COVID-19 and HAI Updates and Q&A Webinars for Long-Term Care and Congregate Residential Settings

August 4th, 2023

Housekeeping

- All attendees in listen-only mode

- Submit questions via Q&A pod to **All Panelists**

- Slides and recording will be made available later

- For continuing education credit, complete evaluation survey upon end of webinar
  - Must be registered individually to receive credit

Agenda

- Upcoming Webinars
- Training, Auditing, and Feedback: Continual Improvement
- Open Q & A

Slides and recording will be made available after the session.

3

Upcoming Infection Prevention and Control Q&A
1:00 pm - 2:00 pm

Date	Infection Control Topic	Registration Link
Friday, August 4th	Training, Audit, Feedback	https://illinois.webex.com/weblink/register/rb6431b64bf7a47cbb0ff408c415bba8f
Friday, August 18th	Respiratory Protection	https://illinois.webex.com/weblink/register/r0f40c1aff7aad66e31b0c07bb567b898
Friday, September 15th	Response to an Outbreak of Respiratory Disease	TBA

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Training, Auditing, and Feedback: Continual Improvement

Mike Bierman

Infection Control Coordinator,

Illinois Department of Public Health

Thomas C. Roome,

Infection Control Coordinator,

Illinois Department of Public Health

E. Coli SEM

Conflicts of Interest and Disclosures

Mr. Roome and Mr. Bierman have no relevant financial relationship(s) with any ineligible or eligible companies, or other conflicts of interest to disclose.

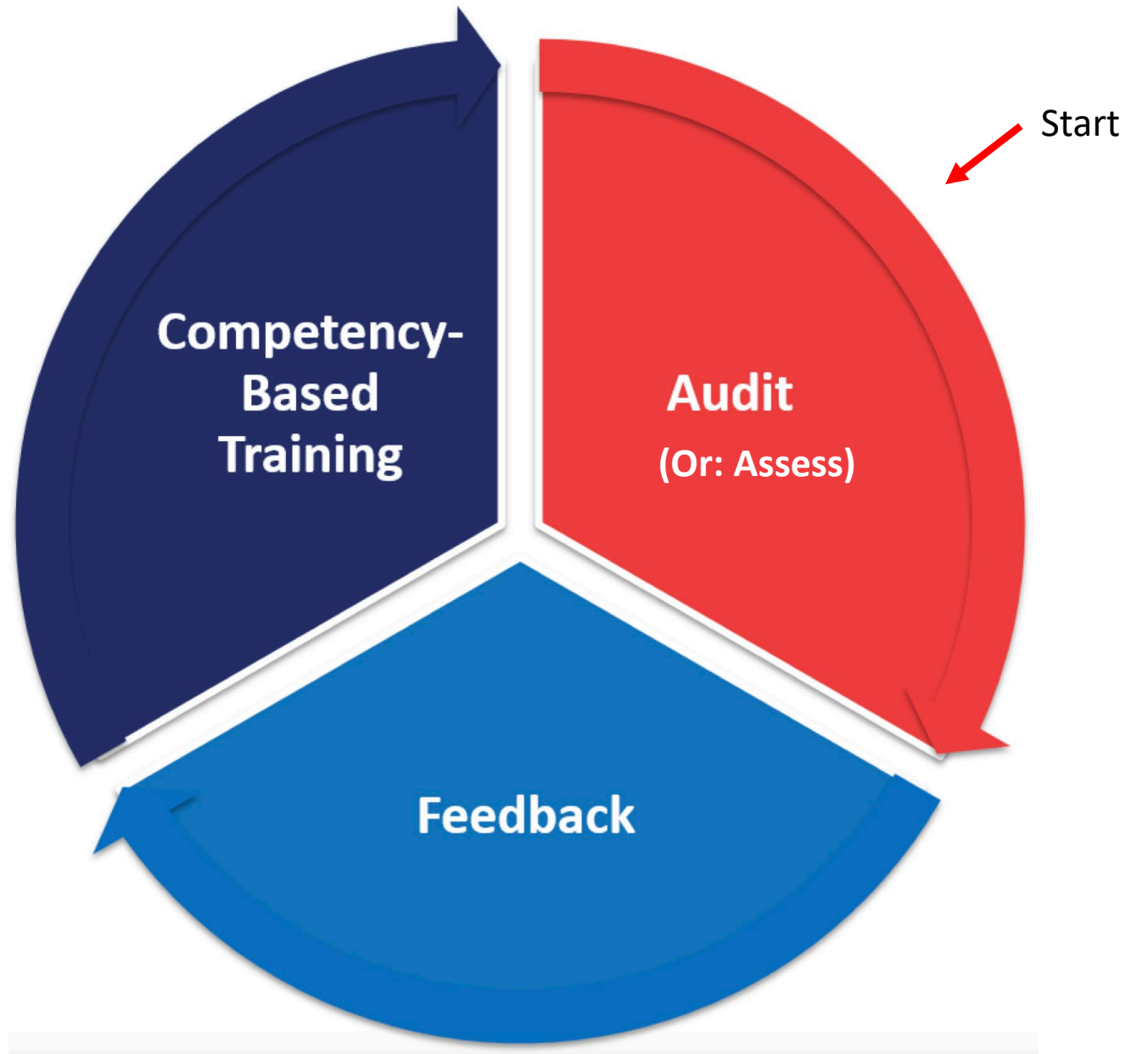Both are currently employed solely by Illinois Department of Public Health.

