

# The Infection Preventionist Roadmap Series

This is the second installment of our “IP Tip Sheets” intended to assist and support the Infection Preventionist (IP) in the long-term care setting. In the first installment of our “IP Tip Sheets” series, we delved into the antibiotic stewardship aspects of the Infection Prevention & Control Program (IPCP), with the Infection Preventionist leading the team in a successful IPCP. As we continue exploring the role of the IP in the IPCP, this second installment will focus on the **system of prevention, identification, reporting, investigating, and controlling infections.**



A major component of the IPCP, this system should cover all residents, staff, visitors, volunteers, and contracted individuals and should follow national standards and be based on the facility assessment (SOM §483.80(a)(1)).

At the center is a surveillance system to identify infectious or communicable diseases to avoid spread and a process for when and to whom these incidents should be reported. This surveillance involves ongoing, systematic collection, analysis, interpretation, and dissemination of data used to monitor infection trends and detect outbreaks. A facility should develop a surveillance plan to define focus areas and ensure consistent processes. The Association for Professionals in Infection Control and Epidemiology (APIC) has a recommended

framework of practices for developing a surveillance plan (see [Action Items](#) below for link).

Identification of an infection should use evidence-based criteria such as updated McGeer and the Center for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN) Long-Term Care Criteria. Notification triggers should be in place to identify potential infections (example of triggers may include the start of antibiotics or change in resident condition). Utilizing surveillance data collection tools is helpful in compiling the information needed to meet surveillance definitions.

Investigating a possible outbreak to recognize patterns is an important element and implementing a line listing of infections or mapping to identify clusters of infections are helpful tools. The NHSN for LTCFs provides a system for tracking infections enabling a facility to summarize surveillance data for review and analysis to identify areas of concern. Data analysis is critical to detecting trends in the surveillance data, signaling an issue and need for a mitigation strategy.

Reporting of certain infections or conditions is required within specific timelines according to state regulations (19 CSR 20-20), so the IPCP should include a process for contacting the Missouri Department of Health and Senior Services and your local public health agency. Additionally, reporting of certain infections into NHSN is encouraged and in some cases required (i.e. COVID-19).

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Controlling and preventing infections, of course, involves implementation of standard and transmission-based precautions as well as isolation, as appropriate in relation to type of infection, and be least restrictive as possible for the resident. Prevention also includes restricting employees with a communicable disease from direct contact with residents or food if transmission is possible. Proper hand hygiene and personal protective equipment (PPE) use should also be adhered to by direct care staff, with training in place and a mechanism for monitoring compliance.

With so many moving parts, a checklist with daily, weekly, monthly, and annual routines is a best practice for the IP to stay organized. Here are some suggestions for activities to include (this is not an exhaustive list, but a good starting point):

**Daily activities:** 1) Review admits/discharges, lab results, 24-hour reports, pharmacy reports, clinical records of residents with suspicion of an infection, 2) Line listing of infections, 3) Antibiotic tracking, 4) Employee health, 5) Unit Rounds—observe compliance, on-the-spot teaching, focus on residents with special precautions & new devices

**Weekly activities:** 1) Review surveillance reports, 2) NHSN reporting, 3) Check vaccine supplies, 4) Employee Health—evaluate return-to-work status and review vaccine status of new hires

**Monthly activities:** 1) Surveillance—summary statistics and reports for IPC and QAA Committees, 2) Antibiotic stewardship reporting, 3) Infection control audits, 4) Staff education

**Annual activities:** 1) Surveillance and Antibiotic Stewardship summary reports (full year), 2) Annual iCAR Assessment & IPC Risk Assessment, 3) Review & update P&P, 4) Review educational in-services

Overall, to have a successful IPCP it takes significant effort and can be overwhelming at times if the IP tries to take it all on without the help and support of a good internal team and organizations such as those represented on the Nursing Home Advisory Council and other external resources.

### Action items:

- Regularly access the State Operations Manual (SOM) for interpretive guidance on regulations (Appendix PP): [R173SOMA \(cms.gov\)](https://www.cms.gov/Regulatory-and-Compliance-Division/Regulatory-Information/State-Operations-Manual)
- Access the CDC Nursing Home Prevention Training (specifically Module 4): [Infection Prevention Training | LTCF | CDC](https://www.cdc.gov/nursinghome/prevention-training/)
- Access national surveillance system for long-term care for data collection and tracking: National Healthcare Safety Network (NHSN): [Long-term Care Facilities \(LTCF\) Component | NHSN | CDC](https://www.nhsn.com/)
- Review Association for Professionals in Infection Control and Epidemiology (APIC) framework of practices for developing a surveillance plan: [doi:10.1016/j.ajic.2007.07.002 \(apic.org\)](https://doi.org/10.1016/j.ajic.2007.07.002)
- Download Surveillance Action Plan: <https://hqin.org/resource/surveillance-action-plan/>  
Surveillance Tracking Tool: <https://hqin.org/resource/nursing-home-infections-and-antibiotic-use-tracking-tool/>
- Download evidence-based criteria – Updated McGeer criteria: <https://asap.nebraskamed.com/wp-content/uploads/sites/3/2018/04/Revised-McGeer-criteria-for-infection-surveillance-checklist.pdf>

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- Download the CDC Respiratory Surveillance Line List template as a monitoring tool during a suspected outbreak: [LTC Respiratory Surveillance Line List and Surveillance Outbreak Summary \(cdc.gov\)](#)
- Download the list of diseases reportable to the Missouri Department of Health and Senior Services: [Diseases and Conditions Reportable In Missouri \(19 CSR 20-20 \(mo.gov\)\)](#)

### For more information and training:

[Novice Roadmap for the Infection Preventionist - APIC](#) (requires APIC membership)

<https://qioprogram.org/nursing-home-training-sessions>

[Infection Prevention Training | LTCF | CDC](#) (CDC Nursing Home Infection Preventionist Training)

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