

**INFECTION PREVENTION PLAN  
POLICIES AND PROCEDURE MANUAL-  
BHIP ADDENDUM TO SYSTEM IP PLAN**

<b>POLICY #:</b>		
<b>SUBJECT:</b>	Broward Health Imperial Point Infection Prevention Program (BHIP) Addendum	<b>Addendum Effective: 2/2023 BHIP IP PLAN: 2/2023</b>
<b>PURPOSE:</b>	Broward Health Imperial Point (BHIP) has developed and implemented an effective Infection Prevention Program for the surveillance, prevention and control of infection.	<b>BHIP IP PLAN DATE REVIEWED: 2/22/2023.</b>
<b>SPONSOR:</b>	Infection Prevention	<b>BHIP IP PLAN REVISED: 2/2023</b>
<b>APPROVED BY:</b>	<p>_____</p> <p><b>Chairman, Infection Prevention Committee</b></p> <p>_____</p> <p><b>Chief Executive Officer, BHIP</b></p> <p>_____</p> <p><b>Chief Nursing Officer, BHIP</b></p>	<b>ADDENDUM APPROVED FOR USE AT BHIP</b>

**PURPOSE:**

The Infection Prevention Plan is a system-wide interdisciplinary team approach that uses evidence-based guidelines and methodologies to identify, reduce, prevent, and control healthcare associated infections. A risk assessment is completed at least annually to identify priorities that will mitigate the acquisition and transmission of infections and communicable diseases among patients and staff.

The Infection Prevention plan is an integral part of the quality and patient safety program and contributes to the organizational effectiveness through its commitment to improve outcomes and processes associated with the delivery of healthcare.

This is the BHIP specific addendum to the plan.

**SCOPE:**

This applies to Broward Health Imperial Point healthcare workers (employees, medical staff, allied healthcare practitioners, students, and volunteers), contractors, patients, and visitors.

**POLICY:**

The infection prevention plan includes but is not limited to:

- Define activities to minimize, reduce or eliminate the risks of infection based upon the needs of the population.
- Establish the Infection Prevention plan and evaluate effectiveness annually.
- Report to external organizations as required by law.
- Investigate outbreaks, institute control measures and report to leadership.

**PROGRAM ADMINISTRATION:**

The Infection Prevention program is under the guidance of the Broward Health Leadership. The responsibility for monitoring the Infection Prevention program is vested in the System Infection Prevention Committee (IPC), through its Chairperson, members and Infection Prevention Director.

**INFECTION PREVENTION COMMITTEE – (IPC):**

The IPC functions as the central decision and policy making for the Infection Prevention program. It provides support, guidance and oversight for relevant activities including limiting unprotected exposure to pathogens throughout the organization by using standard precautions, enhancing hand hygiene, and minimizing the risk of transmitting infections associated with procedures, the use and reprocessing of medical equipment, and devices. IPC reviews surveillance data and makes recommendations, reviews and approves policies and procedures related to infection prevention, approves the annual surveillance plan and forwards to leadership for final approval. The IPC meets regularly and as needed according to the organization's bylaws. A summary of the committee meeting with recommended actions (minutes) is forwarded to Leadership and/or appropriate committee for review and approval.

**POPULATION SERVED:***Patient Population Served:*

All age categories from infants to geriatric with the vast majority of the patients in the adult and geriatric age groups.

- Patients' Health statuses ranging from healthy (self-care) to critically ill. A full range of dependence on health resources including specialized services (i.e., cancer care, ophthalmology, bariatrics, etc.).
- Local, national and international patients from private residences, acute care facilities, nursing homes, extended care, rehabilitation, progressive care, and correction facilities.

Care is provided regardless of socioeconomic backgrounds, ability to pay, education level or cultural background.

BHIP offers a wide range of emergency, inpatient and outpatient services. Admitted patients have demographics which may influence their risk for infections, such as Tuberculosis, HIV, Hepatitis, Sexually transmitted infections; vector-borne infections, Multi Drug Resistant Organisms (MDRO's) and emerging pathogens.

**GOALS:**

The goal of the Infection Prevention program is to reduce the risk of acquiring and transmitting health care associated infections. Families, patients, and visitors are encouraged to participate in the infection prevention program, including cough etiquette, hand hygiene, and prevention of surgical site infections. Priorities and goals are based on the result of a comprehensive risk assessment, annual appraisal of the program, results of surveillance and monitoring activities. Priorities and goals are based on the probability of a condition occurring, risk (health, financial, legal, and regulatory), and organization preparedness which is reviewed at least annually.

