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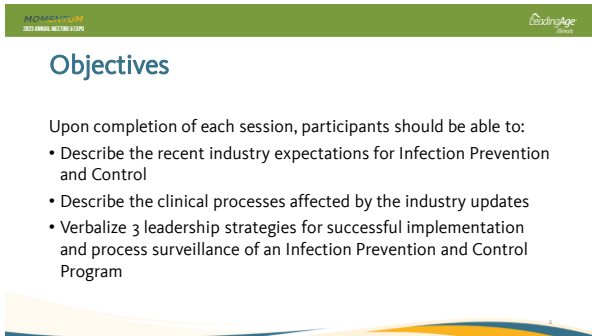
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## Infection Prevention and Control



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## Updated Best Practice Systems

Examples include:

- State Requirements
- Federal (CMS) Requirements
- CDC Guidance
- Evidence-based Review Articles
- Current industry manuals/textbooks
- Industry Standards (published by professional organizations)
- Clinical Practice Guidelines
- Accreditation Bodies



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*change is  
the only  
constant*

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## The BASICS!

- The IPCP should be coordinated with the Facility Assessment
- A community-based risk assessment should be completed



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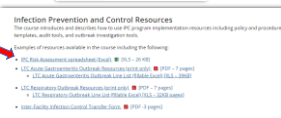
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## Resources Available



<https://www.cdc.gov/hai/prevent/infection-control-assessment-tools.html>

<https://www.cdc.gov/longtermcare/training.html>

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## Centers for Medicare & Medicaid Services (CMS) Memos

<https://www.cms.gov/Medicare/provider-and-certification/survey-certification/info/Policy-and-Memos-to-States-and-Regions>

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## CMS State Operations Manual, Appendix PP

**State Operations Manual  
Appendix PP - Guidance to Surveyors for  
Long Term Care Facilities**

Table of Contents  
(Rev. 211, 02-03-23)

<https://www.cms.gov/medicare/provider-and-certification/guidance-for-law-and-regulations/downloads/appendix-pp-state-operations-manual.pdf>

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## Centers for Medicare & Medicaid Services (CMS)

**State Operations Manual  
Appendix PP - Guidance to Surveyors for  
Long Term Care Facilities**

Table of Contents  
(Rev. 211, 02-03-23)

**Revised Tags not included in Appendix PP:**

- F880: Infection Control
- F881: Antibiotic Stewardship Program
- F882: Infection Preventionist
- F883: Influenza and Pneumococcal Immunizations
- F884: Reporting (NHSN)
- F885: Reporting (Residents, Representatives & Families)
- F886: COVID-19 Testing (Residents & Staff)
- F887: COVID-19 Immunization

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## Enhanced Barrier Precautions



<https://www.cdc.gov/hai/pdfs/containment/PPE-Nursing-Homes-R.pdf>

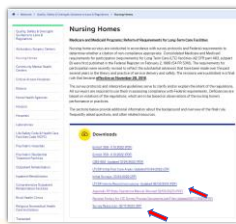
**Enhanced Barrier Precautions**, in addition to Standard and Contact Precautions will be implemented during high-contact resident care activities when caring for residents with wounds, indwelling medical devices or residents with infection or colonization with an MDRO

**Gowns and Gloves for:**

- Dressing
- Bathing/showering
- Transferring
- Hygiene Care
- Changing Linens
- Toileting/Changing Briefs
- Device care or use (urinary catheter, central line, etc.)
- Wound Care

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CMS

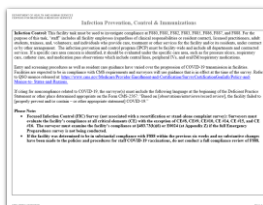


<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-home>

[illegible]

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**CMS-20054 Infection Prevention, Control & Immunization**



<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-home>

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State Updates

<https://idph.illinois.gov/covid19/community-guidance/long-term-care.html>

[https://idph.illinois.gov/content/dam/ids/idsweb/ids/covid19/guidance/IL-CLC-COVID19-Guidance\\_11.4.2022.pdf](https://idph.illinois.gov/content/dam/ids/idsweb/ids/covid19/guidance/IL-CLC-COVID19-Guidance_11.4.2022.pdf)

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Centers for Disease Control and Prevention

<https://www.cdc.gov/coronavirus/2019-ncov/susceptible-new-all.html>

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## Centers for Disease Control and Prevention

"Community Transmission is the metric currently recommended to guide select practices in healthcare settings to allow for earlier intervention, before there is strain on the healthcare system and to better protect the individuals seeking care in these settings. The Community Transmission metric is different from the COVID-19 Community Level metric used for non-healthcare settings. Community Transmission refers to measures of the presence and spread of SARS-CoV-2."

