

UCLA Medical Center



Infection Prevention

What Do We Do?

- **Reduce the risk of healthcare-associated infections**
- **Surveillance for:**
 - MDROs
 - *C. difficile*
 - Aspergillus
 - Device-Associated Infections (e.g. CLABSI)
 - Clusters/Outbreak/Exposure Tracking
- **Public reporting for healthcare consumerism**

Surveying Bodies

Joint Commission (JC)

California Department of Public Health (CDPH)

Center for Medicaid Services (CMS)

GOAL: Reduce the risk of health care-associated infections.

Caregivers should know what is expected of them with regard to hand hygiene and should practice it **consistently**.

DOES OUR PRACTICE MATCH POLICY?

Standard Precautions

Consider all blood and body fluid to be infectious.

- Hand hygiene
- Personal Protective Equipment (PPE)
- Respiratory etiquette, staff, family/visitor illness

The Far Side / BY GARY LARSON



Hand Hygiene

When?

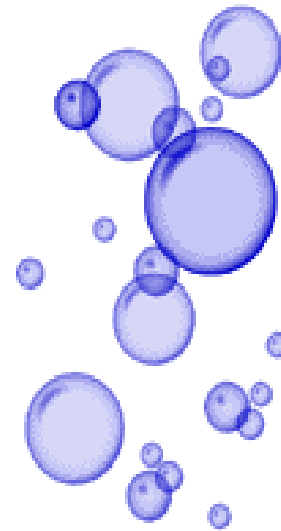
- As soon as possible if contaminated with blood or OPIM
- Before each patient contact
- After each patient contact or contact with environmental surfaces
- **After removing gloves (Gloves are not a substitute!)**
- Before touching eyes, nose, face
- After using the bathroom

Only hospital approved hand hygiene products and hand creams are permitted.

Hand Hygiene

How? – Soap & Water

- Wet hands with warm water.
- Apply soap.
- Lather hands with friction for at least 15 seconds.
- Rinse with fingertips down.
- Dry thoroughly with paper towels.
- Turn off water with paper towels.

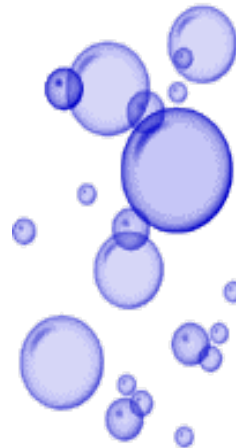


Only hospital approved hand hygiene products and hand creams are permitted.

Hand Hygiene

How? – Alcohol-based hand rub

- Alcohol-based
- Follow directions making sure to dip to cover fingernails.
- Rub hands briskly until dry.
- Not for visibly soiled hands.



Hand Hygiene - Nails

- Policy for patient care providers
- No artificial nails, tips and/or fillers
- Nail polish in good repair
- Natural nail tips less than 1/4-inch long



Personal Protective Equipment (PPE)

- Easily accessible
- Clean and dry
- PPE is a barrier



NO PPE OUTSIDE THE ROOM!

Respiratory Etiquette/Illness

- **Practice respiratory etiquette**

Cover your cough!

- **Staff and Visitor Illness**

Staff: stay home if you are sick!

Visitors: encourage visitors to stay home, educate, provide PPE, tissues, alcohol-based hand rub



Transmission Based Precautions

Used in addition to Standard Precautions.

- Airborne



- Droplet



- Contact

- Contact/Spore



AIRBORNE PRECAUTIONS



VISITORS: REPORT TO NURSES' STATION BEFORE ENTERING ROOM
VISITANTES: FAVOR DE ANUNCIARSE A LA ENFERMERA DE PISO ANTES DE ENTRAR AL CUARTO

Negative Pressure Isolation Room (NPIR) – when available
If no NPIR – private room and portable HEPA filtration unit

HAND HYGIENE



Use alcohol hand rub or wash hands with soap and water on entering and exiting room

N-95 RESPIRATOR MASK



MUST be worn when entering the room

ROOM DOOR



MUST remain closed

DROPLET PRECAUTIONS



VISITORS: REPORT TO NURSES' STATION BEFORE ENTERING ROOM

VISITANTES: FAVOR DE ANUNCIARSE A LA ENFERMERA DE PISO ANTES DE ENTRAR AL CUARTO

Private Room – when available

Special Airflow Room – not necessary

Room Door – may remain open

HAND HYGIENE



Use alcohol hand rub or wash hands with soap and water on entering and exiting room

