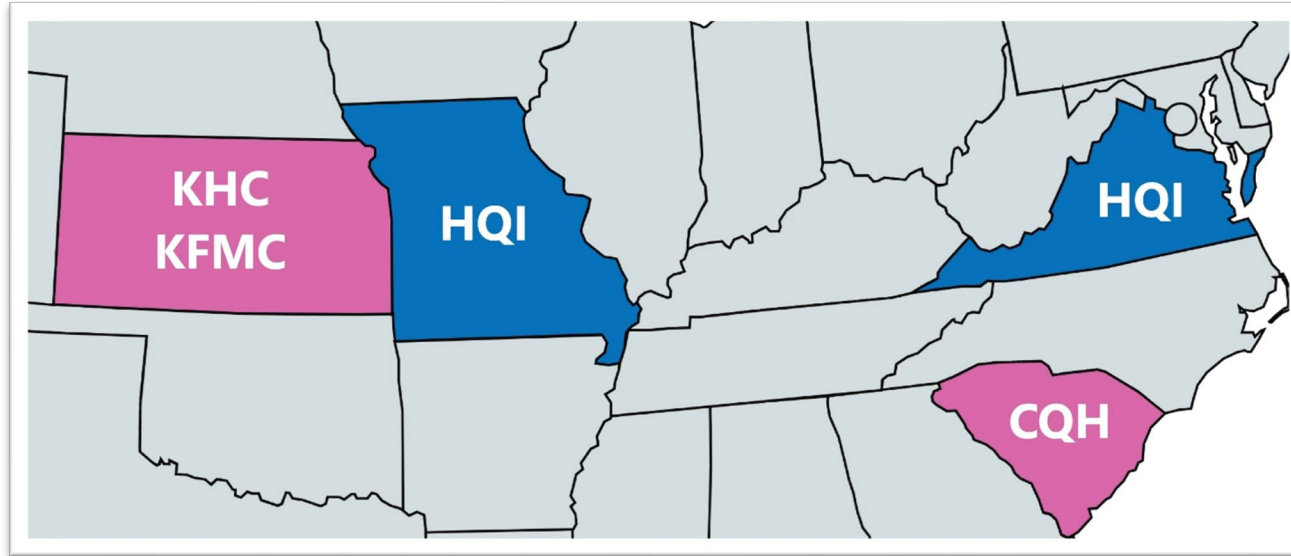




Health Quality Innovation Network



# Health Quality Innovation Network



# Logistics – Zoom Meeting



To ask questions, click on the **Chat** 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 the caret next to the **Mute** icon.



# Infection Prevention and Control Office Hours

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September 25, 2024





# Respiratory Viruses Process Surveillance to Prevent Healthcare Acquired Infections (HAIs)

Presented by: Julie M. Richards, MSN, RN, CIC, FAPIC



# Objectives

The learner will be able to:

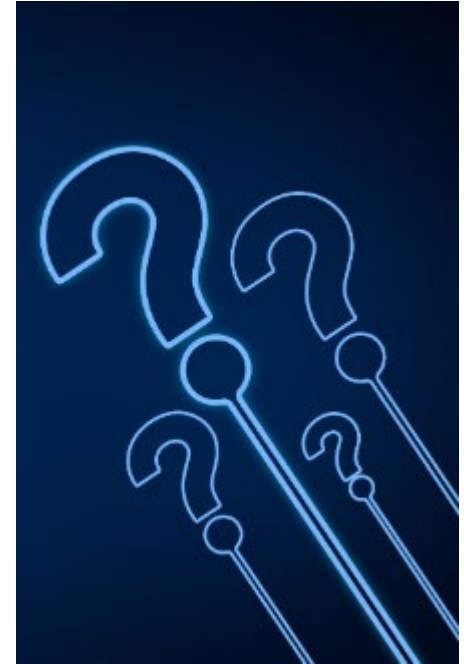
- Recognize process surveillance collection, tabulation, analyze, and the impact on HAIs.
- Explore possible process surveillance elements and data collection methods
- Ask questions of the subject matter experts to clarify individual and facility understanding of best practices



# Survey Question

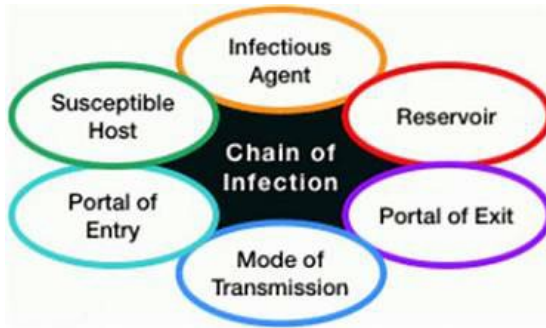
Currently, what types of surveillance are performed at your facility related to COVID-19?

