



LRHA Presents




LOUISIANA RURAL INFECTION CONTROL TRAINING PROGRAM

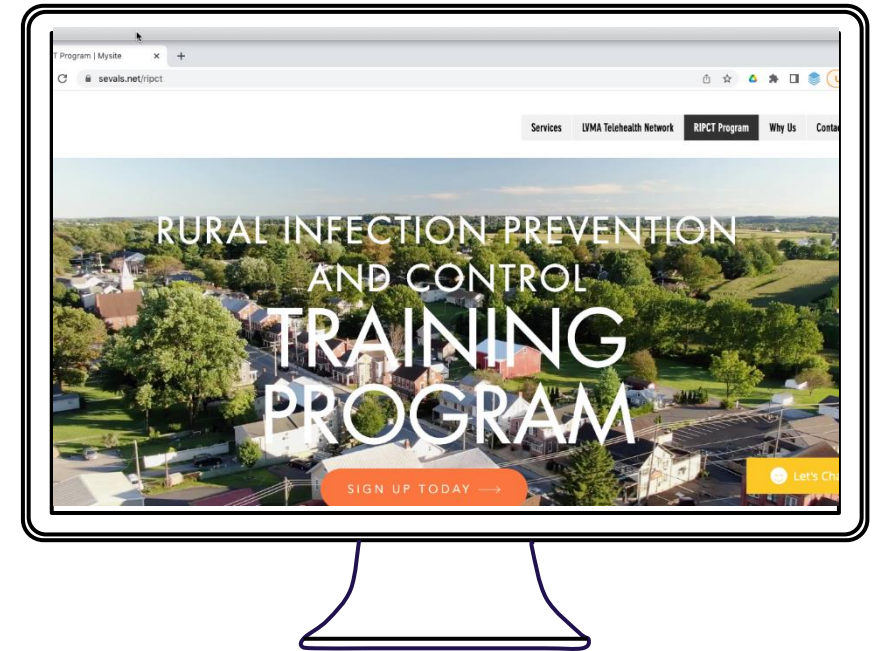
Educating Rural Hospitals and Rural Health Clinics on the most up to date evidence-based practices to ensure regulatory success and utmost patient safety



Good Morning Shout-Outs

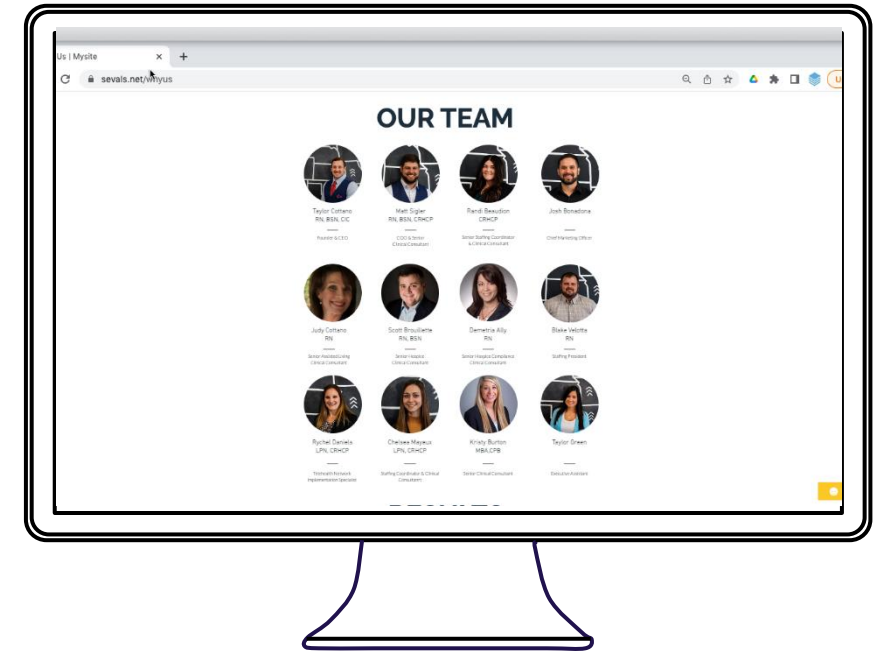
Let's get comfortable with how this presentation will go forward and how to utilize the platform

-  **Where Are You From?**
-  **How long in Infection Control Role?**
-  **Are you signed up yet?**



Who Is Southern EVALS

Louisiana Born. Compliance Experts. Problem Solvers.



