

# INFECTION CONTROL

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# Conflict of Interest Disclosures

## Speaker:

1. I do not have any potential conflicts of interest to disclose, **OR**

2. I wish to disclose the following potential conflicts of interest

Type of Potential Conflict	Details of Potential Conflict
Grant/Research Support	
Consultant	
Speakers' Bureaus	
Financial support	
Other	

3. The material presented in this lecture has no relationship with any of these potential conflicts, **OR**

4. This talk presents material that is related to one or more of these potential conflicts, and the following objective references are provided as support for this lecture:

- 1.
- 2.
- 3.

# Objectives

- Practice Universal Precautions
- Define equipment and reusable sensor disinfection

# Question 1

According to the Centers for Disease Control (CDC), an infection control system that assumes any direct contact with a patient requires the implementation of

- A. Use of high level disinfection
- B. Universal precautions
- C. Immunization programs
- D. Health and Safety Education

Universal precautions

# Required Skills

- Apply universal precautions
- Use personal protection methods
- Know what to do if exposed
- Encourage others to use universal precautions

# Four Ways to Prevent HAI

1. Maintain cleanliness of the hospital
2. Personal attention to handwashing before and after every contact with a patient or object
3. Use personal protective equipment whenever indicated
4. Use and dispose of sharps safely

# UNIVERSAL PRECAUTIONS

- Universal precautions are infection control guidelines designed to protect workers from exposure to diseases spread by blood and body fluids
- Always treat blood, body fluids, broken skin and mucous membranes as if they were infected
- Always follow Universal Precautions because you cannot tell by looking at a person whether they have a contagious disease

# UNIVERSAL PRECAUTIONS

- Use practical, common sense
- Wash your hands before putting on gloves and immediately after removing gloves
- Do not touch clean objects with contaminated gloves



