Wisconsin Healthcare-Associated Infections (HAI) Prevention Program Updates

Assisted Living Forum

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Disclaimer

- The Wisconsin HAI Prevention Program is nonregulatory.
- There is no affiliation with any facilities or products.
- All content is based on current guidance and best practices.

Agenda

- HAI Prevention
 Program structure
- Support to Assisted Living Facilities
- We want to hear from you!

HAI Prevention Program Structure



Our Program Services Are...



Education-based



Program Areas

Administrative

Infection Prevention Unit

Surveillance and Education Unit

Kim Goffard

HAI Prevention Program Manager

Linda Ramthun

Infection Prevention Unit Supervisor

Christina Olivier

Surveillance and Education Unit Supervisor

Program Areas

Administrative

Infection Prevention Unit

Surveillance and Education Unit

Regional Infection Preventionists

- Western Region: Nikki Mueller
- Northern Region: Anna Marciniak
- Northeastern Region: Tess Hendricks
- Southeastern Region: Cross-covered
- Southern Region: Paula Pintar



Specialty Infection Preventionists

- Ambulatory Care: Jen Kuhn
- Dialysis: Rebecca LeMay
- Infection Prevention Onboarding: Ashley O'Keefe
- Multidrug-Resistant Organisms: Greta Michaelson
- Outbreak and Emerging Diseases: Beth Ellinger
- Special Projects: Linda Coakley

Program Areas

Administrative

Infection Prevention Unit

Surveillance and Education Unit

Surveillance and Education Unit

Antimicrobial Stewardship

- Antimicrobial Stewardship Coordinator: Dr. Lindsay Taylor
- Antimicrobial Resistance (AR) Epidemiologist: Megan Lasure

Surveillance

- HAI Epidemiologist: Currently vacant
- National Healthcare Safety Network Surveillance Coordinator: Nancy Eberle

Surveillance and Education Unit

Legionellosis Surveillance

- Legionellosis Surveillance Coordinator: Frances Goglio
- Legionella Industrial Hygienist: Bruce Meiners

Education

- Public Health Educator: Molly Bieber
- Public Health Educator: Mariah Welke

Support





Assisted Living Facilities can look like this.



But they can also look like this.

IPC Basic Principles



Separation of clean and dirty

Cleaning and disinfection

Environmental infection control



Prevention support we can provide:

Performing on-site or remote infection control assessments.

Participating in outbreak and infection control breach investigations.

Reviewing infection prevention process to help identify needs and gaps.

Providing education and technical assistance on a variety of infection prevention topics.

Education and Resources



Guides and Tools

- <u>Transmission-Based</u> <u>Precautions Reference</u> <u>Guide</u>
- <u>Annual Risk Assessment</u> <u>Template</u>
- <u>Situational Risk Assessment</u> <u>Template</u>
- Infection Surveillance Log

Transmission-Based Precautions in Health Care Settings Reference Guide

This reference guide may be used for common diseases to prevent transmission of infectious agents in health care settings. For a more complete list of infectious diseases and indicated precautions, see the Centers for Disease Control and Prevention's (CDC) <u>Appendix A: Type and Duration of Recommended for Selected Infections and Conditions</u>. For a general list of clinical syndromes or conditions warranting empiric transmission-based precautions, refer to CDC's <u>Appendix A: Table 2</u>. <u>Clinical Syndromes or Conditions Warranting Empiric Transmission-Based Precautions in Addition to Standard Precautions</u>.

Standard precautions

ontact with blood	Year:	nd Control Goal Tracking		
Standard precaution symptomatic, or no	Organization name:			
	Date of report:			
Standard p				
Practice han	Risk: Example: Inadequate adherence to transmission-based precautions			
using alcohol-	Goal	Strategies	Responsible party	Q1 Progress check
 Use persona 		Provide refresher training on proper PPE selection for specific	Infection preventionist	Proper selection was at 60% for
Properly clear including amount		symptoms and diagnoses according to CDC Appendix A		the first quarter.
Promote resp		Require all staff to perform a return demonstration of proper	Infection preventionist	Training provided to 100% of
Follow safe i	I	PPE selection, donning, and doffing when given a fictitious patient diagnosis		staff at mandatory staff meeting in April 2024.
Additional info	Improve proper selection of PPE based on the patient's medical symptoms and diagnosis from 50% to 90% by June 1st, 2024	Perform at least 10 PPE audits per month and report findings at infection control committee.	Nurse educator	Completed with 100% of staff a mandatory meeting in April 2024.
		Complete hand hygiene audits with clinical staff	Unit manager	Only 5 audits performed first quarter.

Situational Risk Assessment Tool

Use this risk assessment template to assess new or current situations, problems, processes, or practices within your facility. Use the template as is or adjust to meet the needs of your facility or organization.

ituation requiring assessment:				
ocations assessed:				
Departments impacted:				
Date prepared:				
Prepared by (name and title):				
ontext and considerations for decision making:				

Identified risk:

Potential impact:

Desired outcome:

Webpages

- Infection Prevention Education
- Infection Preventionist Starter Kit
- Precautions



Infection Prevention Education

Find educational materials for infection preventionists on infection prevention and HAIs.

Find educational materials



Precautions

Get information on standard, transmission-based, and enhancedbarrier precautions.

Learn about precautions



Infection Preventionist Starter Kit

The interactive, web-based "starter kit" provides background information, resources, and templates for infection preventionists.

Access the starter kit

HAI Prevention Program Contacts



Email: <u>dhswihaipreventionprogram@dhs.wisconsin.gov</u>





Questions?

Thank you!

