ABSTRACT

• BIDN has an effective Infection Prevention program and has reduced hospital infections from FY2013 to 2015. The Infection Prevention program using evidence based practices in accordance with requirements and recommendations set forth by CDC, CMS and TJC. The updated hand hygiene initiative has been adopted from the World Health Organization’s Five Moments for Hand Hygiene. The goal of 95% compliance with hand hygiene requirements has been demonstrated through regular audits throughout the inpatient and outpatient areas.
• Evidence-based practices for prevention of HAIs is targeted for CLABSI, CAUTI, VAP, SSI and MDRO’s.
• Because the identification of an increase in C. Difficile infections in FY2015, additional interventions, including point of care testing, have been instituted to improve the timeliness of diagnosis, earlier treatment and better control of preventing transmission of infectious diseases. Results for Q1FY2016 show dramatic decrease of > 60%.

METHODS

• New hand hygiene guidelines and enforcement with regular random audits and observations throughout all areas of the inpatient and outpatient services.
• Intensified program for managing identified C. Difficile infections
  ▪ Use of probiotics for patients as adjunctive treatment
  ▪ Re-education of Environmental Services staff regarding understanding the ‘why’ of cleaning techniques, room cleaning techniques, use of bleach products, focus on high touch/use areas
  ▪ Terminal cleaning of patient rooms after discharge of pt infected with C. Difficile, including heat steaming of privacy curtains
• Acquisition of GeneXpert System for rapid point of care testing and immediate resulting for timely treatment
  ▪ Heightened surveillance of high risk procedural and surgical areas,
  ▪ Review and adoption of new recommendations for cleaning of surgical and endoscopic instrumentation

RESULTS

• Hospital acquired infections for CLABSI: 0 infections for FY 2015
• Observed hospital acquired infections of CAUTI Standardized Infection ratio (SIR) is 0.66 reflecting lower than expected
• Observed hospital acquired infections for MRSA bacteremia: 0 for FY 2015
• Surgical site infections: 0 for FY 2015.
• Lessons learned:
  ▪ Active surveillance is essential to reduce infections
  ▪ Education and re-education of clinical staff, environmental, dietary staff regarding infection prevention principles, hand hygiene is a highly effective tool to reduce the spread of infection
  ▪ Point of care testing availability has streamlined and improved timely diagnosis, treatment and Infection Prevention interventions
  ▪ Understanding the ‘why’ of procedures is critical to modifying behavior

RESULTS/CONCLUSIONS

Reporting to CDC/NHSN (National Healthcare Safety Network):
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