials. They can identify and connect you with key contacts and partners, and figure out clear next steps like contacting:

- Community members
- Center leaders
- Center staff, participants and volunteers, and
- Subject matter experts

People who can help develop the policy

People who provide critical information for the policy:

- Subject matter experts
- People who understand the regulatory process

Strategy and Policy Development:
Having comprehensive policies that are the result of a well-managed system of policy development, supports the Adult Day Center's culture of compliance and provides guidance to staff on expectations, regulations and protocols.

This document was produced by The Adult Day Center Model Infection Control and Prevention Policies grant (Subrecipient Number LDAHP603-GY23) awarded to LeadingAge Virginia in 2022 with funding from the Centers for Disease Control and Prevention through the Virginia Department of Health Office of Epidemiology, Division of Healthcare-Associated Infections and Antimicrobial Resistance Program. All products and materials developed through this grant shall not be duplicated or furnished to others without prior written consent.

LeadingAge Virginia HQI HEALTH QUALITY INNOVATORS

Strategy & Policy Development: How Is It Done?

1. Identify your center's need
2. Outline your policy content
3. Obtain input
4. Develop your policy
5. Ask for feedback
6. Share with employees, participants and family members
7. Educate and check understanding and compliance
8. Schedule routine and as-needed updates and revisions



Strategy & Policy Development Checklist

Virginia Adult Day Center Model Infection Control and Prevention Policies Grant Policy Analysis Checklist

What is the Policy Analysis Checklist?

This checklist outlines the process that can be used to develop or review the content of any organizational policy. It includes information about why a policy is needed, research requirements and contents, as well as practical considerations to support implementation.

Use this checklist whenever you develop or review a policy. Remember to include people with disabilities, families, caregivers, support workers and other stakeholders to ensure your policies and procedures are relevant to your organization's expected culture and practices.



This document was produced by The Adult Day Center Model Infection Control and Prevention Policies grant (Subrecipient Number LDASHP03-0123) awarded to LeadingAge Virginia in 2021 with funding from the Centers for Disease Control and Prevention through the Virginia Department of Health Office of Epidemiology, Division of Healthcare-Associated Infections and Antimicrobial Resistance Program. All products and materials developed through this grant shall not be duplicated or furnished to others without prior written consent.

Tips

It may be useful to:

- Consult with peers, licensing inspectors, or trade associations to seek expert advice on specific topics.
- Develop a communication strategy that identifies everyone, including staff, participants, volunteers and visitors, who need to be aware and comply with the policy, and how this will be communicated to the organization.

Ensure:

- Staff members have been trained who must comply with the policy or monitor its implementation.
- Sufficient time is provided for staff, participants, volunteers and visitors to comment on policy draft documents.

If staff are not compliant with the policy, ask them why. This may need to be reviewed, or staff may need to be educated to understand why it is important and how it should be implemented.

	Element	Y	N	Comments
Reason for Policy Development or Review	Scheduled review date to ensure continuous improvement.	<input type="checkbox"/>	<input type="checkbox"/>	
	A gap/need has been identified.	<input type="checkbox"/>	<input type="checkbox"/>	
	A serious or critical incident has occurred, requiring an urgent review.	<input type="checkbox"/>	<input type="checkbox"/>	
	Policy needs to be drafted or modified to align with standards and regulations for Adult Day Center licensing.	<input type="checkbox"/>	<input type="checkbox"/>	
	Policy needs updating due to changes in the operating environment which affect how the policy works, what it covers or who is responsible for implementation.	<input type="checkbox"/>	<input type="checkbox"/>	
	Policy needs updating due to changes in laws, regulations or government policy. The NDIS rules and the Quality and Safeguarding Framework require specific actions by organizations that must be included in organizational policies and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	

Virginia Adult Day Center
Model Infection Control and Prevention Policies Grant
Policy Analysis Checklist



Adult Day Center Case Study

Virginia Licensed Adult Day Center

- 3-year license
- Most recent inspection = no violations
- Review of infection prevention and control policies and practices was recently conducted via an onsite infection prevention and control assessment
- Feedback was provided to the center from this assessment in the areas of:
 - Auditing – the center does not have a process to validate staff compliance with policies
 - Separation of clean and dirty spaces and equipment – the center has an environmental cleaning policy but does not have a process for separating/delineating clean and dirty spaces

What should this adult day center do with these recommendations?

