

The Role of the Infection Preventionist and Core Infection Prevention Practices

ACH IP Course, 2022

Infection Prevention Training for ACH
Healthcare-Associated Infections Program
Center for Health Care Quality California
Department of Public Health



The Role of the Infection Preventionist

Objectives

- Describe the role of infection preventionists (IP) in health care
- Discuss relationships important to success in performing the IP roles

What is the Role of an IP?

What is the Role of the IP?

PREVENTION!

Historical Perspective

What we did

- IPs typically
 - Worked only in acute care hospitals
 - Reviewed CDC guidelines on HAI prevention
 - Educated the facility healthcare staff, mainly nursing, on the guidelines
 - Performed HAI surveillance
 - Reported findings to internal Infection Control and Executive Committees
 - Reported “successes” to The Joint Commission

Historical Perspective

And What Happened

- Many thousands of patients continued to acquire HAI
- Many HAI were device-associated, the majority of which were likely preventable with strict adherence to recommended infection control care practices
- Hospital policies and procedures did not reflect actual clinical practices

Current Perspective on HAI Prevention

- HAI harm patients
- Most HAI can be prevented
- HAI (and antimicrobial resistance) occur in all healthcare settings, including nursing homes
- General public is aware of HAI impact and demands accountability
- Infection PREVENTION has become a **clear mandate** of State and federal regulators

It takes the entire health care team to prevent HAI!

IP Roles and Tools for HAI Prevention



Professional Standards for IP

- Qualifications of an IP
 - Baccalaureate in nursing, microbiology, or epidemiology preferred
 - Completion of a comprehensive IP fundamentals training
 - Knowledge, experience, ability to think critically, listen, and question
- Professional accountability
 - Acquire and maintain knowledge and skills
 - Attend educational conferences
 - Join professional organizations (for example, APIC, SHEA)
 - Consider becoming certified (CIC)

IP as Evaluator

- Review annual risk assessment
 - Update infection prevention plan
 - Participate in unit rounding
 - Nursing units, OR, GI lab, radiology, ED, clinics
 - Perform surveillance
 - Evaluate adherence to HAI prevention care practices
 - Coordinate adherence monitoring
 - Investigate suspected outbreaks
 - Provide IPC recommendations based on observed gaps and needs
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IP as HAI Prevention Expert

- Analyze, interpret, and feedback surveillance data
- Know current evidence-based (CDC) HAI prevention practices
- Regularly review HAI surveillance findings with healthcare providers and leadership
 - Identify areas for prevention focus
 - Spur new prevention efforts
 - Measure HAI prevention progress over time
 - Provide encouragement to continue efforts when prevention success occurs or stalls
 - Look for new ways to attain and sustain prevention
- Feedback data to improve performance

IP as Consultant and Influencer

- Construction
- Device selection
- Floods, fires
- Family/visitor Issues
- Dietary, EVS, lab
- Pet therapy
- Pandemic
- And more

Influence: the capacity or power of persons or things to be a compelling force on or produce effects on the actions, behavior, and opinions of others

**The IP has influence –
use it to keep patients, staff, and visitors safe**

IP as Educator

- Educate facility health care providers groups
 - Evidence-based infection prevention practices
 - Infection risk, prevention, and control methods
 - Updates on Influenza, vaccine preventable diseases, emerging infections
- Ensure visitors and the public are educated
- Offer community-based classes
 - The public likes to hear what IPs have to say
- Provide just-in-time education during outbreaks and emergencies

IP as Collaborator

- It is ALL about relationships – with your EVS Director, OR Supervisor, Chief Engineer, Nursing Manager, Marketing staff, Materials Management, Lab Director and frontline staff
 - What can you learn from other's expertise?
 - Where is teamwork a part the solving a problem?
 - Respect and acknowledgment go both ways
- IP collaborate during disasters, outbreaks, community projects – get to know people now!

IP as Liaison

- IP serve as link to:
 - Local public health
 - For connecting to local services, resources
 - CDC and NHSN
 - For prevention guidelines and surveillance protocols
 - Regulators
 - For requirements specific to infection prevention
 - Patients, visitors, staff, and administration
- IPs serve as an advocate for patient safety

IP as Customer Service

Who are infection prevention customers?

- Patients
- Staff
- Physicians
- Visitors
- Community
- Public health
- **Anyone who calls for your consultation services**

IP as Mentor and Leader

- Staff watch your behaviors
- Make decisions related to ethics and regulations
- Maintain responsibility for knowing and staying current on IPC guidance
- Identify needs/desire for mentorship
 - Others interested in infection prevention
 - Students needing a preceptor
 - An IP Liaison team

Core Infection Prevention Practices

Objectives

- Review how a care practice becomes an infection prevention recommendation
- Describe the core infection prevention practices that must be used in all care settings, all the time

HAI Prevention – What works?

- Recommendations for infection prevention are **based on science**
- To become a recommended practice, must answer questions
 - If studied systematically, does the practice result in reduced infection rates?
 - To be considered an infection prevention “best practice,” is the practice associated with sustained low HAI rates?