Learning Objectives

1. Draw Connections between training, auditing, and feedback and the importance of this relationship for Infection Prevention and Control and Performance Improvement.

2. Explain the advantages of auditing Infection Prevention and Control (IPC) practices, and be able to justify why facilities should audit.

3. Appraise to whom an IP should provide feedback, and why.

4. Explain why training is important, and the disadvantages of providing training without also performing auditing and feedback.

5. Be able to start formulating a system of auditing, feedback and training.

Infection Prevention and Control (IPC)

- IPC is a process of continually honing, improving, and adapting our practices and policies to better prevent infections.

- It can't be static; things change, and adaptation is required:
  - New threats can emerge (both inside and outside the facility)
  - New issues can come to light
  - Regulations/standards/best practices change

- It's important to stay vigilant and be aware of practices at your facility; this will allow you to assess and address problems as they come up.

- This is the essence of Quality Assurance and Performance Improvement (QAPI), QAPI and IPC fit hand in glove.

Training, Auditing, and Feedback: a Cyclical Process

Competency-Based Training

Audit (Or: Assess)

Feedback

Start

Source CDC Using Audits to Monitor IPC Practices: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT102-508.pdf

Auditing and QAPI

- The QAPI cycle of Plan Do Study Act, and the Cycle of Audit, Feedback and Competency-based Training are intimately connected.

- Planning occurs when setting up an auditing program for the first time, or at the beginning of a new cycle when assessing goals, what has already been done, and how to proceed.

- During 'do' we start to implement the plan for improvement

- Study corresponds to auditing, whereby we collect data that will inform our practice.

