

# Healthcare Acquired/Associated Infections Home Care & Hospice

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# HAIs

- HAIs- infections that patients acquire while receiving treatment for another condition in any healthcare setting.
- Reduced by as much as 70%
- \$28-33 billion dollars in excess cost
- HHS Action Plan to Prevent HAIs – focus on acute care settings, ambulatory care and long term care
- Template was designed

# HAI

- 1.7 million a year
- 99,000 associated deaths
- 32% are UTIs
- 22% surgical sites
- 15% pneumonia
- 14% bloodstream infections

# HAIs

- 70% were resistant to at least one drug
- Increase cost of hospitalizations by \$32,000
- Increases costs and utilizations for homecare

# Areas of Focus

- Methicillin resistant Staph Aureus (MRSA)
- Clostridium Difficile (C Diff)
- CLABSI- Central Line Associated Blood Stream Infections
- Surgical Site Infection
- Ventilator- associated Device

# Home Care and Hospice Associated Infections

- Are those infections that were neither present nor incubating at the time of the initial admission for care in the patient's home.

## Criteria for HAI for home care

- Fever which is defined as a fever when the temp is 2.4F higher than baseline
- Defining infection is a NEW sign or symptom identified by home care personnel.

# Categories

- UTI
- Respiratory Tract
- Bloodstream
- Clinical Sepsis

# Categories

- Skin and soft tissue
- Fungal skin
- Herpes simplex or zoster
- Surgical site
- Ears, eyes, nose and mouth

# Categories

- Gastrointestinal infections
- C-diff associated Diarrhea

# What does this mean for Home Care and Hospice?

- Pay closer attention to our admissions
- Skilled clinical assessment
- Familiar with signs and symptoms of infection control
- Reporting mechanism
- Report back to facility if patient develops an infection within 48 hours

# What does this mean for Home Care and Hospice?

- Need to look at information and data more regularly
- Need to be vigilant in reporting back
- Familiar with definitions of HAIs

# Standard Precautions

Standard Precautions apply to blood, all body fluids, secretions, and excretions, *except sweat*, regardless of whether or not they contain visible blood; non-intact skin; and mucous membranes



# Transmission-Based Precautions

- Contact Precautions
- Droplet Precautions
- Airborne Precautions

## Contact Precautions

The use of gloves when coming in contact with epidemiologically important microorganisms. Gowns may be used in addition to the gloves if excessive soiling is anticipated.

Contact Precautions are designed to reduce the transmission of microorganisms by direct or indirect contact.

## Droplet Precautions

The use of a surgical mask (with or without shield) when the transmission of microorganisms involves contact of the conjunctivae or the mucous membranes of the nose or mouth.

Droplet Precautions are designed to reduce the risk of droplet transmission of infectious agents.

(Pneumonic Plague, Avian Flu)

## Airborne Precautions

Use of an N-95 respirator mask to prevent the inhalation of airborne droplet nuclei (of evaporated droplets that may remain suspended in the air for long periods of time) or dust particles containing the infectious agent.

Special air handling and ventilation are required to prevent airborne transmission. (smallpox, VHF's)



# Hospice COPS

## Infection Control- Prevention

- Follow acceptable standards of practice
- Staff know how to incorporate these standards into practice
- Training of staff
- HCW immunization
- Standard precautions

# Hospice COPS

## Infection Control-

- System wide infection program that includes surveillance, identification, prevention, control and investigation of infectious and communicable diseases.
- Data from the above will be reported to the QI/PI.

# Hospice COPS

## Infection Control- Education

- Staff
- Patient, family and caregivers
- Assist families, patients and caregivers to understand the impact an infectious disease has and the importance of minimizing it.
- Agency policy should be to minimize the spread of an infectious disease.

# *Putting It All Together*

## *The IC Program*

### Surveillance

- HICPAC definitions
- Joint Commission standards if accredited
- MDROs
- Occupational exposures

# *Putting It All Together*

## *The IC Program*

- Review of data
- Analysis
- Trend identification

# *Putting It All Together*

## *The IC Program*

### Prevention

- Employee Education and Training
- OSHA Bloodborne Pathogens
- Standard Precautions
- Occupational Health Program-PEP

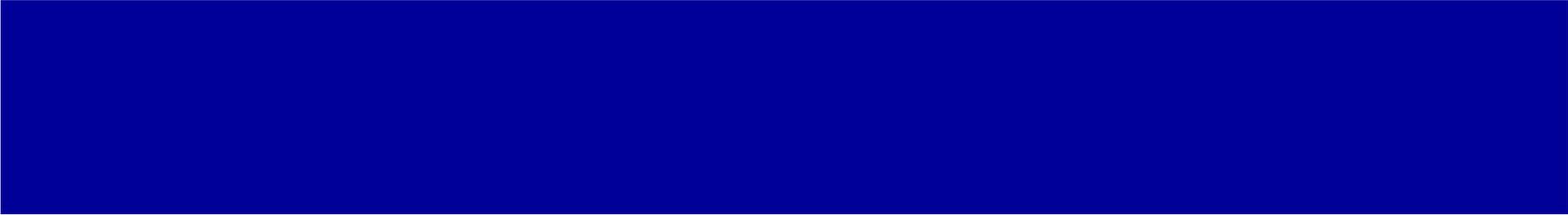
# *Putting It All Together*

## *The IC Program*

- Appoint an infection preventionist
- Handwashing program
- Patient Education
- Reporting findings to QI/PI and governing authority.

# References

- CDC. Multidrug Resistant Organisms in Non-Healthcare Settings.
- CDC. Management of Multi-drug Resistant Organisms in Healthcare Settings.
- APIC.



*“Chance favors the  
prepared mind”*

Louis Pasteur

1822-1895

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