Injection Safety

Injection Safety

Initial Effective Date	mm/dd/yyyy
Most Recent Revision Date	mm/dd/yyyy
Authorized/Reviewed by	Individual or Committee Name
Standard	22VAC40-61-290B1.c

Definition and Overview (define the infection control practice)

Injection safety, or safe injection practices, is a set of measures taken to perform injections in a manner that is optimally safe for participants, **center** staff, and others. A safe injection is harmless to the participant, keeps the provider safe from avoidable risks, and prevents dangerous waste (e.g., through inappropriate disposal of injection equipment).

Purpose (why this policy/procedure is important)

The purpose of this policy is to provide staff with guidance on following safe injection practices. It is the **center's** duty to protect participants and staff by ensuring safe practices are followed when preparing and administering injectable medications.

Responsibility (who is responsible for following this policy/procedure)

For the purpose of this policy, "staff" refers to those in the **center** who hold credentials to prepare and administer injectable medications.

Policy Content Considerations

- Guidance to where medication preparation may occur, including use of a private space to administer medications to participants.
- Maintain adequate supplies in all designated medication preparation areas, including who is responsible and appropriate practices (e.g., frequency of checking supply levels).
- Guidance about proper response if unsafe injection practices are identified. If a center has a policy that references Blood Borne Pathogens protocols as they relate to infection control and/or employee health, reference the location of those protocols in your **center's** policy.

Note: Other policies and procedures should reinforce safe injection practices. For example, your policies and procedures addressing pharmacy considerations may incorporate guidance about purchasing appropriately sized vials to limit the sharing of multi-dose vials between participants.

Procedure Content Considerations (outlines the steps/supplies for performing the practice)

Examples of safe injection and sharps safety practices, to minimize potential exposure to pathogens, should include:

- Preparation of injectable medications in designated clean area(s).
- Adherence to aseptic (clean) technique. Aseptic technique refers to the manner of handling, preparing, and storing medications and injection equipment/supplies (e.g., syringes, needles) to prevent microbial contamination and infection.

Injection Safety

- Proper storage and use of insulin pens and other similar devices.
- Proper disposal of used injection equipment (e.g., syringes, needles) in readily accessible sharps containers.
- Proper identification and handling of medication containers.
 - Single-dose and single-use containers
 - Multi-dose vials
- Proper storage of medications in accordance with the manufacturer's recommendations (e.g., temperature requirements, expiration date, beyond-use date).

Policy

It is the policy of **this center** to adhere to evidence-based protocols and practices for injection safety, both to reduce the risk of transmitting infectious diseases and to ensure the safety of the participant receiving the medication and the staff administering the injection.

Procedure

Medication preparation should occur in a private area to protect the participant's dignity. Medication is verified with the manufacturing date to ensure it is within the use date (not expired). Insulin pens and Epi Pens should be pulled from their appropriate storage space, prepared, and administered to the participant.

Follow Safe Injection Practices and Follow Aseptic Technique.

- a. Prepare medications in a clean designated area.
- b. Perform proper hand hygiene, using alcohol-based hand sanitizer or soap and water, prior to preparing and administering medications. Don gloves.
- c. Disinfect the workspace using alcohol gel or spray (if a workspace is utilized).
- d. Perform proper hand hygiene and don new gloves.
- e. Open supplies.
- f. Do not use needles or syringes for more than one participant, including prefilled syringes and insulin pens. *One needle, one syringe, one time.* Insert a new needle from a new syringe into medication vials, even when obtaining additional doses for the same participant.
- g. Use aseptic (clean) technique when preparing and administering medications to prevent contamination.
- h. If using a multi-dose vial, disinfect the rubber septum with alcohol before accessing.
- i. Single-dose or single-use medication vials, including manufactured prefilled syringes such as insulin pens and Epi Pens, are used for only one participant.
- j. Insulin pens are reusable and should not be disposed of until all medication is used (or expired).
- k. Never recap needles. Dispose of them immediately after use in a designated and appropriate sharps disposal container.

Injection Safety



Blood Glucose Monitoring

Blood Glucose Testing

Initial Effective Date	mm/dd/yyyy
Most Recent Revision Date	mm/dd/yyyy
Authorized/Reviewed by	Individual or Committee Name
Standard	22VAC40-61-290

Definition and Overview (define the infection control practice)

Blood glucose testing is testing that is performed at or near the site of participant care. This is accomplished by obtaining a blood specimen from the participant, often by pricking their finger with a fingerstick device and then using a portable, handheld blood glucose meter to obtain a reading. The testing provides an immediate result to inform the clinical management of a participant with diabetes.