- **Mission: Help Hardworking Healthcare Providers Increase Revenue and Maximize Patient Safety**
- **Values: Honesty. Transparency. Consistency. Hard Work. Compassion**
- **Vision: Provide Safer Care for 1 Billion Patients by Helping 10,000 Healthcare Providers Succeed.**

“Provide Safer Care For 1 BILLION Patients”





RHC ADVANCED

A Deep Dive into regulatory compliance with respect to hand hygiene, safe injection practices, and when applicable, single use-devices, high-level disinfection and point-of-care devices.



The Three P's

Paperwork

Table: System Control Risk Assessment for 2022 - Highest Priority Risk are those with highest outcome scores

Risk Event	Probability Risk will occur			Potential Severity Risk Occurred			How well prepared to manage risk			Priority Score		
	4	3	2	1	4	3	2	1	4		3	2
Score												
Incidence of MDRB Infections												
MRSA												
MRSE												
Enterobacter Sibiriac												
Enterococcus Faecium												
Enterococcus Faecalis												
Incidence of VTE												
Deep Vein Thrombosis												
Pulmonary Embolism												
Compartment Syndrome												
Loss of an I&M/Compliance with												
CLINICAL PRACTICE GUIDELINES												
Standard of Practice Compliance												
Staff Infection Control												
Hand Hygiene Compliance												
Use of Personal Protective Equipment												
Hand Sanitizer Availability												
Wearing of Goggles or Face Shields												
Wearing of Masks												
Equipment												
Surveillance & Reporting												
Incidence of nos & Short Report rates of PPE												
Compliance of Personal Protective Equipment												
Incidence of nos & Short Report rates of PPE												
Compliance of Personal Protective Equipment												
Incidence of nos & Short Report rates of PPE												
Compliance of Personal Protective Equipment												

Policy and Procedure

PURPOSE: The purpose of this policy is to outline the hospital standards for employees regarding the use of facemasks to minimize the spread of illness within hospital premises.

POLICY:

The health and safety of hospital employees is of highest priority and imperative for the hospital to continue to serve the community. To protect the health and safety of employees, patients, and visitors of the hospital and clinics, the hospital may require employees to wear face masks at all times while in a hospital facility. This requirement will be enforced when there is a high risk for spread of disease within the region as defined by federal, state, and/or local agencies. Employees will be notified of the initial date in which masks will be mandatory and when the requirement is lifted.

During periods in which masks are mandatory for employees, the following will apply:

- Employees providing direct patient care and whose jobs require the use of PPE will be provided with appropriate face masks as defined by CDC guidelines to meet PPE standards applicable to their positions.
- Non-clinical staff may be loaned surgical masks from the hospital. During periods when supplies is maintained clinically, non-clinical employees who are not required to utilize specific PPE as part of their job duties may be allowed to wear cloth masks as an alternative with the hospital loaning surgical masks when necessary. Cloth masks must be properly maintained.
- Employees must wear appropriately fitted masks at all times while in a hospital facility (including ROP, PT, clinics, etc.) with the following exceptions:
 - o When an employee is working in a private office alone
 - o When eating/drinking
- Employees working in an office or other area with other employees, patients, and/or visitors will be required to wear a mask at all times.
- Employees traveling in a vehicle on company time with another employee or patient will be required to utilize face masks while traveling.

The hospital will provide training to any employee who needs assistance regarding the proper use of wearing of face masks. Employees will be notified of the date that masks are required.

Practice



You Can Make A **DIFFERENCE!!!**



It is up to you as a healthcare leader to make positive changes that will have positive effects on **YOUR COMMUNITY.**





CLASSIFICATION AND DEFINITIONS

The Setup, Documentation and Processes that are required for safety and regulatory compliance





Hand Hygiene

Things to Remember

- Soap water and a sink are readily accessible in appropriate locations including, but not limited to patient care areas and food medication preparation areas. 3-foot rule
- Alcohol based hand rub is readily accessible and placed in appropriate locations.
- Personnel perform hand hygiene
 - Before contact with patient
 - Before performing an aseptic task
 - After Contact with the patient
 - After contact with blood, body fluids or visibly contaminated surfaces
 - After removing gloves
- Personnel performs hand hygiene using soap and water when hands are visibly soiled or after caring for a patient with known or suspected C.difficile or norovirus during an outbreak.