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

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## Centers for Disease Control and Prevention



[https://covid.cdc.gov/covid-data-tracker/#county-view?loc\\_select\\_state=all\\_states&loc\\_select\\_county=all\\_counties&data\\_loc=US](https://covid.cdc.gov/covid-data-tracker/#county-view?loc_select_state=all_states&loc_select_county=all_counties&data_loc=US)

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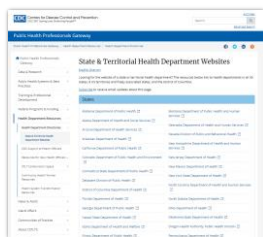
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## Local Departments of Public Health

<https://www.cdc.gov/publichealthgateway/healthdirectories/healthdepartments.html>



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## CDC Clinician Info

[https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html?deliveryName=USCDC\\_2067-DM32945](https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html?deliveryName=USCDC_2067-DM32945)

### SUPPORT LINES

**CDC-INFO**  
Answers to COVID-19 questions for healthcare workers  
800-CDC-INFO (800-232-4636)

If you are a healthcare provider or health department with a question about the clinical management of COVID-19, please contact [CDC-INFO](#).

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## Additional Resources

2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings

Last update: May 2022

James H. Beigel, MD, Emily Berthiaume, MD MPH CDC, Marguerite Johnson, PhD, Linda Chastock, MS, MSW, the Healthcare Infection Control Practices Advisory Committee

Advisory Committee: The authors and HICPAC gratefully acknowledge Dr. Larry Strausbaugh for his time and contribution and related guidance in the preparation of this guideline.

Original author: Singer, D, Klevens, R, Jackson, M, Chansinsirakul, and the Healthcare Infection Control Practices Advisory Committee. 2007. Guidelines for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings. <https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>

Appendix A Update (September 2018)

Changes: Update and clarifications made to the table in Appendix A: Type and Duration of Precautions Recommended for Selected Isolations and Conditions.

Infection/Condition	Type of Precaution	Duration of Precaution	Precaution/Comments
Cholera, major	Standard	2 weeks	and manage stool or vomit as contact for testing
Cholera, minor or mild	Standard	2 weeks	if bloody stools and cardiac dysrhythmia
Scarlet fever	Standard	24 hours	if bloody stools and cardiac dysrhythmia
Scarlet fever, severe	Standard	24 hours	if bloody stools and cardiac dysrhythmia

Last update: May 2022

<https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-11.pdf>

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## Centers for Disease Control and Prevention

January 20, 2023, Update!

Vaccine Administration

General Precautions

Infection Control and Sterile Technique

Vaccine Administration Preparation and Timing (Updated)

TABLE 6-1. Dose and route of administration for selected vaccines

Vaccine	Dose	Route
DTaP/DTaP-IPV	0.5 mL	Intramuscular
DTaP/DTaP-IPV	0.5 mL	IM
DTaP/DTaP-IPV	0.5 mL	IM

Figure 1. Intramuscular needle insertion

Figure 2. Subcutaneous needle insertion

<https://www.cdc.gov/vaccines/imz/qip/qip-general-misc/administration.html>

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## Antibiotic Stewardship




<https://www.cdc.gov/antibiotic-use/core-elements/nursing-homes.html>

<https://www.ahrq.gov/hguides/index.html>

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## EPA Registered Disinfectants

<https://www.epa.gov/pesticide/registration/selected-epa-registered-disinfectants>

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## GREAT Resource!!!

