Infection Preventionist

Infection Preventionist Access

Clicking the Infection Preventionist Menu button from the QA Nurse screen will load the below access screen. Or this screen may automatically appear upon logging in to ECS if you are in the Infection Preventionist user group.

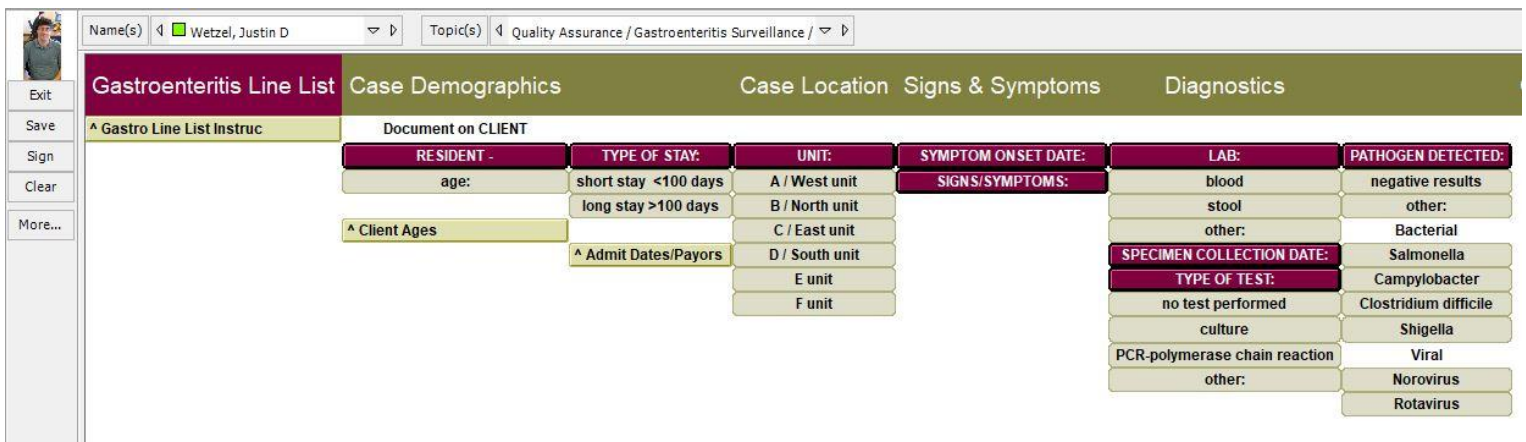| Infection Prevention & Control	Facility Surveillance	Infection Prevention	Graphs/ Reports	Resident	Employees	QAPI
QA Nurse Menu	Gastroenteritis Surveillance	IPC Risk Assessment	Gastroenteritis Line List	McGeer Criteria Assessment	Chart Employee Health	QAPI Infection
	Gastroenteritis Outbreak Summ.	IPC Practice Failures	Respiratory Line List	Chart Resident Infections	Employee Immunizations	QAPI Employee Health Impact
	Respiratory Surveillance	Inter-Facility IC Transfer	Employee Immunization History	Resident Immunizations	Employee/ Resident Illness	
	Resp Outbreak Summary		Resident Immunization Records	Infection Graph (past month)		
			Gastroenteritis Summary Report	Infection Graph (past year)		
			Respiratory Summary Report	Infection Detail		
				Infection Types		

General Charting

1. Click onto a button underneath the column you are working to address.
2. Once the **Name Selection** screen pops up, you as the Infection Preventionist will have unique name default settings in that you will be charting on both Clients in the facility and on employee Provider profiles, so you should see both black (client) and purple (provider) names in the list, as well as a checkmark in both Clients & Providers on the **Name Selection** screen. Select the desired name of the client or provider you will be charting on, click **OK**.
3. A two-way split screen will display. The top portion is the **Write** screen which is where the user may develop their note. The bottom portion is a **View** screen which displays potentially useful documentation as the user completes their charting.
4. Work from left to right, clicking onto relevant items, and free type where necessary.
5. Click **Sign** once completed with the entry.

Facility Surveillance

There are two surveillance topics – one for gastroenteritis and one for respiratory. How each topic functions will be the same.
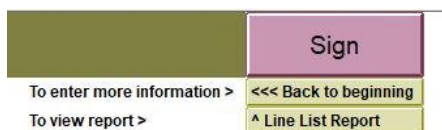
Gastroenteritis Surveillance

When you enter the topic, you will need to select if you are charting on a Client or a Provider as they will have different questions asked of them. Once you select either Client or Provider, the screen will jump you to the appropriate charting area. Click on the **Gastro Line List Instruct** to run a preview for you to print if needed, of the criteria that you will be documenting on. The instructions will specify what you are needing to document.

