Ask an IP

Learning and Communication Series

SNF Honors Program, ICAR
Review, SNF Symposium,

PSIE

Presented by: Chandana Das, MD, Marco

Marquez, MPH, CIC, Walteena Brooks,

LVN, Eileen Wong, PhD, MS

Acute Communicable Disease Control (ACDC) Program

Los Angeles County Department of Public Health

LACDPH Infection Preventionist Team

- Jehan Mephors, RN

- Marco Marquez, MPH, CIC

- Walteena Brooks, LVN

Contact Us: LACSNF@ph.lacounty.gov

Website:

http://publichealth.lacounty.gov/acd/AskAnIPProgram/index.htm

Disclosures

- There is no commercial support for today's call
- Neither the speakers nor planners of today's call have disclosed any financial interests related to the contents of this meeting
- This call is meant for healthcare facilities and is off the record, reporters should log off now

Housekeeping

- **Microphones** are disabled. For questions, please use the chat
- **Cameras:** please keep them turned off during the presentation
- **Recording**: the presentation is being recorded and will be posted on the Ask an IP Website within a few weeks following the session
- We will not review COVID-19 guidelines (including CDPH AFLs) during these sessions

Objectives

- Review the LAC DPH SNF Honors Program
- Review the goals of an Infection Control Assessment and Response (ICAR) tool
- Describe the process of conducting an ICAR
- Share resource for LAC SNFs to enroll in an ICAR from the LAC DPH IP Team
- Share information regarding the 2024 SNF Symposium
- Describe the Patient Safety Information Exchange (PSIE)
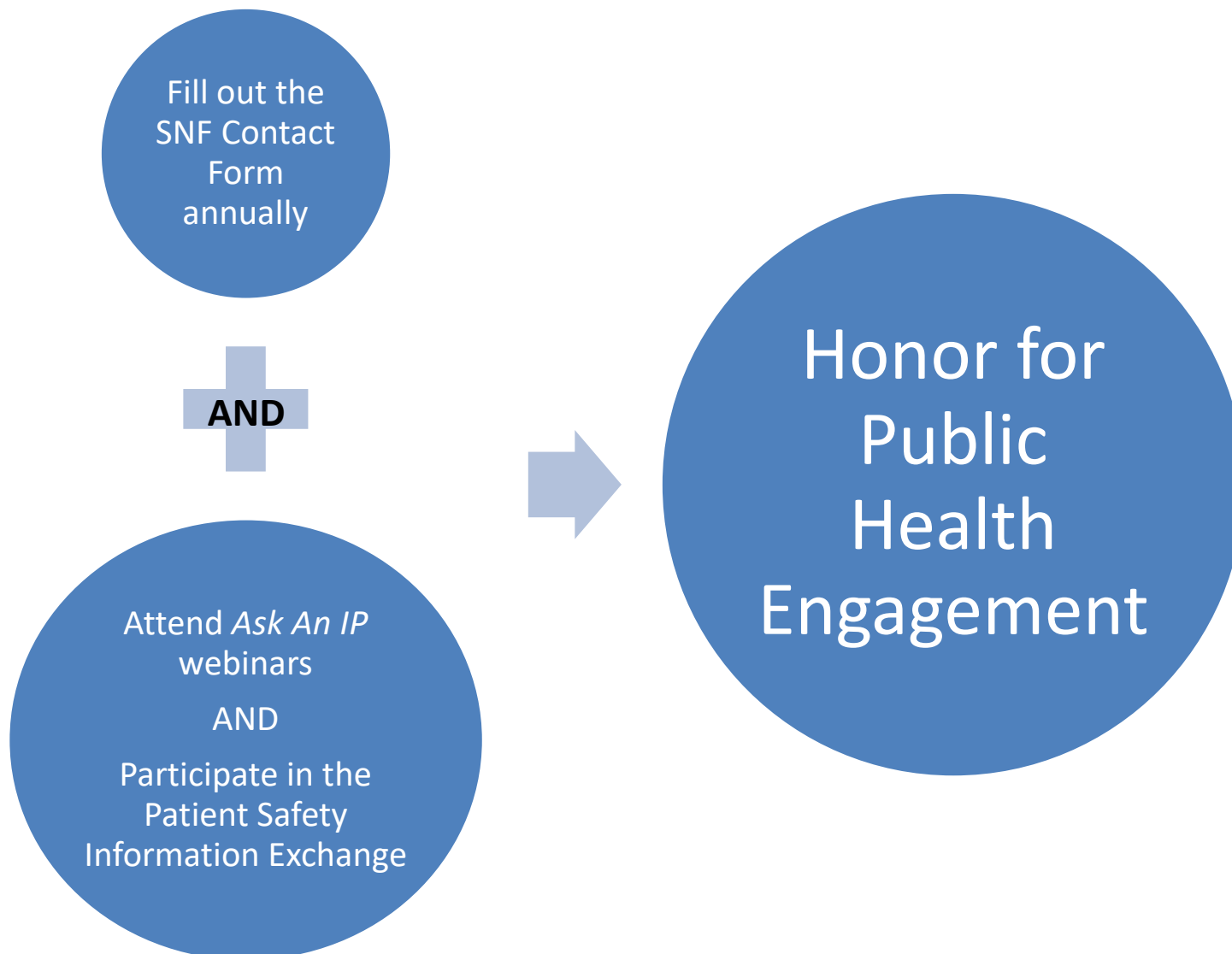
SNF Honors Program