- Act to provide a training or an intervention, informed by the previous steps, with the goal of addressing issues identified while studying/auditing.
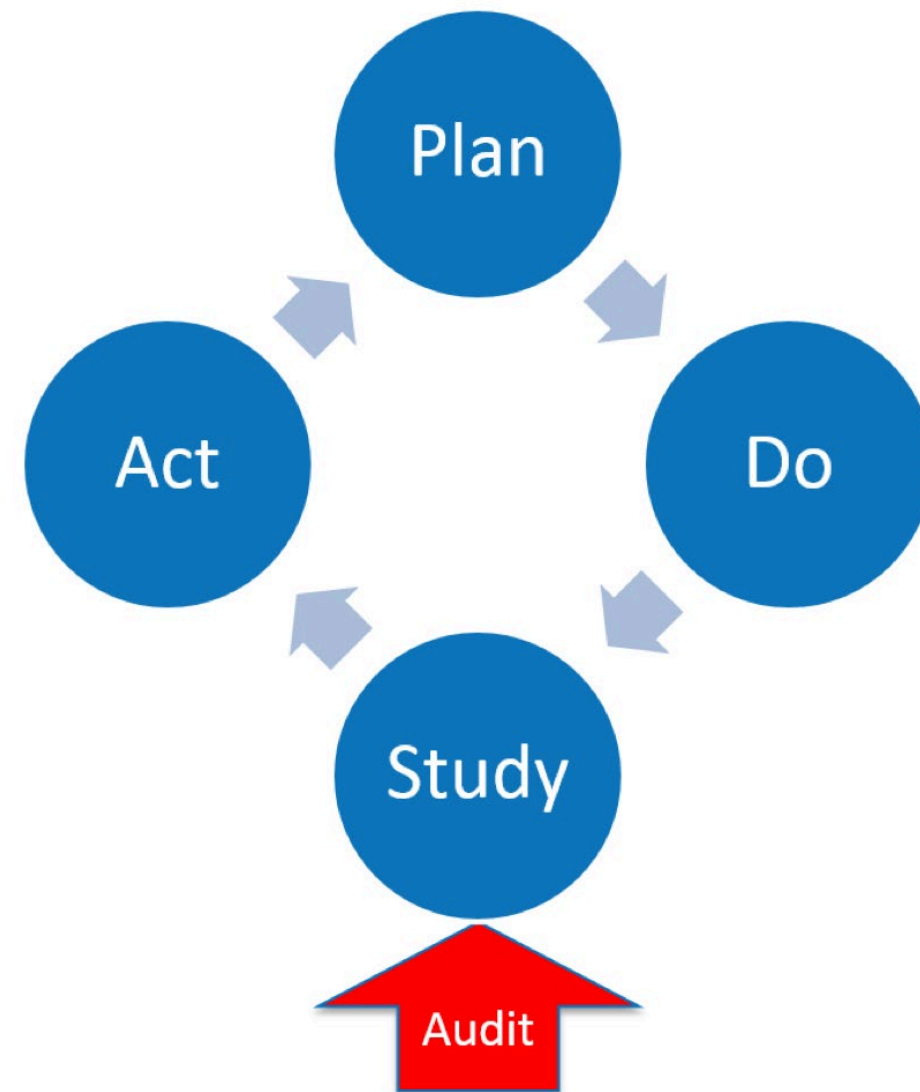
Above and Beyond Policy

- Policy is an important part of ensuring proper practice; however, after setting policies, providing education and competency-based assessments for staff, and planning implementation, the question remains......

- But how do you know that policies are adhered to *in practice*?
  - How can you identify problems with *practices*?
  - How could you *target education/interventions* reliably?
  - How would you know that an intervention (such as staff training) *actually worked*?

- In order to accomplish these goals, requires *continually monitor* IPC *practices*.

*"There are two pieces that are unique to what IPs and healthcare epidemiologists bring to the table: **Data —** knowing what is happening in your institution — and the **knowledge** of what needs to be done to prevent infections. Those are the reasons people will invite you when discussing problems related to healthcare safety — because its something the others don't know."*

–Denise Cardo, MD,
    Director, CDC Division of Healthcare Quality Promotion

Source:
California Department of Public Health The role of the IP: https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/SNF_OnlineIPCourse_B.s_RoleOfIP_012521_ADA.pdf

What is Auditing?

- CDC Definition: Auditing is the "Process of conducting an objective review of job-specific IPC practices"

- A more detailed definition: Auditing is a process of **directly observing** and **collecting data** on how staff employ **important IPC practices** to **monitor adherence** and **guide improvement** of those practices.

- Fundamentally, auditing is part of surveillance, one of the most important IPC practices.

Sources:
CDC ICAR Tool, Training Auditing and Feedback Facilitator Guide https://www.cdc.gov/infectioncontrol/pdf/icar/IPC-mod1-training-audits-508.pdf
AHRQ Observational Audits for Improving IPC Practice for COVID-19 https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/observational-audits.pdf
CDC Using Audits to Monitor IPC Practices: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT102-508.pdf

Auditing

- In healthcare, **audits** measure Healthcare Personnel's (HCP) adherence with standards and best practices in order to improve resident care.
  - **They help us identify what practices need improving.**
  - And provide **data** to **guide improvement** efforts and help **ensure our efforts are** as **effective** as possible.

