



HEALTH QUALITY INNOVATORS

Affinity Group: That's a Wrap! Recap of Earlier Sessions

6/11/24

Roll Call Recognition

Attendance Rockstars

Have attended at least twice or have had multiple people on calls



- Ascend Health Adult Retreat
- The Kensington Falls Church
- The Retreat at Berryville
- Insight Memory Care Center
- Lucy Corr – ADC and ALF
- Brightview Great Falls
- The Trotter House
- Coles Retirement Home
- Brighter Living
- Covenant Woods
- Colonial Manor
- DVOC
- The Mennowood Retirement Community

Roll Call Participation – Partner Support

- HQI
- VDSS, including licensing inspector
- VDH
- Loudoun County Health Department
- Sentara Health
- Riverside Health System
- Lewis Gale Hospital Montgomery



Polling Question

Have you received your copy of the VDSS Train the Trainer binder?

1. Yes
2. No
3. No, but I have ordered it!



Objectives

- ✓ Engage assisted living and adult day care center facilities in common issue discussion and problem solving by peers
- ✓ Evaluate topics of strength and opportunity from previous affinity sessions
- ✓ Identify partnerships to continue support for ADCs and ALFs
- ✓ Develop networks for support moving past VLIPP project



Take Aways

- ✓ **Session 1** – Auditing is Awesome
 - Like the Superbowl, an early fumble will not cause the team to fail!
- ✓ **Session 2** – Cleaning and Disinfection
 - It Is Cool to be Clean!
- ✓ **Session 3** – Personal Protective Equipment
 - Dressing for Success
- ✓ **Session 4** – Education is Extremely Important
 - And so is participant engagement!



Auditing and Monitoring Misconception



What, How and Who?

Auditing and Monitoring

Helpful considerations:

What, How and Who?



What to audit?



How to audit (and when)?



Who to audit? This pertains both to who can do the audit (it does not always have to/need to be you) and who/what is being audited.

The WHAT – Every Marathon Starts With a Single Step



- Hand Hygiene (is it really an easy pick?)
- PPE use (is it just about gloves?)
- Environmental Cleaning (can of worms?)
- Laundry Practices
- Antibiotic use (for the superstars!)

The HOW

- a. Direct Observation
- b. Chart review (could include self-reporting)
- c. Indirect methods
- d. Technology (preview with scan codes)



Auditing

Environmental Checklist

Location/Unit: _____ Date: _____ Person Monitoring: _____

Cleaning Tasks (*= high touch areas frequently contaminated)	Cleaned	Not cleaned	Not applicable
Patient/resident rooms and shared areas - use appropriate disinfectant			
Bed - thoroughly during terminal cleaning and allow to dry completely			
Bedside commode and its cleaning brush*			
Call box / button and controls*			
Door, handles, and bed rails*			
Floor - sweep, use wet mop starting farthest from door			
IV pole - grab area*			
Light switches*			
Medical equipment - per facility policy and manufacturer instructions			
Phone*			
Remote control*			
Room furniture - bed, chairs, sofa, table, etc.*			
Bathroom - all surfaces with appropriate disinfectant			
Door handles, bathroom handrails, and light switches*			
Floor: sweep, use wet mop starting farthest from door			
Mirrors			
Shower stall / bathtub			
Sink and faucet handles*			
Toilet including surface, seat, lever / flush*			
Medication room			
Area secure and clean without items stored on the floor			
Medications clearly identified, dated, discarded after expiration date			
Refrigerator: no food, clean, temperature between 36-46°F			
Laundry			
Appropriate personal protective equipment worn by laundry personnel			
Clean and soiled laundry separated appropriately			
Clean and soiled linen covered while stored and transported			
Wash temperature appropriate			
Replace as needed			
Curtains - if soiled			
Hand sanitizer			
Sharps containers - replace if 1/2 to 3/4 full and properly dispose			
Other personal protective equipment (gloves, gowns, face masks, etc.)			
Paper towels			
Red bag waste - close, transport, and dispose appropriately			
Soap			
Waste basket - close bag before removing; clean and disinfect if soiled			

* Use proper hand hygiene and personal protective equipment depending on chemicals used and isolation precautions.
 * Use Environmental Protection Agency (EPA) standards and published guidelines to choose chemicals specific to the organism and situation. For example, a 10% sodium hypochlorite disinfectant is recommended for norovirus.
 * No food should be eaten/stored in designated laundry, medication, or chemical areas.
 * Pay attention to isolation precaution signs and do not remove until terminal cleaning is completed.

