

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?

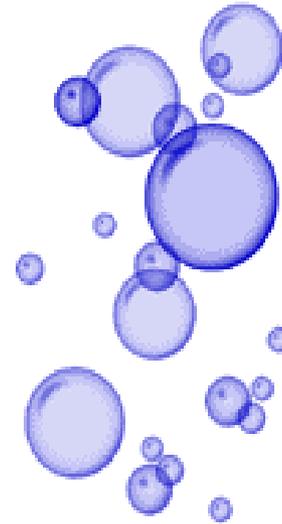
- As soon as possible if contaminated with blood or OPIM
- Before each patient contact
- After each patient contact or contact with environmental surfaces
- **After removing gloves (Gloves are not a substitute!)**
- Before touching eyes, nose, face
- After using the bathroom

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.

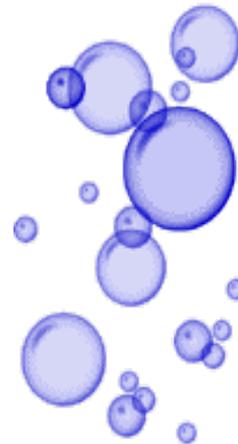


Only hospital approved hand hygiene products and hand creams are permitted.

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.



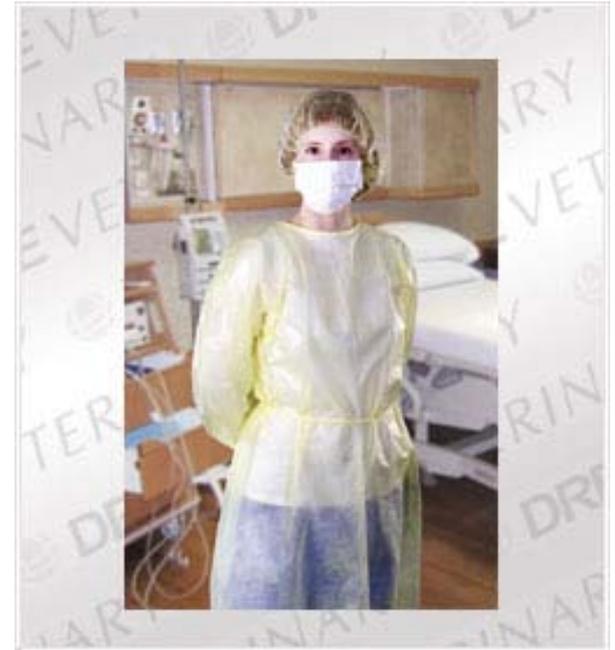
Hand Hygiene - Nails

- 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