

HQIC Office Hours – Infection Prevention Chats

Welcome!

- All lines are muted, so please ask your questions in Q&A
- Please actively participate in polling questions that pop up on the lower right-hand side of your screen

We will get started shortly.

HQIC Office Hours – Infection Prevention Chats



Presented by:

Amy Ward, Patient Safety Manager for Alliant Health Solutions

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Making Health Care Better *Together*

COLLABORATORS:

Alabama Hospital Association
Alliant Health Solutions
Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza

Hospital Quality Improvement

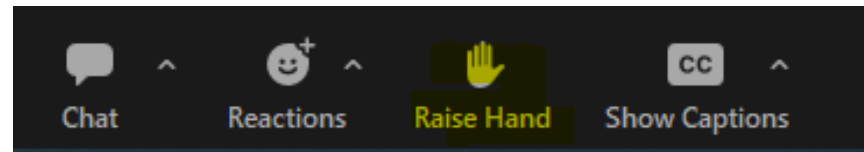
Welcome from all of us!



Format for IP Chats

- Open forum networking events to:
 - Build knowledge
 - Share experience
 - Provide IP support

- To come off mute, please use the “Raise Hand” feature.



Amy Ward, MS, BSN, RN, CIC, FAPIC

**Patient Safety Manager,
Alliant Health Solutions**

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678-527-3653**



Hello, My Name Is...

- Drop into the chat box:
 - Name
 - State
 - Years in IP



HQIC Data Shows Outstanding Achievements

Measure ▲	RIR Goal Month 42	RIR Achieved
CDC_CAUTI_ICU_I	9.00%	44.49%
CDC_CAUTI_ICU_P	9.00%	34.80%
CDC_CLABSI_ICU_I	9.00%	53.97%
CDC_CLABSI_ICU_P	9.00%	35.95%
CDIFF_SIR	9.00%	21.44%
MRSA_SIR	9.00%	32.96%

