



MedTrainer

GUIDE

Maintaining an Effective Infection Control Plan in a Changing World



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Balancing New Risks and Impact to the Bottom Line

In a world of rapidly emerging diseases, antibiotic resistance, changing regulations, and significant staffing challenges, infection control and prevention is a constant concern.

Its impacts are felt all the way down to the bottom line. It costs far less to prevent infection than to fight it. Healthcare-acquired infections (HAIs) **cost more than \$28.4 billion annually.**

The viability of a healthcare facility depends on an effective infection control plan (ICP) and supporting resources.

But as infections and the environment continue to evolve, it is tough to maintain your ICP and ensure you're survey ready.

In this guide, you'll find:

- ICP details that surveyors say ASCs often miss
- Cheat sheet to avoid the most common deficiencies
- Predictions for the future of infection prevention

Value of an Infection Control Program

There is incredible value in the prevention of infection beyond just reducing HAIs and post-surgical infections. That value comes in the form of dollars, time, and productivity.

Here's a look at some of the ways infection prevention adds value.

Reduce deficiencies and fines.

Year-after-year infection prevention-related deficiencies are among the **highest reported** and can put accreditation or reaccreditation in jeopardy.

Smoother accreditation process.

A solid ICP helps to reduce infection prevention deficiencies so that staff can focus on – and reduce – other potential issues.

Increase in facility volume.

ASC volume is expected to **grow 15% by 2028**. A low infection rate and the resulting higher patient satisfaction will help to capture more of those procedures.

Improve employee retention and morale.

There's no one answer to the nationwide staffing shortages, but an emphasis on safety and reduction in return visits and care protocols can reduce the strain on staff.



Common Infection Prevention Deficiencies

An effective ICP supports the foundational goal of recognizing and minimizing the spread of infection. It's a continuous cycle that starts with training and risk identification and ends with tracking improvement.

Sometimes it is a tiny detail that prevents an infection from spreading – or puts your accreditation in jeopardy. Here's a look at the most common infection prevention deficiencies.

Most common infection control deficiencies found by **Accreditation Association for Ambulatory Health Care (AAAHC) surveyors in 2022.**

7.1.A The organization has a written program for infection prevention and control.

2. The program is relevant to the organization as demonstrated by a formal, documented infection prevention risk assessment.

7.1.B The written infection prevention and control program describes how infections and communicable diseases are prevented, identified, and managed.

2. To reduce the risk of healthcare-acquired infection (HAI), the program requires education and active surveillance consistent with:
(a) WHO, CDC, or other nationally recognized guidelines for hand hygiene and (b) CDC or other nationally recognized guidelines for safe injection practices.

7.1.D Safe processes are used for the cleaning, decontamination, high-level disinfection, and sterilization of instruments, equipment, supplies, and implants.

4. Cleaning, decontamination, high-level disinfection, and sterilization processes adhere to: (a) nationally recognized guidelines, (b) manufacturer's instructions for use, and c) state and federal guidelines.

Before you dismiss these standards with the assumption your ICP is fine, keep reading for hints that surveyors shared with MedTrainer.

Details Your Infection Control Program Needs

Are you worried that certain infection and prevention requirements will be scored non-compliant when your organization has a written policy you believe meets the standard?

These are some of the details and nuances that surveyors say are often missed.

COVID-19 Vaccination Process

This missing detail can really cost you. Failure to report COVID-19 vaccinations may result in a loss of Medicare reimbursement by up to 2%.

This mandate comes from the Centers for Medicare & Medicaid Services (CMS) and has been extended through 2023. Ensure you have a documented process for tracking COVID-19 vaccinations, resources in place to educate staff, and policies for evaluating exemptions.

Save or print the cheat sheet at the end of this guide.