<https://www.epa.gov/sites/production/files/2020-04/documents/disinfectants-onepager.pdf>



coronavirus.gov

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**Water Management Program**

**A Practical Guide to Implementing Industry Standards**

Water buildings need water management programs to reduce the risk for Legionnaires' disease, protect public health, and ensure compliance with regulatory requirements. This toolkit is designed to help you develop, implement, and maintain a water management program in your building or facility. It includes a checklist, a flowchart, and a list of resources to help you get started.

**Download the Toolkit**

Download a Free Downloadable Toolkit: A Practical Guide to Implementing Industry Standards. The toolkit is available in PDF format and can be downloaded from the CDC website. It includes a checklist, a flowchart, and a list of resources to help you get started.

<https://www.cdc.gov/legionnaires/toolkit/index.html>

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**WAIT!!!! As if we haven't had enough IPCP ....**

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**Mpox**

<https://www.cdc.gov/poovirus/mpox/mpox-infection-control-healthcare.html>

**Infection Prevention and Control of Mpox in Healthcare Settings**

On 1/20/2022, the CDC issued a guidance document for healthcare settings on the prevention and control of Mpox. This document provides information on the transmission of Mpox, the signs and symptoms of the disease, and the steps that healthcare settings should take to prevent and control the disease. The document is available in PDF format and can be downloaded from the CDC website.

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## Additional Resources

- National Healthcare Safety Network (NHSN)
- Tuberculosis
- Multidrug Resistant Organisms (MDROs)
- Occupational Safety and Health Administration (OSHA)
- US Food & Drug Administration (FDA)
- Industry Associations

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## Clinical Processes Affected by the Industry Updates

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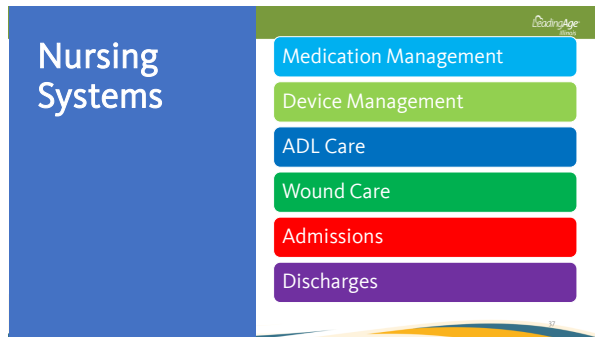
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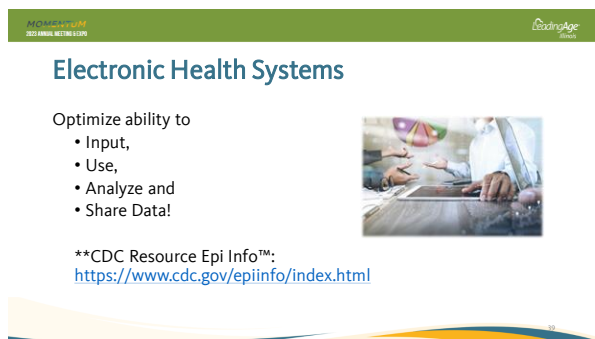
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## Leadership Strategies for Successful Implementation

And Process Surveillance of an Infection Prevention and Control Program

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## Leadership Strategies for IPCP Oversight

### 1. Review Policies and Procedures for all areas of Infection Prevention and Control (for example):

- General – Overall IPCP Policy and Procedure
- Standard and Transmission-Based Precautions
- Cleaning and Disinfecting
- Hand Hygiene
- Surveillance
- Occupational Health
- Linens and Laundry
- Dietary Considerations
- Outbreak Management
- Water Management Program
- Pest Control



- Antibiotic Stewardship
- Vaccinations
- Construction
- Tuberculosis screening
- Respiratory Protection Program
- Preadmission Assessments
- COVID-19 Related Guidance
- And much more!

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## Leadership Roles and Responsibilities

### 2. Review the Facility-Wide Resource Assessment

- Determines resources and competencies necessary to care for your unique resident population

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## Leadership Roles and Responsibilities

### 3. Review Facility Pandemic Plan

- Membership of your team
- Depict how you will coordinate with your Emergency Preparedness Plan
- Alignment with your Infection Prevention and Control Program
- Identify Risks and hazards
- Determine and identify goals and priorities
- Describe facility preparedness
- Staff, resident, resident representative and others involvement
- Response
- Recovery
- And more!