KNOW YOUR GUIDELINES:

- CDC
- WHO

Guidelines to Follow

- Use the hand cleaning guidelines from the Centers for Disease Control and Prevention or the World Health Organization. Set goals for improving hand cleaning. Use the goals to improve hand cleaning.



Secret Shopper Observations
Do not document 100% unless truly 100%

Injection Practices

Things to Remember

- Injections are prepared using aseptic technique in an area that has been cleaned and is free of contamination
- Needles are used for only one patient
- Syringes are used for only one patient
- Insulin pens are used for only one patient
- The rubber septum on all medication vials, whether unopened or previously accessed is disinfected with alcohol prior to piercing
- Medication vials are entered with a new needle
- Medication vials are entered with a new syringe
- Medication vials labeled for single dose are only for one patient
- Bags of IV solution are used for only one patient (not source of flush)
- Medication administered tubing and connectors for only one patient
- Multi-dose vials are dated when they are first opened and discarded per policy or manufacturers guidelines.
- Multi-dose medication vials use for more than one patient are stored appropriately and do not enter the immediate patient treatment area.
- All sharps are disposed of in a puncture resistant sharps container
- Sharps containers are replaced when the fill line is reached.
- Sharps containers are disposed of appropriately as medical waste.



**Know where
the key is to
change out
Empty when
at full line**



STERILIZATION

The process of complete elimination of all forms of microbial life in or on a device.

- **Autoclave**
- **Sterilization Logs**
- **Spore Testing for Adequate Sterilization**
- **Sterilization must be performed for critical instruments and equipment that enter normally sterile tissue or the vascular system.**



HIGH-LEVEL DISINFECTION

The process of complete elimination of all microorganisms in or on a device, except for small numbers of bacterial spores .

- **Glutaraldehyde**
- **Hydrogen Peroxide**
- **Ortho-phthaldehyde (OPA)**
- **Pay attention to all of the details on how to properly perform HLD. This has been a huge focus for the past couple of years with surveyors looking at every step of the process down to testing test strips and measuring the temperature of solutions.**



Low-Level Disinfection

Things to Remember

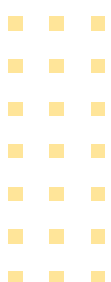
- Cleaners and disinfectant, including disposal wipes, are used in accordance with manufacturer's instructions (dilution, storage, shelf life, contact time)
- Reusable noncritical patient care devices (blood pressure cuffs, oximeter probes) are disinfected on a regular basis
- For patients on Contact Precautions, if dedicated disposable devices are not available, noncritical patient care devices are disinfected after use on each patient
- There is a clear designation of responsibility for disinfection of reusable le noncritical patient care devices.
- Manufacturers instructions for cleaning non-critical medical equipment are followed.
- Hydrotherapy equipment is drained cleaned and disinfected after each patient use.



Best Practice

- The clinic reduces the risk of infection associated with medical equipment, devices and supplies
- The clinic implements infection prevention and control activities when performing low-level disinfection of medical equipment, devices and supplies.





Circle Contact Time
on Bottle



EOC-IC ROUNDS

Environmental inspection process to improve compliance with infection control procedures and to identify areas that need improvement.



-  **General Clinic Cleanliness**
-  **Exam Room Clean and Orderly**
-  **Supplies Inventoried for Expiration Dates**
-  **Patient care equipment properly cleaned and stored after use.**

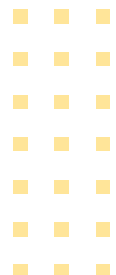


Point-of-Care DEVICES

Devices that do not ordinarily touch the patient or touch only intact skin.



- **Stethoscopes**
- **Thermometers**
- **Vitals Signs Machines**
- **Glucometers**
- **These items may be cleaned by low level disinfection.**





INDUSTRY BEST PRACTICES

Tips and tricks on how to comply with regulatory requirement as well as increase safety and efficiency.



