

The Role of the Infection Preventionist in LTC

THE ROLE OF THE INFECTION PREVENTIONIST (IP) IN LONG-TERM CARE FACILITIES

Infection Prevention & Control
Boot Camp For Long-Term Care Facility
Infection Preventionists

OBJECTIVES

At the conclusion of this presentation, participants will be able to:

- Understand the components of an effective Infection Prevention and Control Program (IPCP)
- Describe the role of an Infection Preventionist (IP), including that of consultant, mentor, educator, change agent, leader
- Describe five elements in an Infection Prevention and Control Program

WHY IS IT NECESSARY TO HAVE AN IP IN LONG-TERM CARE

- CMS F441 – one of the top three most frequently cited deficiencies on surveys in Long-Term Care (LTC) in the U.S. followed by CMS F371²
- National increase in Multi-Drug Resistant Organisms (MDROs, e.g., CRE, MRSA, VRE) and *Clostridium difficile* infection³
- Antibiotic Stewardship – National safety crisis
- Recognized knowledge gap in understanding requirements/implementation of effective infection control programs in LTC

2. Morgan E. Nursing home deficiencies, substandard care declining, federal regulators say. McKnight's March 20, 2016. <http://www.mcknight.com/news/2016/03/20/long-term-care-deficiencies-substandard-care-declining-federal-regulators-say/>

3. Healthcare Infection Control Practices Advisory Committee (HICPAC). Epidemiology of MDROs. <http://www.cdc.gov/ncez/oddsr/vol10/no04.html>



The Role of the Infection Preventionist in LTC

INVESTIGATOR



- Perform surveillance
 - Collect data
 - Analyze findings
 - Interpret Results
 - Report
- Outbreak investigation
 - Suspected and confirmed
 - Identify
 - Investigate
 - Control
 - Report

SURVEILLANCE⁴

Ongoing systematic collection, analysis, and interpretation of outcome specific data for use in planning, implementation, and evaluation of infection prevention and control practices

- **Process Surveillance** – Direct observation of skills, practices and techniques related to infection prevention and control practice
- **Outcome Surveillance** – Collection, documentation and review of data for individual infection cases including comparison of the data to standard written definitions of infections

4. California Department of Public Health (CDPH), *Asset Infection Prevention and Control Guidelines, Enhanced Standard Precautions (ESP), California Long-Term Care Facilities*, 2010. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/InfectionControlResources.aspx>

OUTCOME SURVEILLANCE PRACTICES⁴

- The ongoing, systematic collection, analysis, interpretation, and dissemination of data related to the occurrence of healthcare-associated infection in the LTC facility
- Applied retrospectively; standardized
 - Use McGeer's Criteria to define infections
- Focus to be on transmissible & preventable infections





The Role of the Infection Preventionist in LTC

PROCESS TO OUTCOME⁴

Process surveillance is the direct observation of skills, practices and techniques related to infection prevention and control practice

- Hand hygiene
- Isolation practices
- Use of PPE
- Aseptic technique
- Safe injection practices
- Linen handling
- Cleaning & disinfection of equipment & surfaces
- Others...



AUDITOR

- Conduct periodic process surveillance and initiating interventions for corrective actions
- Conduct Environmental Rounds to monitor
 - Overall cleanliness of facility
 - Storage and practices to maintain sterility of items
 - Disinfection practices
 - Construction and renovation projects
 - Practices to maintain aseptic technique



MONITOR COMPLIANCE

- Practice of standard precautions by all
 - Hand Hygiene
 - Respiratory Hygiene & Cough Etiquette
 - Appropriate use of personal protective equipment (PPE)
 - Isolation practices





The Role of the Infection Preventionist in LTC

EDUCATOR

- Work with each department to oversee, mentor, educate and coordinate department specific infection prevention and control practices
- Follow evidenced-base infection prevention & control practices



CONSULTANT – PREVENTIONIST

- To:
 - All departments
 - Administration
 - Staff
 - Physicians
 - Patients
 - Visitors
- Content expert
- Facilitator
- Conduct risk assessments
- Develop and implement policies
- Develop and implement strategies to prevent transmission of organisms and infectious diseases



LIAISON

Internal

- Administration
- Staff
- Physicians
- Residents
- Departments
 - Housekeeping & Environmental Services
 - Dietary & Food Services
 - Facilities

External

- Public Health Department
- Community
- Regulatory agencies
- Surveyors
- Acute care and other facilities





The Role of the Infection Preventionist in LTC

IP OVERSIGHT



- Immunizations and screening for communicable diseases
- Tuberculosis Control Plan
- Aerosol Transmissible Disease (ATD) Plan
- Bloodborne Pathogen Exposure Control Plan



INFLUENCER – LEADER - CHANGE AGENT

In Summary the IP is the:

- “Go to” person
- Advisor
- Leader
- Educator
- Coordinator
- Analyzer
- Manager
- Observer
- Communicator



HOWEVER.....YOU ARE NOT ALONE!

- DON, ADON & Administrator
- Medical Director, Physicians
- Nurses and Nurse Aides
- Laboratory Director
- Consultant Pharmacist
- Director of Staff Development
- Dietary Manager
- Environmental Services & Laundry Directors
- Therapists & Staff
- Local Health Officer
- Acute Care Infection Preventionist
- Local APIC Chapter Members