Honors Categories

- Public Health Engagement

- Vaccination Coverage

- Infection Preventionist Professional Development

- Preventive Action

Public Health Engagement

Fill out the SNF Contact Form annually

AND

Attend *Ask An IP* webinars

AND

Participate in the Patient Safety Information Exchange

Honor for Public Health Engagement

Vaccination Coverage

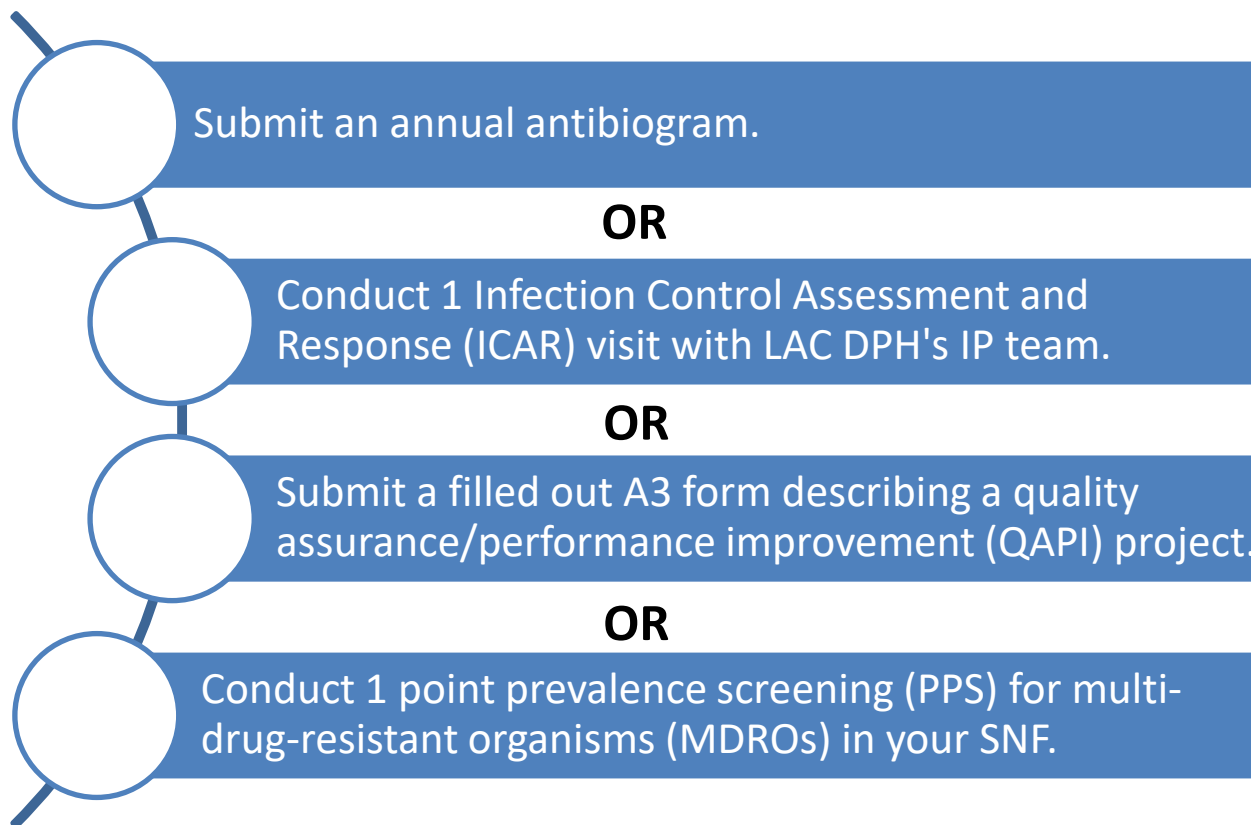| Honor for achieving at least 2/3		
Resident COVID-19 vaccination rate $\geq$ 80%	Staff COVID-19 vaccination rate $\geq$80%	Staff Influenza vaccination rate $\geq$90%