- Direct observation auditing involves watching staff as they work and recording data regarding the rate of adherence with IPC Practices
  - **Opportunities** are situations in which a given practice *should* be performed.
  - **Adherence** would mean that the correct practice *is* performed during an opportunity.

What IPC Practices should be Audited?

Core Infection Control Measures, and more!

Hand hygiene

Transmission Based Precautions (TBP)

PPE use

POC Testing

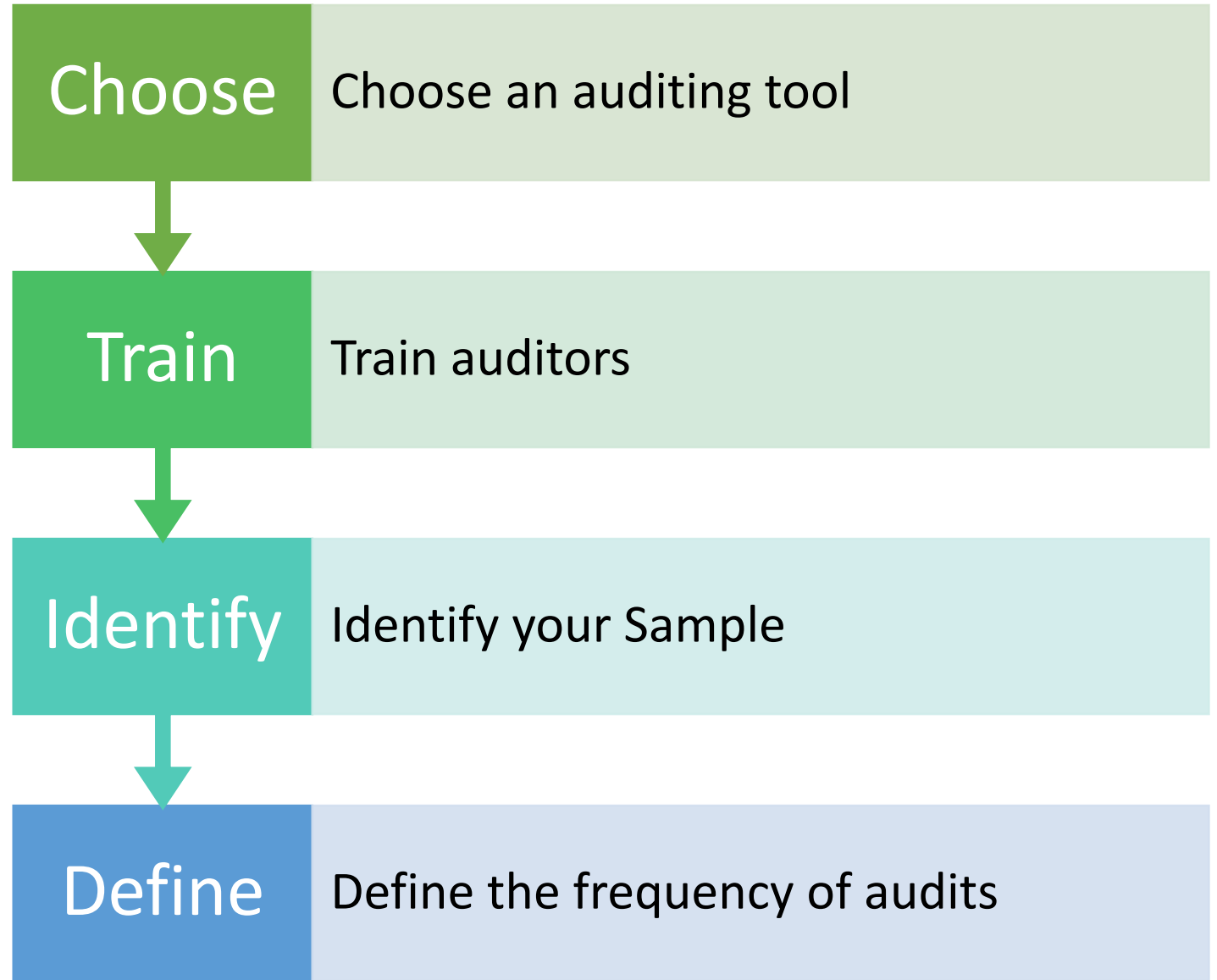Practices surrounding Injection safety & dialysis

