WELCOME TO
Scott &White Infection Prevention

Scott and White Needs YOU
To prevent infections to patients

1/3 can be prevented

Hand washing is the single best way to keep from spreading infections or germs to others!

Preventable Hospital Infections and Complications
What is acceptable?

- Over 100,000 Patients die each year from infections acquired in US hospitals. Acceptable?
- Patients die daily with HAI

  Considered Acceptable?

- In the airline industry.. Would you consider flying safe if:
- 280 people died each day 365 days out of the year.

  280 X 365 = 102,000

  Considered Acceptable?

Healthcare-Associated Infections (HAI)

- What are they?
  - Bloodstream infections, urinary tract infections, pneumonia, surgical site infections that develop in hospital
- The Problem
  - **1.7 million HAIs in hospitals**
  - **90,000 deaths per year**
  - **28-33 billion $$$ in added healthcare costs**
- HAI Prevention?
  - Implementing good infection prevention principles will decrease 70%

CONSTRUCTION POLICY

- Protect Patients, Employees, and Visitors from exposure to organisms released into the environment during construction and renovation activities through:

Containment Barriers

Watch for white footprints away from the construction site. This is a break of containment. Notify your supervisor or Infection Control

No open Ceiling Tiles
Patient Safety

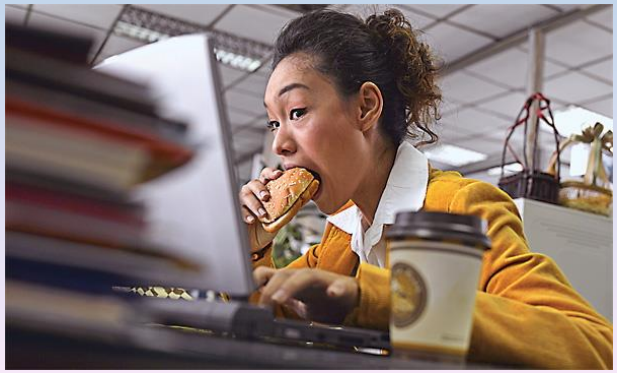
Report soiled ceiling tiles to 724-2216.

Safety First

Use Safety Needles

All Blood and body fluids are placed in Red bags

Don't drink or eat in work area



Always Wash your hands

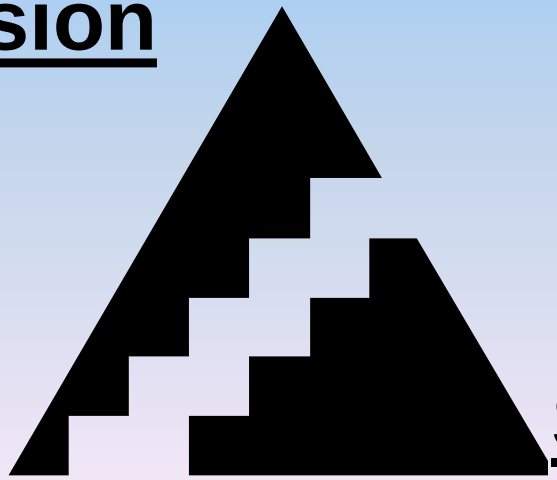
Where are you eating lunch at?

- **Researchers find an average desk harbors 400 times more bacteria than an average toilet seat.**

Basic Overview of Isolation Precautions

- Two Tiered System
  - Standard Precautions for all patient
  - Transmission Based Precautions for special communicable disease

Transmission



Standard

STANDARD PRECAUTIONS
Use For All patients All ages

Protection against unknown Bloodborne pathogens

HIV Hepatitis B Hepatitis C

Standard Precautions For All Patients
The Basics

1. Hand Hygiene

2. Gloves

3. Gowns

4. Mask

5. Eye Protection

6. Safety Devices

Transmission Based ISOLATION
Can transmit diseases if unprotected

Biblical Bird Flu

3 Categories for Transmission Based Isolation
Important for all Staff to Know

- Airborne: Very small organisms float on air currents. Inhale into lungs

- Droplet: large droplets that transmit and drop on horizontal surfaces

How fast does a sneeze exit your body?

