2019

APIC Applied Learning Conference



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Disclosures

- Carole Leone: No disclosures
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- Martin Gitonga: No disclosures
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Welcome!

- Discussion among 3 disciplines (Martin-OR, Carol-IP, and Sara-SPD)
- Scenarios
 - Audience discuss in small groups—what would you do?
 - Expert panel will present how they would handle the situation
- Audience Questions



Learning Objectives

- Explain the role of the Infection Preventionist (IP) in working with Sterile Processing Department (SPD) and the Operating Room (OR)
- Identify at least three common issues that require participation by members of IP, SPD, and the OR
- Articulate at least three ways that an IP can foster relationships with the SPD and the OR





What is your worst fear coming from an IP standpoint?

Establish Relationship

- Regular visits
- Attendance at IP committee
- IP inservices highlighting impact of sterilization issues--SSIs

Relationship Building Tips for SPD/ IP

Each facility manager may have their own needs and expectations.

- Starting out with 1:1 meetings to discuss gaps in processes or desired environmental issues can be done
 through established audit tools
- After issues are addressed, then quarterly meetings can be helpful in ensuring sustainability of improvements.
- As needed meetings should be scheduled for upcoming construction, facility repairs, product or process changes, and support for practice adherence (i.e. point of use cleaning).





- What happens when foreign objects, such as cement, are in the sterile trays?
 - What if it's just one item in a tray?
 - What if it's a one-of-a-kind item/ tray?

OR Example Issue

What are the mystery black flakes at the bottom of this pan?



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The Mystery is Solved after Collaboration





Sara (SPD)

What is the Infection Preventionist looking for when they walk through SPD?



Keys to fostering relationship

- Joint rounding
- Creation of rounding tool together

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Example Audit Tool Customized by SPD/ IP

STERILE PROCESSING AUDIT TOOL

Audit conducted by:			(ground floor) (2 nd floor/OR)	
Personnel			Comments:	
 Know how to access policies/procedures, which are easily accessible 	Yes	No		
Consistently adhere to dress code	Yes	No		
Use PPE and remove properly	Yes	No		
Use PPE liquid resistant gown w/sleeves, head cover, face and eye	Yes	No		
protection, adequate decontamination gloves (mask PRN)	res	IVO		
Facility Design				
 Ceilings flush surface, intact materials with recessed and enclosed pipes, 	Yes	No		
ceiling tiles are clean.	163	140		
 Doors and windows kept closed 	Yes	No		
 Handwashing stations conveniently located in clean and decontamination 	Yes	No		
areas	163	140		
 Eye wash stations located within 10 seconds travel time, routinely tested, 	Yes	No		
OSHA compliant				
Functional work flow pattern	Yes	No		
Dirty to clean workflow pattern	Yes	No		
Pass-through window kept closed	Yes	No		
Traffic patterns				
Restricted to authorized personnel only	Yes	No		
 Cardboard boxes removed before items are brought to clean areas 	Yes	No		
 Temperature and humidity levels monitored and recorded daily 	Yes	No		
Housekeeping procedures				
All areas cleaned daily	Yes	No		
 Separate cleaning equipment for decontamination 	Yes	No		
Decontamination				
 Appropriate cleaning and decontamination solutions 	Yes	No		
 Expiration dates current (enzymatic/other solutions) 	Yes	No		
Solution containers labeled	Yes	No		
 Contaminated items transported in covered containers marked 	Yes	No		
biohazard	163	140		
 Equipment is operated following manufacturer instructions 	Yes	No		
 Equipment is loaded properly for cleaning efficiency 	Yes	No		
Hinged instruments are opened	Yes	No		
Multi-part instruments are disassembled as appropriate	Yes	No		





 What should I do when a patient wants to take home his hardware/ gallstone/ gold tooth?





 Does your staff use Immediate Use Sterilization (IUSS)? How do you assess competency?





 What's the best process to get instruments to SPD after a long case? How can we keep them from drying out during the case?

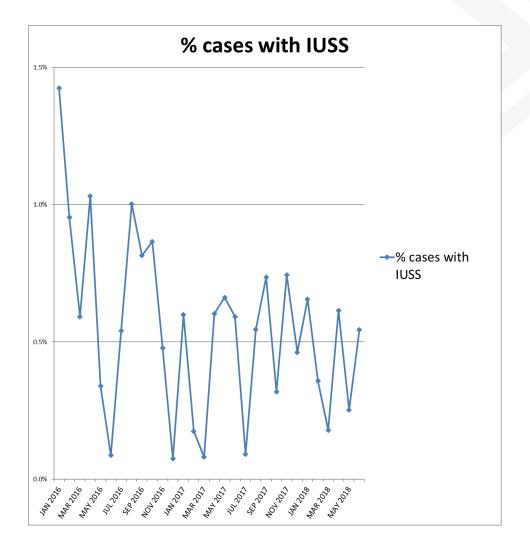




What information do you need me to present at your IP committee?

Example of IP Committee Slides

Month	Cases	IUSS - QC	Avg per day	% cases with IUSS	Goal
JAN 2015	1167	31	2	2.7%	5%
FEB 2015	1029	21	1	2.0%	5%
MAR 2015	1151	37	2	3.2%	5%
APR 2015	1229	19	1	1.5%	5%
MAY 2015	1182	20	1	1.7%	5%
JUN 2015	1201	19	1	1.6%	5%
JUL 2015	1157	21	1	1.8%	5%
AUG 2015	1151	13	1	1.1%	5%
SEP 2015	1219	18	1	1.5%	5%
OCT 2015	1214	12	1	1.0%	5%
NOV 2015	1128	8	0.4	0.7%	5%
DEC 2015	1302	9	0.5	0.7%	5%







What issues would you call IP for?



Carol, Martin, and Sara

- Carol: When do you hate to hear from IP?
- Martin: When do you hate to hear from the OR?
- Sara: When do you hate to hear from SPD?

• Scenario will be provided on site

• Scenario will be provided on site



Keys to fostering relationships

- Make collaboration/ communication plan BEFORE issues arise
- Develop policy for sterilization failures/ recalls
- Meet regularly so that IP, SPD, and the OR are all aware of any issues/ problems

SCENARIO #3a & 3b

Scenario will be provided on site

SCENARIO #4

Scenario will be provided on site

Keys to building relationships in healthcare

- Systemness—break down silos and work together
- Create strategies for effective communication and effective teams—look for examples of effective teams to discuss potential strategies
- Map out roles and responsibilities of OR, SPD, and IP those that overlap and those that are specific for each area
- Planned rounding—TOGETHER!
- Design systems that make it easy for all disciplines to be involved, to stay informed, and to share accountability
- Keeping patients safe is the shared goal



Bonus Scenario

Scenario will be provided on site



Resources

- APIC Implementation Guide: Infection Preventionist's Guide to the OR (2015)
- APIC/ JCR Infection Prevention and Control Workbook (2017)
- ASC Quality Collaboration
- Association for the Advancement of Medical Instrumentation (AAMI)
- Association for Professionals in Infection Control and Epidemiology (APIC)
- Association of peri-Operative Registered Nurses (AORN)
- Centers for Disease Control and Prevention (CDC)
- International Association of Healthcare Central Service Material Management (IAHCSMM)

QUESTIONS?