Honor for Infection Preventionist Professional Development

- One IP with national certification from the Certification Board of Infection Control (CBIC).
    - a-IPC: Associate Infection Prevention and Control
    - LTC-CIP: Long-Term Care Certification in Infection Prevention
    - CIC: Certification in Infection Control
    - BCIDP: Board Certified Infectious Disease Pharmacist

AND

- One IP who has been working at the SNF for 1 year or more.

Both criteria do not need to be met by the same IP.

Honor for Preventive Action

Submit an annual antibiogram.

OR

Conduct 1 Infection Control Assessment and Response (ICAR) visit with LAC DPH's IP team.

OR

Submit a filled out A3 form describing a quality assurance/performance improvement (QAPI) project.

OR

Conduct 1 point prevalence screening (PPS) for multi-drug-resistant organisms (MDROs) in your SNF.

Review of SNF ICAR Process

What is an ICAR?

- ICAR = Infection Control Assessment and Response
  - Gap Analysis: identify the gap between what should be happening for infection prevention and control (IPC) and what is currently being done for IPC
  - Tool for assessing your facility's IPC practices
  - Tool for guiding your facility's QAPI program/projects

Goals of an ICAR

- Assess your facility's IPC practices

- Guide your facility's QAPI programs

- Identify your facility's capacity to detect and address HAIs and outbreaks

ICAR Process

- Identify a need for an ICAR

- Schedule the ICAR

- Conduct the ICAR

- Disseminate findings and feedback

- Follow up on feedback

*IP plays a significant role at each part of the process

ICAR Process: Identify a Need

- Examples include:
  - Increase in HAIs
  - New staff, new IP
  - Preparation for a regulatory survey
  - Facility goal of completing ICARs at a specific frequency (e.g., yearly)
    - As part of an Annual Risk Assessment that is used to update IP plan on an annual basis

ICAR Process: Facility-Wide vs Targeted ICAR

Facility-wide ICAR	Targeted ICAR
• Comprehensive snapshot of your facility's IPC practices	• Deep dive into specific units, departments, IPC practices
• Unknown reason for poor IPC practices	• Known reasons for poor IPC practices
• Unknown state of IPC practices	• Previous interventions did not yield improvement
• Outbreak or increased transmission seen throughout facility	• Outbreak or increased transmission seen in specific areas within facility

ICAR Process: Schedule

- Internal: Facility is conducting their own ICAR, IP is typically responsible for leading the ICAR
  - IP is accompanied by other team leads (e.g., nursing, supervisors, EVS, dietary, maintenance)
- External: the IP is typically the liaison for scheduling external gap analysis between internal and external teams
  - Ex. LAC DPH
  - Ex. External consultant

ICAR Process: Conducting the ICAR

- Materials needed to conduct ICAR:
  - Trained staff who are familiar with IPC best practices and direct observation instructions
  - ICAR tool (electronic or paper)
  - Fluorescent marker and uv flashlight if conducting fluorescent marker observations or observing environmental cleaning and disinfection
- Types of ICAR questions:
  - Close ended: yes or no
  - Open ended: free text or prompt a longer response
  - Interview (verbal)
  - Observation (audit)

ICAR Process: What are the areas covered in the ICAR?