- Contact: organisms spread by direct or indirect contact "sticks like Vaseline" to surfaces until cleaned
- Takes approx 2 hours to colonize a room

AIRBORNE PRECAUTIONS

HAND HYGIENE

Before Entering Room

N95/HEPA OR PAPR Respirator Mask

REQUIRED

To Enter Room

Negative Air Pressure

REQUIRED

Keep Door Closed

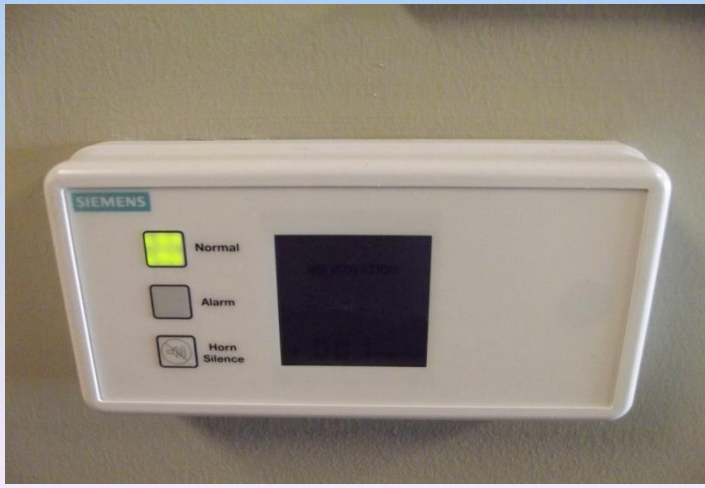
HAND HYGIENE

After Exiting Room

Airborne Precautions

- Private Neg- Pres Room
- Hepa Filter
- Check Monitor (green)
- Only enter with N 95 Mask
- Must be fit tested annually

- Diagnosis:
- Tuberculosis (N95 mask only)
- Varicella and shingles (add contact precautions



Fit Testing

DUCK BILL

DROPLET PRECAUTIONS

HAND HYGIENE

Before Entering Room

GOWN AND GLOVES

REQUIRED

To Enter Room

Mask with eye shield

REQUIRED

Within 6 ft of patient

HAND HYGIENE

After Exiting Room

Droplet Precautions

- Private room
- Gown and Gloves Required
- Wear mask with eye shield if within 6 feet of patient
- No special ventilation requirements
- Door may remain open
- Diagnosis:
- Pertussis, Influenza, Bacterial Meningitis, and Mumps

How Long can these Germs stay on surfaces
In a patient's room if not cleaned????

Remember the Question?

Speed of a sneeze 100 miles/Hr

Equal to:

- Category 2 Hurricane
- Wind Speeds 96-110 mph

- DANGER: Extremely dangerous winds will cause extensive damage:

