TIPCU ENGAGEMENT PROGRAM IN RURAL HOSPITALS AND NON-ACUTE SETTINGS

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Tasmania
Explore the possibilities

Conflicts and funding

- The authors have no conflicts to declare and no funding was received by the authors in connection to the work presented.
- Member of the ACIPC 2013 Conference Scientific Committee

Overview

- A novel approach to getting infection prevention and control messages out there..

Background

- Risk identification in rural hospitals and non-acute sites
- Extensive review of:
  - Assessment tools
  - Education and training

Project Aims

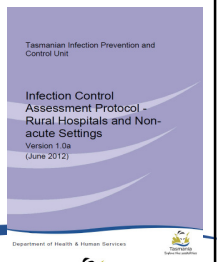
- Minimise health care associated infections
  - Build clinician capacity
  - Assess and manage infection control risks
  - Foster local ownership of infection prevention and control

Infection Control Assessment

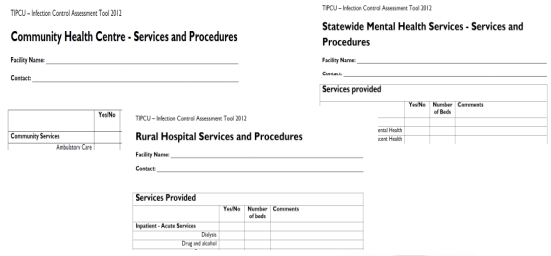
TIPCU – Infection Control Assessment Program

Infection Control Assessment

- ICA Protocol – outlines framework
- ICA Tools
  - Component 1: Site Demographics
  - Component 2: Program Elements
  - Component 3: Site Assessments
  - Reporting templates



Component 1 – Site Demographics


TIPCU – Infection Control Assessment Tool 2012

Community Health Centre - Services and Procedures

Facility Name:

Contact:

	Yes/No
Community Services	
Ambulatory Care	

TIPCU – Infection Control Assessment Tool 2012

Rural Hospital Services and Procedures

Facility Name:

Contact:

Services Provided	Yes/No	Number of beds	Comments
Inpatient - Acute Services			
Dialysis			
Drug and alcohol			

TIPCU – Infection Control Assessment Tool 2012

Statewide Mental Health Services - Services and Procedures

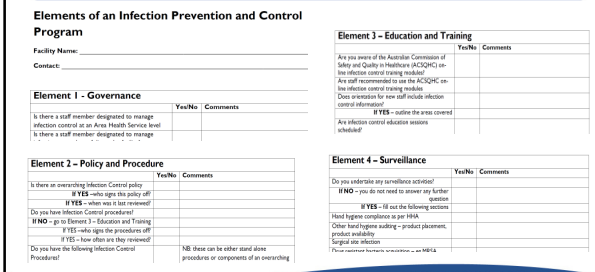
Facility Name:

Contact:

Services provided

	Yes/No	Number of Beds	Comments
ental Health			
ore Health			

Component 2 – Program Elements


Elements of an Infection Prevention and Control Program

Facility Name:

Contact:

Element 1 - Governance

	Yes/No	Comments
Is there a staff member designated to manage infection control at an Area Health Service level		
Is there a staff member designated to manage		

Element 2 – Policy and Procedure

	Yes/No	Comments
Is there an overarching Infection Control policy		
If YES –who signs this policy off?		
If YES – when was it last reviewed?		
Do you have Infection Control procedures?		
If NO – go to Element 3 – Education and Training		
If YES –who signs the procedures off?		
If YES – how often are they reviewed?		
Do you have the following Infection Control Procedures?		NB: these can be either stand alone procedures or components of an overarching

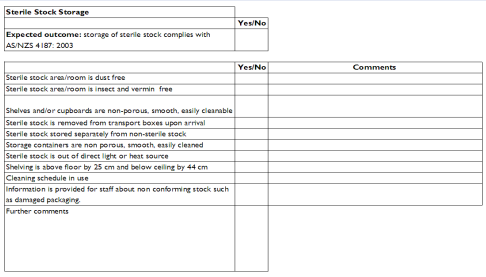
Element 3 – Education and Training

	Yes/No	Comments
Are you aware of the Australian Commission of Safety and Quality in Healthcare (ACSQHC) on-line infection control training modules?		
Are staff recommended to use the ACSQHC on-line infection control training modules		
Does orientation for new staff include infection control information?		
If YES – outline the areas covered		
Are infection control education sessions scheduled?		