- Modules include:
  - Demographics
  - IPC Program
  - Training, Auditing, Feedback
  - Hand Hygiene
  - Antimicrobial Stewardship Program
  - Standard and Transmission Based Precautions
  - Dietary
  - Wound Care
  - Occupational Health
  - And More!!!

ICAR Process: Disseminating Information

- Once you complete the entire assessment, the IP should collect and organize findings and feedback
- You can work together with your QAPI team and other department leads to prioritize interventions and agree on project deadlines
- Disseminate your ICAR findings and feedback:
    - All staff
    - Electronic, paper, verbal
    - Celebrate the good!

ICAR Process: Follow Up

- Regularly meet with teams and assist them with their IPC interventions (based on findings and feedback)

- As QAPI projects wrap up, complete a focused ICAR (gap analysis)

- Document bridged gaps

- Disseminate your improved findings

Establish Your Own Goal

We invite you to start the ICAR process

1. **When do you want to complete your ICAR by?**
2. **Who should be involved in the assessments and observations?**
3. **Is there a focus?**
4. **If yes, what is your focus?**
5. **How will you disseminate findings and feedback?**
6. **When will you follow up on intervention implementation?**
7. **Who will you report intervention progress to?**

SNF Symposium in September

SNF Symposium on Infection Prevention

- September 24, 2024.

- The California Endowment in downtown Los Angeles.

- We will be sending out the announcement flyer shortly along with registration information.

- This will be an in-person event only, one attendee per facility.

PSIE Information

MDROs in Healthcare

- Multidrug-resistant organisms (MDROs)
- MDROs are common sources of infections and outbreaks in healthcare settings
- MDROs of particular concern in LA County and reportable to DPH:
  - *Candida auris*
  - Carbapenemase-producing organisms (CPO)
  - Carbapenem-resistant Enterobacterales (CRE)
- MDROs result in life-long carriage

The Threat of Antibiotic Resistance in the United States

Antibiotic resistance—when germs (bacteria, fungi) develop the ability to defeat the antibiotics designed to kill them—is one of the greatest global health challenges of modern time.

New National Estimate*

Each year, antibiotic-resistant bacteria and fungi cause at least an estimated:

2,868,700 infections

35,900 deaths

*Clostridioides difficile*** is related to antibiotic use and antibiotic resistance:

223,900 cases

12,800 deaths

New Antibiotic Resistance Threats List
Updated urgent, serious, and concerning threats—totaling 18

5 urgent threats   **2** new threats   **NEW:** Watch List with **3** threats

Antibiotic resistance remains a significant One Health problem, affecting humans, animals, and the environment. Data show infection prevention and control is saving lives—especially in hospitals—but threats may undermine this progress without continued aggressive action now.

Learn more: www.cdc.gov/DrugResistance/Biggest-Threats.html

https://www.cdc.gov/drugresistance/pdf/threats-report/2019-ar-threats-report-508.pdf

26

Past efforts to improve interfacility communication of MDROs

- Education (webinars, email reminders)

- Standardized interfacility transfer forms

- Standardized transfer guides

- Calls to educate facilities after events

- HFID complaints

- LA County study found only 6 out of 22 CRE patients (27%) transferred from Facility X to Hospital A had documentation about their CRE.[1]

Los Angeles County Department of Public Health
Infectious Organism Transfer Form
Use this form for all patient transfers between facilities. This form is not intended to be used as criteria for admission. On transfer, please include all positive lab results that pertain to this form.