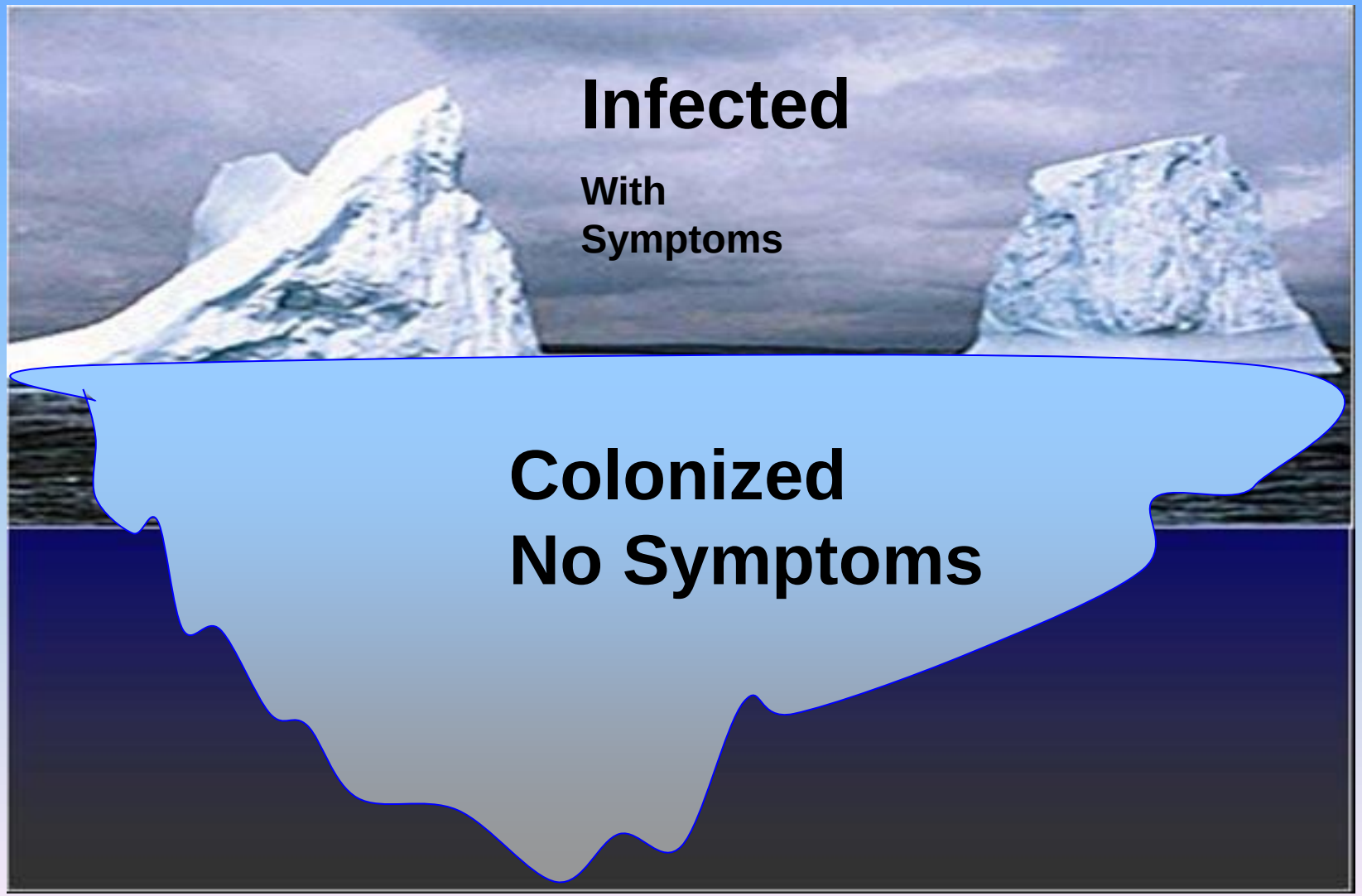
Cover Your COUGH and SNEEZE

MDRO's

Multi-Drug Resistant Organism

The New Guy CR- GNR

The MDRO Iceberg



CONTACT PRECAUTIONS

HAND HYGIENE

Before Entering Room

GOWN

REQUIRED

To Enter Room

GLOVES

REQUIRED

To Enter Room

HAND HYGIENE

After Exiting Room

Contact Precautions

- Private Room
- Wear Gown and Gloves to enter
- If the patient is coughing, use the Loop Ear Mask
- Use disposable equipment when available
- Do not use a community B/P cuff or stethoscope.
- When patient ambulates in hallway, patient must wear isolation gown and practice good hand hygiene.
- Door may stay open

Contact Precautions

- Most Common Isolation Precautions
- Diagnosis :
  - Multidrug-resistant organisms (MRSA, VRE, CRGNR C Difficile)
  - Respiratory syncytial virus (RSV), parainfluenza or enteroviral infections in infants & young children
  - Lice & scabies