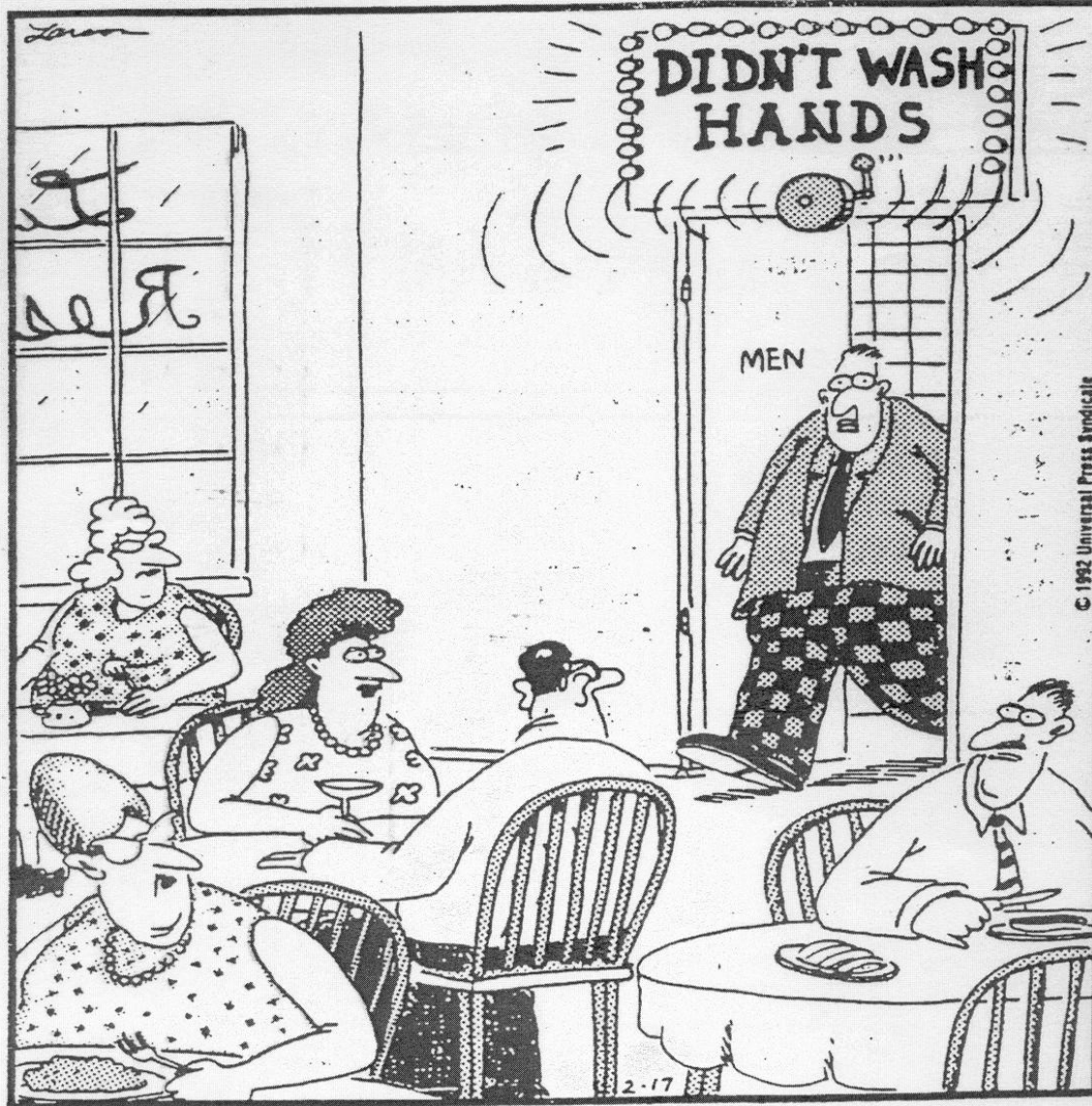
# UNIVERSAL PRECAUTIONS

- Wear gloves if you may come in contact with blood, body fluids, secretions and excretions, broken or open skin, human tissue of mucous membranes
- Bag all disposable contaminated supplies
- Clean all surfaces that may be contaminated with infectious waste, such as beds, wheelchairs and shower chairs

# WHEN NOT TO USE ALCOHOL HAND GELS

- When hands are visibly soiled
- Before eating
- After using the restroom
- When caring for patients with C. Difficile

THE FAR SIDE



# Hand Washing Audit Tool

Health Care Worker Type										
Hands were washed or cleansed:										
When entering/exiting any room	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO	YES / NO
Before/after invasive procedure, i.e.: IV, foley catheter, or dressing change	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA	YES / NO NA



# Employee Files

## Employee-Related Risks

Screening for immunity to communicable diseases

Staff understanding of disease transmission and prevention

Degree of compliance with infection control practices, including hand hygiene

Inadequate screening for transmission of communicable diseases

Practice accountability issues

Sharps injuries

Bloodborne pathogen exposures

Influenza vaccination

Mask fit testing



# Personal Protective Equipment

- Gloves, aprons, gowns, eye protection, and face masks
- Health care workers should wear a face mask, eye protection and a gown if there is the potential for contamination from blood or other bodily fluids

# Safe Use and Disposal of Sharps

- Keep handling to a minimum
- Do not recap needles; bend or break after use
- Discard each needle into a sharps container at the point of use
- Do not overload a bin if it is full
- Do not leave a sharp bin in the reach of children

# Required Performance

All Staff need to:

- apply universal precautions
- be immunized against Hepatitis B
- use personal protection methods
- know what to do if exposed
- encourage others to use universal precautions



# HAND HYGIENE VIDEO

- Training videos on hand hygiene:

<http://www.cdc.gov/CDCTV/HandsTogether/>

**Application of learning** – employee return demonstration



**“The patient in the next bed is highly infectious. Thank God for these curtains.”**

# TJC IC Standards

- The organization plans infection prevention and control activities, including surveillance, to minimize, reduce, or eliminate the risk of infection
- Everyone who works in the organization has responsibilities for preventing and controlling infection

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# Question 2

What is **NOT** true about the flu vaccine?

- A) Most healthy adults may be able to infect others beginning 1 day before symptoms develop and up to 5 to 7 days after becoming sick
- B) Flu vaccines cannot cause the flu
- C) Flu vaccines will protect you for 2 years.
- D) You can get the flu from patients and coworkers who are sick with the flu.

Flu vaccines will protect you for 2 years.



