

Cleaning and Disinfecting the Infection Prevention and Control Policy Collection: The Road to Convergence

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Abstract

Background: Shared regulations guide Infection Prevention and Control (IPAC) practices and policy development across the enterprise. This commonality made the IPAC policy collection poised for convergence. Policy convergence was a priority for the IPAC Specialty Council.

Objective: Consolidate site-specific policies into one shared IPAC collection and reduce redundant policies by 2018.

Methods: A Policy Convergence Workgroup (PCW) and policy process workflow were established to ensure a systematic and consistent method for policy review. Policy collection inventories were performed routinely.

Results: Policy collection consolidation and refinement mirrored practice convergence efforts and allowed policies to be more easily incorporated into the electronic medical record (EMR) to aid frontline staff's access to a policy and application of content into practice.

Conclusions: By the end of 2018, the IPAC policy collections were "cleaned", as multiple collections were consolidated into one, and "disinfected", as hundreds of redundant policies were retired.

Define

In 2013, a Policy Convergence Workgroup was formed to consolidate policies into one collection and standardize redundant policies in alignment with practice convergence efforts by 2018.



Objective

Consolidate site-specific policies into one shared collection and reduce redundant policies by 2018.

Measure

The IPAC PCW assessed current policy review processes and inventoried all documents in the five IPAC policy collection libraries.

Analyze

Healthcare institutions are expected to ensure safe patient care that meets state and federal standards. Having common regulatory standards results in redundant IPAC policies across sites.

In August 2016 a policy inventory found 362 documents across the IPAC collections. This list included 196 policies, 113 procedures, 52 guidelines and one process.

Policies that were redundant across collections, and that also exhibited opportunities for practice standardization, were prioritized for convergence.

Figure 1. Process Flow

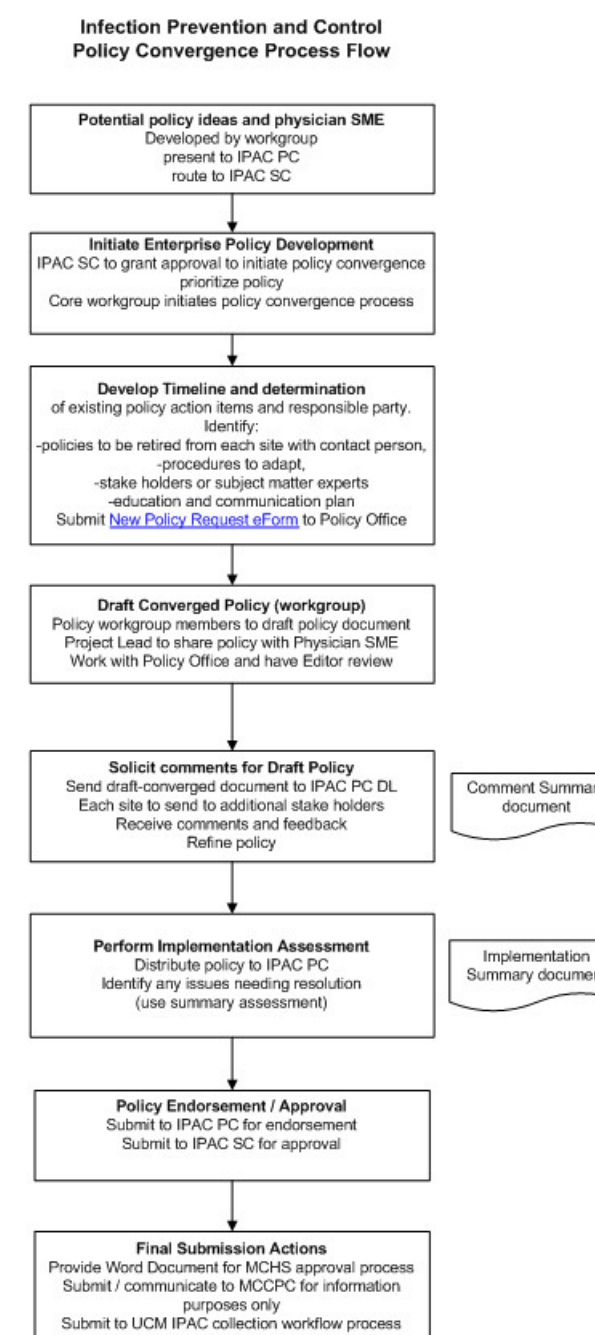


Fig. 1. The IPAC Policy Convergence Workgroup annual process flow for policy review and development.

Key:

PC = Practice Council

SC = Specialty Council

SME = Subject Matter Expert

MCCPC = Mayo Clinic Clinical Practice Committee

Figure 2. EMR Application

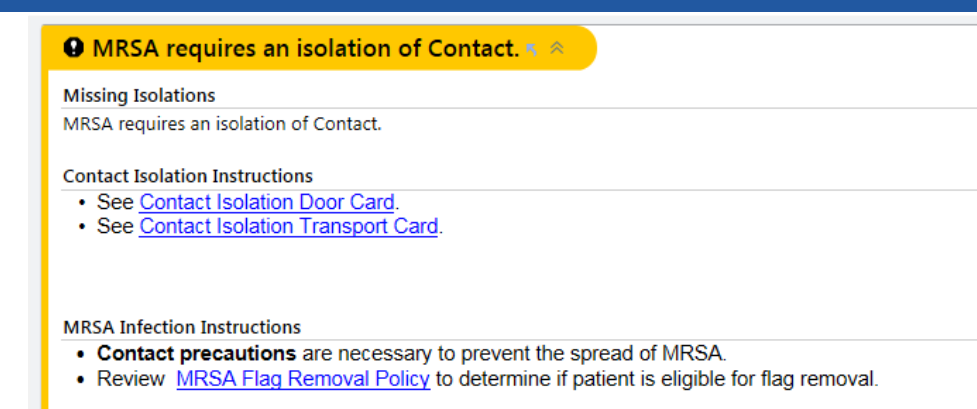


Fig. 2. IPAC policy linked in EMR Best Practice Advisory.

Improve

The consolidation of policy collections was assisted with the implementation of a Policy and Procedure Management System, which allowed each IPAC site to upload policies into one shared management system.

Control

The IPAC PCW established an annual process flow to ensure policies were converged whenever possible, in alignment with IPAC and institutional priorities (Figure 1), and incorporated into the EMR when appropriate to aid in frontline staff's application of policy to practice (Figure 2).

A policy inventory was performed repeatedly to refine the collection.

Lessons Learned

Establishing and maintaining a PCW with site representation aided to consolidate five policy collections into one, successfully retire 279 documents, standardize 26 policies, and enhance practice convergence across the institution between 2012 and 2018.

Acknowledgement

We would like to thank the Policy Office for the assistance it has provided to facilitate our policy convergence efforts.