Most Important Key Element of Isolation Communication

Special Needs for C. Difficile

- Use soap and water instead of Alcohol Gel.
- Leave sign on gel dispenser for notification of housekeeping for discharge cleaning. EVS will terminally clean MDRO rooms with bleach.
- Cohort patients only if necessary.
- Gowns and gloves imperative.
- Sign will be on the alcohol gel dispenser to remind all staff
- FYI:

- **Influenza can live 6-8 hours**
- **MRSA can live on a surface 3-4 MONTHS**
- **C. diff can live up to 6 MONTHS on a surface**

Disinfection Guide for Multi-use Patient Equipment

Equipment Cleaning

Examples of equipment that require low level disinfection:

HOW TO:

- **Use the PDI (grey top) Wipes.**
- **Thoroughly wet surface with wipe.**
- **IMPORTANT – Equipment must remain visibly wet for a full 3 minutes.**
- **Let air dry.**

TEST YOUR KNOWLEDGE!

Match The Isolation and PPE

Isolation Type:

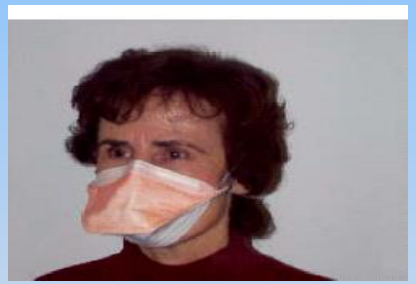
Contact

GOWNS

Mask with EyeShield

Droplet

HEPA FILTER



N 95 Mask

GLOVES

Airborne

Soap/H20

Alcohol Gel

Earloop Mask

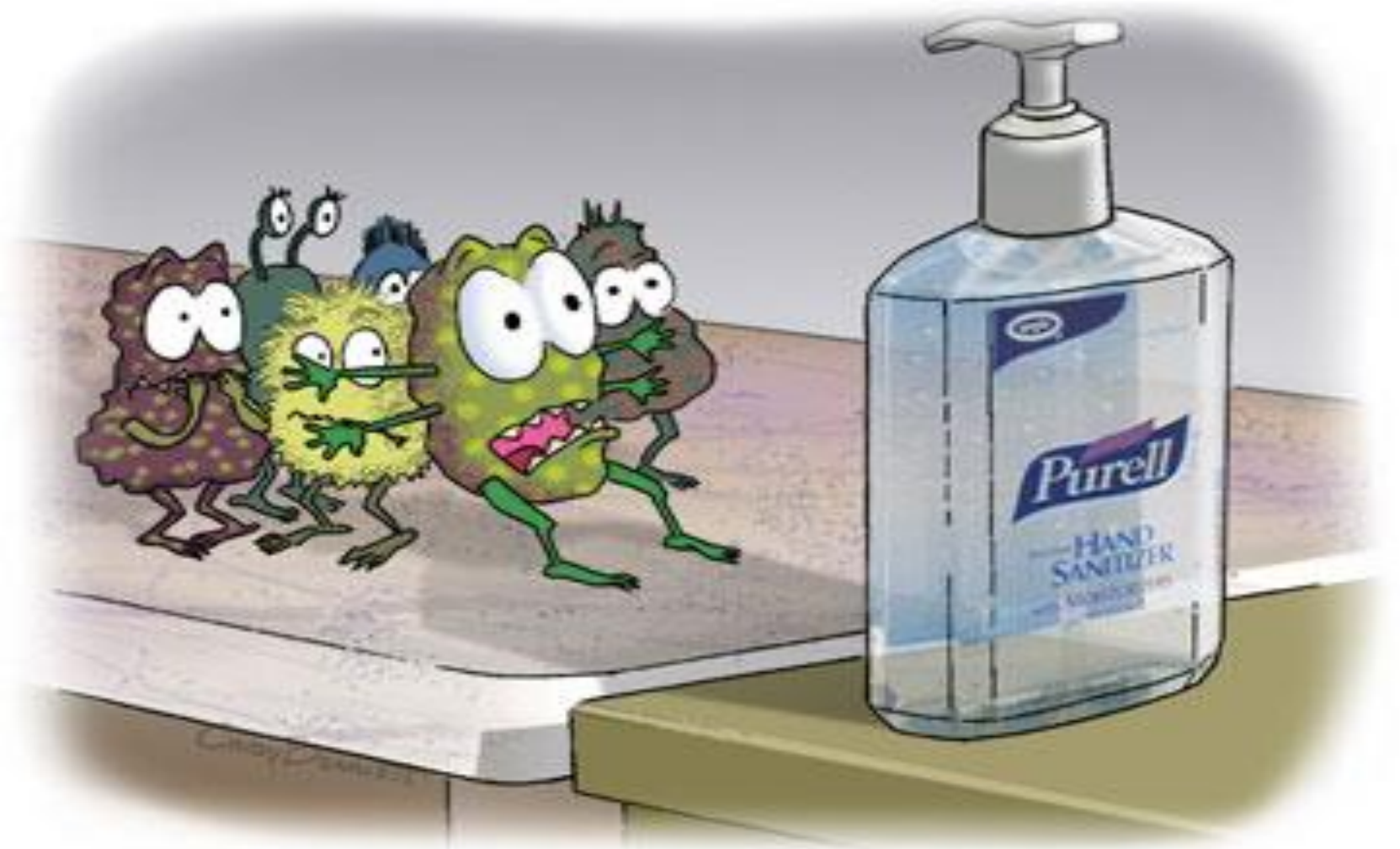
The 5 second Rule…
Fact or Fiction?