- a. Hand hygiene
- b. Transmission-based precautions
- c. Personal protective equipment (PPE)
- d. All the above
- e. None



# Why Perform Surveillance?<sup>1</sup>

Surveillance contributes to meeting the IPC's overall goals:



1. Protect the residents
2. Protect healthcare worker, visitors, and others in the healthcare environment
3. Accomplish the previous two goals in a timely, efficient, and cost-effective manner whenever possible



# IPC Surveillance and CMS

A facility-based and community-based risk assessment and plan must be completed and evident at each facility.

- Include effective systems for preventing, identifying, reporting and controlling infections and communicable diseases.
- This includes all residents, staff, volunteers, visitors and other individuals providing services under a contractual arrangement, which follow accepted national standards.<sup>2</sup>

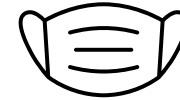
# Selecting the Surveillance<sup>1</sup>

The choice of outcomes or processes to be measured defines the appropriate surveillance for each measure.

- **Outcome Surveillance:** The result of care or performance. It can be negative, such as an infection. It could be positive, such as wound healing.
- **Process Surveillance:** Steps taken to achieve an outcome, such as immunization and compliance with policies associated with a given outcome.

# Respiratory Virus Transmission Process Surveillance

1. Hand hygiene
2. Personal Protective Equipment (PPE)
3. Resident and healthcare personnel (HCP) vaccination<sup>3</sup>
4. Transmission-based precautions
5. Environmental cleaning and disinfecting
6. Symptom screening



## Knowledge Check:

Since your facility does not have an infection preventionist, you may be wondering who will perform your transmission-based precautions surveillance.

Can you give me some ideas?

# Create the Process Surveillance Plan for COVID-19

- Decide on the form/tool that will be used (resource examples at the end of this slide deck)
- A consistent form/tool should be used for each process of surveillance
- Educate on how to use the form

4

## Hand Hygiene Adherence Observations

*Complete as many observations as possible during the visit. If observed, note hand conditions that increase risk of colonization with pathogens (e.g., dermatitis, use of artificial nails) in comments.*

Location/Unit	Staff type	Type of opportunity	HH performed?	Comments
		<input type="radio"/> Room entry <input type="radio"/> Room exit <input type="radio"/> Before patient/resident contact* <input type="radio"/> Before clean/aseptic procedure <input type="radio"/> After patient/resident contact* <input type="radio"/> After glove removal <input type="radio"/> Other (specify):	<input type="radio"/> ABHS <input type="radio"/> Hand Wash <input type="radio"/> No hand hygiene done	

# Collect and Document Process Surveillance for COVID-19

- Trained individuals collect observations/data
- Document findings on form/tool
- Trained individuals may perform “just in time” training

Standard Precautions: Observation of Personal Protective Equipment Provision

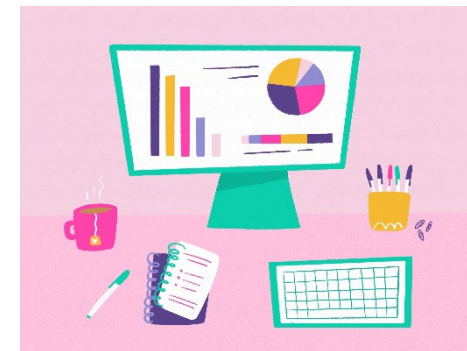
5

**Instructions:** Observe patient care areas or areas outside of patient rooms. For each category, record the observation. In the column on the right, sum (across) the total number of “Yes” and the total number of observations (“Yes” + “No”). Sum all categories (down) for overall performance.

Standard Precautions: Observation Categories		Room 1	Room 2	Room 3	Room 4	Room 5	Summary of Observations		
		Yes	No	Yes	No	Yes	No	Yes	Total Observed
1	Are gloves readily available outside each patient room or any point of care?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes			
		<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No			
2	Are cover gowns readily available near each patient room or point of care?	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes			
		<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No			
	Is eye protection (face shields or								

# Analysis of Process Surveillance Data for COVID-19

- Require a submission date deadline
- Data manager analyzes data
- Dissemination to stakeholders
- Trends identified and interventions initiated



# Case Scenario:

Although process surveillance found no gaps, COVID-19 is spreading among residents and HCPs.

Digging deeper, a review of standard precautions, including cough etiquette and hand hygiene, for new hires and annual education with competency validation documentation was undertaken. It indicated that all the nursing staff were in attendance. The same was found when cleaning and disinfection education was reviewed. You realize that only nursing staff completed this education and competency. This prompts the question: What other departments could we involve?



