Core Infection Prevention Practices

Last Updated 2019
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 $\rightarrow$ patient
  - Patient $\rightarrow$ HCP
  - Patient $\rightarrow$ 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

(https://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
(https://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 HAIs continue to occur in hospitals
- Even if you have implemented evidence-based recommendations, start monitoring infection prevention care practices to assess if adherence is consistent
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*Will be covered in more detail in separate lectures

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Summary

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

You 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 any HAI Program Liaison IP Team member

Or email

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