Infection Control Program and the Requirements Participation

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PHCA Convention--2017

Spotlight on Infection Control and Antibiotic Stewardship

- 2015
  - White House releases the National Action Plan for Combating Antimicrobial Resistance
    - CALL TO ACTION: Antibiotic Stewardship Programs and activities for all health care settings, including long-term care
    - Hosts a forum on Antibiotic Stewardship
  - CMS proposes new Federal Requirements for LTC which includes infection prevention and antibiotic stewardship activities
  - CDC releases the Core Elements of Antibiotic Stewardship for Nursing Homes
- Flash Forward
  - November 2016—Phase 1 RoP Infection Control Deliverables
  - November 2017 Phase 2 RoP Antibiotic Stewardship Deliverable
Infection Control Overview

- The facility must establish and maintain an infection prevention and control program designed to provide safe, sanitary, and comfortable environments to help prevent the development and transmission of communicable diseases and infections.

- **RoP Phase 1 Requirements (483.80 Infection Control)**
  - Infection Prevention and Control Program
  - Written Standards, Policies, and Procedures for the Program
  - A system for recording incidents identified under the facilities' program and the corrective actions taken
  - Influenza and pneumococcal immunizations policies and procedures

Infection Control Overview

- **RoP Phase 2 Requirements (483.80 Infection Control)**
  - Antibiotic Stewardship Program

- **RoP Phase 3 Requirements (483.80 Infection Control)**
  - Infection Preventionist
Steps to Ensure Compliance with the Phase 1 Requirements of Participation

- Review current infection prevention and control program
  - Do you have a program?
- Compare your program to the Requirements of Participation?
- Are you using the latest guidelines?
  - CDC
- Collaborate
  - PA Safety Authority
  - Epidemiology and Laboratory Capacity (ELC) Infection Control Assessment and Response (ICAR) Program

Antibiotic Stewardship Program—Phase 2 RoP Requirement
What is an Antibiotic Stewardship Program?

- “Antibiotic stewardship refers to a set of commitments and activities designed to “optimize the treatment of infections while reducing adverse events associated with antibiotic use.”
  - Source: CDC Core Elements

- Phase 2 (November 2017) requires “an antibiotic stewardship program that includes antibiotic use protocols and a system to monitor antibiotic use”. (483.80 Infection Control)

Why is this a priority now?

- The FACTS—According to the CDC (2015)
  - Up to 70% of nursing home residents received on or more courses of systemic antibiotics in a year
  - Similar to hospitals studies have shown that 40-75% of antibiotics prescribed in nursing homes may be unnecessary or inappropriate

- RESULTING in an increased number of adverse events such as drug interactions and colonization and/or infection with antibiotic resistant organisms.

- IMPACTING quality of care and quality of life; driving up costs of care.

- MAKING Antibiotic Stewardship a National and State Issue and Priority
  - CMS, CDC, PA Safety Authority, Epidemiology and Laboratory Capacity (ELC) Infection Control Assessment and Response (ICAR) Program
What Does that Really Mean?

- Uses coordinated interventions
- Improves and measures the appropriate use of antimicrobial agents
- Promotes the selection of the optimal drug regimen
  - Dosing
  - Duration of therapy
  - Route of administration

7 Core Elements of an Antibiotic Stewardship Program

1. **Leadership commitment:** Demonstrate support and commitment to safe and appropriate antibiotic use in your facility

2. **Accountability:** Identify physician, nursing and pharmacy leads responsible for promoting and overseeing antibiotic stewardship activities in your facility

3. **Drug expertise:** Establish access to consultant pharmacists or other individuals with experience or training in antibiotic stewardship for your facility

4. **Action:** Implement at least one policy or practice to improve antibiotic use
7 Core Elements of an Antibiotic Stewardship Program

5. **Tracking:** Monitor at least one process measure of antibiotic use and at least one outcome from antibiotic use in your facility

6. **Reporting:** Provide regular feedback on antibiotic use and resistance to prescribing clinicians, nursing staff and other relevant staff

7. **Education:** Provide resources to clinicians, nursing staff, residents and families about antibiotic resistance