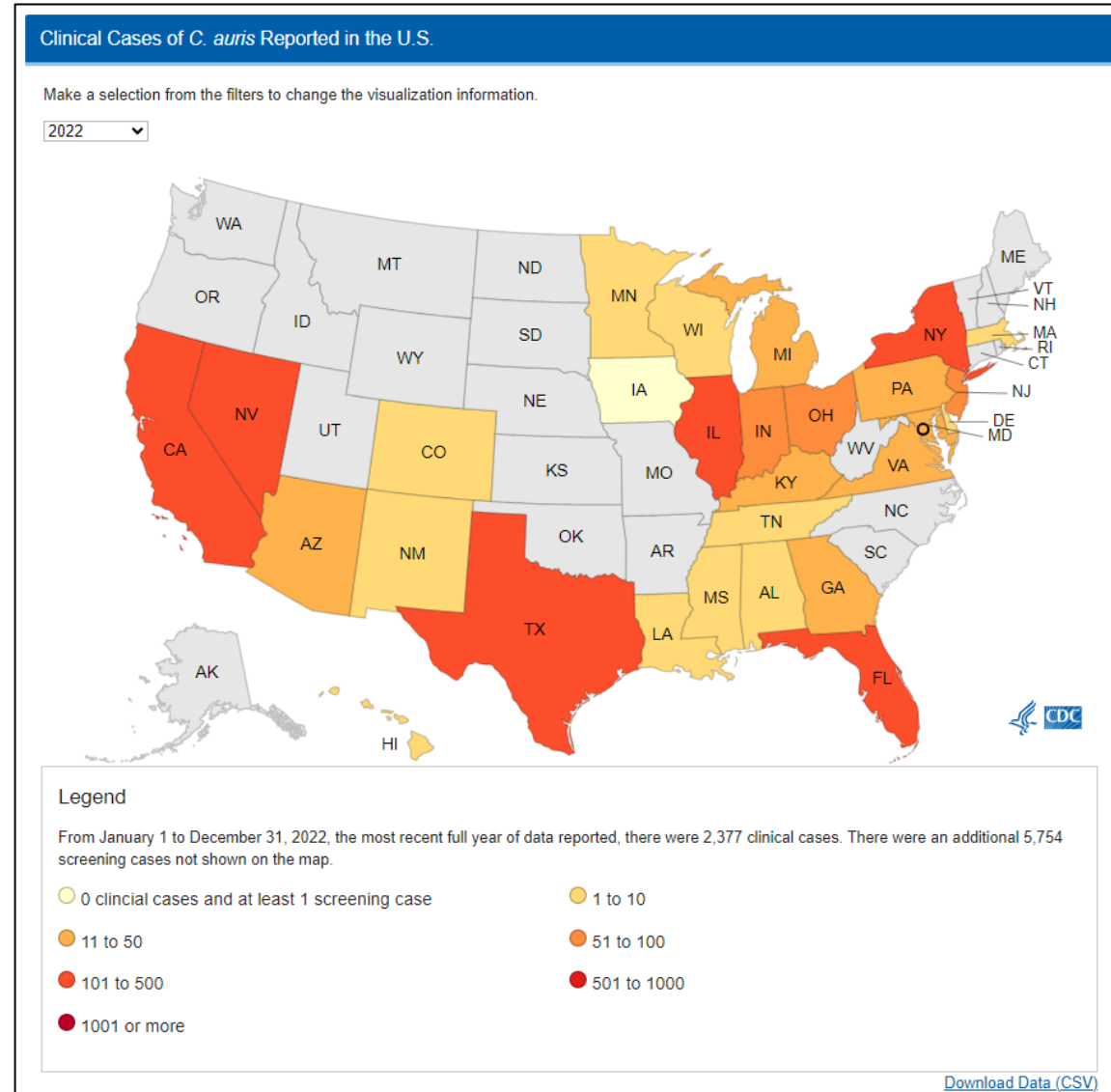
Measure ▲	RIR Goal Month 42	RIR Achieved
CDIFF_RATE	9.00%	31.77%
MRSA_RATE	9.00%	35.52%
OPIOID_DOSE_DC	12.00%	20.75%
READM_30D_HW	5.00%	6.49%

Measure □	RIR Goal Month 42	RIR Achieved
ADE_ANTICOAG	13.00%	24.78%
ADE_HYPOGLYCEMIA	13.00%	-14.18%
ADE_OPIOID_RATE	7.00%	5.06%
PU_STAGE3	9.00%	24.34%
SEPSIS_MORT_2	9.00%	20.92%
SEPSIS_SHOCK	9.00%	7.81%

Monitoring Measures reported as Percentage	
Measure ▲	RIR Achieved
CDC_CAUTI_UR	16.01%
CDC_CLABSI_UR	13.33%