Environmental Checklist

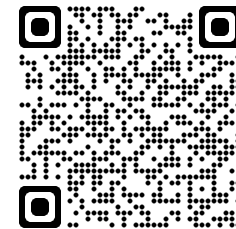


The WHO – and Does it Have to be YOU?

Here are some simple forms for you to consider:



[TAP strategy | CDC](#)



The Battleground

Influenza viruses can survive on hard surfaces such as stainless steel and plastic for up to 48 hours



- Some viruses can travel on droplets through the air
- E. coli, salmonella and other bacteria can live up to two hours on surfaces like doorknobs, counters and keyboards



Bacteria **DOUBLES** every 20 minutes.

5 bacteria in a sandwich at 12 p.m. will total over 10 million by 7 p.m.

After 3 days, with no bacteria dying, **there would be enough to COVER THE EARTH.**

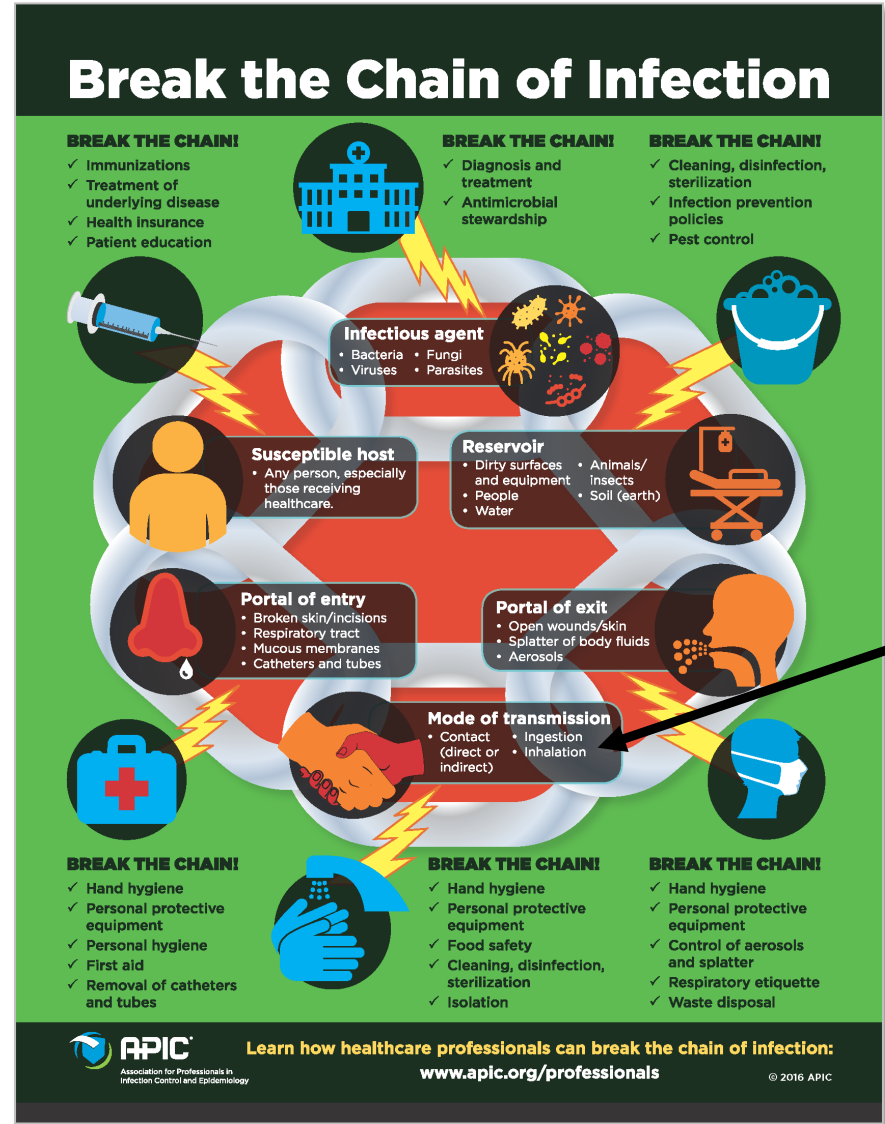
- Norovirus can last from **a few days to a FEW WEEKS** on surfaces!
- MRSA can live on surfaces – particularly fabrics – for **WEEKS**
- Cold virus can live on surfaces for **weeks** and it is **extremely contagious** on surfaces and hands

Transmission Video



Which is Your "Link?"

