Webinar: CMS Infection Control Worksheet

September 23, 2015 10 – 11:45 a.m. ET

If there is one webinar your hospital should listen to this year it would be this one. If a surveyor showed up at your door tomorrow for a validation survey, would you be prepared? The Centers for Medicare and Medicaid Services (CMS) has finalized the surveyor worksheet for assessing compliance with the infection control Conditions of Participation (CoPs). The worksheets are used by State and Federal surveyors on all survey activates when assessing compliance with the infection control standards.

Webinar Objectives

- Recall that there are many policies and procedures required by CMS in the area of infection control
- Discuss that CMS requires that the national standards of care and practice must be followed such as those from the CDC, SHEA, APIC, OSHA, and AORN
- Describe that all glucose meters should be cleaned after each use
- Recall that CMS requires mandatory education in infection control
- Recall that a clean needle and syringe should be used each time under the safe injection practices memo issued by CMS

Target Audience

Infection control nurse or coordinator (infection control professionals, now called infection preventionists), CNO, COO, Nurse Educator, Hospital Epidemiologists, Infection control committee, Nurse, Nurse Managers, PI Director, JC Coordinator, Nursing Supervisors, Department Directors, Anesthesiologist, CRNAs, CMO, Physicians, Risk Manager, Senior Leadership, Pharmacists, Board Members, Lab Director, Patient Safety Officer, Dietician, Maintenance Director and staff, OR Manager and staff, Anesthesia staff and anyone interested or responsible for infection control

Webinar Outline

Infection Control Final Worksheet for Hospitals

- 49 page final hospital infection control worksheet
- Infection preventionist identified and qualified
- Infection control program and resources
- Infection control policies required (many)
- Follows national recognized standards (CDC, APIC, etc.)
- PI process
- HAI reported thru PI
- Training program and must include problems identified
- Leadership involvement
- Systems to prevent MDRO and correct antibiotic usage; stewardship
  - Antibiotic orders include indications for use
  - Prompt for clinicians to review
  - Log of incidents (may rescind standard in 2012)
 interiors and new tracers on HAI
Process to identify present on admission or POA
HCP competency assessments
Identify and report and control infections
MDRO and contact precautions

• Module on hand hygiene
• Infection prevention systems and training
• Injection practices and sharps safety
• Environmental cleaning and disinfection
  - Disinfectants used correctly
  - High touch environmental surfaces
  - Reusable noncritical items (BP cuffs, pulse ox probes)
  - Single use devices
  - Laundry requirements
  - Policies and procedures required
• Point of care devices (blood glucose monitors and INR monitors)
• Sharps
• Reprocessing non critical items
• Single use devices
• Urinary catheter tracer
• Central venous catheter tracer
• Protective environment (bone marrow patients)
• Isolation contact precautions
• Isolation droplet precautions
• Isolation airborne precautions
• Critical care module
  - Hand hygiene, sharps safety, injection safety, personal protection equipment, etc.
• Ventilator/respiratory therapy tracer
• Spinal injection practices
• Invasive procedure module
• Infection control in the Operating Room
• Hydrotherapy equipment
• Infection control tool
• Infection control questions to ask
• Questions for employee health nurse in worksheet three
• Questions for director of education in worksheet one

About the Speaker
Sue Dill Calloway, R.N., M.S.N, J.D. is a nurse attorney and President of Patient Safety and Healthcare Consulting and Education. She was the past VP of Legal Services at a community hospital in addition to being the Privacy Officer and the Compliance Officer. She worked for over 8 years as the Director of Risk Management and Health Policy for the Ohio Hospital Association. She was also the immediate past director of hospital patient safety and risk management for The Doctors Insurance Company in Columbus.

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area for five years. She does frequent lectures on legal and risk management issues and writes numerous publications.

Ms. Calloway has given many presentations locally and nationally to nurses, physicians and attorneys on medical and legal issues. She has authored numerous articles and over 1000 articles and 100 books, including the 2009 Joint Commission Leadership Standard (HCPro), Nursing and the Law (PESI, 1986 and 1987), Ohio Nursing Law (West Publishing), Nursing Ethics and the Law (PESI, 1986), Legal Issues in Supervising Nurses (PESI, 1988), Medicine Made Easy (PESI, 1992) and The Law for Nurses Who Supervise/Manage Others (PESI, 1993), Legal Issues in Obstetrics (PESI, 1997) and JC Leadership Standards (HCPro, 2004), and the Compliance Guide to the CMS and the Joint Commission Patient Rights Standards (HCPro, 2005), and the 2009 book on the Joint Commission Leadership Standards (HCPro). She often writes articles called the "CMS Corner" in Briefings on the Joint Commission. Ms Calloway is a 1996 recipient of PESI's Excellence in Education Award.

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