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## Leadership Roles and Responsibilities

### 4. Administer, DON, IP and Medical Director meet to discuss the Infection Prevention and Control Program and QAPI involvement

- Review of infection data
- Review of process surveillance activities
- Discuss any updates to guidance
- Discuss updates to system necessary



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## Leadership Roles and Responsibilities

### 5. Oversees IDT involvement

- Housekeeping
- Environmental Services
- Dietary
- Activities



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## Choosing an Infection Preventionist

## DON and Administrator Coordination

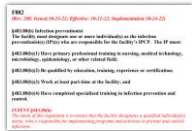
- Leadership abilities
- Independent
- Dependable
- Problem-Solver
- Ability to Multi-Task
- Trust



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## Infection Preventionist Requirements

## F882: Infection Preventionist



<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforassuredregulations/downloads/appendix-gp-state-operations-manual.pdf>

**IL Section 300.697 Infection Preventionist**



<https://www.fga.gov/commission/jca/admicode/077/077000000609908.html>

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## IL Section 300.697 Infection Preventionist

- Facility must designate IP to develop and implement policies (IPCP)
- Qualified through education, training, experience, or certification or a combination
- Qualifications must be documented
- IP shall complete or provide proof of completion of initial IPCP training – CDC or equivalent **within 30 days of accepting IP position.** Maintain documentation in employee file
- 19 hours of training in IPCP (specified topic areas), have clinical work experience in IPCP in healthcare setting
- At least one IP on-site for minimum of 20 hours/week
- Facilities with more than 100 licensed beds or that offer high-acuity services must have one IP on-site for min. of 40 hours/week (i.e., infusion therapy, etc.)
- A facility's IP shall coordinate with the facility group (IPC committee, QA committee)

<https://www.lga.gov/commission/jcar/admincode/077/077003000C06970R.html>

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## IP Education Topics - Illinois

- A. Principles of Standard Precautions
- B. Principles of Transmission-Based Precautions
- C. Prevention of Healthcare-Associated Infections
- D. Hand Hygiene
- E. Environmental Cleaning, Sterilization, Disinfection, and Asepsis
- F. Environment of Care and Water Management
- G. Employee/Occupational Health
- H. Surveillance and Epidemiological Investigations
- I. Antimicrobial Stewardship



<https://www.ilsa.gov/commissioner/particle/node/4772677363000C-08/08/08.pdf>

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## CMS F882 Infection Preventionist Education Topics

- Infection prevention and control program overview,
- The infection preventionist's role,
- Infection surveillance,
- Outbreaks,
- Principles of standard precautions (e.g., content on hand hygiene, personal protective equipment, injection safety, respiratory hygiene and cough etiquette, environmental cleaning and disinfection, and reprocessing reusable resident care equipment),
- Principles of transmission-based precautions,
- Resident care activities (e.g., use and care of indwelling urinary and central venous catheters, wound management, and point-of-care blood testing),
- Water management,
- Linen management,
- Preventing respiratory infections (e.g., influenza, pneumonia),
- Tuberculosis prevention,
- Occupational health considerations (e.g., employee vaccinations, exposure control plan, and work exclusions),
- Quality assurance and performance improvement,
- Antibiotic stewardship, and
- Care transitions

<https://www.cms.gov/media/releases/2019/sr-infection-prevention-and-certification/understanding-and-regulations-for-infection-prevention-and-certification-081819.pdf>

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## Support Strategies for the IP

1. Education
  - CDC
  - Certification or certificate programs
  - Etc.

<https://www.cdc.gov/longtermcare/training.html>

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## Education and Support on Surveillance



- Process Surveillance
- Outcome Surveillance
- Mapping Infections
- Data
  - Collecting, Analyzing, Reporting

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## Support Strategies for the IP

**2. Resourcing adequate time for:**

- Program implementation, review and revisions,
- Surveillance,
- Employee education and competency,
- Documentation,
- Reporting,
- Update management
- Preparation of QAPI reports
- QAPI and QAA involvement
- Communication with Leadership and Medical Director