Purpose (why this policy/procedure is important)

The purpose of this policy is to provide staff with guidance on following safe blood glucose testing practices. It is the center's duty to protect participants and staff by ensuring safe practices are followed when performing blood glucose testing.

Responsibility (who is responsible for following this policy/procedure)

For the purpose of this policy, "staff" refers to those in **the center** who hold credentials to perform blood glucose testing.

Policy

It is the policy of **this center** to adhere to evidence-based protocols and practices for glucose monitoring and insulin administration to reduce the risk of transmitting hepatitis B virus (HBV) and other infectious diseases during blood glucose monitoring and insulin administration.

Procedure

Blood Glucose Monitoring (BGM)

1. Participants who require assistance with blood glucose testing will provide to **the center** all necessary and needed supplies, including the monitoring and testing device's instructions for use and cleaning.
2. Gather all necessary supplies, including the meter, auto disabling fingerstick device (lancet), gauze, alcohol wipes, test strips, nonsterile gloves, and the products recommended for cleaning and disinfecting the meter.
3. Follow the participant's physician order.
4. Verify that the blood glucose device being used belongs to the participant.
5. Perform hand hygiene. Don nonsterile gloves.
6. Clean the participant's finger using an alcohol wipe. Ensure alcohol is dry prior to obtaining blood sample.
7. Prick the participant's finger using the single-use, auto-disabling device (lancet), and

Blood Glucose Testing

- properly dispose of the used fingerstick device. Wipe off first drop of blood with gauze.
8. Transfer second drop of blood to the test strip and obtain the reading.
 9. Apply pressure using gauze or an alcohol wipe to the fingerstick wound.
 10. Discard all used supplies.
 11. Remove and discard gloves and perform hand hygiene before and after each participant, and after cleaning and disinfecting meters.
 12. Follow the participant's physician orders for parameters including when notification of the physician is indicated.
 13. Testing meters and devices should be clearly labeled with the participant's name and stored appropriately and in a manner that prevents contamination.
 14. Meters should be cleaned and disinfected after each use prior to storage according to manufacturer's instructions.
 15. The disinfectant used must have a claim to inactivate (kill) hepatitis B virus (HBV), hepatitis C virus (HCV) and HIV. Staff must wear gloves when cleaning and disinfecting the meter and only use products recommended by the manufacturer to ensure compatibility with the device.
 16. Some participants may utilize a continuous blood glucose monitoring device. For those, obtaining readings/test results is non-invasive and does not require adherence to the above protocols.

Fingerstick Devices (lancing devices)

1. Fingerstick devices should be restricted to use by individual participants.
2. Single-use lancets that permanently retract upon puncture should be used if possible.
3. Lancets should be disposed of at the point of use in an approved sharps container.
4. Lancets should NEVER be reused.
5. If reusable fingerstick devices are used, they should be treated in a manner like other personal care items (e.g., razors and toothbrushes) and must never be shared.
 - a. Reusable fingerstick devices should be clearly labeled and stored in a manner to prevent use by the wrong participant and prevent contamination.

Insulin Pens and Insulin Administration

1. Participants provide their own insulin pens which are approved and labeled only for single-participant use. Under no circumstances should they be used for more than one participant.
2. Participant's insulin pens are to be labeled with the date opened and discarded within the stability period per manufacturer's instructions and **center** policy.
3. Participant's insulin pens are stored in a secure location at **the center** according to manufacturer instructions.

Follow Safe Injection Practices

1. Practice hand hygiene according to evidenced-based recommendations (e.g., CDC, WHO) before and after performing injection.

Blood Glucose Monitoring



Where Do You Start?

1. Complete a policy analysis
2. Develop your strategy, which includes identifying what policies are needed at your center
3. Develop and draft your policy or revise your current policies
4. Participate in the next Office Hours webinar to learn how to enact your policy!



Polling Question

What is your next step based on the information shared today?

1. Identify the policies needed at our center
2. Update and revise our center policies based upon the policy templates we have received from this project
3. Educate and re-educate our staff on policies and/or updates
4. Other (type your step in the chat)



Next Session

Policy Enactment



Thursday, July 13, 2023
2:00 p.m. EST

[Registration Link](#)



Contact Information

Sheila McLean

Project Director

smclean@hqi.solutions

804.289.5345

Allison Spangler

Project Manager

aspangler@hqi.solutions

804.289.5342

Felicity Wood

Consultant

fwood@hqi.solutions

804.289.5301