Consideration of Environmental Hygiene Needs

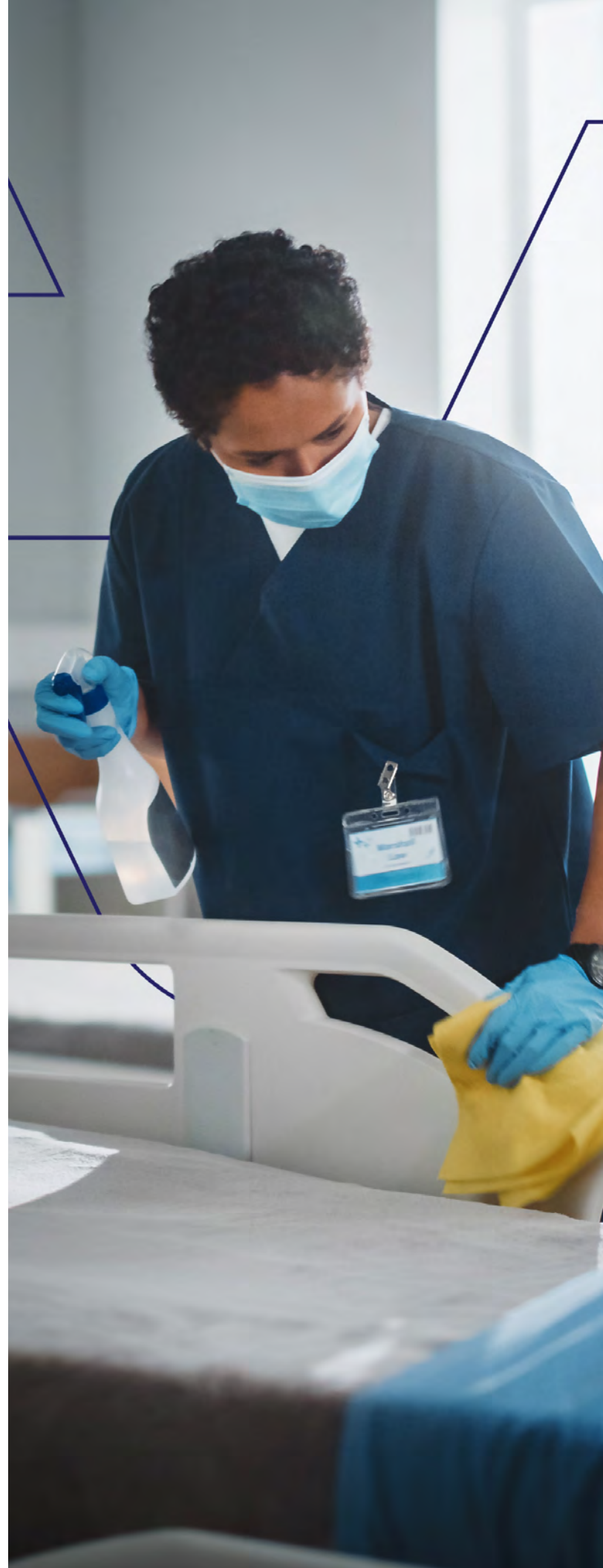
The most common healthcare-associated pathogens are known to survive on surfaces for hours or days, some for weeks and a few for over a year. As patient volumes increase, new consideration must be given to room turnaround expectations and how surfaces and equipment are disinfected. It may even require **going beyond** traditional infection control procedures. Documented procedures are needed in your ICP, along with employee access to proper training and manufacturer instructions.

350,000

Number of times courses on disinfection are watched annually on the **MedTrainer platform**

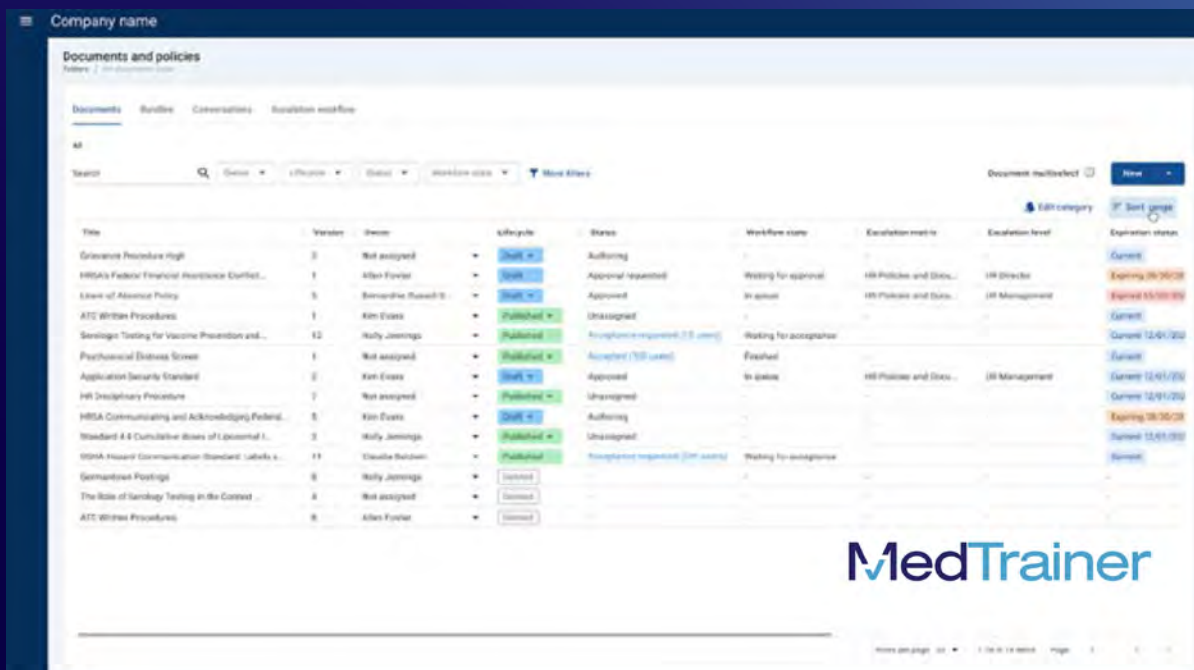
Documentation for Your Infection Preventionist