- **Researchers tested salmonella placed on wood, tile or carpet, and dropped bologna on the surfaces for 5, 30 or 60 seconds.**

- **99 percent of the bacteria were transferred nearly immediately, and there was no difference by the time of contact.**

- **As few as 10 salmonella bacteria can cause gastroenteritis. (that means a BAD stomach ache)**

Hand Hygiene



"Stay back, you guys! This stuff has killed 99.99% of our fellow germs!"

HAND HYGIENE

- HH – The number one most important way to prevent infections
- Joint Commission NPSG 7
- We hold our patients lives in our hands…. Be sure they are clean hands

Hand Hygiene Saves Lives

Calling All Hand Hygiene Experts

Most Commonly missed Areas

Do you know what these are for?

Red flag up = Dispenser needs attention!

How does it work?

- Raise the flag if dispenser is empty or needs service.
- Contact EVS to service, call 24-2216 to place a work order, or simply replace the sanitizer yourself.
- Foam in, Foam out!!!

Thank you,

The Hand Hygiene Best Practice Team

Hand Hygiene Audits

- Each nursing unit sends in 10 visual audits weekly. Students are included in audits.
- Each unit has secret shoppers
- Our Goal 95% or greater
- Make Hand Hygiene a Habit for Patient Safety

S&W NAIL Policy

Not For Patient Care

- Not Accepted: Fillers/Overlay/Shellac/ Gel
- Nails ¼” in length
- Fresh Nail Polish OK.. No Chips
- Nails Can Transmit Disease to Patients
- Applies to **All** Direct Patient Care Givers & to Those That Have Direct contact with Patients’ Environment or Products.

Vaccination Prevention
Scott and White Policy

- If you receive the vaccination you are protected
- Applies to Employees in direct patient care
  - Hepatitis B Vaccine **Mandatory One time vaccine**
  - TDAP High Risk Area **Mandatory Every 10 years**
  - MMR/ Varicella **Mandatory One time vaccine**
  - Influenza Vaccine **Mandatory Annually**

Transmission of Influenza happens 24 hours before symptoms or fever.

Protect your patient by getting vaccinated every year.

Do Your Actions Really Make a Difference?

Hand Hygiene
Each time when entering room

Annual Flu
Vaccination

Patient Safety

Gowns and gloves each time
Entering contact isolation

Patient Infection/Death

Cleaning equipment
Between each patient