# Resources for Hand Hygiene Surveillance:

- **CDC Hand Hygiene Video links (these links are educational):**
  - [CDC- Engage: The Foundation of a Hand Hygiene Program](#)
  - [CDC - Educate: Developing Knowledge and Skill in Hand Hygiene](#)
  - [CDC - Execute: Mindfulness and Team Accountability with Hand Hygiene](#)
  - [CDC - Evaluate: Using Hand Hygiene Data for Action](#)
  - [CDC – Observation Form - Hand Hygiene](#)
- **ASC Quality Collaboration hand hygiene surveillance tool links:  
(This tool can be used in a variety of healthcare settings, not just ambulatory surgical centers)**
  - [Hand Hygiene: What CMS Surveyors Are Looking For](#)



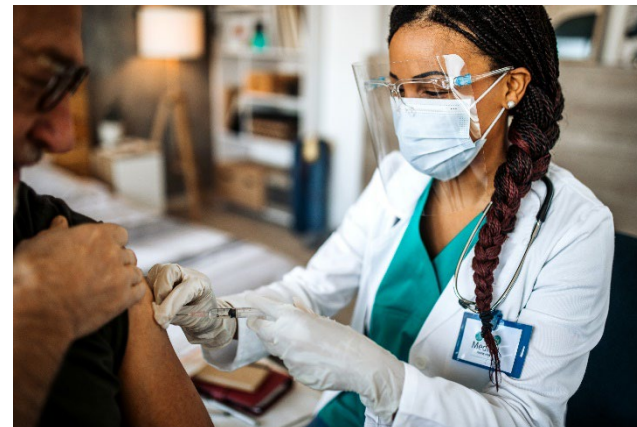
# Resources for Hand Hygiene Surveillance:

- **Agency for Healthcare Research and Quality: Hand Hygiene Observation Audit Tracking Tool & User Guide links:**
  - [Auditing Strategies to Improve Infection Prevention Processes in Nursing Homes](#)
  - [Hand hygiene audit tool user guide](#)
  - [Hand hygiene observational audit tool](#)



# Resources for PPE Surveillance:

- **CDC ICAR Tool for Transmission-Based Precautions:**
  - [Observation Form - Transmission-Based Precautions \(TBP\)](#)
- **CDC PPE tool link:**
  - [PPE Provisions Tool](#)
- **AHRQ PPE Audit Tool & User Guide link:**
  - [AHRQ PPE Audit Tool](#)
- **Telligen PPE Audit Tool link:**
  - [Telligen QI Connect PPE Audit Tool](#)



# Resources for Environmental Cleaning Surveillance:

- **APIC Daily Cleaning Audit link:**
  - [Daily Cleaning Inspection Form](#)
- **CDC Environmental Monitoring tool link:**
  - [CDC Environmental Checklist for Monitoring Terminal Cleaning](#)
- **CDC Infection Control: Options for Evaluating Environmental Cleaning Tools link:**
  - [CDC Environmental Cleaning Surveillance Tools](#)



# Resources: Infection Control Assessment and Response (ICAR) Tools:

- **CDC Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings:**
  - [CDC ICAR Tools for Surveillance](#)



# References

1. Lee, T., Montgomery, O., Marx, J., et al. Recommended practices for surveillance: Association for Professionals in Infection Control and Epidemiology (APIC), Inc. *Am J Infect Control*. 2007;35:427-40.
2. HQIN. Facility Assessment: More than a Regulatory Requirement. [https://hqin.org/wp-content/uploads/2024/07/More-than-a-Regulatory-Requirement\\_Slides\\_070324.pdf](https://hqin.org/wp-content/uploads/2024/07/More-than-a-Regulatory-Requirement_Slides_070324.pdf)
3. CDC. Viral Respiratory Pathogens Toolkit for Nursing Homes. <https://www.cdc.gov/long-term-care-facilities/media/pdfs/Viral-Respiratory-Pathogens-Toolkit-508.pdf>

# References

4. CDC. ICAR Tool for General Infection and Control (IPC) Across Settings. <https://www.cdc.gov/infection-control/media/pdfs/icar-ipc-obs-form-hand-hygiene-508.pdf>

5. CDC. Standard Precautions – Observation of Personal Protective Equipment Provision. [https://www.cdc.gov/infection-control/media/pdfs/standard-precautions-ppe-provision-p.pdf?CDC\\_AAref\\_Val=https://www.cdc.gov/infectioncontrol/pdf/QUOTS/Standard-Precautions-PPE-Provision-P.pdf](https://www.cdc.gov/infection-control/media/pdfs/standard-precautions-ppe-provision-p.pdf?CDC_AAref_Val=https://www.cdc.gov/infectioncontrol/pdf/QUOTS/Standard-Precautions-PPE-Provision-P.pdf)

# Office Hours Q&A

To ask questions, click on the **Chat** icon.

**Raise your hand** if you would like to ask a question verbally.





# Next Office Hours: October 2, 2024 Respiratory Virus Season Personal Protective Equipment (PPE)

Registration link:

<https://apic.zoom.us/meeting/register/tZwvdeGgpzgjGdxulrCkTCv6SgkY38t1oWdK>

## Today's Office Hours Evaluation link:

[https://apic.qualtrics.com/jfe/form/SV\\_bx9c8etx1lr03r0](https://apic.qualtrics.com/jfe/form/SV_bx9c8etx1lr03r0)

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# FOR MORE INFORMATION

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