

# Infection Prevention and Control from a Regulatory Perspective

**APIC-DFW** 

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### **Objectives**

- Regulatory and Survey Landscape
- Review of most challenging standards for hospitals and The Joint Commission
- Collaborating with Infection Prevention
- Review and discuss CMS and Joint Commission key focuses
  - Hot Buttons
  - Trending Now
- Practical Tips

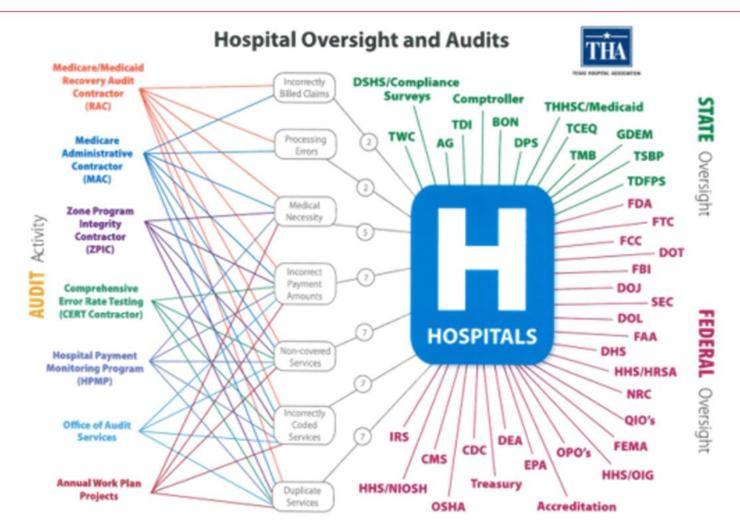


## Those people...

https://www.youtube.com/watch?v=S0wEfdhbHUk



## How can we comply and connect to outcomes?





#### **The Joint Commission**

## Top Standards Compliance Data First Half of 2017 HOSPITALS

86%	LS.02.01.35	The hospital provides and maintains systems for extinguishing fires.
74%	LS.02.01.30	The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke.
73%	EC.02.05.01	The hospital manages risks associated with its utility systems.
70%	IC.02.02.01	The hospital reduces the risk of infections associated with medical equipment, devices, and supplies.
68%	EC.02.06.01	The hospital establishes and maintains a safe, functional environment.
66%	LS.02.01.10	Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat.
62%	EC.02.02.01	The hospital manages risks related to hazardous materials and waste.
60%	LS.02.01.20	The hospital maintains the integrity of the means of egress.



## **Transcending Interpretation**

- Standards and regulations are written to interpretation
- The Joint Commission
  - Elements of Performance is the <u>how</u>
- Centers for Medicare & Medicaid (CMS)
  - Interpretive Guidelines is the <u>what</u>
- Frequently Asked Questions (FAQs) serve as a guide for implementation



## **Applying Practicality**

- Risk Assessment/Gap Analysis
- Proactive Risk Assessments
  - Proposed standards or COPs
  - Non-compliant trends
- Patient and Process Tracers
  - Conversational approach NOT driven by standards
- Integration with existing processes
  - Constant rounding
  - Safety walkthroughs
  - Etc...









## **CMS and Joint Commission Infection Control Focus Areas**

The Joint Commission's **Survey Analysis for Evaluating Risk** (SAFER™) Matrix™ Patient/Staff/Visitor HIGH **MODERATE** Harm a Likelihood to **LOW** 

Immediate Threat to Life (a threat that represents immediate risk or may potentially have serious adverse effects on the health of the patient, resident, or individual served)				
LIMITED	PATTERN	WIDESPREAD		

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## **High Level Disinfection (HLD)**

- How do you determine who's performing HLD in your hospital?
  - Supply chain orders
  - Service lines include: Anesthesia, GI, ENT, etc.
- Point of use cleaning
- Standardization of HLD processes
- Transporting of dirty scopes
- Monitoring of processes
- Documentation
- IFUs

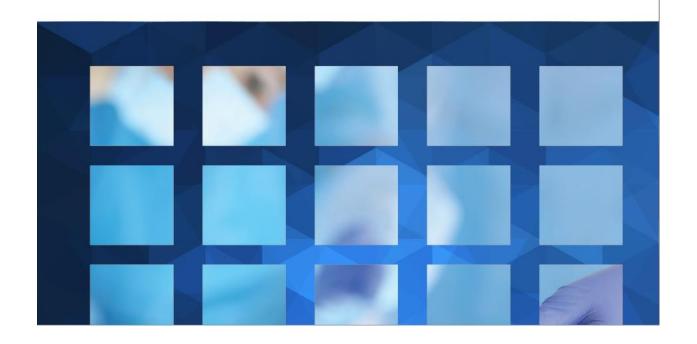


#### **Sterilization**

- How do you determine who's sterilizing instruments in your hospital?
  - Supply chain orders
  - Departments include: OR, Emergency Room, Ambulatory Clinics, etc.
- Sterilized instruments versus one-time-use
- Storage of instruments
  - Peel packs
  - Compromised packaging
- Use of enzymatic spray at point of use
- Transporting of dirty instruments
- Sterilization processes in SPD
- Immediate Use Steam Sterilization (IUSS)



#### High-Level Disinfection (HLD) and Sterilization BoosterPak





## **Onboarding Education and Competencies**

- New staff that perform these tasks must be educated
- Your organization must determine the frequency of the comps
- Encourage IPC team to review education and comps
- All HLD and sterilization findings during survey is under Infection Control



## **Operating Rooms**

- Appropriate Use of Surgical Attire
  - Bonnets, masks, gloves worn in designated areas
  - Use of skull caps
- Dangling hair, beards/mustaches
- Earrings in nares or large earrings in ears
- Hand hygiene
- Air Flow
  - Critical versus non-critical areas
- Bronchoscopies performed in positive pressure rooms



## **Inpatient and Ambulatory Areas**

- Appropriate use of PPE
- Hand hygiene
- Documentation of isolation precautions
- Understanding of contact wet time of cleaning products used
- Staff's ability to speak to IPC processes



#### **Kitchens**

- Hand washing techniques
- Use of gloves
- Expired Foods
- Temperatures of cold and hot foods
  - (refrigerator logs)
- Storage of wet dishes, pots/pans
- Dishwasher temperature logs
  - Processes for out of range temps or issues



#### **Construction and Renovation**

- Appropriate barricades/barriers
  - Dust control
- Particle counts are being completed
- Water cultures, when applicable





## **Practical Tips for IPC Professional**

## **Tips**

- Encourage IPC team members to be a part of the Environment of Care team
- Create a baseline
  - Scoring your compliance with the top vulnerabilities
- Collaborate with Accreditation and others within your organization
- Trace Trace Trace



## A Little Humor Before I go....