**OBJECTIVES:**

The objectives of the Infection Prevention program include but are not limited to the following:

- Identify and prioritize infection risk and develop strategies to prevent transmission of infection.
- Establish surveillance activities, monitor technique and practices, and provide recommendations based on the analysis of data and nationally approved standards.
- Communicate pertinent infection control performance improvement findings, identified problems and recommendations to the appropriate department, individuals, and committees.
- Minimize risk of transmission of infections associated with the use of equipment and medical devices.
- Review sterilization and disinfection practices, monitoring, and documentation.
- Limit unprotected exposure to pathogens throughout the facilities.
- Promote/monitor hand hygiene.
- Assist the Employee Health program and Workers Compensation Program, as needed.
- Provide infection prevention education to health care workers and including patients, families and visitors, as needed.
- Comply with all infection prevention regulatory agencies requirements.
- Monitor and report communicable diseases to the local Florida Department of Health.
- Provide Infection Prevention consultation during demolition, construction, and renovation projects.
- Collaborate with the Environment of Care Committee.
- Formulate and update Infection Prevention policies and procedures.

- Participate in the Antimicrobial Stewardship Program.

## **SURVEILLANCE AND MONITORING ACTIVITIES:**

Monitoring activities are based on regulatory requirements.

Surveillance Definitions – National Healthcare Safety Network (NHSN) case definitions are used to ensure accurate and consistent statistics. These definitions are published annually and include surgical site infections, blood stream infections, central line associated blood stream infections, catheter associated urinary tract infections, and ventilator associated events.

### **1. Surgical Site Infections (SSI's)**

Focused Surgical Site Infection surveillance is performed based upon the goals of the facility.

### **2. Device Associated Infections – (Outcomes and Processes)**

Device associated infections are monitored monthly, as appropriate.

- Central Line Associated Blood Stream Infections (CLABSI)
- Catheter Associated Urinary Tract Infections (CAUTI)

### **3. Laboratory-based Surveillance - (community acquired/hospital acquired)**

Monthly surveillance based upon NHSN requirements will include Methicillin-Resistant Staphylococcus aureus Bacteremia (MRSA) and Clostridiosis difficile, as appropriate

### **4. Target Surveillance**

Target Surveillance is based upon the facilities goals and may include:

- Surgical Outcomes
- Employee Infections/Exposures
- Multi-Drug Resistant Organisms (MDROs)

### **5. Outbreak Investigation**

An investigation will be conducted whenever an outbreak is suspected. Outbreaks are investigated following a systematic approach. Actions may include:

- establish the severity of the problem.
- review program and procedures
- institute control and prevention measures
- provide appropriate training as needed.
- communicate with Leadership, Risk Management, and Health Authorities as required.

### **6. Monitoring Activities and Facility Goals:**

- Hand Hygiene
- Device Bundles
- Isolation
- Sterilization and High-Level Disinfection
- Immediate Use Steam Sterilization (IUSS) and Biologicals monitoring.
- Influenza Vaccine

- Emerging Pathogens
- Infection Prevention Standards
- Safe Injection Practices
- Renovation and Construction Projects
- Tuberculosis
- Covid-19 HCW vaccination

The Infection Prevention Program is to prevent infections from occurring in patients, families, visitors, medical staff and employees. The following strategies have been implemented to achieve our goals and objectives based on evidence-based national guidelines from relevant organizations (CDC, APIC, SHEA).

### **1. Standard Precautions**

Standard Precautions represent the minimum infection prevention measures that apply to all patient care, regardless of suspected or confirmed infection status of the patient in any setting where healthcare is delivered. Standard Precautions include:

- Hand Hygiene
- Use of Personal Protective Equipment (e.g., gloves, gowns, facemasks), depending on the anticipated exposure.
- Respiratory Hygiene and Cough Etiquette.
- Safe Injection Practices.
- Safe handling of potentially contaminated equipment.
- Cleanliness of the facility and patient environment.

### **2. Hand Hygiene**

Hand Hygiene continues to be the most important practice for the Infection Prevention and the Patient Safety Program.

Designated trained observers monitor hand hygiene compliance with an electronic audit tool. Compliance is reported to Leadership.

