"INFECTION CONTROL: WHAT'S COMING IN 2017?"

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OBJECTIVES

• REVIEW STATISTICS ASSOCIATED WITH OLDER ADULTS AND THEIR RISK OF INFECTIONS
• REVIEW APPEARANCE OF F441 IN TOP DEFICIENCIES FOR 2016
• APPLY FEDERAL REGULATION F441 TO CURRENT DATA
• DEFINE AND DISCUSS QUALIFICATIONS OF A “INFECTION PREVENTIONIST”
KEY FACTS

• BETWEEN 2015-2050, THE PROPORTION OF THE WORLD’S POPULATION OVER 60 YEARS WILL NEARLY DOUBLE FROM 12% TO 22%

• BY 2020, THE NUMBER OF PEOPLE AGED 60 YEARS AND OLDER WILL OUTNUMBER CHILDREN YOUNGER THAN FIVE YEARS

• BY 2050, THE WORLD’S POPULATION AGED 60 YEARS AND OLDER IS EXPECTED TO TOTAL 2 BILLION, UP FROM 900 MILLION IN 2015

• LITTLE EVIDENCE IS AVAILABLE TO SUGGEST THAT OLDER PEOPLE TODAY ARE EXPERIENCING THEIR LATER YEARS IN BETTER HEALTH THAN THEIR PARENTS
KEY FACTS: ANTIBIOTIC RESISTANCE

• ANTIBIOTIC RESISTANCE IS ONE OF THE BIGGEST THREATS TO GLOBAL HEALTH, FOOD SECURITY, AND DEVELOPMENT TODAY

• ANTIBIOTIC RESISTANCE CAN AFFECT ANYONE, OF ANY AGE, IN ANY COUNTRY

• ANTIBIOTIC RESISTANCE OCCURS NATURALLY, BUT MISUSE OF ANTIBIOTICS IN HUMANS AND ANIMALS IS ACCELERATING THE PROCESS

• A GROWING NUMBER OF INFECTIONS—SUCH AS PNEUMONIA, TUBERCULOSIS, AND GONORRHEA—ARE BECOMING HARDER TO TREAT AS THE ANTIBIOTICS USED TO TREAT THEM BECOME LESS EFFECTIVE

• ANTIBIOTIC RESISTANCE LEADS TO LONGER HOSPITAL STAYS, HIGHER MEDICAL COSTS AND INCREASED MORTALITY
KEY FACTS: ANTIMICROBIAL RESISTANCE

• ANTIMICROBIAL RESISTANCE (AMR) THREATENS THE EFFECTIVE PREVENTION AND TREATMENT OF AN EVER INCREASING RANGE OF INFECTIONS CAUSED BY BACTERIA, PARASITES, VIRUSES AND FUNGI

• THE COST OF HEALTHCARE FOR PATIENTS WITH AMR INFECTIONS IS HIGHER THAN CARE FOR PATIENTS WITH NON-RESISTANT INFECTIONS DUE TO LONGER DURATION OF ILLNESS, ADDITIONAL TESTS AND USE OF MORE EXPENSIVE DRUGS

• GLOBALLY, 480,000 PEOPLE DEVELOP MULTI-DRUG RESISTANT (MDRO) TUBERCULOSIS (TB) EACH YEAR, AND DRUG RESISTANCE IS STARTING TO COMPLICATE THE FIGHT AGAINST HIV AND MALARIA AS WELL
GERIATRIC SYNDROMES

• OLDER AGE IS ALSO CHARACTERIZED BY THE EMERGENCE OF SEVERAL COMPLEX HEALTH STATES THAT TEND TO OCCUR LATER IN LIFE AND DO NOT FALL INTO DISCRETE DISEASE CATEGORIES. THESE ARE COMMONLY CALLED GERIATRIC SYNDROMES.
483.80 INFECTION CONTROL- F441

• THE FACILITY MUST ESTABLISH AND MAINTAIN AN INFECTION PREVENTION AND CONTROL PROGRAM DESIGNED TO PROVIDE A SAFE, SANITARY AND COMFORTABLE ENVIRONMENT AND TO HELP PREVENT THE DEVELOPMENT AND TRANSMISSION OF COMMUNICABLE DISEASES AND INFECTIONS…
483.80 (A) INFECTION PREVENTION AND CONTROL PROGRAM