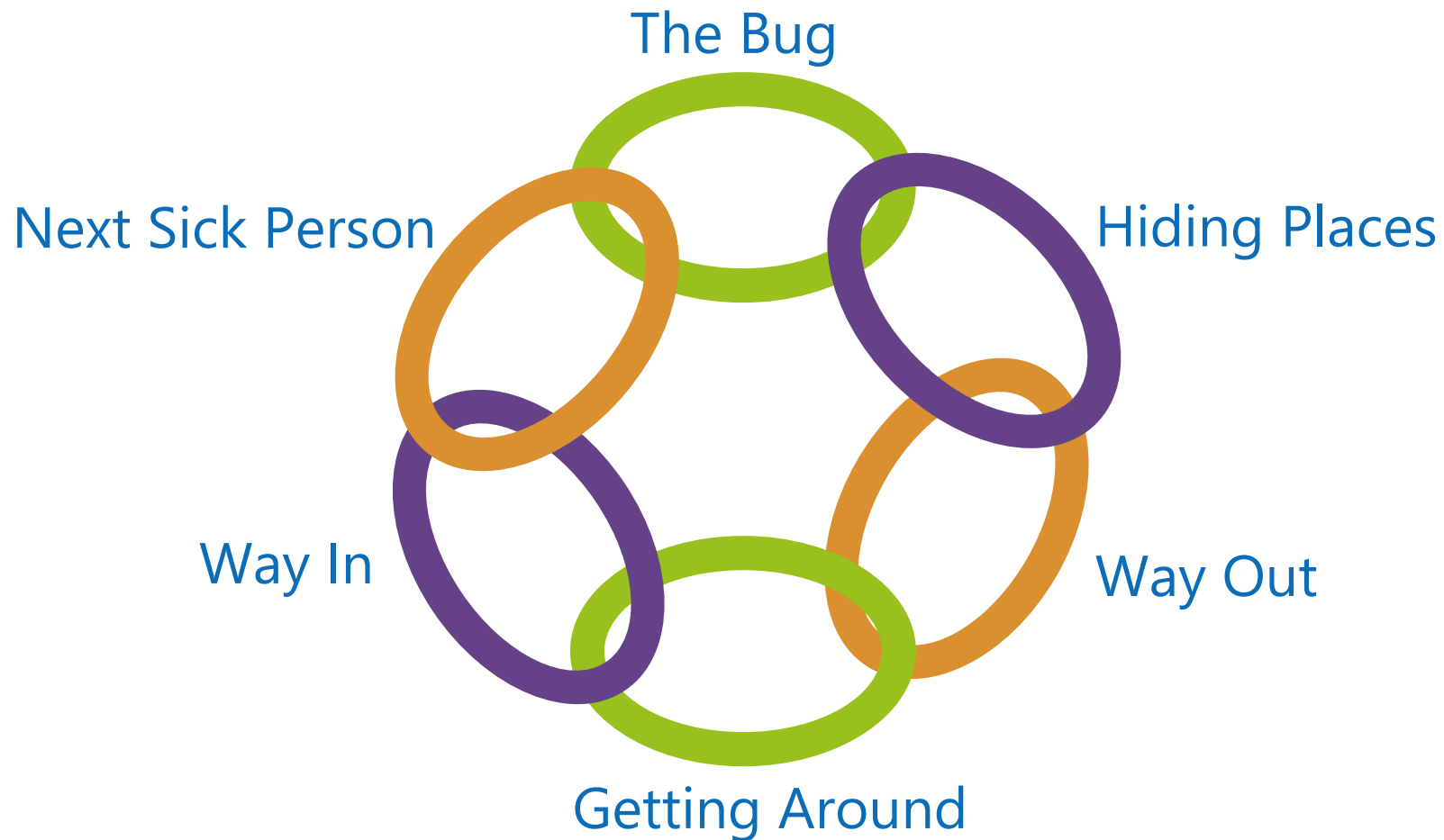
Break the Chain of Infection | APIC



You are here

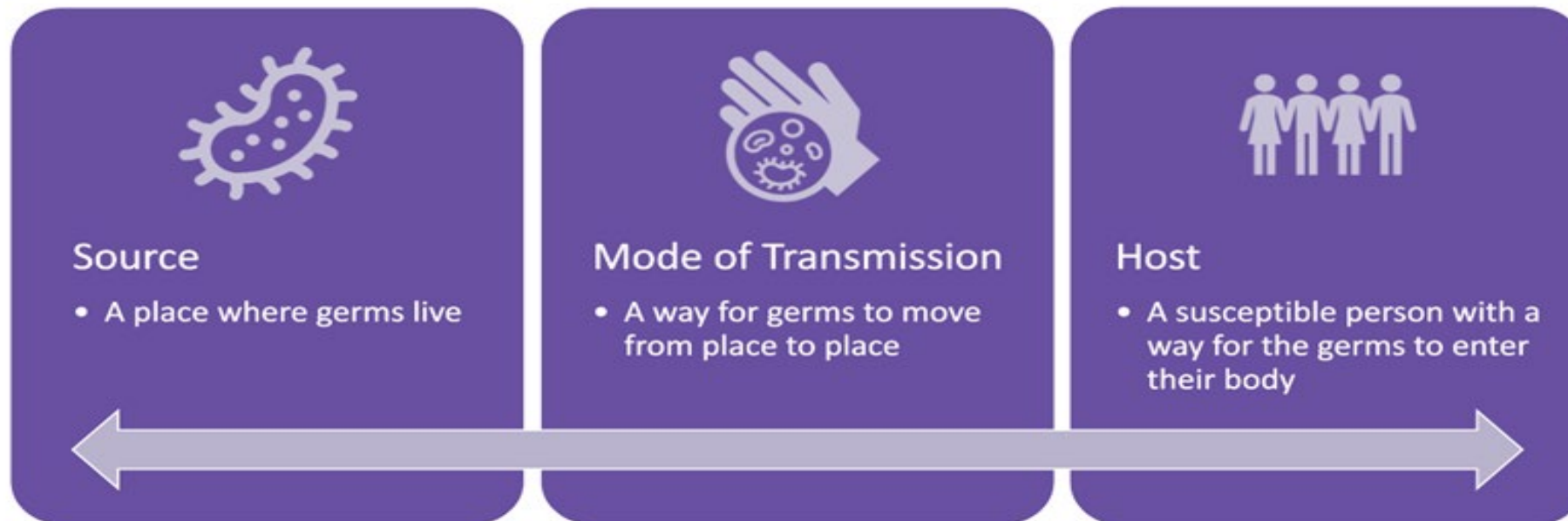
Breaking it Down Even More

The Chain of Infection

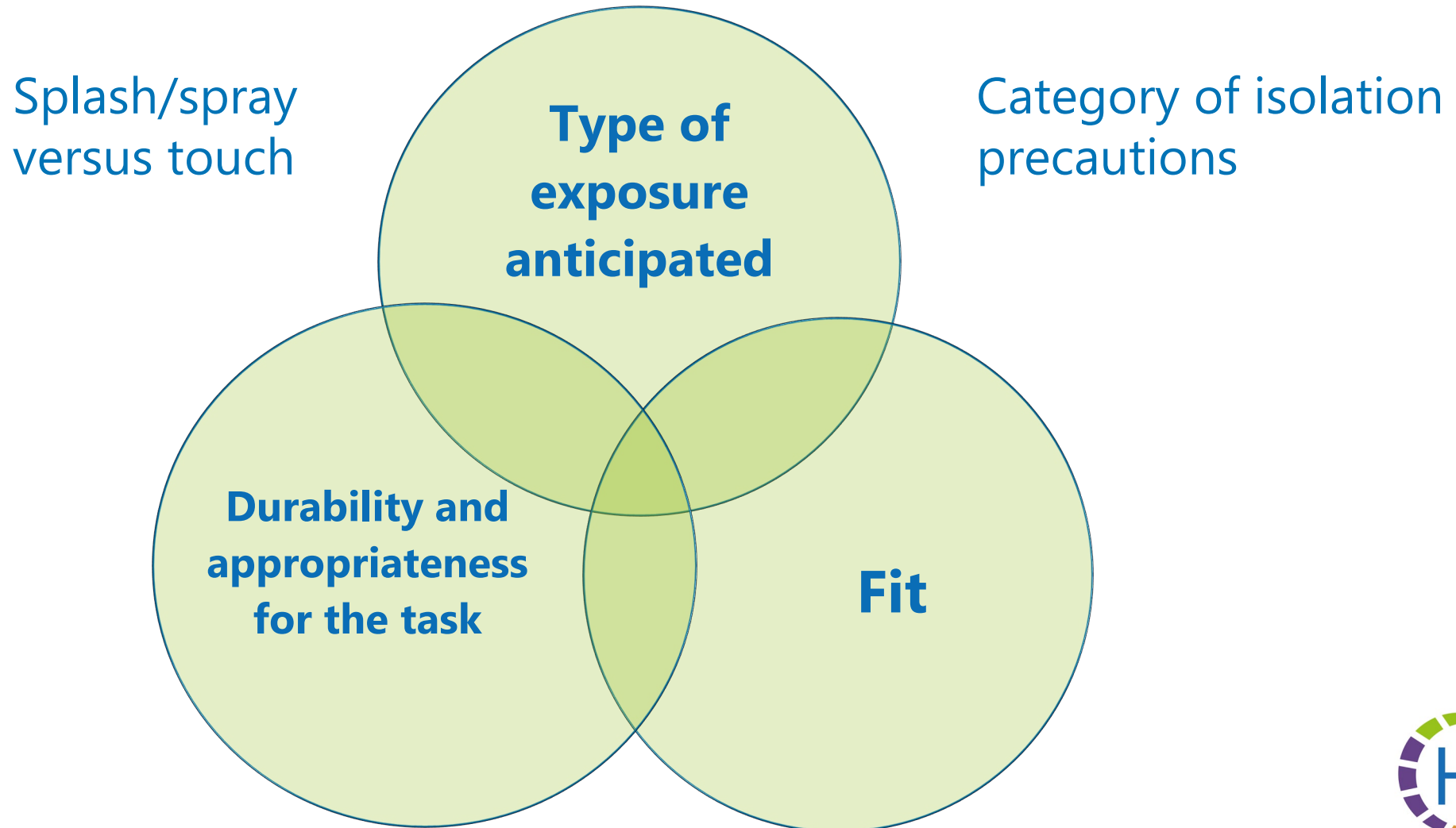


Another Visual for Transmission

From our partners at VDSS:



Factors Influencing PPE Selection



When to Use PPE

**Standard
Precautions**

**Transmission-
based
Precautions**

Teaching About Masking



Donning and Doffing



CDC Donning and Doffing Sequence

Pause for Prevention

Module 3: Personal Protective Equipment (PPE)

Donning (putting on) personal protective equipment:

Follow the QR Code to see CDC demonstration for donning personal protective equipment. Put on PPE before contact with the resident.



Perform Hand Hygiene



Put on Gown



Put on Mask or Respirator



Put on Goggles or Faceshield



Put on Gloves

Doffing (removing) personal protective equipment:

Follow the QR Code to see CDC demonstration for doffing personal protective equipment.



Remove Gloves



Perform Hand Hygiene



Remove Goggles or Faceshield



Remove Gown



Remove Mask or Respirator



Perform Hand Hygiene

Staff Skill Check

Scenario 1:

You walk into a resident's room and find that they have fallen; there is a 2-inch laceration to their arm that is oozing blood.

- Before cleaning the wound, what PPE should you don?

Scenario 2:

You are about to assist with ADLs for someone who has Norovirus.

- What PPE would you anticipate using?
- What is the sequence for donning these items?
- What is the sequence for doffing?
- What is the possible consequence of improper donning or doffing?

Making it Real – Great Practice for Staff

 U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

 PROJECT FIRST LINE

WHEN HEALTHCARE TASKS TAKE A TURN! ARE YOU READY FOR THE INFECTION CONTROL CHALLENGE?

You know that being a healthcare worker means you're always dealing with the unexpected.

How well can you stop infection from spreading when problems come up?

Take the infection control challenge and find out. **Select the Start button to begin!**





