Infection Prevention and Control in LTC Facilities: Quality Monitoring Program Activities and Current Regulations

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HHS Quality Monitoring Program
Objectives

• Describe the functions of the HHS Quality Monitoring Program
• Describe the QMP Infection Prevention and Control (IPC) focus area and available resources
  ✓ Components of an effective IPC program
  ✓ Techniques and resources for conducting self-evaluation of a facility’s IPC program
  ✓ Role of the Infection Preventionist
• Describe the state and federal regulations related to IPC
QMP Overview

- Statutory basis
- Primary purpose and function
- Units within QMP
QMP – Statutory Basis

• Established by Senate Bill 1839, 77th Legislature, Regular Session, 2001 (TEXAS HEALTH AND SAFETY CODE - CHAPTER 255. QUALITY ASSURANCE EARLY WARNING SYSTEM FOR LONG TERM CARE FACILITIES)

• Not a regulatory function, and staff do not cite deficient practices

• Primary Purpose: To detect, through an Early Warning System, conditions in facilities that could be detrimental to the health, safety, and welfare of facility residents and work with those facilities to facilitate improvements
QMP – Early Warning System (EWS)

- Statistical model
- Data from MDS/quality measures, regulatory surveys and complaint investigations
- Additional data points:
  - PASRR referrals from within HHSC or Local Authorities
  - Referrals from DSHS related to outbreaks or MDRO cases
- Scoring criteria reviewed annually
QMP – Units & Functions

• Quality Monitoring
• Quality Service Review
• Quality Reporting Unit
• Program Development and Innovation
Quality Monitoring Visits

- Introductory Visit
- Initial QM Visit
- 45-Day Follow-Up Visit
- Routine QM Visit
- In-service Education Visit
Rapid Response Team Visits

- At a minimum, a 6 month process
- Starts with an initial, multi-disciplinary visit
- Follow-up visits by individual QMs or the team
- Re-evaluation at the end of the 6 months to determine progress made
Program Development and Innovation

• CMP applications and project management
• Quality in Long-Term Care Conference (formerly the Geriatric Symposium)
• Curriculum development for conferences
• Nursing Facility Quality Review (NFQR)
• Center for Excellence in Aging Services and Long-Term Care
• Focus area development and revision
QMP – Focus Areas

Why a particular topic?
• Frequently cited deficiencies
• NFQR Data
• New CMS Requirements

IPC
• Outbreaks of infectious illnesses
QMP – Focus Areas

Evidence-Based Best Practices

• Literature review, clinical practice guidelines

• Valid and reliable resources
  ✓ Centers for Disease Control and Prevention (CDC)
  ✓ World Health Organization (WHO)
  ✓ Association for Professionals in Infection Control and Epidemiology (APIC)
  ✓ Society for Healthcare Epidemiology of America (SHEA)
  ✓ Department of State Health Services (DSHS)
QMP - Focus Areas

Infection Prevention and Control

• Facility based review
• Multiple components and sections
• Evaluate areas/issues that are most important
• Technical assistance based on the findings of the systems evaluation
### IPC Focus Area

**Monitoring Visit Worksheet – Infection Prevention and Control Program**

<table>
<thead>
<tr>
<th>Facility#</th>
<th>Date</th>
<th>Quality Monitor</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Facility System Review – Infection Prevention and Control Program</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Administrative and Personnel</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Has the facility designated an individual to be responsible for the infection prevention and control program (IPCP)?</td>
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<tr>
<td>2. If yes, is coordinating the IPCP this person’s full-time role? If not the IP’s full-time role, how many hours per week are spent on infection prevention and control activities?</td>
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<tr>
<td>3. What is the IP’s level of professional licensure/certification?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- LVN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- RN</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Other</td>
<td></td>
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<tr>
<td>4. Has the facility’s IP received specific training in Infection Prevention and Control?</td>
<td></td>
<td></td>
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<tr>
<td>- State or local training courses sponsored by a recognized professional society (e.g. APIC, SHEA, TSICP, etc.)?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Corporate/Employer sponsored training course?</td>
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<tr>
<td>5. Is the designated IP certified in infection prevention and control (e.g. CIC)?</td>
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<tr>
<td>6. Has the facility developed written policies and procedures that guide infection prevention activities and control activities?</td>
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<tr>
<td>7. Are the facility’s policies and procedures developed using evidence-based guidelines, regulations, and standards?</td>
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</tr>
<tr>
<td>8. Are the facility’s policies and procedures reviewed at least annually and updated as needed?</td>
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<td></td>
</tr>
<tr>
<td>9. Has the facility developed a written emergency preparedness plan that includes infection prevention and control processes?</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Surveillance Programs and Disease Reporting</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Does the facility have a process in place to identify potentially infectious residents at the time of admission?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Does the facility have a system in place for notifying the IP when an antibiotic-resistant organism or C. difficile is identified by the laboratory?</td>
<td></td>
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</tr>
</tbody>
</table>
IPC Focus Area

Administrative and Personnel

- Infection preventionist
- Policies and procedures
- Emergency preparedness
IPC Focus Area