And *any* practices causing issues

Sources: CDC Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings:
https://www.cdc.gov/infectioncontrol/guidelines/core-practices/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fhicpac%2Frecommendations%2Fcore-practices.html#anchor_72633
CDC ICAR Tool, Training Auditing and Feedback Facilitator Guide
https://www.cdc.gov/infectioncontrol/pdf/icar/IPC-mod1-training-audits-508.pdf

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Opportunities

- Each time a person *should* perform an IPC practice is considered an 'opportunity'.
  - i.e., an opportunity refers to a chance to perform a practice properly.

- Opportunities are the first thing to look for when auditing.

- Then, observe, and record whether the right thing was done in that opportunity.

- Example: Hand hygiene before entering a resident's room. Wearing a N95 respirator when caring for a resident with COVID-19.

Preparing an Auditing Program

Choose	Choose an auditing tool
Train	Train auditors
Identify	Identify your Sample
Define	Define the frequency of audits

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Auditing Tools

Auditing tools:	Can be electronic or paper
• Help guide and prompt auditors, and • Ensure the collection of complete data.	• Electronic: Apps such as GoAudit or Speedy Audit etc. • Paper: many organizations have examples online, or you could make your own.

Sources: AHRQ Hand Hygiene Observational Audit Tracking Tool: https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/hand-hygiene-observational-audit-tool-tt.xlsx
AHRQ PPE COVID-19 Observational Audit Tracking Tool https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/ppe-covid19-audit-tracking-tool-tt.xlsx
Examples **only**: no endorsement implied
GoAudit: https://goaudits.com/healthcare/
Speedy Audit: https://www.speedyaudit.com

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Train Observers

- Training your observers ensures that data collection is consistent between them.

- This training should include:
  - A refresher on proper techniques for the practices they'll audit.
  - The purpose of auditing.
  - Explaining how things are being defined for auditing purposes (i.e., opportunities, what is considered missed etc.)
  - Ensuring feedback is provided appropriately.
  - The importance of being unbiased.

Choose your Sample/Samples

The IDPH IP Team *usually* recommends LTCFs audit across the whole facility to get the most benefit

Auditing doesn't *always* have to be whole-house.

It may be challenging to audit many practices across the whole facility, or to collect a lot of data, when just starting.

However, it can help to start on a single unit or floor.

Define the Frequency and Scope of Audits

- CDC does not recommend a specific number of observations be collected.
  - They do state "*small sample sizes may result in biased data, preventing valid assessment of practices and improvements.*"

- *For long-term Care; at least* 30 observations/unit/month for each practice should provide adequate data.

- When setting the scope of auditing two important factors should be considered:
  - Who will be the subject of auditing?
  - And where in the building do you want to audit?

Interrupted Audits

- So, you're auditing, and see something is about to be done incorrectly.

- If you don't intervene, it could potentially result in harm (i.e. negative consequences for a resident or staff member).

- Interrupted audits refer to intervening and providing feedback and guidance to the HCP being observed *before* the error could be made that could affect a resident or staff member.

Getting Started:

- It is important to **ease** into auditing.
  - Having a very complicated auditing program from the start may hurt your program's chances for success.
  - It would also make launching your program very difficult.

- After you've got the basics of auditing down in practice, then start scaling up and adding more.

Feedback

What is Feedback

- Feedback is defined as *"a summary of audit findings that is used to target performance improvement."*

- Feedback can come in different forms:
  - Interrupted audits are valuable; however, they only reach one staff member at a time.
  - Communicating findings to leadership and staff
    - Will allow us to reach a broader audience, especially when coupled with Performance improvement activities.