HAI Prevention – What works?

- Recommendations are “evidence-based”
- Require careful evaluation of available studies, including risks and benefits
- Where scientifically valid studies are lacking, consensus expert opinion also considered but never alone

HAI Prevention – What works?

- Best sources for evidence-based HAI prevention practice recommendations
 - **Centers for Disease Control and Prevention (CDC)**
 - **Healthcare Infection Control Practices Advisory Committee (HICPAC)**
 - **Infectious Diseases Society of America (IDSA) / Society for Healthcare Epidemiology of America (SHEA)**
- APIC provides practical implementation guidance

Care Practices Should Prevent Infection

- Infections occur when pathogens are introduced into sterile body sites
- Infections may be caused by
 - Patient's own normal flora
 - Pathogens acquired in the facility or during recent healthcare

Care Practices Should Prevent Transmission

- Transmission occurs when pathogens (including MDROs, *C. difficile*) are spread to others
 - HCP → patient
 - Patient → HCP
 - Patient → patient
- Can result in colonization (which may or may not lead to infection)
 - Colonized patients/HCP increase risk of transmission to others

Why Core Infection Prevention Practices?

- Care practices that apply to all patient care, regardless of a patient's suspected or confirmed infectious state
- Apply to all settings where care is delivered
- Protect patients and healthcare personnel
- Prevent healthcare personnel and the environment from transmitting infections to other patients

[Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings – CDC HICPAC Recommendations, 2017](#)

(www.cdc.gov/hicpac/recommendations/core-practices.html)

Core Infection Prevention Practices

For Use in All Health Care Settings at All Times

- Visible, tangible leadership support for infection control
- Infection prevention training for all HCP
- Patient, family, caregiver HAI prevention education
- Performance monitoring and feedback
- Early, prompt removal of invasive devices
- Occupational health
- Standard precautions
 - Hand hygiene
 - Environmental cleaning and disinfection
 - Injection safety, medication safety
 - Assess risk, use PPE appropriately
 - Minimize potential exposures
 - Clean and reprocess reusable medical equipment
- Transmission-based precautions as necessary

[CDC HICPAC, 2017](#)

(www.cdc.gov/hicpac/recommendations/core-practices.html)

What Do the Core Practices Mean by Visible, Tangible Leadership Support?

- A governing body must be accountable for infection prevention activities
- Sufficient resources allocated
 - Adequate staffing so infection prevention practice adherence is feasible
- Individual with infection prevention training assigned to manage the program
 - Given support and authority

What Do the Core Practices Mean by Infection Prevention Training for All HCP?

- Provide job-specific infection prevention training
 - Require training before HCP are allowed to perform duties and at least annually
 - Provide additional training when gaps in care practice adherence or increased infection rates noted
- Implement processes to ensure HCP competency
- Requires updated written infection prevention policies and procedures
 - Based on current, evidence-based guidelines

What Do the Core Practices Mean by Patient, Family, Caregiver Education?

- Provide appropriate infection prevention education to patients, family members, visitors, and others included in the caregiving network
- Include
 - How infections are spread
 - How they can be prevented
 - What signs and symptoms should prompt evaluation
 - Instructional materials that address varied levels of education, language, comprehension, and cultural diversity

What Do the Core Practices Mean by Performance Monitoring and Feedback?

- Monitor adherence to infection prevention practices
- Provide prompt, regular feedback to HCP and leadership
- Use standardized tools and definitions
- Monitor HAI incidence and act on the data

What do the Core Practices Mean by Early, Prompt Removal of Invasive Devices?

- Assess the medical necessity of any invasive device to identify the earliest opportunity for safe removal
 - Vascular catheter
 - Indwelling urinary catheter
 - Feeding tubes
 - Ventilator
 - Surgical drain
- Ensure HCP adhere to recommended insertion and maintenance practices

**Are Core Infection Prevention Care
Practices Performed Routinely at
YOUR facility?**

You won't know unless you measure!

What is Adherence Monitoring?

CDC definitions

- **Audit (adherence monitoring):** Direct observation or monitoring of healthcare personnel adherence to job-specific infection prevention measures
- **Feedback:** A summary of audit findings that is used to target performance improvement

Why is Adherence Monitoring Important?

- Infection prevention policies are most likely in place
- Preventable HAI continue to occur
- Even if facilities have implemented evidence-based recommendations, they must have a program to regularly **monitor infection prevention care practices to assess if adherence is consistent**

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**Will be covered in more detail in separate lectures*

[CDC HICPAC, 2017](#)

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Summary

HAI can only be prevented if every HCP adheres to evidence-based practices

Need to know the gaps to correct the gaps

Every care giver needs to own HAI, know how to prevent them, and practice consistently

Questions?

For more information,
please contact

HAIProgram@cdph.ca.gov

Include “ACH IP Training Course” in
the subject line

Post Test

Now that you have completed this
module,
Click on the “Post Test” link when it
pops up

To Return to
Learning Stream
and take the post test

*If the Post Test link does not pop up,
you will be sent a link via e-mail*