COMMON ISSUES






Common Non-Compliant Items

- The facility is not pre-cleaning at the point of use or improperly pre-cleaning
- The manufacturers instructions for use are not being followed per guideline
- Policy states that we follow national guidelines, but the practice is not consistent with national guidelines
- Sterilization is done at remote sites with storage, prep, and transport not being done correctly
- Ultrasound Probes are not being disinfected properly
- Inadequate training or supervision for staff with no proof of competency or training.

Common areas at Risk

- The facility adds new equipment to the area
- The facility introduces new cleaning products for items
- The facility has new uses for existing equipment that needs extra steps completed
- The facility adds new staff to its department
- The facility has a new location or new locations that it is functioning out of

Patient Contact	Examples	Device Classification	Minimum Disinfection Level
Intact Skin		Non-Critical	Low Level or Intermediate Level Disinfection
Mucous Membranes or non-intact skin		Semi-Critical	High Level Disinfection
Sterile areas of the body, vascular system		Critical	Sterilization

Source: Healthcare Purchasing News (June 2014)



ASK YOURSELF

- **WHAT?** Surfaces, Equipment, Supplies, Items are contaminated.
- **WHEN?** Are you required to clean and disinfect and the frequency
- **WHO?** Is responsible for cleaning, do they know that and are they educated and competent.
- **HOW DO YOU KNOW?** If an item has been cleaned or disinfected when you see it.
- **WHERE?** Are your policies located and if you had a question would you be able to access them



PREP YOURSELF



- **Make sure that you have on the proper attire and that it is appropriate for the setting:**
 - **Gloves**
 - **Mask or Face Shield**
 - **Long Sleeve Gown**
 - **Eye Wear**
 - **Cap**
 - **Goggles (when mixing or changing chemical solutions)**
- **Make Sure to have these items available to you and your staff in a safe place that is big enough for staff to dress out and is not behind a restricted area.**



ALWAYS REMEMBER

**DISINFECTION AND
STERILIZATION
REQUIRE
PRECLEANING**



PRE-CLEANING

- **This is the first step to your disinfection and sterilization process**
- **The point of this step is to remove all soil that is visible on the item**
- **It is best practice to perform this step as soon and as close as possible after the procedure is completed**
- **Items that have been precleaned need to remain wet for storage or transport. It is best practice to wipe, rinse, spray or soak items in enzymatic solution.**
- **Items then need to be transported to the processing area in a safe manner.**



TRANSPORT TO DECONTAM AREA

- **Make sure that all items are contained to protect the person transporting. Ensure items are moist for transport to prevent hardening of bioburden**
- **Ensure that the transportation is based on what is being transported**
- **Container for transport needs to be a leak and puncture proof container that is labeled as biohazardous. Have a process for cleaning and to indicate if box is clean or dirty.**



DISINFECTION KEYS

- **FOLLOW MANUFACTURERS GUIDELINES:**
 - **CORRECT DILUTION**
 - **CORRECT CONTACT TIME**
 - **CORRECT TEMPERATURE**
 - **CORRECT TESTING PROCEDURE**
 - **CORRECT TESTING ITEMS**
 - **CORRECT EXPIRATION DATE**
 - **CORRECT LOG**
 - **CORRECT STAFF COMPETENCY**



DISINFECTION KEYS

- **Keep an Eye Out For:**

- Unattended carts of contaminated instruments
- Issues that delay the process
- Items left soaking for extended periods of time with not log

- **In Decontam Area**

- PPE is properly worn
- There is a clear separation of dirty and clean
- Linear flow is apparent through the space
- Ventilation and Temperature proper
- No Risk of Overexposure.
- Step by Step Process Listed
- Hinged items are open for processing
- Cleaning is done properly with brushes



DISINFECTION KEYS

• Pack Items Properly

- Wrap or pack items base don their IFUs
- Do not fold over the inner paper/plastic peel pouch
- Use proper size pouch for the proper instruments
- Write on the correct area of the pack
- Discard any packs that are torn, stained or damaged. Reprocess items.

• Document all Items

- Document all required elements from sterilizers based on IFUs
- Ensure that you document the testing or any process including sterilizer, chemical tests, testing strips, etc.



DISINFECTION KEYS

• Chemical Indicators

- a monitoring device that is used to monitor one or more critical parameters required for sterilization. This is typically noted by a color change on a tape or strip that indicates the item has been exposed (or processed versus not processed) to the sterilization process

• Biological Indicators

- monitoring devices commercially prepared with highly resistant spores that tests the effectiveness of the sterilization method in use. This indicator demonstrates that conditions necessary to achieve sterilization were met during the cycle being monitored.