- Part of Performance Improvement is sharing the data used to make targeting decisions
  - This will help support your interventions and demonstrate why they're necessary.
  - And it ensures transparency.

Sources:
CDC How to Provide Timely and Effective Feedback: https://www.cdc.gov/hai/pdfs/tap/Feedback-Packet-508.pdf
CDC Using Audits to Monitor IPC Practices: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT102-508.pdf
https://www.ahcancal.org/Survey-Regulatory-
Legal/Pages/QAPI.aspx#:~:text=Quality%20Assurance%20and%20Performance%20Improvement%20(QAPI)%20is%20a%20data%20driven,and%2

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Feedback Cont.

- CDC recommends IPs *"provide prompt, regular feedback on adherence and related outcomes to healthcare personnel and facility leadership."*

- Basically, you need to make people aware;
  - Immediately, feedback comes in the form of education on best practices through interrupted audits.

  - However, in the longer term,
    - Auditing results should be communicated to leadership.
    - Results should also be made available to staff

Sources:
CDC How to Provide Timely and Effective Feedback: https://www.cdc.gov/hai/pdfs/tap/Feedback-Packet-508.pdf

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Communicating Feedback

- First, we need to be sure to communicate in effective meaningful ways:
  - Use the data that has been collected through auditing.
    - Saying 'hand hygiene is not good' isn't nearly as helpful as saying 'hand hygiene compliance rate is currently 62% with a goal of at least 80%'
  - In addition, include the time period and method through which data was collected.
    - 'During the 4th quarter of 2022, our hand hygiene compliance rate was 62% with a goal of at least 80%, as assessed by direct observation auditing.'
  - In addition, the feedback needs to be widely available.
    - Meetings, emails, posting in key, staff-only, areas of the facility etc. are helpful to communicate your feedback.

Communicating Feedback: Tone

- Communicating feedback shouldn't be a negative experience, however, it's often necessary to communicate that practices aren't where they need to be.

- There are several strategies to help set a positive, constructive tone when communicating feedback:
  - When providing feedback always be sure to include things that are being done well too. (the complement sandwich approach)

  - If there is improvement, remember to congratulate staff for their success and thank them for their hard work.

  - If practices need a lot of improvement, communicate that, but put the focus on what can be done to remedy the situation.

  - Express confidence in your team's ability to improve practices

  - Consider trying to make auditing and feedback a game or healthy competition

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Competency-Based Training

Education: Infection Prevention and Control Practices

- Routine education should be performed in a few different circumstances:

  - Upon Hire

  - Annually

  - Whenever new processes are implemented, or new products are introduced.

  - And in response to outbreaks and other situations that indicate practices may not be adequate.

- Interrupted audits are education provided in-real time when poor practices are observed.

Sources:
CDC occupational Infection Prevention and Control Education and Training: https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/training.html
CDC Competency-Based Training for Infection Prevention: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT101-508.pdf

Practices that Require Training?

- At minimum, staff should receive training on the core Infection Prevention and Control Measures
  - Hand Hygiene
  - Use of PPE
  - Environmental Cleaning and Disinfection
  - Reprocessing of Reusable medical equipment
  - Safe Injection Practices
  - Point of Care testing
  - Blood-Borne Pathogen Training
  - And TB Training

- However, virtually any practice may require training.
- This training should be job-specific
  - Staff in different jobs may have different roles in these practices.

Tips for Training

- The goal of training is to ensure that staff know *how* to perform tasks appropriately and *why* it's important to do so.

- The Infection Preventionist should be responsible for providing IPC training.

- Methods borrowed from education, and the Professional Development Model may be helpful to ensure training is as effective as possible:
  - *"Professional development (PD) is a consciously designed, systematic process that strengthens how staff obtain, retain, and apply knowledge, skills, and attitudes."*

- There are also resources available from CDC to help develop training
  - CDC Quality Training Standards: https://www.cdc.gov/training/development/pdfs/standards/qts-508.pdf
  - CDC Training Developer Checklist:. https://www.cdc.gov/training/development/pdfs/standards/qts-checklist-508.pdf

- For those with the APIC Text, Chapter 3 has information regarding active learning.