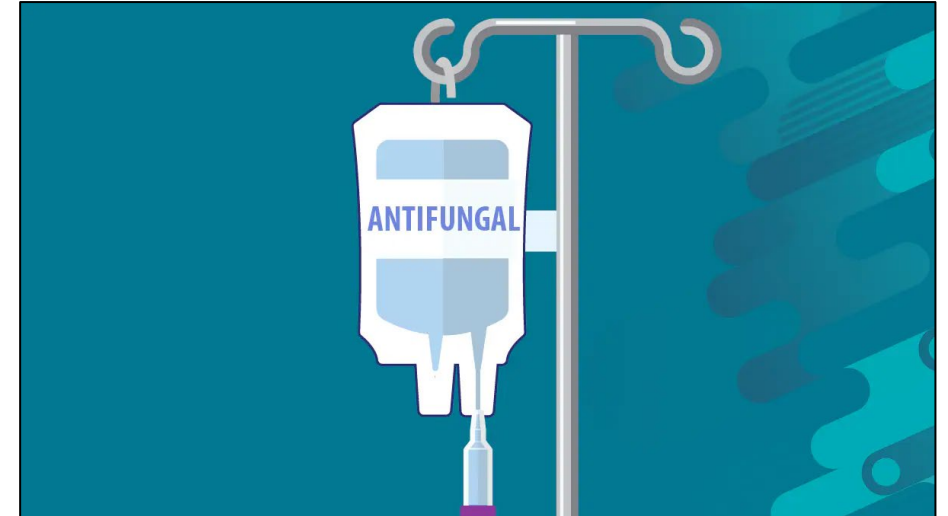


Candida auris National Surveillance

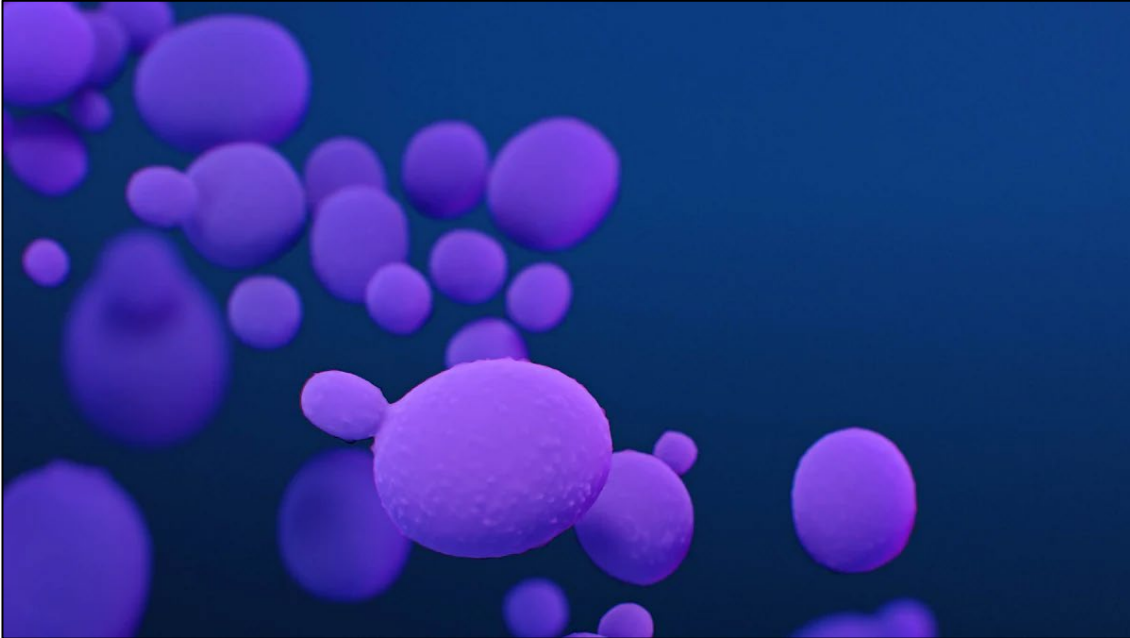


Why is *C. auris* concerning?

- Difficult to treat
- Survives on surfaces and objects for long periods
- High mortality rate for invasive infections
- Hard to identify in laboratories
- Spreads easily in healthcare settings



IP Surveillance and Response



- Planning and Programming
 - [CDC MDRO Control Assessment Tool](#)
- Early detection is critical to controlling spread
 - Coordinate with lab to develop protocols for:
 - Screening of high-risk patients
 - [CDC Screening Recommendations](#)
 - Speciation of Candida isolates
- If a new case is identified:
 - Report to the health department
 - Provide training for staff and patients
 - Implement precautions
 - Review patient placement (private room)
 - Audit practices
 - Hand hygiene compliance
 - [Isolation- Observation of Area Exterior to Contact Isolation Rooms \(cdc.gov\)](#)

[Screening Recommendations for Healthcare Facilities | Candida auris \(C. auris\) | CDC](#)

Risk Factors and Symptoms

Risk Factors

- Invasive medical devices
 - Mechanical ventilation
 - Indwelling medical devices
- Antibiotic overuse
- Chronic or severe illness
- Complex or high-acuity healthcare
- Frequent or long-term healthcare exposure
- Colonization with other multidrug-resistant organisms