Element 4 – Surveillance

	Yes/No	Comments
Do you undertake any surveillance activities?		
If NO – you do not need to answer any further question		
If YES – fill out the following sections		
Hand hygiene compliance as per HHA		
Other hand hygiene auditing – product placement, product availability		
Surgical site infection		

Component 3 – Sites Assessments


Sterile Stock Storage	Yes/No
Expected outcome: storage of sterile stock complies with AS/NZS 4187: 2003	

	Yes/No	Comments
Sterile stock area/room is dust free		
Sterile stock area/room is insect and vermin free		
Shelves and/or cupboards are non-porous, smooth, easily cleanable		
Sterile stock is removed from transport boxes upon arrival		
Sterile stock stored separately from non-sterile stock		
Storage containers are non porous, smooth, easily cleaned		
Sterile stock is out of direct light or heat source		
Shelving is above floor by 25 cm and below ceiling by 44 cm		
Cleaning schedule in use		
Information is provided for staff about non conforming stock such as damaged packaging.		
Further comments		

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Correctional Services

Services included:

- 6 adult inpatient beds
- Post op custodial admissions
- Forensic mental health service
- Correctional primary health
- Drug and alcohol
- Older persons services
- Dental services

ICA Component 1: Services

Correctional Services

Procedures included:

Continence management
Foot and nail care
Vaccinations
Specimen collection
Wound care
IM/SC injections
Minor ops
Dentistry

ICA Component 1: Procedures

Correctional Services

- ICA Component 2 – Elements

Governance	No designated hours for IC activities No infection control management plan
Policy and procedure	Current guidelines not available
Education and training	Limited IC info for new staff No ongoing IC education
Surveillance	No surveillance activities undertaken

Rural Hospital Network

Services included:

10 inpatient beds
5 aged care beds
Drug and alcohol
Mental health
Podiatry
2 emergency beds
Post natal care
OT & Physio
Continence advice
Obstetric clinics

ICA Component 1: Services

Rural Hospital Network

Procedures included:

Chemotherapy
Foot and nail care
IM/SC injections
Specimen collection
Trans-vaginal Ultrasound
Minor ops
IV therapy
Wound care
Vaccination

ICA Component 1: Procedures

Rural Hospital Network

- ICA Component 2 – Elements

Governance	No defined governance structure No infection control management plan
Policy and procedure	Guidelines available but need updating
Education and training	Limited IC info for new staff No ongoing IC education
Surveillance	Limited surveillance activities undertaken

Alcohol & Drug Services

Services included:

- Outpatient pharmacotherapy unit
- Inpatient withdrawal unit
- Community mental health service

Procedures included:

- Oral medication
- Urine specimen testing
- Blood collection
- Wound swabs

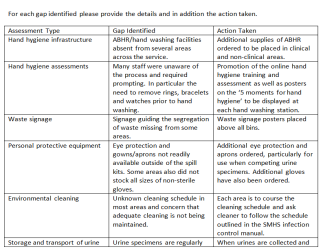
ICA Component 1: Services and Procedures

Alcohol & Drug Services

- ICA Component 2 – Elements

Governance	No infection control management plan
Policy and procedure	Current guidelines available
Education and training	Limited IC info for new staff No ongoing IC education
Surveillance	No surveillance activities undertaken

Alcohol & Drug Services



For each gap identified please provide the details and in addition the action taken.

Assessment Type	Gap Identified	Action Taken
Hand hygiene infrastructure	ABHR/hand washing facilities absent from several areas across the service.	Additional supplies of ABHR ordered to be placed in clinical and non-clinical areas.
Hand hygiene assessments	Many staff were unaware of the process and required prompting. In particular the need to remove rings, bracelets and watches prior to hand washing.	Promotion of the online hand hygiene training and assessment as well as posters on the '5 moments for hand hygiene' to be displayed at each hand washing station.
Waste signage	Signage guiding the segregation of waste missing from some areas.	Waste signage posters placed above all bins.
Personal protective equipment	Eye protection and gowns/aprons not readily available outside of the spill kits. Some areas also did not stock all sizes of non-sterile gloves.	Additional eye protection and aprons ordered, particularly for use when competing urine specimens. Additional gloves have also been ordered.
Environmental cleaning	Unknown cleaning schedule in most areas and concern that adequate cleaning is not being maintained.	Each area is to course the cleaning schedule and ask cleaner to follow the schedule outlined in the SMHS infection control manual.
Storage and transport of urine	Urine specimens are regularly	When urines are collected and