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## Support Strategies for the IP

**3. Access to Resources**

- External
  - Guidance
  - Training
  - Ongoing Updates
- Internal
  - Supplies
  - Equipment
  - Authority to hold others accountable



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## Support Strategies for the IP

### 4. Input in supplies and equipment

- Personal Protective Equipment (PPE)
- Cleaning and Disinfectant Supplies
- Resident Care Equipment



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## Support Strategies for the IP

### 5. Support

- Expectations during staffing challenges
- Time devoted to IPCP activities
- Involvement in outside opportunities to advance knowledge
- Communication essentials
- Assistance with communication and reporting
  - NHSN
  - Public Health
  - Etc.

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## COVID-19

### Clinical Considerations:

- Increasing knowledge for all staff on COVID-19, variant(s) Infection Prevention and Control
- Respiratory Services
- Vaccination
- Respiration Protection Program
- Technology and Telehealth



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## For COVID-19—We're Not Done Yet!

- Continue to keep the fire burning!
- COVID-19 Core Principles:
  - Screening
  - Hand Hygiene
  - Source Control
  - Signage
  - Cleaning and Disinfection
  - Appropriate PPE use
  - Proper cohorting
  - Resident and Staff Testing



<https://www.cms.gov/files/document/gsc-20-39-rh-revised.pdf>

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## Process Surveillance and Follow-up



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## Audit Examples

- Hand Hygiene Audits
- Food Preparation Audits
- Personal Protective Equipment Audits
- Water Pass Audits
- Med Pass Audits
- Catheter Care Audits
- Peri-Care Audits
- Room Sanitization Audits
- Environmental Audits
- Dining Room Audits
- Linen Handling Audits

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## Follow-up

### F868 Quality Assessment and Assurance

- “§483.80(c) Infection Preventionist participation on quality assessment and assurance committee. The individual designated as the IP, or at least one of the individuals if there is more than one IP, must be a member of the facility's quality assessment and assurance committee and report to the committee on the IPCP on a regular basis.”
- “Regular basis”: for the purpose of the infection preventionist reporting requirement, reporting should occur at the same frequency as the QAA committee meetings.”

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- Guidance Updates are Essential!
- The Basic Principles of IPCP are instrumental in the success of the program
- Ongoing Surveillance and Data Management for Quality Improvement
- Educated and Well-Prepared Oversight of the Program!

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## Summary



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## Questions?



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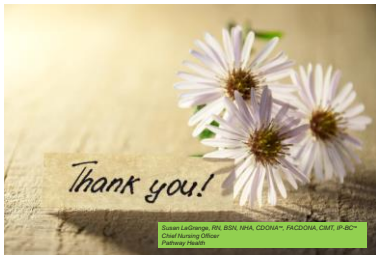
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## References and Resources

- Centers for Medicare & Medicaid Services State Operations Manual, Appendix PP – Guidance to Surveyors for Long Term Care Facilities (Rev. 2018, 10-21-22): <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>
- Centers for Medicare & Medicaid Services, LTC Survey Pathways (Downloads) Infection Prevention, Control & Immunizations, CMS-20062 "Sufficient and Competent Nurse Staffing Review" <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes.html>

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## References and Resources

- Centers for Medicare & Medicaid Services. LTC Survey Pathways (Downloads) CMS-20054 Infection Prevention, Control & Immunizations. <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes.html>
- Centers for Disease Control and Prevention. Implementation of Personal Protective Equipment in Nursing Homes to Prevent Spread of Novel or Targeted Multidrug-resistant Organisms (MDROs). Updated: July 12, 2022. <https://www.cdc.gov/hai/pdfs/containment/PPE-Nursing-Homes-H.pdf>



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## References and Resources

- Centers for Disease Control and Prevention. Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic. Updated Sept. 23, 2022: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>
- Centers for Disease Control and Prevention. Strategies to Mitigate Healthcare Personnel Staffing Shortages. Updated Sept. 23, 2022: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html>
- Centers for Disease Control and Prevention. Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2. Updated Sept. 23, 2022: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html>



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