THE FACILITY MUST ESTABLISH AN INFECTION PREVENTION AND CONTROL PROGRAM (IPCP) THAT MUST INCLUDE, AT A MINIMUM, THE FOLLOWING ELEMENTS:

1. A SYSTEM FOR PREVENTING, IDENTIFYING, REPORTING, INVESTIGATING, AND CONTROLLING INFECTIONS AND COMMUNICABLE DISEASES FOR ALL RESIDENTS, STAFF, VOLUNTEERS, VISITORS, AND OTHER INDIVIDUALS PROVIDING SERVICES UNDER A CONTRACTUAL ARRANGEMENT BASED UPON FACILITY ASSESSMENT CONDUCTED ACCORDING TO §483.70(E) AND FOLLOWING ACCEPTED NATIONAL STANDARDS;

[AS LINKED TO FACILITY ASSESSMENT §483.70 (E), WILL BE IMPLEMENTED BEGINNING NOVEMBER 28, 2017]
483.80 (A) INFECTION PREVENTION AND CONTROL PROGRAM

• 2. WRITTEN STANDARDS, POLICIES, AND PROCEDURES FOR THE PROGRAM, WHICH MUST INCLUDE, BUT ARE NOT LIMITED:

• (I) A SYSTEM OF SURVEILLANCE DESIGNED TO IDENTIFY POSSIBLE COMMUNICABLE DISEASES OR INFECTIONS BEFORE THEY CAN SPREAD TO OTHER PERSONS IN THE FACILITY;

• (II) WHEN AND WHOM POSSIBLE INCIDENTS OF COMMUNICABLE DISEASE OR INFECTIONS SHOULD BE REPORTED

• (III) STANDARD AND TRANSMISSION BASED PRECAUTIONS TO BE FOLLOWED TO PREVENT SPREAD OF INFECTIONS;
483.80 (A) INFECTION PREVENTION AND CONTROL PROGRAM

• (IV) WHEN AND HOW ISOLATION SHOULD BE USED FOR A RESIDENT; INCLUDING BUT NOT LIMITED TO:

A. THE TYPE AND DURATION OF THE ISOLATION, DEPENDING UPON THE INFECTIOUS AGENT OR ORGANISM

B. A REQUIREMENT THAT THE ISOLATION SHOULD BE THE LEAST RESTRICTIVE POSSIBLE FOR THE RESIDENT UNDER THE CIRCUMSTANCES

(V) THE CIRCUMSTANCES UNDER WHICH THE FACILITY MUST PROHIBIT EMPLOYEES WITH A COMMUNICABLE DISEASE OR INFECTED SKIN LESIONS FROM DIRECT CONTACT WITH RESIDENTS OR THEIR FOOD, IF DIRECT CONTACT WILL TRANSMIT THE DISEASE; AND

THE HAND HYGIENE PROCEDURES TO BE FOLLOWED BY STAFF INVOLVED IN DIRECT RESIDENT CONTACT.
483.80 (A) INFECTION PREVENTION AND CONTROL PROGRAM

3. AN ANTIBIOTIC STEWARDSHIP PROGRAM THAT INCLUDES ANTIBIOTIC USE PROTOCOLS AND A SYSTEM TO MONITOR ANTIBIOTIC USE.

[§483.80 (A) (3) WILL BE IMPLEMENTED BEGINNING NOVEMBER 28, 2017 (PHASE 2)]

4. A SYSTEM FOR RECORDING INCIDENTS IDENTIFIED UNDER THE FACILITY’S IPCP AND THE CORRECTIVE ACTIONS TAKEN BY THE FACILITY.
ARKANSAS TOP TEN NON-COMPLIANCE ISSUES

• F441 HAS APPEARED EVERY SINGLE MONTH IN 2016!
• EVERY MONTH F441 HAS BEEN IN THE TOP FOUR CITATIONS!
• NON-COMPLIANCE RANGES FROM FAILING TO WASH HANDS ALL THE WAY TO “F” LEVEL OF FAILURE TO HAVE AN INFECTION PREVENTION AND CONTROL PROGRAM
§480.80 (B) INFECTION PREVENTIONIST