ICA Component 3: Site Assessments

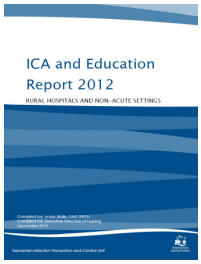
Reporting process

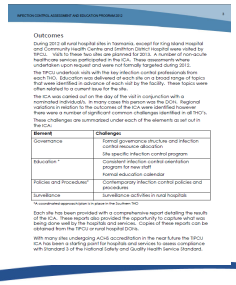
- Recommendations from TIPCU in relation to the elements sent to each participating site.

TIPCU – Infection Control Assessment Report 2012

Element 1 – Governance Recommendations				
Gap	**Action required**	**Outcome**	**By whom**	**Due date**
No infection control program formally outlined.	Formalise current infection control activities into an IC program with appropriate outcome measures.	Clearly defined IP&C program that identifies routine infection control activities and other key priority areas	DON NUM IC Portfolio holder	2013

EDONs & DONs – annual report





Outcomes

During 2012 all rural hospital sites in Tasmania, except for King Island Hospital and Community Health Centre and Smithton District Hospital were visited by the TIPCU. The Royal Hobart Hospital (RHH) was the only non-acute/ambulatory healthcare service participated in the ICA. These assessments where undertaken upon request and were not formally targeted during 2012.

The TIPCU undertook visits with the key infection control professionals from each THO. Education was delivered at each site on a broad range of topics that were identified in advance of each visit by the facility. These topics were based on the ICA Standard 3 elements.

The ICA was carried out on the day of the visit in conjunction with a nominated individual/s. In many cases this person was the DON. Regional variations in relation to the outcomes of the ICA were identified however there were a number of significant common challenges identified in all THO's.

These challenges are summated under each of the elements as set out in the ICA.

Element	Challenge:
Governance	Formal governance structure and infection control resource allocation Site specific infection control program
Education *	Consistent infection control orientation program for new staff Formal education calendar
Policies and Procedures*	Contemporary infection control policies and procedures
Surveillance	Surveillance activities in rural hospitals

* A coordinated approach/plan is in place in the Southern THO

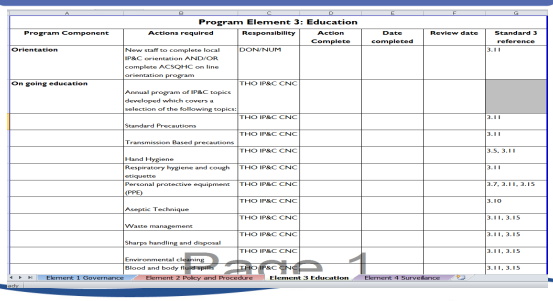
Each site has been provided with a comprehensive report detailing the results of the ICA. These reports also provided the opportunity to capture what was being done well by the hospitals and services. Copies of these reports can be obtained from the TIPCU or rural hospital DONs.

With many sites undergoing ACHS accreditation in the near future the TIPCU ICA has been a starting point for hospitals and services to assess compliance with Standard 3 of the National Safety and Quality Health Service Standard.

Major themes from 2012 ICA

Elements	Challenge and Response
Governance	No Infection prevention and control management plan. Template developed by TIPCU - cross referenced with ACSQHC Standard 3
Policy and Procedures	THO responsibility
Education and Training	TIPCU training program ACSQHC Orientation Module recommended THO responsibility
Surveillance	TIPCU Surveillance Modules for rural hospitals and non-acute settings