Patient Label Here

1. Manuel Knight et al. (2018) Poster presented at Society for Healthcare Epidemiology Conference

Automating interfacility communication - PSIE

- MDRO registries have proven successful in Chicago, Tennessee, and other LHJs

- LACDPH is building the **Patient Safety Information Exchange (PSIE)**

PSIE PROJECT GOALS

- Overall Goal: Decrease transmission of MDROs in LA County by closing the communication gap with accessible and rapid notification of a patient's MDRO status.

- Intend for every hospital and SNF in LA County to use PSIE at patient admission.

County of Los Angeles Public Health

LACDPH provides list of reported MDRO cases

All Facilities → Log in and search for patients (Name, DOB) → **Patient Safety Information Exchange (PSIE)**

Facilities with EHR → Automated EHR patient admission messages sent → **Patient Safety Information Exchange (PSIE)**

Health Information Exchange (HIE) Organizations

Patient and MDRO information displayed when match is found

Automated e-mail alerts sent when match is found

Log into PSIE to view patient and MDRO information

MDRO: Multidrug-resistant organism
EHR: Electronic Health Record
LACDPH: Los Angeles County Department of Public Health

Early Beta Release

COUNTY OF LOS ANGELES
Public Health

LACDPH provides list of reported MDRO cases

All Facilities

Log in and search for patients (Name, DOB)

Patient Safety Information Exchange (PSIE)

Patient and MDRO information displayed when match is found

Facilities with EHR

Automated EHR patient admission messages sent

Automated e-mail alerts sent when match is found

Health Information Exchange (HIE) Organizations

Log into PSIE to view patient and MDRO information
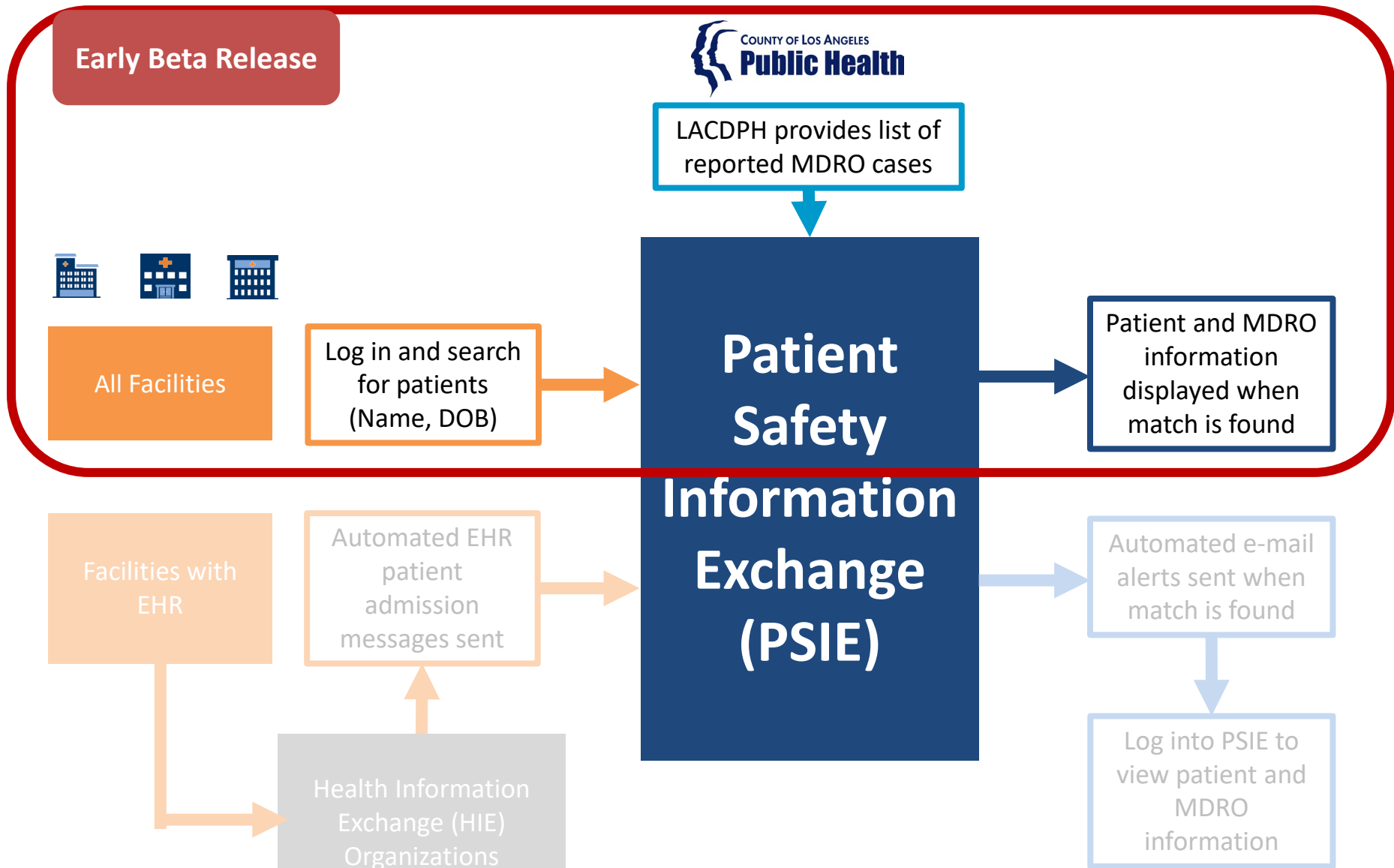
MDRO: Multidrug-resistant organism
EHR: Electronic Health Record
LACDPH: Los Angeles County Department of Public Health