# Infection Control Policy

All reusable electrodes, clinical equipment, and PAP equipment must be

- Thoroughly cleaned
- Disinfected after each use in a manner consistent with **manufacturer recommendations**, infection control guidelines, and OSHA standards

# Policy continued

- Disposable electrodes, single-use sensors and items are discarded after use
- Reusable equipment, PAP interfaces and other PAP equipment is cleaned and disinfected after every patient use
- The technical staff is responsible for keeping all equipment, patient areas and technical areas clean



# Disinfection and Sterilization Guides

- Follow recommendations for
  - High level thermal disinfection
  - High level chemical disinfection
  - Sterilization
  - **Validating number of cycles**

# TJC & Use of High Level Disinfectants

The organization implements infection prevention and control activities when:

- *sterilizing medical equipment, devices and supplies*

*High level disinfection must be used for respiratory equipment (CPAP therapy)*

# Precautionary Measures Lacking for High Level Disinfectants

## 2011 Health and Safety Practices Survey of Healthcare Workers

- 17% never received training on safe handling of HLD
- 19% reported that safe handling procedures were unavailable
- 44% did not always wear water-resistant gown or outer garment
- 9% did not always wear protective gloves
- 'Exposure was minimal' was the most frequently reported reason for not wearing PPE
- 12% reported skin contact with HLD during the past week
- Workers reporting skin contact were 4 times more likely to report not always wearing protective gloves

<http://www.cdc.gov/niosh/updates/upd-01-14-15.html>

# Disposables

- EEG electrodes
- Snap electrodes
- CPAP masks
  - tubing/chambers



## **ASET Guideline 2015**

- Skin Safety During EEG Procedures – A Guideline to Improving Outcome

[https://www.aset.org/files/public/Skin\\_Safety\\_During\\_EEG\\_Procedures.pdf](https://www.aset.org/files/public/Skin_Safety_During_EEG_Procedures.pdf)

# Set up trays



- Use squeeze tubes not tubs
- Set up cart for single patient use only
- Label container to identify product

# Patient Care Areas



# Patient Care Areas



# Patient Care Areas





# Patient Care Areas



# Question 3

Clean linen can be stored in a patient room as long as it is wrapped in plastic protection wrap and stored in a cabinet

A. True

B. False

False

# Patient Care Areas

- Linens
- Storage Rooms
  - Clean and Dirty
  - Cardboard Boxes
  - Vinyl Mats on Wire Shelves



# Sleep Lab - Patient Area Cleaning Audit Tool

(Fax completed tool to Infection Control)

Contact Items	Pass	Fail	Corrected / Re-inspected
1. Patient Bed			
2. Bedside Table			
4. TV Control			
5. Bedside Lamp			
6. Headboard			
7. Walls and Doors			
General Items			
8. Hi/Lo dusting (Vents, Lights, etc)			
9. Floor Care (Dust/Damp Mop/Vacuum)			
10. Trash Receptacles			
11. Chairs			
12. Closet			
13. Counters and Sinks			
14. TV Set			
Restroom			
15. Toilet			
16. Sink			
18. Mirror			
19. Dispensers (Soap, Paper)			
20. Hand/Towel Rails			
21. Trash Receptacles			
22. Vents/Walls			
23. Floors			
TOTAL			
SCORE			



# References

- World Health Organization. (2010). WHO Patient Safety Curriculum Guide for Medical Schools.
- World Health Organization. (2010). Topic 1: What is patient safety?
- CDC, Influenza  
<http://www.cdc.gov/flu/professionals/infectioncontrol/>
- Emanuel, L., Berwick, D., Conway, J., Combes, J., Hatlie, M., Leape, L., Reason, J., Schyve, P., Vincent, C., & Walton, M. (2008). What exactly is patient safety? *Advances in Patient Safety*, Vol. 1: Assessment. Retrieved from  
[http://www.ncbi.nlm.nih.gov/bookshelf/br.fcgi?book=aps2v1&part=advances-emanuel-berwick\\_110](http://www.ncbi.nlm.nih.gov/bookshelf/br.fcgi?book=aps2v1&part=advances-emanuel-berwick_110)
- Burke, J. P. (2003). Infection control – A problem for patient safety. *The New England Journal of Medicine*, 348, p. 651-656.

# AAST Resources

- AAST Infection Control Policy.  
<https://go.aastweb.org/store/search.aspx?searchterm=infection+control>
- AAST Maintenance and Cleaning Core Competency  
<http://cdn2.hubspot.net/hubfs/488356/PDFs/MaintenanceCleaning.pdf?t=1456421417867>

And that is the down and dirty!  
Questions?