Symptoms

- Colonization - asymptomatic
- Infection
 - Fever
 - Chills
 - Dependent on the site of infection
 - May be similar to bacterial infection

[About C. auris](#) | [Candida auris \(C. auris\)](#) | [CDC](#)

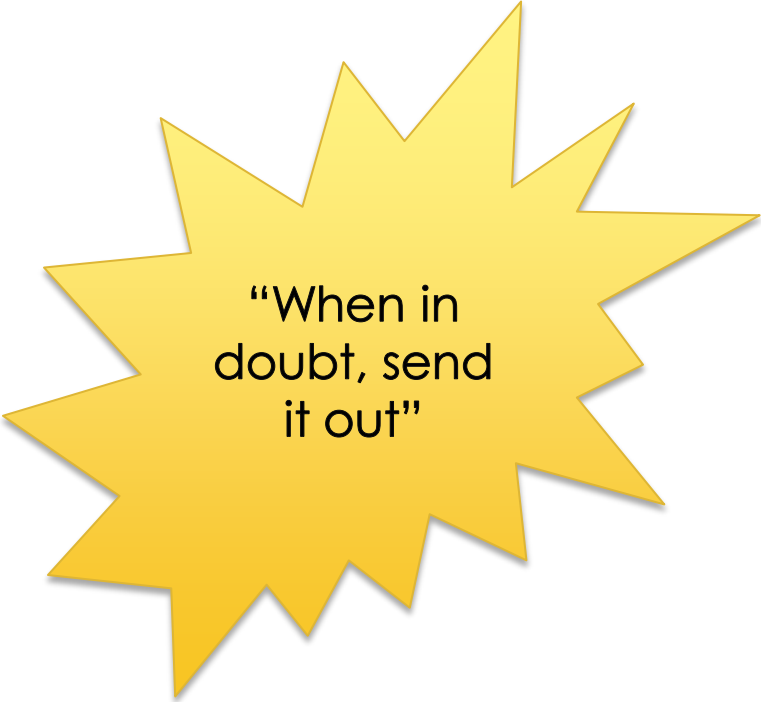
C. auris Prevention

In general, facilities that are equipped to care for residents or patients with other multi-drug resistant organisms and *C. difficile* can safely care for patients with *C. auris*.

- Hand hygiene per [CDC guidelines](#)
- Precautions
 - Utilize precautions appropriate to the care setting and clinical situation
 - Standard Precautions
 - Enhanced Barrier Precautions
 - Transmission Based Precautions
- Cleaning and disinfection
 - Dedicated equipment
 - Routine cleaning and disinfection utilizing disinfectants from [EPA List P](#)
- Communication with receiving facilities and transport personnel
 - Utilize the [interfacility transfer form](#) to ensure critical infection-related information is communicated during transitions of care

Reporting Requirements

- Report new cases to state and local health departments
 - May be included in state notifiable disease lists as a distinct reportable condition
 - If your state has not updated the notifiable disease lists to include *C. auris*, report it as a case of “extraordinary occurrence”
 - *C. auris* is a nationally notifiable condition
 - State health departments will report new cases to CDC
- Laboratories should report any suspected and confirmed cases immediately to the infection prevention department



“When in doubt, send it out”
































CMS Quality Reporting Program Deadline

- August 15: Deadline for CMS IQR data for Q1 2024 (January – March)
- [NHSN Monthly Checklist for Reporting to CMS Hospital IQR \(cdc.gov\)](https://www.cdc.gov/nhsn/monthly-checklist-for-reporting-to-cms-hospital-iqr)
- Device Associated
 - CAUTI – ICUs and adult/pediatric medical, surgical, and medical/surgical wards
 - CLABSI – ICUs and adult/pediatric medical, surgical, and medical/surgical wards
- Lab ID
 - MRSA Blood Lab ID - FacWideIn and ED/Obs locations
 - C. diff Lab ID - FacWideIn and ED/Obs locations
- Procedure Associated
 - HYST inpatient
 - COLO inpatient
- Healthcare Personnel Safety
 - COVID-19 vaccination for healthcare workers (1 week per month for reporting period)