Surveillance Programs and Disease Reporting

• Process to identify potentially infectious residents
• Process to notify the infection preventionist
• Written surveillance plan
• Surveillance definitions used
• Review of surveillance and infection data
• Written plan for outbreak response
• Notifiable conditions
IPC Focus Area

Hand Hygiene

• Policies and procedures
  ✓ When to use alcohol based hand rub vs. soap and water
  ✓ Consistent with evidence-based guidelines

• Ongoing training and competency evaluations of staff

• Monitoring adherence to hand hygiene policies and procedures

• Adequate supplies are available in all areas of the facility
IPC Focus Area

Personal Protective Equipment (PPE)

• Policies and procedures
  ✓ Standard and transmission based precautions

• Job specific training and competency evaluations on proper use of PPE

• Monitoring and documenting adherence to the use of PPE

• Supplies necessary to adhere to policies
IPC Focus Area

Respiratory Hygiene and Cough Etiquette

• Signage in facility
• Hand hygiene supplies near entrances
• Face masks available
• Education of family and other visitors
• Education of all staff members

8/22/2019
IPC Focus Area

Antibiotic Stewardship
• Leadership support
• Access to professionals with antibiotic prescribing expertise
• Written policies
• Monitoring cultures – notifying prescriber if organism not susceptible to prescribed antibiotic
• Antibiotic use report (6 months)
• Antibiogram
• Feedback to prescribers
• Training for nursing staff, prescribers
IPC Focus Area

Safe Injection Practices/Point of Care Testing

- Injection safety policy and procedure
- Training and competency evaluations of staff
- Procedures for cleaning point of care equipment (blood glucose monitors)
- Auditing adherence to policies and procedures
- Necessary supplies are available
IPC Focus Area

Employee Health and Immunization Practices

• Policies and procedures
• Staff training – prompt reporting of symptoms
• Baseline TB screening
• Training and competency of the person conducting TB screening
• Offer vaccines – Hep B, Influenza
• Centralized system for tracking immunizations
• Documentation of staff immunization status – all recommended vaccines
IPC Focus Area

Employee Health and Immunization Practices

• Exposure control plan
• Staff training and competency evaluation – managing bloodborne pathogen exposure
IPC Focus Area

Resident Health and Immunization Practices

• Baseline TB screening
• Pneumococcal vaccination status
  ✓ PPSV 23
  ✓ Prevnar 13
• Influenza immunizations
• Individual immunization record
• Centralized tracking system
IPC Focus Area

Environmental Services

- Cleaning and disinfection processes
- Routine and terminal cleaning
- High touch surfaces
- Equipment shared between residents
- Re-usable medical devices
- Staff training and competency evaluations – job specific
- Monitoring quality of cleaning and disinfection procedures
- Necessary supplies available
IPC Focus Area

Laundry

• Workflow to prevent cross-contamination

• Appropriate PPE available to staff
  ✓ Thick gloves to prevent accidental sharps injuries

• Sharps container available in the laundry area

• Routine cleaning and disinfection of carts, shelves and folding tables
IPC Focus Area

Nutrition and Dietary Services

• Cleaning of hydration and snack carts
• Temperature sensitive items held at appropriate temperature
• Ice scoops properly stored
• Food/fluids on med carts properly labeled and at appropriate temperature
• Supplements and enteral nutrition formulas properly stored

✓ Labeled and dated when opened or hung
IPC Focus Area

Nutrition and Dietary Services

• Refrigerators and freezers
  ✓ Food stored correctly
  ✓ Clean, free of spills, appropriate temperature
  ✓ Dry storage area organized and clean

• Hazardous foods – eggs, meat

• Cleaning and sanitizing contact surfaces

• Staff
  ✓ Hand hygiene, fingernails, jewelry
  ✓ Gloves, hair restraints
  ✓ Free of jewelry
  ✓ No eating, drinking, chewing gum, tobacco use
IPC - Self-Evaluation

CDC Infection Prevention and Control Assessment Tool (ICAR)
https://www.cdc.gov/infectioncontrol/pdf/icar/ltcf.pdf

SPICE Risk Assessment for LTC Template
https://spice.unc.edu/resources/template-risk-assessment-for-ltc/
Infection Preventionist

Basic knowledge
• Resident care practices
• Infectious diseases, epidemiology
• Surveillance, data collection
• Current immunization guidelines
• Disinfection and sterilization processes
• Adult education, communication method

Specialized education
• Basic infection control
• Continuing education
Infection Preventionist

Certification
- Not required, but does demonstrate expertise
- Certification in Infection Control (CIC)

Additional options for training and certification
- AHCA IP specialized training
- NADONA
- CMS/CDC online training for IP
IPC Regulations

Texas Administrative Code


State Operations Manual, Appendix PP

Texas Administrative Code

Title 40, Part 1, Chapter 19, Subchapter Q

• §19.1601 Infection Control
  ✓ Infection control program
  ✓ Isolation procedures
  ✓ Hand hygiene
  ✓ Communicable diseases and reporting
  ✓ TB Screening
  ✓ Immunizations
  ✓ Linens
  ✓ QAA Committee oversight

