Infection Prevention Rounding

Infection Prevention Boot Camp
October 23, 2019

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Objectives

- Participants will be able to verbalize the importance of IP Rounding
- Participants will be able to identify best practices for IP Rounding
- Participants will be able to name areas where the IP Rounds
- Participants will be able to locate IP Rounding Resources
Why is IP Rounding Important
Importance of IP Rounding

On any given day, about 1 in 31 hospital patients has at least one healthcare-associated infection.

CDC, October 2019

https://www.cdc.gov/hai/data/index.html
Importance of IP Rounding

- Epidemiology & Surveillance
- Education
- **IPC Rounding**
  - Cleaning, disinfection, sterilization
  - Outbreak detection & management
  - Emerging technologies
  - Antimicrobial Stewardship
  - Diagnostic Stewardship

https://apic.org/professional-practice/infection-preventionist-ip-competency-model/
Importance of IP Rounding

Outcomes

Patient Safety

Reduce Risk
Importance of IP Rounding

“We’re glad someone comes down here to see to what we do”
Best Practices for IP Rounding

- Formal Report
- Present to ICC
- Feedback
- Follow Up
Best Practices for IP Rounding

- Standardized Tool
- Frequency
- Schedule
- Multidisciplinary Team
- Measurement

Announced vs. Unannounced
Best Practices for IP Rounding

- Hand Hygiene
- PPE
- Housekeeping
- Expiration dates
- Storage
- Clean supply
- Soiled utility
- General facility

Data

<table>
<thead>
<tr>
<th>Date</th>
<th>Clinic</th>
</tr>
</thead>
<tbody>
<tr>
<td>01/01</td>
<td>Issue</td>
</tr>
<tr>
<td>01/02</td>
<td>Issue</td>
</tr>
<tr>
<td>01/03</td>
<td>Issue</td>
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<tr>
<td>01/04</td>
<td>Issue</td>
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<tr>
<td>01/05</td>
<td>Issue</td>
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<tr>
<td>01/06</td>
<td>Issue</td>
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<tr>
<td>01/07</td>
<td>Issue</td>
</tr>
<tr>
<td>01/08</td>
<td>Issue</td>
</tr>
<tr>
<td>01/09</td>
<td>Issue</td>
</tr>
<tr>
<td>01/10</td>
<td>Issue</td>
</tr>
</tbody>
</table>

Description

- Hand Hygiene policy is adhered
- PPE is continuously assessed
- Housekeeping is performed
- Expiration dates are monitored
- Storage is properly organized
- Clean supply is available
- Soiled utility is handled
- General facility is maintained

Expiry Dates

- Gloves: 12 months from date of purchase
- Disinfectant: 2 years from date of purchase
- Sanitizer: 1 year from date of purchase

Personal Protective Equipment and EPP Exposure Protection

- Glove care: Wash hands, avoid touching face, and use only if necessary
- Eye protection: Worn when there is a risk of splashing
- Respiratory protection: Used when there is a risk of inhaling dust or chemicals

General Housekeeping

- Floors and surfaces are clean and free of clutter
- Offices and workspaces are organized and maintained
- No dust is present above shelves, cabinets, tables, or in machinery

Housekeeping carts are attended and located in housekeeping closet

Any obstacles are clear and free of any build-up
Best Practices for IP Rounding

5 Minute Rounding
IP Rounding Resources – APIC/CDC QUOT

INDIVIDUAL AUDITS
- Clean areas
- Dirty areas
- Hand Hygiene Supplies
- Isolation
- Isolettes/Bassinets
- Medication Areas
- Needlestick Prevention
- Nutrition Prep Areas
- PPE Supply
- Point of Care testing
- Vaccine storage areas
- Visitor Areas

SUITE TOOLS
- Ambulatory Care
- Critical Access Hospitals
- Device-Associated Infections
- High – Level Disinfection
- ICU
- Medication Areas
- NICU
- PACU
- Transmission-based precautions

http://ipcobservationtools.site.apic.org/observation-tools-library/
IP Rounding

Inpt units
- Med/Surg
- ICU
- NICU
- Labor / Delivery
- Emergency

Procedure areas
- Surgery/SPD
- GI
- Bronchoscopy
- Dialysis
- Pain Management
- Radiology

Outpatient
- Physician Practices
- Urgent Care
- ASC
- Sleep Centers
- Wound Care
Support Services

- KITCHEN
- LAB
- PHARMACY
- THERAPY
- REHAB
- LAUNDRY
IP Rounding Resources - Isolation

- Appropriate Isolation Category
- Visible Signage
- PPE available
- Single room or cohort
- Hand Hygiene
- Patient/Family education
- Equipment cleaning

https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html
IP Rounding Resources
CMS Worksheet – HOSPITAL - IC Worksheet