A well-designed ICP does not require perfection, but must include a licensed healthcare professional qualified by training and designated to direct the infection control program. This person can be an employee or a contractor who is regularly available to manage the facility's infection control program. Documentation for this person should include a job description, credentials, and easy access to courses and training completed.



Documentation of ICP Training

In addition to all regulatory–required training, training on the infection control program must be provided to physicians, clinicians, and support staff. This simple requirement is an easy one to miss in the never–ending list of accreditation needs. Just be sure to document the training with inclusion of the method and date the training was provided.



Storing all documents and policies in an online compliance platform ensures you and your team can easily find all the information you need during a surveyor visit.

Evidence Proving All Regulations are Included

The Joint Commission has identified that organizations get unexpected deficiencies because they are relying on evidence-based guidelines alone, without consideration for state regulations, CMS conditions for participation, equipment manufacturer instructions for use, national standards, and consensus documents. To avoid a deficiency related to **42 CFR 416.51(b)**, you must be able to document that you considered and selected specific guidelines even if your infection control practices comply with generally accepted standards of practice/national guidelines. If you neither selected nationally recognized guidelines nor comply with generally accepted infection control standards of practice, then you will be cited for a condition-level deficiency.

Leadership Support

Setting up training and policies will not have the intended positive outcomes unless there is support from leadership backing them up. Leadership needs to not only drive home the importance of compliance, but also act as a resource for staff who have questions, concerns, and noncompliance reports. Along with support from leadership, a diverse set of ICP champions should be selected from among the staff. These program champions can work with their colleagues to help them understand the importance of the program and enforce compliance.



Explicit Incident Reporting Process

Enabling staff and providers to utilize incident reporting for infection control issues in a non-confrontational manner can result in productive dialog and process improvement. This will likely increase the volume of incident reports in your facility, so streamlining and documenting the process – and resulting improvements – will be important. Including incident reporting guidance in your ICP is a measure of prevention.

Incident #	Incident Type	Location	Department	Report Creation Date	Incident Date	Resolution Date	Status	Elapsed time
96409648	Vandalism-work Property (x2)	Fawcett	Clinical	05-25-2022 18:12:39	05-25-2022	05-25-2022	Resolved	00:00:00 ago
44024386	Flood	Stars Hollow	Non-Clinical	02-15-2022 15:09:03	02-05-2022	01-10-2023	Resolved	34 days 22 hours ago
42504839	Physical Violence/Staff	Stars Hollow	Non-Clinical	02-15-2022 15:08:24	02-01-2022	01-10-2023	Resolved	34 days 22 hours ago
01777490	Influenza	Springfield	General	02-15-2022 15:07:23	02-04-2022	01-10-2023	Resolved	34 days 22 hours ago
62511397	Hazardous	Springfield	General	02-15-2022	02-03-2022	01-10-2023	Resolved	34 days

Using a unified compliance platform, you can customize incident report templates for the types of issues you want reported – from supply to behavior issues. Plus all reports are searchable so you can identify trends for even greater infection prevention.

Inclusion of Antibiotic Stewardship

Proper prescription and use of antibiotics are critical to ensuring an ICP protects patients and staff while also minimizing antibiotic resistance. **Antibiotic stewardship** includes optimizing and monitoring the ways antibiotics are prescribed, dispensed, and monitored to ensure they aren't being prescribed unnecessarily and are correctly dispensed by staff. When considering antibiotic stewardship, it is vital that staff know the signs of sepsis and the importance of antibiotics to treat this potentially deadly condition.