Alliant Infection Prevention Resources

- [Alliant HQIC Infection Prevention Website](#)
 - Topic-specific resources including:
 - Practice guidelines
 - Toolkits
 - Flyers and infographics
 - Observation and audit tools
 - Training and orientation checklists
- [Alliant HQIC IP Chats](#)
 - Short videos for frequently asked questions about NHSN access and reporting

<p>Catheter Associated Urinary Tract Infection (CAUTI)</p> <p>CAUTI Gap Assessment Tool </p> <p>Urinary Catheter Quick Observation Tool </p> <p>CDC-HICPAC Guideline for Prevention of CAUTI 2009 </p> <p>AHRQ Toolkit for Reducing CAUTI in Hospitals </p> <p>SHOW MORE</p>	<p>Central Line Associated Blood Stream Infection (CLABSI)</p> <p>HQIC Fishbone Diagram – CLABSI and MRSA </p> <p>CLABSI Gap Assessment Tool </p> <p>Central Line Quick Observation Tool </p> <p>CDC-HICPAC Guidelines for Prevention of Intravascular Catheter-Related Infections, 2011 </p> <p>SHOW MORE</p>	<p>Clostridioides Difficile Infection (C. difficile)</p> <p>HQIC C. diff Process Discovery Tool </p> <p>Transmission Based Precautions Quick Observation Tool </p> <p>The Progression of a C. Diff Infection </p> <p>CDC Strategies to Prevent C. diff in Acute Care Facilities </p> <p>SHOW MORE</p>
<p>Sepsis</p> <p>Hospital Sepsis Program Core Elements </p> <p>HQIC Sepsis Gap Assessment and Action Steps </p> <p>HQIC Sepsis: Spot the Signs Magnet </p> <p>HQIC Sepsis Provider Engagement </p> <p>SHOW MORE</p>	<p>Antibiotic Stewardship</p> <p>Actionable Patient Safety Solutions Antimicrobial Stewardship </p> <p>Assessment of the Appropriateness of Antimicrobial Use in US Hospitals </p> <p>Antibiotic Stewardship Core Elements at Small and Critical Access Hospitals </p> <p>5 Tips to Improve Antibiotic Stewardship in Your Emergency Department </p> <p>SHOW MORE</p>	<p>COVID-19/Other</p> <p>COVID-19 Self Management Zone Tool </p> <p>HQIC Inter-Facility Infection Control Transfer Form </p>
<p>Methicillin-resistant Staphylococcus aureus (MRSA)</p> <p>FAQ's about MRSA </p> <p>CDC MRSA Prevention Guidelines </p> <p>AHRQ Universal Decolonization Protocol </p>	<p>NHSN Resources</p> <p>IP NHSN Training Checklist </p> <p>NHSN Survival Guide </p>	<p>IP Training</p> <p>CDC Project Firstline </p> <p>Association for Professionals in Infection Control and Epidemiology (APIC) Education and Events </p> <p>CDC/STRIVE Infection Control Training </p> <p>CMS Quality, Safety & Education Portal </p> <p>SHOW MORE</p>

Questions?



Email us at HospitalQuality@allianthealth.org

or call us 678-527-3681.

HQIC Goals



BEHAVIORAL HEALTH OUTCOMES & OPIOID MISUSE

- Promote opioid best practices
- Decrease high dose opioid prescribing and opioid adverse events in all settings
- Increase access to behavioral health services



PATIENT SAFETY

- Reduce risky medication combinations
- Reduce adverse drug events
- Reduce *C. diff* in all settings



QUALITY OF CARE TRANSITIONS

- Convene community coalitions
- Identify and promote optical care for super utilizers
- Reduce community-based adverse drug events

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Comagine Health
Georgia Hospital Association
KFMC Health Improvement Partners
Konza

Hospital Quality Improvement



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Thank you for joining us!
How did we do today?

Alliant Health Solutions



AlliantQIO



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