PSIE Landing Page

Los Angeles County Department of Public Health
Patient Safety Information Exchange (Beta v1)

User Name

Data Management ⌄

Welcome to the PSIE landing page

Select the Component

🔍 Case Search

⏱ Alert History

⊞ MDRO Dashboard

📋 Reports

Search for patients within the MDRO registry by name and date of birth

Summary information and statistics about patients with MDRO infections for the health care facility

If facility has EHR and is set up to send ADT messages to one of our HIE collaborators or directly to DPH, will be able to receive automated alerts when patient with known MDRO is admitted

Create reports or spreadsheets for the health care facility

PSIE Case Search

Los Angeles County Department of Public Health
Patient Safety Information Exchange (Beta v1)

User Name

Data Management ⌄

MDRO Patient Search

First Name

First Name

Last Name *

Last Name

DOB

MM/DD/YYYY

🔍 Search   ⬦ Clear

Last name is required

Can search using:
- First Name (minimum of 2 characters)
- Last Name (minimum of 2 characters)
- Date of Birth (exact date)

MDRO Case Search Example

MDRO Case Search Example

MDRO Case Search Example

MDRO Case Search Example

MDRO Case Search Example

Register for PSIE

- Voluntary participation

- Currently limiting to 5 or fewer users per facility, targeting users who are responsible for infection prevention and control or implementation of transmission-based precautions.

- Three steps to access MDRO information from PSIE:

1. Complete a registration form.

2. Sign and submit Data User Agreement.

3. Set up Microsoft Authentication to use County of Los Angeles apps upon approval.

Email PSIE@ph.lacounty.gov for these steps and links to be sent by email or for more information!