- Hand Hygiene (pg. 9)
- Injection Practices & Sharps Safety (pg. 11)
- PPE/Standard Precautions (pg. 14)
- Reprocessing of Semi- & Critical Equipment (pg. 19)
- Single – Use Devices (pg. 27)
- Spinal Injection Procedures (pg. 38)
- Point of Care Devices (pg. 39)
- Precautions (pg. 40)
- Surgical Procedure (pg. 46)

IP Resources for Peri-op Areas:

- **AAMI:**
  - Comprehensive guide to steam sterilization and sterility assurance in health care facilities (ST79)
  - Chemical sterilization and high-level disinfection in health care facilities (ST58)
  - Flexible and semi-rigid endoscope reprocessing in healthcare facilities (ST91)

- **APIC**
  - Infection Preventionist Guide to the OR (2018)

- **AORN:**
  - Guidelines for Perioperative Practice

- **CDC Guideline for Disinfection and Sterilization**

- **Disinfection & Sterilization**
  - [https://disinfectionandsterilization.org/](https://disinfectionandsterilization.org/)
IP Rounding: Peri-operative Services

**Pre-op**
- HH
- Med administration
  - IV Fluids!
- Surgical site marking
- Point of care testing
- Equipment cleaning
- Clean storage
- Linen
- Environment

**Intra-op**
- HH/Surgical Scrub
- Asepsis
- Surgical site prep
- Draping
- Med administration
- Sharps safety
- Room turnover
- Instrument reprocessing

**Post-op**
- HH
- Med administration
- Equipment cleaning
- Isolation
- Soiled utility
- Patient food/refrigeration
- Staff eat/drink
- Environment
IP Rounding Resources
Sterile Processing

- Point of Use
- Decontamination
- Washer
- Prep & Pack
- Sterilization
- Sterile Storage

Sterilization SPS Medical Sterilization Audit Checklist
http://www.ascquality.org/Library/sterilizationhighleveldisinfectiontoolkit/Sterilization%20Audit%20Checklist%20SPSmedical.pdf
Standard IC.02.02.01
Reducing the risk of infection associated with medical devices

https://www.jointcommission.org/assets/1/6/TJC_HLD_BoosterPak.pdf
### Reprocessing: High Level Disinfection and Liquid Sterilization Process—“Dirty” Area Using Chemical Soak Method

**Instructions:** Use this card and the one that precedes collectively. Observe area where instruments are reprocessed by a soaking method using a liquid chemical germicide. For each category, record the observation. Sum all Yes and No responses. Divide by sum of “Yes” + “No”.

<table>
<thead>
<tr>
<th>Equipment Reprocessing – Dirty Area</th>
<th>Summary of Observations</th>
</tr>
</thead>
<tbody>
<tr>
<td>8. Are chemical potency test strips stored appropriately and labeled with “opened” and “use by” dates?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>9. Are opened liquid chemical containers labeled with the date opened and the use-by date?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>10. Do log books show test strip quality control recording?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>11. Do log books show results of liquid chemical germicide potency testing?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>12. Are spill kits readily available?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>13. Are safety data sheets (SDS, formerly known as MSDS) available for the chemicals used in the area?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td>14. Are instrument instructions for use (IFUs) readily available for each equipment item reprocessed in the area?</td>
<td>□ Yes □ No</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td></td>
</tr>
</tbody>
</table>

[https://www.cdc.gov/infectioncontrol/pdf/QUOTS/High-Level-Disinfection-Suite-P.pdf](https://www.cdc.gov/infectioncontrol/pdf/QUOTS/High-Level-Disinfection-Suite-P.pdf)
IP Rounding – HLD Areas

IFU

Staff competency

PPE / HH

Pre-cleaning

Transportation

Cleaning

Reprocessing

Storage

Documentation

Physical Environment

Maintenance

Reprocessing failures
### Spaulding Classification

<table>
<thead>
<tr>
<th>Classification</th>
<th>Critical</th>
<th>Semi - Critical</th>
<th>Non - Critical</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Patient Contact</strong></td>
<td>Sterile tissue/cavities, Bloodstream</td>
<td>Mucous membranes/non-intact skin</td>
<td>Intact Skin</td>
</tr>
<tr>
<td><strong>Process</strong></td>
<td>Sterilization</td>
<td>HLD/Sporicidal chemical</td>
<td>Low level disinfection</td>
</tr>
<tr>
<td><strong>Examples</strong></td>
<td>Surgical instruments, implants</td>
<td>Flexible endoscopes, laryngoscopes, respiratory equipment</td>
<td>BP cuffs, wheelchairs, etc.</td>
</tr>
</tbody>
</table>
IP Rounding: Ultrasound Probe

- Where is the probe used?
- What type of procedures?
- Is there a potential for exposure to blood during procedure?
- What is the process for determining if sheath is intact?
- Is there an IFU for the sheath?
- What is process after sheath removal?
**IP Rounding Resources: Ultrasound Probes**