IC Management Plan



Program Element 3: Education

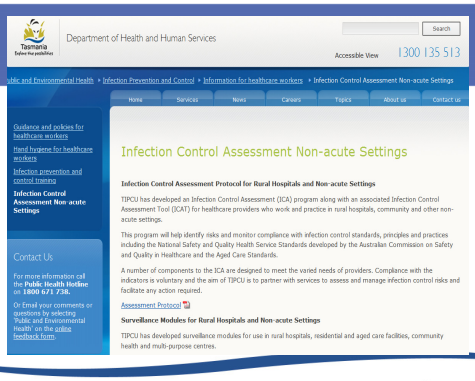
Program Component	Actions required	Responsibility	Action Complete	Date completed	Review date	Standard 3 reference
Orientation	New staff to complete local IP&C orientation AND/OR complete ACSQHC on line orientation program	DON/NUM				3.11
On going education	Annual program of IP&C topics developed which covers a selection of the following topics:	THO IP&C CNC				
	Standard Precautions	THO IP&C CNC				3.11
	Transmission Based precautions	THO IP&C CNC				3.11
	Hand Hygiene	THO IP&C CNC				3.5, 3.11
	Respiratory hygiene and cough etiquette	THO IP&C CNC				3.11
	Personal protective equipment (PPE)	THO IP&C CNC				3.7, 3.11, 3.15
	Aseptic Technique	THO IP&C CNC				3.10
	Waste management	THO IP&C CNC				3.11, 3.15
	Sharps handling and disposal	THO IP&C CNC				3.11, 3.15
	Environmental cleaning	THO IP&C CNC				3.11, 3.15
	Blood and body fluid spill	THO IP&C CNC				3.11, 3.15

Element 1 Governance | Element 2 Policy and Procedure | Element 3 Education | Element 4 Surveillance

Surveillance Modules

Outcome
- MDRO
- Bloodstream Infection

Process
- Gastro Management
- Influenza Illness Management
- Indwelling Urinary Catheter Use



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2013 Program

- One hour videoconference with each site
- Review:
  - Component 2 - elements recommendations
  - Component 3 - site assessments
- Introduce the IC Plan and Surveillance Modules
- Education opportunity

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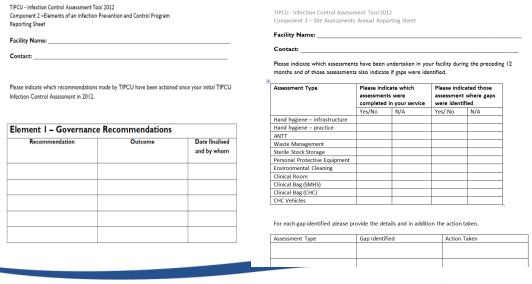
2013 Site follow up


TIPCU - Infection Control Assessment Tool 2012
Component 2 –Elements of an Infection Prevention and Control Program
Reporting Sheet

Facility Name: _____

Contact: _____

Please indicate which recommendations made by TIPCU have been actioned since your initial TIPCU Infection Control Assessment in 2012.

Element 1 – Governance Recommendations

Recommendation	Outcome	Date finalised and by whom

TIPCU - Infection Control Assessment Tool 2012
Component 3 – Site Assessments Annual Reporting Sheet

Facility Name: _____

Contact: _____

Please indicate which assessments have been undertaken in your facility during the preceding 12 months and of those assessments also indicate if gaps were identified.

Assessment Type	Please indicate which assessments were completed in your service		Please indicated those assessment where gaps were identified	
	Yes/No	N/A	Yes/ No	N/A
Hand hygiene – infrastructure				
Hand hygiene – practice				
AWTT				
Waste Management				
Sterile Stock Storage				
Personal Protective Equipment				
Environmental Cleaning				
Clinical Room				
Clinical Bag (SMHS)				
Clinical Bag (CHC)				
CHC Vehicles				

For each gap identified please provide the details and in addition the action taken.

Assessment Type	Gap Identified	Action Taken

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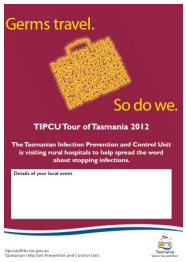
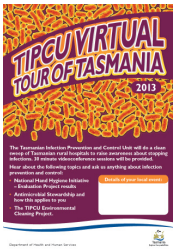
Education and Training





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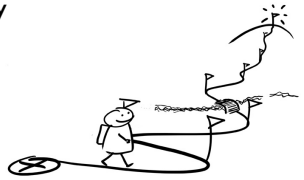
Where are we at?

- Clinician capacity
- Risk assessment
- Local ownership



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- Ms Annie Wells, TIPCU
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- Dr Ramon Shaban, Griffith University
- All participating pilot study and program sites.

Thank you

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