*Source: CDC Core Elements of Antibiotic Stewardship for Nursing Homes

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**Phase 3: Infection Preventionist (IP)**

- The facility must designate one or more individual(s) as the IPs who are responsible for the Infection Prevention and Control Program.
- The IP(s) must have primary professional training in nursing, medical technology, microbiology, epidemiology or other related field
- Be qualified by education, training, experience or certification
- Work at least part-time at the facility
- Have completed specialized training in infection control and prevention
- Must participate on the QAA Committee (eventually QAPI)
  - Member and Report on a regular basis
Infection Control Pilot Surveys

- Ref: S&C 17-09-ALL
- November 18, 2016—CMS launched the second of a three year pilot project to improve assessment of infection control and prevention regulations
- Second year (2017) activities include:
  - Pilot new surveyor infection control tools
  - Pilot new survey processes that can be utilized to optimize future assessment of new infection control regulations

- NOTE: Educational Purposes Only; however, if observations are made and refer to local field office for an onsite visit
Infection Control Pilot Survey Overview

- Generally 3 surveyors
  - 2 CMS RN Surveyors
  - 1 CMS RN Infection Preventionist
- Entrance Conference
  - Provide current active census
  - Preferred a current roster sample matrix
  - A list of documents to be provided is presented during entrance conference
    - Documents include Policies and Procedures
    - Departments include: Nursing, Laundry, Human Resources
    - Infection Control Risk Assessment and Plan
    - QAA Plan
    - Infection Control Reports—Surveillance, Antibiogram
    - Antibiotic Stewardship Program

Survey Process

- Employee Interviews
- Observations
  - Staff (Nursing and non-nursing)
  - Students
- Review of Charts
- Policy and Procedure Manual Review
- Education and Orientation
- Recommendations
Resident Selection

- New/Worsened Pressure Ulcers (stage 2-4)
- Wound care/dressing changes
- UTIs/Indwelling catheters
- Dialysis
- Recent Admission, Transfer, Discharges
- Significant Change in Status
- Specialty Care—Central lines, Central venous catheters with infusions, ventilators/residents dependent upon ventilators, O2, Tracheotomies
- Respiratory therapy treatments (nebulizer/aerosol)
- Dehydration
- Isolation Precautions (Contact, Droplet, Airborne)
- Intravenous Fluid
- Diabetes-Blood Glucose Monitoring Injections
- Antibiotics
- Injections

Employee Interviews

- Staff (regardless of discipline) were asked to respond to questions on Infection Control Education:
  - How were staff educated on Infection Control
  - Was the education sufficient enough for them to do their jobs
- Non-nursing staff were asked how do they retrieve PPE
Examples of Observations

- Medication Pass
- Dressing Changes
- Blood Glucose Checks
- Hand Hygiene/Hand Washing
- Catheter Care

Infection Control Pilot Domains

- Infection Control Program Infrastructure and Infection Preventionist
- Infection Preventionist Relationship to Quality Assurance (QAPI) Committee
- Infection Surveillance and Outbreak Response
- Influenza and Pneumococcal Immunization
- Linen Management
- Infection Prevention During Transmission of Care
### Pilot Survey Summaries
Prior to Phase 1

<table>
<thead>
<tr>
<th>Domain: Infection Control Program Infrastructure and Infection Preventionist</th>
<th>Observation/Comments</th>
<th>RoP Phase</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Policy and procedure</strong></td>
<td>Not current to CDC guidelines</td>
<td>Phase 1</td>
</tr>
<tr>
<td><strong>Personnel Training</strong></td>
<td>Not current to CDC guidelines</td>
<td>Phase 1</td>
</tr>
<tr>
<td><strong>Risk Assessment</strong></td>
<td>Not current—Data not within 1 year (Utilize facility and community infection rate from previous assessment)</td>
<td>Phase 1</td>
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<tr>
<td><strong>Infection Control Officer</strong></td>
<td>Designated person with other assigned duties (must be majority portion of the job)</td>
<td>Phase 3</td>
</tr>
<tr>
<td><strong>Infection Preventionist</strong></td>
<td>Education and timing to ensure expertise</td>
<td>Phase 3</td>
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Pilot Survey Domain: Infection Surveillance and Outbreak Response

- Risk Assessments—Current and Appropriate to the Region
  - TB Risk Assessment
  - Legionella Risk Assessment
- Recommended use of McGreers
- Antibiogram: No Available
  - Will you lab service provide?