### **3. Transmission-Based Precautions**

Transmission-Based Precautions are intended to supplement Standard Precautions in patients with known or suspected colonization or infection of highly transmissible or epidemiologically important pathogens. For diseases that have multiple routes of transmission, a combination of Transmission-Based Precautions may be used. Whether used singularly or in combination, they are used in addition to Standard Precautions. The three categories of Transmission-Based Precautions include:

- Contact Precautions
- Droplet Precautions
- Airborne Precautions

Enhance Contact Precautions are used to prevent transmission of emerging pathogens from spreading through both direct and indirect contact.

### **4. Monitor Device-Associated infections ( evidence-based bundles and checklists).**

Incorporate recommendations from the following regulatory agencies: Joint Commission (JC), Institute for Healthcare Improvement (IHI), Association for Professionals in Infection Control and Epidemiology (APIC), Infectious Diseases Society of America (IDSA) Compendium, Association of Perioperative Registered Nurses (AORN) and Occupational Safety and Health Administration (OSHA), Florida Department of Health (FDOH), Centers for Disease Control and Prevention (CDC), National Healthcare Safety Network (NHSN), Center for Medicare and Medicaid Services (CMS), and Association for the Advancement of Medical Instrumentation (AAMI).

### **5. Tracking and Trend of Multiple Drug Resistant Organisms (Antimicrobial Stewardship Program)**

Multiple drug resistant and epidemiologically significant organisms are included in the surveillance program. Trending MDROs is part of the Antimicrobial Stewardship Program.

### **6. Education**

As a requirement, education is provided upon hire and annually through Computer Based Learning (CBL) system called HealthStream and as needed.

### **7. Disinfection and Sterilization of reusable medical equipment**

National guidelines, best practices, and adherence to manufacturer recommendations are used in disinfection/sterilization processes. Single use devices are disposed of after each patient use.

### **8. Employee Health Program**

The Employee Health Program includes recommendations for screening and immunizations to reduce the risk of infection to employees through the following measures:

- Annual Seasonal Influenza Vaccination Program
- Tuberculosis Surveillance (initial and annual TB testing program) Determination of risk for TB is based upon the Center for Disease Control (CDC) standards.
- Exposure Management Program, Employee Health is responsible for the management of employee exposure.

### **9. Infection Prevention Risk Assessment**

An annual Risk Assessment is performed to determine priorities of goals and objectives for the infection prevention program. The Risk Assessment is based on regulatory requirements and prior outcomes. Based on the potential impact, the probability of the occurrence of a problem/condition, and the organization's ability to deal with the problem/condition a numeric score is generated. The numerical risk is determined by multiplying the score of each section to get a total numerical risk level. The risk assessment is reviewed and generates a numeric score approved by the IPC annually.

### 10. Evaluation/Assessment:

The Surveillance, Prevention, and Control of Infection Plan is evaluated annually and revised as necessary. The evaluation is reviewed and approved by the IPC Chairman, Chief Executive Officer, BHIP, and Chief Nursing Officer, BHIP.

- Implementation of the annual plan and prioritized goals
- Achievement of desired targets for infection reduction
- Compliance with policy, standards, and regulations
- Success/failure in meeting goals and objectives
- Identifying trends related to infections and MDROs.

#### Evaluation of 2022 objectives/goals

2022 Objectives	Met	Not Met	Action Plan
<u>Target Rates</u> MRSA: 0.05 VRE: 0.00 CRE: 0.02 ESBL: 0.02 MDR Pseudo 0.02	0.00 0.00 0.00	0.06 0.03	Carried over to 2023
SIR MRSA BAC 0.763 CDIFF 0.748	0.000 0.446		Carried over to 2023
SSI: Target: SIR HYST: 0.726 COLO: 0.754	0.588	1.288	Carried over to 2023
CLABSI: Target: Rate SIR 0.687	0.434		Carried over to 2023.
CAUTI: Target: Rate SIR 0.774	0.000		Carried over to 2023
Decrease amount of sharps injuries 5% decrease	2021: 0	2022: 1	Carried over to 2023
Decrease needle sticks, splashes, other preventable exposures. <5%	2021 – 17 2022 - 13		Carried over to 2023
Hand Hygiene Compliance 95%	96%		Carried over to 2023
Flu Vaccination Increase compliance by 10% each year until 90% goal is met	70%		Carried over to 2023