PSIE Timeline

2021

2022

2023

2024

Initial focus groups held

Gathered requirements and researched vendors

Began to build system and contract with vendors

Onboard and train facility users

Continue to build system

Pilot launch: January 2024

Early Beta Release: May 31, 2024

Full Release: Expected Early 2025
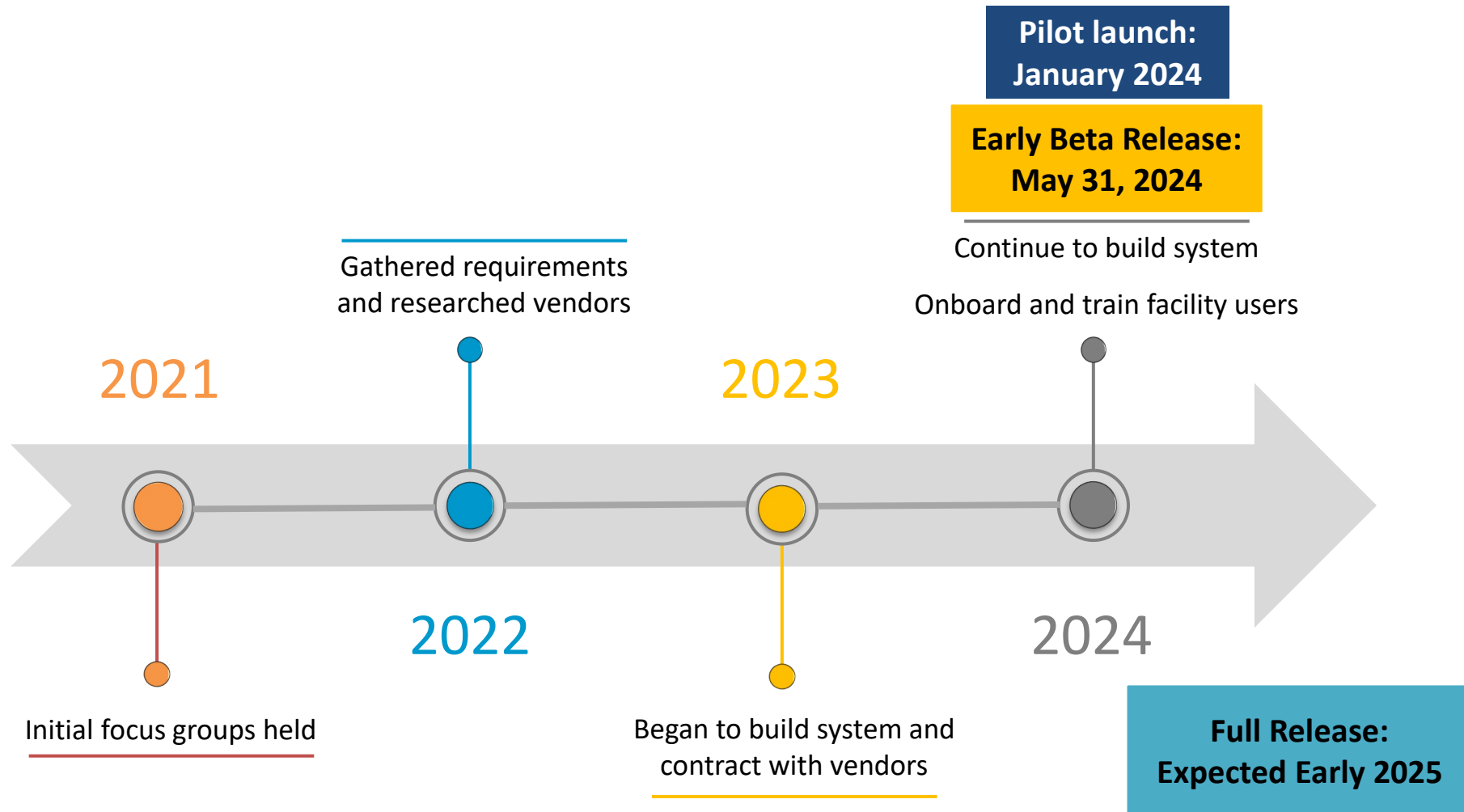
Resources

Questions

Resources

- BCIDP

  - https://bpsweb.org/infectious-diseases-pharmacy/

- CBIC

  - https://www.cbic.org/

- LAC DPH Ask an IP 3-Part Webinar Series on ICARs

  - http://publichealth.lacounty.gov/acd/AskAnIPProgram/index.htm#:~:text=The%20Ask%20an%20IP%20is,nursing%20facility%20(SNF)%20setting.

LACDPH Project Firstline

Our next Ask an IP session will be on Wednesday, September 11 at 1:30pm!