Insight From an Infection Control Gap Analysis

As part of your annual facility infection risk assessment, run an Infection Control Gap Analysis to help leaders identify and prioritize ICP updates based on risk. This helps to align policies, staff training, environmental considerations, personal protective equipment (PPE) availability, and open the lines of communication with ASC staff. Don't forget to document the annual review of your ICP and subsequent approval by the governing body or sole proprietor.

Take advantage of the easy-to-use Infection Control Gap Analysis tool within the MedTrainer compliance platform.

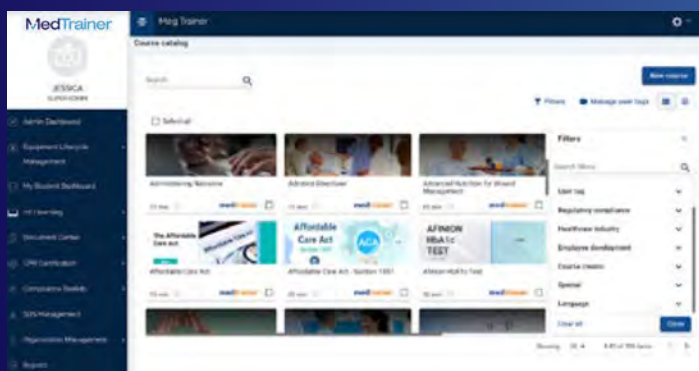


Teach Staff to Recognize Risk

Infection can happen in many ways and too many scenarios to possibly train for. All ASC staff should have the proven ability to apply essential knowledge and skills based on their role, and the ability to prevent infections and cross-transmission. By giving employees access to policies and documents, they can review the correct use and ensure they are following policies and training. Plus staff access to the ICP and supporting documentation can create powerful interactions between staff and surveyors so that both are confident in the response and results.

MedTrainer's Most Popular Infection Control Courses

- ✓ Introduction to Infection Control
- ✓ Personal Protective Equipment (PPE)
- ✓ Bloodborne Pathogens
- ✓ Hand Hygiene and Infection Control in Surgical Settings
- ✓ General Safety Orientation



Using an unified compliance platform puts your organization's information and resources in one place alongside online training for easy access.

Looking to the Future of Infection Prevention

The future of infection control and prevention in healthcare facilities is evolving, and although we are not likely to gain a national consensus on how to prevent and manage outbreaks or overcome antibiotic resistance, we are becoming more “infection prepared.”

When an ASC is “infection prepared,” it means you’re identifying risks, educating staff, and measuring what matters most to prevent HAIs.

The future of infection prevention will require an all-in-one compliance platform, such as MedTrainer, to reduce deficiencies, better protect patients, and increase facility volume.

How MedTrainer Streamlines Infection Prevention

- ✔ Puts all documents, policies (and acknowledgments), training, and manufacturer instructions in one place that is accessible by all staff, at any time.
- ✔ Highlights gaps in training and incident trends through real-time reporting so you can make ICP improvements.
- ✔ Offers comprehensive infection prevention and control courses designed specifically for ASCs.

***See MedTrainer
in Action***

Double Check These Details to Eliminate Infection Prevention Deficiencies

Sometimes it is a tiny detail that prevents an infection from spreading – or puts your accreditation in jeopardy. Use this cheat sheet to be sure you aren't missing the details and nuances that surveyors often see.

- Consider room turnaround expectations and how surfaces and equipment are disinfected.
- Ensure you have a documented process for tracking COVID-19 vaccinations, resources in place to educate staff, and policies for evaluating exemptions.
- Store a job description, credentials, and easy access to courses and training completed for the facility's (required) infection preventionist.
- Document training on your Infection Control Plan. Include the method and date the training was provided.
- Document your consideration and selection of nationally-recognized infection control guidelines even if your infection control practices comply with generally accepted standards of practice.
- Use incident reporting of infection control issues as a preventative measure by offering a non-confrontational environment designed for process improvement.
- Include antibiotic stewardship practices as part of your ICP. Include documentation on the ways antibiotics are prescribed, dispensed, and monitored.
- Run and document an Infection Control Gap Analysis annually to help leaders identify and prioritize ICP updates based on risk. Be sure to track approval by the governing body or sole proprietor.
- Enable staff to apply essential knowledge and skills based on their role and ability to prevent infections and cross-transmission. Ensure staff can access the ICP and supporting documentation during surveys and visits.

Find out how MedTrainer can improve infection prevention.

[Learn More](#)