[§483.80 (B) AND ALL SUBPARTS WILL BE IMPLEMENTED BEGINNING NOVEMBER 28, 2019 (PHASE 3)]

THE FACILITY MUST DESIGNATE ONE OR MORE INDIVIDUAL(S) AS THE INFECTION PREVENTIONIST(S) (IP)(S) WHO IS RESPONSIBLE FOR THE FACILITY’S INFECTION PREVENTION CONTROL PROGRAM(IPCP). THE IP MUST:
INFECTION PREVENTIONIST

1. HAVE PRIMARY PROFESSIONAL TRAINING IN NURSING, MEDICAL TECHNOLOGY, MICROBIOLOGY, EPIDEMIOLOGY, OR OTHER RELATED FIELD
2. IS QUALIFIED BY EDUCATION, TRAINING, EXPERIENCE OR CERTIFICATION
3. WORKS AT LEAST PART TIME IN THE FACILITY; AND
4. HAS COMPLETED SPECIALIZED TRAINING IN INFECTION PREVENTION AND CONTROL
SPECIALIZED TRAINING

• INFECTION CONTROL DEGREES - 100% ONLINE & PART-TIME DEGREE

• FEB 23, 2017 - THIS ONLINE MPH PROGRAM PROVIDES AN OPPORTUNITY FOR INTERESTED ... RECEIVE SPECIALIZED AND INDIVIDUALIZED TRAINING IN THE FIELD OF INFECTION CONTROL ...

• INFECTION PREVENTION FOR HEALTHCARE EPIDEMIOLOGY

• SPECIALIZED CENTERS FOR DISEASE CONTROL AND PREVENTION TRAINING/ONLINE WEB-BASED INSTRUCTION (CDC)
SPECIALIZED TRAINING

- SPECIALIZED TRAINING IN INFECTION PREVENTION AND CONTROL. DATE: JUNE 6 - 7, 2017 ...
  INFECTION PREVENTION AND CONTROL HAS TAKEN CENTER STAGE AS PART OF THE CENTERS FOR MEDICARE AND MEDICAID ...
  CREDIT CARDS ACCEPTED WITH ONLINE REGISTRATIONS.
SPECIALIZED TRAINING

• APIC | CERTIFICATION

• WWW.APIC.ORG › EDUCATION & CERTIFICATION

• A GROWING NUMBER OF EMPLOYERS EXPECT CANDIDATES TO HAVE OR BE WORKING TOWARD THEIR CERTIFICATION IN INFECTION PREVENTION AND CONTROL, OR CIC®, CREDENTIAL.
SPECIALIZED TRAINING

• **INFECTION PREVENTION AND CONTROL, OR CIC®, CREDENTIAL.**

• **APIC | INFECTION PREVENTION EDUCATION**

• **WWW.APIC.ORG/EDUCATION-AND-EVENTS/OVERVIEW**

• **ADDITIONALLY, APIC ALSO SUPPORTS THE CERTIFICATION BOARD OF INFECTION CONTROL AND EPIDEMIOLOGY’S CIC® (CERTIFICATION IN INFECTION CONTROL) CREDENTIAL. PROFESSIONAL**
CMS TRAINING WEBSITE

• FREE!
• HTTP://SURVEYORTRAINING.CMS.HHS.GOV
• CLICK ON “I AM A PROVIDER”
• CLICK ON COURSE CATALOGUE
• LEARN TO YOUR HEARTS CONTENT!
IF YOUR HOME IS IN FULL COMPLIANCE WITH THE REGULATION OF F441, INFECTION CONTROL, MEETING ALL OF THE REGULATION ACCORDING TO IMPLEMENTATION DATES, THEN YOU WILL BE IN COMPLIANCE WITH THE FACILITY ASSESSMENT INCLUDED IN §483.70(E) PHYSICAL ENVIRONMENT, WITH WHAT WE KNOW AT THIS TIME (IT COULD CHANGE!) TO BE IMPLEMENTED ON NOVEMBER 28, 2017

THIS SECTION IS COMPRISED OF F454 THROUGH F469
QUESTIONS

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RESOURCES

• WORLD HEALTH ORGANIZATION
• CENTERS FOR DISEASE CONTROL
• STATE OPERATIONS MANUAL, APPENDIX PP