Pilot Survey Domain—Linen Management

- Proximity of clean and dirty linens
- Handling of dirty linens by Nursing Assistants
- Laundry Bags on the Floor
General Recommendations

- Monitor cleaning of equipment (Not always thorough)
- Location of hand sanitizers (Not in all common areas)
- Cover should be over clean personal laundry in hallway
- Podiatry—Sanitation Procedures
- Job Descriptions:
  - Do job descriptions reflect the responsibility of the employee as it relates to infection control and prevention?

Regulatory Impact
The Future is Now...

- F441 Infection Control
- F329 Unnecessary Medications
- F332/333 Medication Errors
- F428 Medication Regimen Review
- F323: Chemicals not locked up on housekeeping chart
- F328: Oxygen tubing on floor, not places under nares, humidifiers and mask on floor
- F270/280: Care Plans not addressing infection/isolation, why practices
- F-241: Dignity
  - Catheter bags not covered; dragging under chairs on floor

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Crosswalk to New Federal Tag

<table>
<thead>
<tr>
<th>Federal Tag Category</th>
<th>Current Federal Tag</th>
<th>New Federal Tag</th>
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<tbody>
<tr>
<td>Infection Control 483.80(a)(1)(2)(4)(e)(f)</td>
<td>F441</td>
<td>F880</td>
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<tr>
<td>Unnecessary Drugs 483.45(d)(1)-(6)</td>
<td>F329</td>
<td>F757</td>
</tr>
<tr>
<td>Safe/Functional/Sanitary Comfortable Environment 483.90(i)</td>
<td>F465</td>
<td>F921</td>
</tr>
<tr>
<td>Medication Errors 483.45(f)(1)(2)</td>
<td>F332\ F333</td>
<td>F759\ F760</td>
</tr>
<tr>
<td>Drug Regimen Review 483.45(c)(1)(2)(4)(5)</td>
<td>F428</td>
<td>F756</td>
</tr>
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The Opportunity

Work to Overcome Common LTC Barriers

- Prescribers rely on assessments made by others
  - How confident are you in the clinical assessment skills of your nurses?
  - Do you have the right number of Registered Nurses to ensure quality of care and quality of life to your residents?
- Many prescribers have not changed their practice
  - Are your Medical Directors engaged in quality and infection control programs?
  - Are your Medical Directors empowered to have difficult conversations with their colleagues?
- Documentation lacks detailed assessments and rationale when antibiotics are started
  - Are you conducting audits on antibiotic usage?
  - Do you have an Antibiotic Stewardship Program?
- Difficulty obtaining and interpreting laboratory and diagnostic data to inform antibiotic use
  - Have you had the discussion with your lab provider on the requirements for LTC?
- Resident and family influence on antibiotic requests
  - Do you have educational materials available for families?
Key Takeaways

- Review your current Infection Control and Prevention Program utilizing a multidisciplinary approach which involved the Medical Director, Pharmacy and Lab Providers
- Compare your current program with the RoP and CDC Checklists
- Review the CDC Core Elements of Antibiotic Stewardship for Nursing Homes
- Be sure your are utilizing current guidelines and performing annual risk assessments
- Collaborate with state and local partners
  - PA Safety Authority
  - ICAR

Resources

- CMS Survey and Cert Memo (with worksheet)

- CDC—The Core Elements of Antibiotic Stewardship for Nursing Homes (Checklist)
  https://www.cdc.gov/longtermcare/prevention/antibiotic-stewardship.html

- PA Safety Authority--http://patientsafety.pa.gov/

- Agency for Healthcare Research and Quality—Nursing Home Antibiotic Stewardship Guide (Checklist and Tools)
  https://www.ahrq.gov/nhguide/index.html
Questions

Thank you!
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