Quality Training

- In 2018 the CDC set standards for the training that they would develop or fund. These standards are also useful for developing any training.

- According to CDC, quality training should:
  1. Be informed by a **needs assessment**
  2. Include **learning objectives**
  3. Be **accurate and relevant**
  4. Include opportunities for **Learner Engagement**
  5. Be designed for **usability and accessibility**
  6. Be evaluated to **inform improvement**
  7. Includes an opportunity for **learner assessment**
  8. Include Follow-up **Support for Learners**

Following Training

- Knowledge and technique should also be evaluated through a competency-based Assessment.
    - This will normally consist of a test or quiz to assess staff understanding of the topic
    - Followed by a demonstration to ensure that staff can apply that knowledge and perform the task appropriately.

- Finally, training is statutorily required, so maintaining documentation is very important.

Thank You!

We'll now move on to the Q&A session.

References and Resources:

- CDC Quality Training Standards: https://www.cdc.gov/training/development/pdfs/standards/qts-508.pdf

- CDC Training Developer Checklist:. https://www.cdc.gov/training/development/pdfs/standards/qts-checklist-508.pdf

- AHRQ Hand Hygiene Observational Audit Tracking Tool: https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/hand-hygiene-observational-audit-tool-tt.xlsx

- AHRQ Observational Audit Tracking Tool User Guide: https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/hand-hygiene-audit-tool-userguide.pdf

- AHRQ PPE COVID-19 Observational Audit Tracking Tool https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/ppe-covid19-audit-tracking-tool-tt.xlsx

- AHRQ Observational Audits for Improving IPC Practice for COVID-19 https://www.ahrq.gov/sites/default/files/wysiwyg/nursing-home/materials/observational-audits.pdf

- CDC ICAR Tool, Training Auditing and Feedback Facilitator Guide https://www.cdc.gov/infectioncontrol/pdf/icar/IPC-mod1-training-audits-508.pdf

- CDC COVID-19 Training Resources for Healthcare Professionals: https://www.cdc.gov/coronavirus/2019-ncov/hcp/training.html

- California Department of Public Health The role of the IP: https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/SNF_OnlineIPCourse_B.s_RoleOfIP_012521_ADA.pdf

- CDC Using Audits to Monitor IPC Practices: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT102-508.pdf

- AHRQ, Health Literacy Universal Precaution Toolkit 2nd Edition, Plan-So-Study-Act (PDSA) directions and Examples: https://www.ahrq.gov/health-literacy/improve/precautions/tool2b.html

- CDC Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings: https://www.cdc.gov/infectioncontrol/guidelines/core-practices/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fhicpac%2Frecommendations%2Fcore-practices.html#anchor_72633

- CDC How to Provide Timely and Effective Feedback: https://www.cdc.gov/hai/pdfs/tap/Feedback-Packet-508.pdf

- CDC occupational Infection Prevention and Control Education and Training: https://www.cdc.gov/infectioncontrol/guidelines/healthcare-personnel/training.html

- CDC Competency-Based Training for Infection Prevention: https://www.cdc.gov/infectioncontrol/pdf/strive/CBT101-508.pdf

- CMS QAPI Five Elements https://www.cms.gov/medicare/provider-enrollment-and-certification/qapi/downloads/qapifiveelements.pdf

- AHCA/NCAL Quality Assurance/Performance Improvement (QAPI): https://www.ahcancal.org/Survey-Regulatory-Legal/Pages/QAPI.aspx#:~:text=Quality%20Assurance%20and%20Performance%20Improvement%20(QAPI)%20is%20a%20data%20driven,and%20Performance%20Improvement%2

Open Q&A

Submit questions via Q&A pod to **All Panelists**

Please do not resubmit a single question multiple times

Slides and recording will be made available after the session.

Reminders

- For continuing education credit, please fill out the evaluation survey upon end of webinar

- SIREN Registration
  - To receive situational awareness from IDPH, please use this link to guide you to the correct registration instructions for your public health related classification: http://www.dph.illinois.gov/siren

- NHSN Assistance:
  - Contact Telligen: **nursinghome@telligen.com**