START

Feedback



Timely

Individualized

Non-punitive



Effect on Performance



Optimal
Effect

Training and Competency Verification

Personal Protective Equipment (PPE) Competency Validation			
Donning and Doffing Standard Precautions and Transmission Based Precautions			
Type of validation: Return demonstration		<input type="checkbox"/> Orientation <input type="checkbox"/> Annual <input type="checkbox"/> Other	
Employee Name: _____		Job Title: _____	
Donning PPE			Competent
			YES
			NO
1. Perform Hand Hygiene			
2. Don Gown: Fully covering torso from neck to knees, arms to end of wrists			
3. Tie/fasten in back of neck and waist			
4. Don Mask/Respirator: Secure ties/elastic bands at middle of head & neck			
5. Fit flexible band to nose bridge			
6. Fit snug to face and below chin (Fit-check respirator if applicable)			
7. Don Goggles or Face Shield: Place over face and eyes; adjust to fit			
8. Don Gloves: Extend to cover wrist of gown			
Doffing PPE			
9. Remove Gloves: Grasp outside of glove with opposite gloved hand; peel off			
10. Hold removed glove in gloved hand			
11. Slide fingers of ungloved hand under remaining glove at wrist			
12. Peel glove off over first glove			
13. Discard gloves in waste container			
14. Remove Goggles or Face Shield: Handle by head band or ear pieces			
15. Discard in designated receptacle if re-processed or in waste container			
16. Remove Gown: Unfasten ties/fastener			
17. Pull away from neck and shoulders, touching inside of gown only			
18. Turn gown inside out			
19. Fold or roll into bundle and discard			
20. Remove Mask/Respirator (respirator removed after exit room/closed door): Grasp bottom, then top ties or elastics and remove			
21. Discard in waste container			
22. Perform Hand Hygiene			

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Standard Precautions & Transmission Based Precautions	Competent	
	YES	NO
23. Staff correctly identifies the appropriate PPE for the following scenarios:		
a. Standard Precautions (PPE to be worn based on anticipated level of exposure)*		
b. Contact/Contact Enteric Precautions (gown & gloves)		
c. Droplet Precautions (surgical mask)		
d. Airborne Precautions (fit-tested respirator if applicable)		

*NOTE: Examples include: mask for coughing/vomiting patient, goggles/face shield for irrigating draining wound, gown for dressing change if scrubs may touch patient, etc.

Comments or follow up actions:

Employee Signature _____

Validator Signature _____

Date _____

CDC at <http://www.cdc.gov/HAI/pdfs/ppp/pppposter148.pdf>

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VDH PPE Competency Validation Tool



Competency: Personal Protective Equipment

Competency Statement	Method of Validation
Demonstrates proper technique for putting on (donning) and taking off (doffing) personal protective equipment (PPE). Verbalizes knowledge of how PPE helps prevent healthcare-associated infections. Verbalizes knowledge of how to select appropriate PPE based on Standard Precautions and Transmission-Based Precautions.	D = Demonstrate V = Verbalize

Critical Behaviors for Competency
<ul style="list-style-type: none"> Verbalize knowledge of the importance of appropriate use of personal protective equipment in preventing healthcare-associated infections. Verbalize knowledge of how to select appropriate PPE based on Standard Precautions and Transmission-Based Precautions. Demonstrate proper donning and doffing technique using the Personal Protective Equipment Competency Validation/Audit Tool. Frequency: <i>Suggested on hire, as an ongoing yearly competency, as needed if unit compliance is below % , and if lapses in PPE use contributed to a serious safety event.</i>
Competency Resource: <ul style="list-style-type: none"> VDH: Personal Protective Equipment Competency Validation/Audit Tool

Employee's Name: _____ Date: _____
(Print full name and include credentials)

Validator's Name: _____ Date: _____
(Print full name and include credentials)



Personal Protective Equipment (PPE) Competency Validation/Audit Tool

Employee Name: _____ Orientation
 Annual
 Other

Job Title: _____

Putting On (Donning) PPE	Type of Validation D=Demonstrate V=Verbalize	Meets Criteria (Y or N)	Comments/ Recommendations	Recommendations Implemented (Date & Initials)
1. Performs appropriate hand hygiene	D			
2. Puts gown on: Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back	D			
3. Ties/fastens in back of neck and waist	D			
4. Puts mask/respirator on: Secures ties/elastic bands at middle of head and neck	D			
5. Fits flexible band to nose bridge	D			
6. Fits snug to face and below chin. If respirator, performs fit check.	D			
7. Puts goggles or face shield on: Places over face and eyes; adjusts to fit	D			
8. Puts gloves on: Extends to cover wrist of gown	D			

Taking Off (Doffing) PPE	Type of Validation D=Demonstrate V=Verbalize	Meets Criteria (Y or N)	Comments/ Recommendations	Recommendations Implemented (Date & Initials)
1. Removes gown and gloves: Grasps the gown in the front and pulls away from the body so that the ties break, touching outside of gown only with gloved hands	D			

One-Step vs Two-Step Audit

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Personal Protective Equipment (PPE) Competency Validation/Audit Tool