• §19.1602 Universal Precautions
Appendix PP

F880 Infection Control

• System to prevent, identify, report, investigate, and control infections/communicable diseases
  ✓ Based on the facility assessment (F838)

• Written standards, policies and procedures
• Surveillance program
• Standard and transmission based precautions
• Incidents identified and actions taken
• Linen handling
• Annual review
Appendix PP

F881 Antibiotic Stewardship
- Antibiotic use protocols
- System to monitor antibiotic use

F882 Infection Preventionist (Phase 3)
- Responsible for the facility’s IPC program
- Nursing, medical technology, microbiology, epidemiology, related field
- Qualified by education, training, experience, certification
- At least part-time in the facility
- Completed specialized training in IPC
- Participate on QAA Committee
Appendix PP

F883 Influenza and Pneumococcal Immunizations

• Education before administering – benefits and risks
• Offer to all residents unless medically contraindicated, or already given
• Opportunity to refuse
• Documentation in clinical record
Appendix PP

F945 Infection Control Training (Phase 3)

• Written standards, policies and procedures for the IPC program
Resources

- Risk Assessment, Plan, Policies and Procedures
- Infection Preventionist training
- Antibiotic/antimicrobial Stewardship
- Notifiable conditions
- Surveillance
- Hand Hygiene
- PPE
Resources

Risk Assessment, Plan, Policies and Procedures

• CDC: Infection Prevention and Control Assessment Tool for Long-term Care Facilities (ICAR)
  https://www.cdc.gov/infectioncontrol/pdf/icar/ltcf.pdf

• CDC: Long Term Care Baseline Prevention Practices Assessment Tool
  http://www.cdc.gov/HAI/toolkits/LTC_Assessment_tool_final.pdf

• APIC: Long Term Care Risk Assessment Sample (included with the Infection Preventionist’s Guide to Long-Term Care, 2019) Available for purchase at

• SPICE: Risk Assessment for LTC Template
  https://spice.unc.edu/resources/template-risk-assessment-for-ltc/

• SPICE: Long Term Care Program/Policy Sample
  https://spice.unc.edu/resources/607/
Resources

Infection Preventionist Training and Certification

- APIC: Infection Preventionist Competency Model [https://apic.org/Professional-Practice/Infection_preventionist_IP_competency_model](https://apic.org/Professional-Practice/Infection_preventionist_IP_competency_model)
- AHCA: Infection Preventionist Specialized Training-IPCO [https://educate.ahcancal.org/p/ipco#tab-product_tab_overview](https://educate.ahcancal.org/p/ipco#tab-product_tab_overview)
- CDC/CMS Nursing Home IP Training Course [https://www.train.org/cdctrain/training_plan/3814](https://www.train.org/cdctrain/training_plan/3814)
Resources

Antibiotic Stewardship

- CDC: Core Elements of Antibiotic Stewardship for Nursing Homes [https://www.cdc.gov/longtermcare/pdfs/core-elements-antibiotic-stewardship.pdf](https://www.cdc.gov/longtermcare/pdfs/core-elements-antibiotic-stewardship.pdf)
- TMF Quality Improvement Network (QIN): Nursing Home Training Sessions (CEs available) [http://qioprogram.org/nursing-home-training-sessions](http://qioprogram.org/nursing-home-training-sessions)
Resources

Notifiable Conditions

• Texas Department of State Health Services (DSHS)
  http://www.dshs.state.tx.us/idcu/investigation/conditions/
Resources

Surveillance


• SHEA: Revisiting the McGeer Criteria http://www.jstor.org/stable/pdf/10.1086/667743.pdf?refreqid=excelsior%3A0cf4133b334b0cd7692b2c3643874547

• APIC: Definitions and Surveillance

• http://www.apic.org/Professional-Practice/Practice-Resources/Definitions-Surveillance
Resources

Hand Hygiene

• CDC: Guideline for Hand Hygiene in Health-Care Settings. https://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf
• CDC: Clean Hands Save Lives https://www.cdc.gov/handwashing/resources.html
• WHO: Guidelines on Hand Hygiene in Health Care 2009 http://www.who.int/gpsc/5may/tools/9789241597906/en/
• WHO: Five Moments for Hand Hygiene http://who.int/gpsc/tools/Five_moments/en/
• SPICE Competency Validation https://spice.unc.edu/wp-content/uploads/2017/03/Hand-Hygiene-Competency-SPICE.pdf
Resources

PPE

• CDC: Protecting Healthcare Personnel
  https://www.cdc.gov/hai/prevent/ppe.html

• APIC: PPE Do’s and Don’ts
  http://professionals.site.apic.org/infographic/ppe-dos-and-donts/

• SPICE: Competency Validation
Best practice information is available through:

- On-site visits
- Website - https://hhs.texas.gov/qmp
- Email - QMP@hhsc.state.tx.us
Thank you

HHS Quality Monitoring Program
hhs.texas.gov/qmp
QMP@hhsc.state.tx.us