SURGICAL MASK



MUST be worn within 3 feet of the patient

CONTACT PRECAUTIONS



VISITORS: REPORT TO NURSES' STATION BEFORE ENTERING ROOM
VISITANTES: FAVOR DE ANUNCIARSE A LA ENFERMERA DE PISO ANTES DE ENTRAR AL CUARTO

Private Room – preferred
If no Private Room – see back of sign

| | | |
|--------------|---|--|
| HAND HYGIENE |  | Use alcohol hand rub or wash hands with soap and water upon entering room |
| GLOVES |  | <u>MUST</u> be worn upon entering room |
| GOWNS |  | <u>MUST</u> be worn if contact with the patient, patient care items or environmental surfaces |
| HAND HYGIENE |  | Use alcohol hand rub or wash hands with soap and water after removing PPE and exiting room |

CONTACT/SPORE PRECAUTIONS



VISITORS: REPORT TO NURSES' STATION BEFORE ENTERING ROOM
VISITANTES: FAVOR DE ANUNCIARSE A LA ENFERMERA DE PISO ANTES DE ENTRAR AL CUARTO

Private Room – preferred
Clean Room and Equipment with Bleach-Containing Disinfectant

| | | |
|--------------|---|--|
| HAND HYGIENE |  | Wash hands upon entering room. |
| GLOVES |  | <u>MUST</u> be worn upon entering room |
| GOWNS |  | <u>MUST</u> be worn if contact with the patient, patient care items or environmental surfaces |
| HAND HYGIENE |  | Wash hands with <u>SOAP</u> and <u>WATER</u> after removing PPE and exiting room |

Patient Transport

- Stretcher or wheelchair preferred
 - Use clean sheet to cover
- Bed to be used only if patient condition warrants it
- Instructions for each type of isolation are on the backs of the signs



Other Contributing Factors

- General environmental sanitation
 - Maintain clean, dust and clutter-free environment.
- Waste streams (e.g. biohazard, linen)
 - Use leak proof containers, no sorting linen.
- Equipment
 - Properly disinfect with appropriate contact times.
- Unapproved products
 - No unapproved products in patient care areas.

Construction and Repairs

- Dust generated by construction and repairs can be harmful to patients and staff.
- Minimize dust in patient care areas by:



- Keeping closed windows and doors
- Keeping dust and debris contained
- Keeping work sites clean and dust-free

Aerosol Transmissible Diseases

- Definition: a disease or pathogen for which droplet or airborne precautions are recommended
- Examples: chickenpox, influenza, measles SARS, TB
- Emphasis on early recognition of cases and initiating precautions
- **Tuberculosis:**
 - Recognize signs and symptoms including: unexplained weight loss, night sweats, hemoptysis. Risk factors: homelessness and recent travel to TB endemic area
 - Protect patients and staff: NPIR, Airborne Precautions

Tuberculosis and LA County

- Report all suspect/active cases to DHS.
- Discharge must be approved by DHS prior to patient leaving hospital.
 - On weekends and holidays, MD must call TB physician on-call for approval.
 - Documentation of approval must be in chart.
 - Where, when, MD, f/u appt, drug regimen
 - Assessment of home environment

What did we just talk about?

- Hand hygiene
- PPE
- Respiratory Etiquette
- Transmission Based Precautions
- ATD/Tuberculosis
- Remember everything you touch was touched by someone else!

Contact Information

Ronald Reagan UCLA Medical Center

- **Office:** 40187
- **Fax:** 40195
- **Director/IC Officer:** Zachary Rubin MD (p24870)
- **IP:** Teresa Zaroda (p90339)
- **IP:** Dana Russell (p91417)
- **IP:** Gelila Gizaw (p94168)
- **IP:** Alisa Trout, Surgical Site Infection Coordinator (p99335)
- **Admin. Analyst:** Carlos Acosta

Santa Monica-UCLA Medical Center and Orthopaedic Hospital

- **Office:**
- **Fax:**
- **Director/IC Officer:** Dan Uslan, MD (p24981)
- **IP:** Geri Braddock (p94519, office 98538)
- **Admin. Analyst:** Luck Cook