Employee Name: Orientation
 Annual
 Other

Job Title:

Putting On (Donning) PPE	Type of Validation D=Demonstrate V=Verbalize	Meets Criteria (Y or N)	Comments/ Recommendations	Recommendations Implemented (Date & Initials)
1. Performs appropriate hand hygiene	D			
2. Puts gown on: Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back	D			
3. Ties/fastens in back of neck and waist	D			
4. Puts mask/respirator on: Secures ties/elastic bands at middle of head and neck	D			
5. Fits flexible band to nose bridge	D			
6. Fits snug to face and below chin. If respirator, performs fit check.	D			
7. Puts goggles or face shield on: Places over face and eyes; adjusts to fit	D			
8. Puts gloves on: Extends to cover wrist of gown	D			

Taking Off (Doffing) PPE	Type of Validation D=Demonstrate V=Verbalize	Meets Criteria (Y or N)	Comments/ Recommendations	Recommendations Implemented (Date & Initials)
1. Removes gloves: Using one gloved hand, pinches palm area of other gloved hand and peels off first glove	D			

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2. Holds removed glove in gloved hand	D			
3. Using ungloved hand, slides fingers under glove of other hand	D			

Education Begins: Onboarding



Education Begins: Onboarding

What are the basics?

- Hand Hygiene
- Standard and Transmission-Based Precautions
- Personal Protective Equipment (PPE)
- Bloodborne Pathogens
- Safe injection and blood glucose monitoring practices
- Respiratory hygiene and cough etiquette
- Cleaning – equipment, environment
- Chain of infection



Tools to Make Onboarding Memorable



Teach concept of appropriate use of alcohol-based hand rubs and soap and water



[Simple Strategies: When to Practice Hand Hygiene | HQIN](#)



Practice, practice, practice!

- Brief quiz
- Return demonstration using Glo Germ

Virtual vs Binder vs In-Person Annual Education

Pros and Cons of “**Canned**” Annual Education:

PRO

You don't have to do it.

Can be assigned with tracking for compliance.

CON

Cost associated with use.

Boring.

Virtual vs Binder vs In-Person Annual Education

Pros and Cons of **Binder** Updates:

PRO

Can be very timely and current.

Predictable, with employee sign-in attestations.

CON

Someone (probably you) has to come up with content.

No way to be sure if information is retained.

Virtual vs Binder vs In-Person Annual Education

Pros and Cons of **In-Person** Updates:

PRO

Can be very timely and current.

Can actively engage participants.

CON

Time consuming for person leading.

How to reach off-shift or working staff?

Open Discussion

Looking to the future, what other hot topics might you be interested in for help from your peers?



Thank You for Your Participation!

**You
Got
This!**



Resources

- [About Hand Hygiene for Patients in Healthcare Settings | Clean Hands | CDC](#)
- [Hand Hygiene, Glove Use, and Preventing Transmission of C. difficile \(cdc.gov\)](#)
- [Break the Chain of Infection with Better Hand Hygiene | HQIN](#)
- [Module 1 Hand Hygiene | HQIN](#)
- [Environmental Infection Control Guidelines | Infection Control | CDC](#)
- [Environmental Cleaning and Disinfection | virginia.gov](#)
- [Steps in Daily Room Cleaning Pocket Card | HQIN](#)
- [Cleaning and Disinfecting Pocket Card | HQIN](#)
- [Episode 16: Cleaning? Disinfection? What is the Difference? | YouTube: CDC](#)
- [Transmission-Based Precautions | Infection Control | CDC](#)
- [Standard Precautions for All Patient Care | Infection Control | CDC](#)

Resources

- [Infection Prevention and Control Train-the-Trainer Resource Binder - Virginia Department of Social Services](#)
- [Project Firstline Infection Control Training | CDC](#)
- [Virginia Infection Prevention & Control Training Alliance \(VIPTA\) - VIPTA](#)
- YouTube video links for instructional videos:
 - [Donning & Doffing](#)
 - [Universal Masking](#)
 - [Staying Safe in the Splash Zone](#)
 - [Chain of Transmission](#)



There is Still Time for Participation in Onsite Assessments!



Benefits:

- Establish relationship with personable and knowledgeable infection preventionist
- Obtain resources to assist with building a robust infection prevention program
- Glo-germ demonstration to elevate hand hygiene campaign
- Fit testing coordination with LHD

For more information, contact:

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