

Healthcare Associated Infection (HAI) Prevention

- Excerpts from “A Compendium of Strategies to Prevent Healthcare-Associated Infections in Acute Care Hospitals: 2014 Updates”
(http://ac.els-cdn.com/S0196655314009481/1-s2.0-S0196655314009481-main.pdf?_tid=8565a46e-710f-11e4-afb7-00000aacb361&acdnat=1416527400_2b6daf849966b738d77b130825acf511)

The Centers for Disease Control and Prevention (CDC) reports that in the United States HAIs account for 1.7 million infections and 99,000 deaths each year. As a result, regulatory agencies are focusing on infection control and prevention. The Joint Commission has included many infection prevention requirements in the National Patient Safety Goals.

California Senate Bill 158 requires that beginning January 2010, all staff receive training in methods to prevent the transmission of HAIs. The Joint Commission also requires that staff and licensed independent practitioners receive education regarding strategies to prevent HAIs *at hire and annually thereafter*. The following information outlines some of the evidence-based methods for preventing and controlling the spread of HAIs.

Hand Hygiene

- Perform hand hygiene with an alcohol-based hand rub or an antimicrobial or nonantimicrobial soap
- Perform hand hygiene with antimicrobial or nonantimicrobial soap if hands are visibly dirty
- Measure hand hygiene adherence via direct observation
- During *C. difficile* outbreaks, in addition to contact isolation and requiring the use of gloves, use soap and water after caring for patients with known or suspected *C. difficile*

Catheter Associated Urinary Tract Infection (CA-UTI) Prevention Strategies

- Ensure that only trained, dedicated personnel insert urinary catheters
- Assess healthcare professional competency in catheter use, care, and maintenance
- Practice hand hygiene immediately before insertion of the catheter and before and after any manipulation of the catheter site or apparatus
- Consider other methods for bladder management, such as intermittent catheterization, where appropriate
- Maintain a sterile, continuously closed drainage system
- Replace the catheter and the collecting system using aseptic technique when breaks in aseptic technique, disconnection, or leakage occur

Central Line Associated Bloodstream Infection (CLABSI) Prevention Strategies

- Perform hand hygiene prior to catheter insertion or manipulation
- Avoid using the femoral vein
- Use maximum sterile barrier precautions during central venous catheter insertion
- Use an alcoholic chlorhexidine antiseptic for skin preparation
- Disinfect catheter hubs, needleless connectors, and injection ports before accessing the catheter
- Remove nonessential catheters

Surgical Site Infection Prevention Strategies

- Administer antimicrobial prophylaxis according to evidence-based standards and guidelines
- Do not use razors. Do not remove hair at the operative site unless the presence of hair will interfere with the operation
- Maintain normothermia during the perioperative period
- Control blood glucose during the immediate postoperative period

Ventilator Associated Pneumonia (VAP) Strategies

- Avoid intubation if possible
- Interrupt sedation once a day for patients without contraindications
- Assess readiness to extubate once a day for patients without contraindications
- Pair spontaneous breathing trials with spontaneous awakening trials
- Change the ventilator circuit only if visibly soiled or malfunctioning

MRSA Infection Prevention Strategies

- Promote compliance with CDC or WHO hand hygiene recommendations
- Use contact precautions for MRSA-colonized and MRSA-infected patients
- Ensure cleaning and disinfection of equipment and the environment
- Use gowns and gloves when providing care to or entering the room

C. difficile Infection Prevention Strategies

- Encourage appropriate use of antimicrobials
- Use contact precautions for infected patients, single patient room preferred
- Ensure cleaning and disinfection of equipment and the environment
- During C. difficile outbreaks, in addition to contact isolation and requiring the use of gloves, use soap and water after caring for patients with known or suspected C. difficile
- Use an Environmental Protection Agency approved sporicidal disinfectant for environmental cleaning and disinfection