DISINFECTION KEYS

• Know Your Expirations

- Expiration is based off of the facility policy and procedure, based on evidence-based guidelines and MFUs.
- If the package integrity is compromised including being torn, punctured, wet, stained, etc, the items must be repackaged and reprocessed.
- May choose to use a timeline with that timeline either written or placed on a label on the items.



STORAGE AREAS



- **Make Sure:**
 - **Limited access and traffic**
 - **Housekeeping cleans area properly and is allowed in**
 - **Understand and Identify shelf life of supplies**
 - **Store items so that they are not compromised**
 - **Log specialized items that are stored and not frequently used**



PROBLEMATIC AREAS

Make sure to spend extra time in these areas in your facility to ensure processes are intact and compliant

- **Exam Rooms, Restrooms, Floors**
- **Patient Equipment**
- **Horizontal Surfaces**
- **Storage Areas**
- **Medication Storage**



SURVEY HOT TOPICS

These items have especially be scrutinized this year with all of the regulatory surveys that we have been a part of.

- **Following MFUs**
- **Proper storage of items**
- **Transport of Dirty Items from Clinics to MC**
- **Competencies Documented for Staff**
- **Proper Sterile technique and breaks in ST**





HOW TO SUCCEED



- Ensure that Orientation and Training is sufficient and covers all required elements including competencies and checkoffs.
- Ensure that you have appropriate staff with supervision that has been trained properly
- Standardize the process with step-by-step instructions available and posted.
- Reinforce best practice when possible and be a resource for existing and future staff.
- Consistently monitor for compliance with education provided as non-compliance is found



GIVE YOURSELF CREDIT FOR YOUR HARD WORK!!!





REMINDERS



Webinar Dates



Webinar Breakdown

There will be 3 types of webinar through this program

- Intro Webinar
- Infection Control/Prevention Basics
 - One Geared towards Hospitals
 - One Geared towards RHCs
- Infection Control/Prevention Advanced
 - One Geared towards Hospitals
 - One Geared towards RHCs

DATE & TIME	DESCRIPTION	AUDIENCE	REGISTER
MAY 17 @ 12:00PM - 1:00PM	PROJECT KICK-OFF	RURAL HOSPITALS & RURAL HEALTH CLINICS	
JUNE 15 @ 10:00AM-11:00AM	INFECTION CONTROL/PREVENTION BASICS	RURAL HOSPITALS	COMING SOON
JUNE 28 @ 12:00PM-1:00PM	INFECTION CONTROL/PREVENTION BASICS	RURAL HEALTH CLINICS	COMING SOON
JULY 14 @ 12:00PM-1:00PM	INFECTION CONTROL/PREVENTION BASICS	RURAL HOSPITALS	COMING SOON
JULY 28 @ 12:00PM - 1:00PM	INFECTION CONTROL/PREVENTION BASICS	RURAL HEALTH CLINICS	COMING SOON
AUGUST 16 @ 12:00PM - 1:00PM	INFECTION CONTROL/PREVENTION ADVANCED	RURAL HOSPITALS	COMING SOON
AUGUST 30 @ 12:00PM - 1:00PM	INFECTION CONTROL/PREVENTION ADVANCED	RURAL HEALTH CLINICS	COMING SOON
SEPTEMBER 15 @ 12:00PM - 1:00PM	INFECTION CONTROL/PREVENTION ADVANCED	RURAL HOSPITALS	COMING SOON





Assessment Application

Infection Control & Prevention Project: Hospital On-Site Assessment and Education Application

Contact Information

1. Hospital Name	2. Hospital Location	3. Primary Contact Name	4. Primary Contact Role/Title
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Primary Contact Email			
<input type="text"/>			
<input type="button" value="Next"/>			

The link is open!!! Applicants can complete the Infection Control and Prevention Project: On-Site Assessment and Education Application.

There is one link for Rural Hospitals and one link for Rural Health Clinics. Each has specific questions for that facility type.

Based off of the answers to the questions, your facility will be ranked according to our needs algorithm.



THANK YOU

If you have any questions at all, please shoot us an email or give us a call.



-  318-403-3788
-  support@sevals.net
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