<table>
<thead>
<tr>
<th>IP Questions</th>
<th>Department Answers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tell me more about how this probe is being used during a procedure.</td>
<td>The probe is used during procedures in interventional radiology.</td>
</tr>
<tr>
<td>What types of procedures is the probe used for?</td>
<td>Angiograms, venograms, biopsies, line placements, paracentesis, thoracentesis</td>
</tr>
<tr>
<td>What type of contact does the probe have with the patient?</td>
<td>None, we use a sterile sheath</td>
</tr>
<tr>
<td>What is the process for determining if the sheath is intact?</td>
<td>Observation during procedure and visual inspection upon completion of the procedure.</td>
</tr>
<tr>
<td>Is there an IFU for the sheath? What does it state?</td>
<td>Not available from the manufacturer</td>
</tr>
<tr>
<td>Is there a potential for exposure to blood during any of these procedures?</td>
<td>Only if the sheath has been punctured</td>
</tr>
<tr>
<td>What is the process after sheath removal?</td>
<td>Disinfection per the IFU.</td>
</tr>
</tbody>
</table>
**IP Rounding: Ultrasound Probes**

<table>
<thead>
<tr>
<th>CDC</th>
<th>FDA</th>
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<tbody>
<tr>
<td>&quot;Ultrasound probes used during surgical procedures can contact sterile body sites. These probes can be covered with a sterile sheath to reduce the level of contamination on the probe and reduce the risk for infection. However, because the sheath does not completely protect the probe, the probes should be sterilized between each patient use as with other critical items. If this is not possible, at a minimum the probe should be high-level disinfected and covered with a sterile probe cover.&quot;</td>
<td>&quot;For clinical applications of a semi-critical or critical nature (intraoperative, transrectal, transvaginal, transesophageal, or biopsy procedures), labeling should recommend, when appropriate, the use of sterile, legally-marketed probe sheaths. Note that the use of sheaths does not change the type of reprocessing that is recommended after each use.&quot;</td>
</tr>
<tr>
<td>&quot;Do not use a lower category of disinfection or cease to follow the appropriate disinfectant recommendations when using a probe cover because these sheaths and condoms can fail.&quot;</td>
<td>&quot;Probe used in a semi-critical application should be cleaned and sterilized or at least received high-level disinfection after use even if a sheath was used. Probes used for critical applications should be cleaned and sterilized after use even if a sterile sheath was used. Sheaths can fail during use and contamination may not be easily visible.&quot;</td>
</tr>
</tbody>
</table>


Toolkit available:

www.ultrasoundinfectionprevention.org
IP Rounding Resources - Dialysis

CDC: Assessment tool for Hemodialysis Facilities

https://www.cdc.gov/infectioncontrol/pdf/icar/dialysis.pdf

https://www.cdc.gov/dialysis/index.html
IP Rounding Resources – Laundry

- Healthcare Laundries Accreditation Council (HLAC)
  - Standards Manual
  - Standards Checklist
  - Sample Policy & Procedure
  - https://www.hlacnet.org/

- CDC “Guidelines for Environmental Infection Control in Health-Care Facilities”
  - Equipment, handling, process Pg. 153
  - Water Temp for Laundry pg. 63

- Round annual w/ EVS
IP Rounding Resources – Dietary

Food storage
Food Handling
Cleaning & Sanitizing
Garbage
Pest Control
Environment
Worker Appearance

State of WI. Department of Agriculture - Wisconsin Food Code
https://datcp.wi.gov/Pages/Programs_Services/FoodCode.aspx
IP Rounding
Resources – Dietary

STOP CROSS CONTAMINATION
USE CORRECT COLOUR CODED CHOPPING
BOARDS AND KNIVES AT ALL TIMES!

- RAW MEAT
- RAW FISH
- COOKED MEATS
- SALADS & FRUITS
- VEGETABLES
- DAIRY PRODUCTS
Rounding Together
Mop bucket
Janitor’s Closet

Is this room + or – pressure?
Storage Areas:

- Liquids below solids
- Solid bottom shelf liner in place
Outside shipping box
Soiled Utility Area
Linen
“Hand washing facilities should also be situated to avoid splashing - suggesting at least 36 in from patients or clean supplies, or equipped with a splash guard to avoid splash contamination”
Bartley, 1999. pg 165
How many paper towels do you need?
Locker Room
Got coffee?
Operating Room
Positioning
Device

- Torn
- Tape Residue
OR

- Positioning Devices
Instrument tap and plastic dipping material are used to identify instruments. They wear out over time and need to be inspected every time the instrument is processed, replace as often as needed. AAMI (2017), ST 79, pg. 40


State of WI. Department of Agriculture - Wisconsin Food Code. https://datcp.wi.gov/Pages/Programs_Services/FoodCode.aspx