You are provided with additional tools to help with your documentation. Click on the buttons for **Client Ages** and **Admit Dates/Payors** to pull up reports displaying that information. The age does need to be documented even though it is in the resident demographics, as it is necessary for report purposes. You must chart on all the questions for each resident/employee for the statistics to be accurate. You can go back to the beginning and document on multiple people at a time while you are in this topic by clicking **Back to beginning** and then clicking **Name** and selecting a different client or provider and then choosing the appropriate charting.

Once you are done entering in information, you can run the **Line List Report** anytime, remembering to select both clients and providers when running and to choose dates for the time frame you are looking at.

Gastroenteritis Outbreak Summary

This button will load a Write task which is linked to a fake provider, named Infection Prevention &, Control that was created in your system with the merging of this module. In this topic, you will also have an **Outbreak Summary Instruction** report to refer to, as well as some other reports and calendars to provide you with the cumulative data that you will need to populate information into the **Outbreak Summary Report.**

Respiratory Surveillance

This topic will function the same as the Gastroenteritis Surveillance topic. See above.
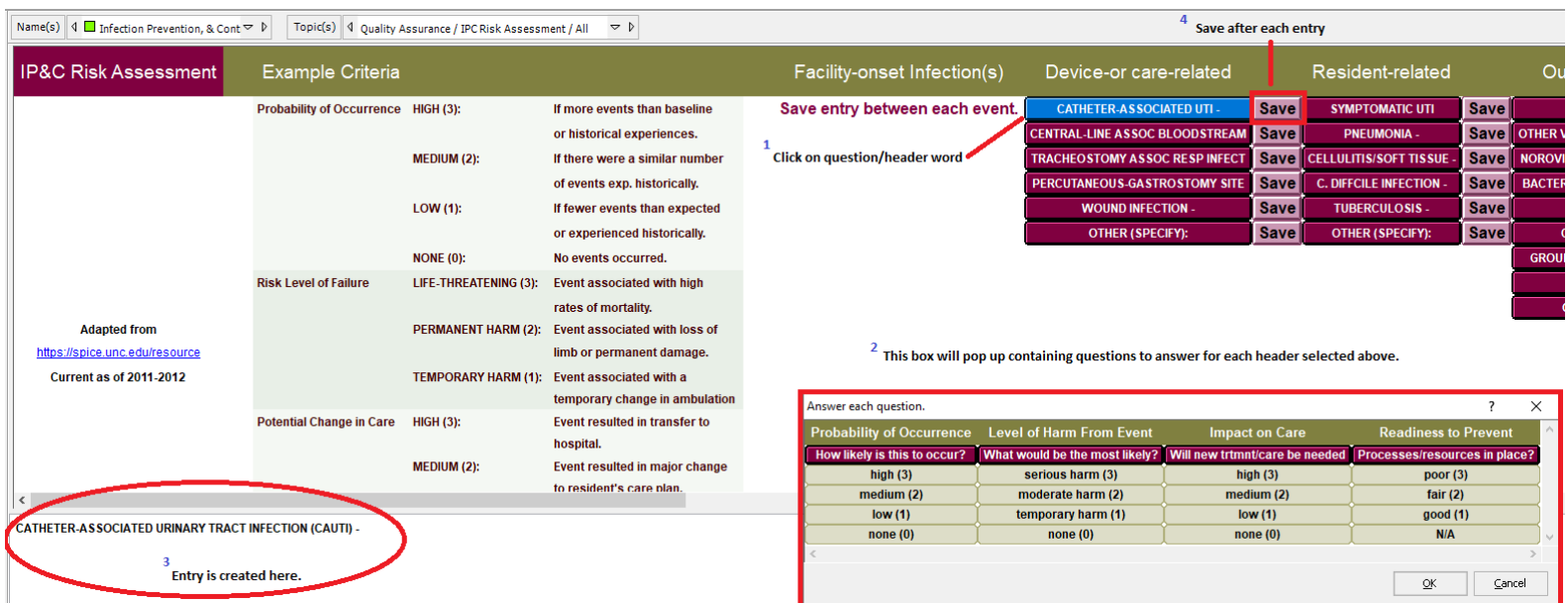
Respiratory Outbreak Summary

This topic will function the same as the Gastroenteritis Outbreak Summary topic. See above.

Infection Prevention

The items in this area are for collecting facility-wide data, along with a special transfer form for residents.

IPC Risk Assessment

The **Infection Prevention & Control Risk Assessment** will load a Write task linked to the fake provider profile to enter in compiled data for the entire facility. To document you will just click on each maroon header word and each one will pop up its own series of questions to be answered. You will need to save in between each question for the score calculations to work properly.

IPC Practice Failures

The **Infection Prevention & Control Practice Failures** will load a Write task linked to the fake provider profile to enter in compiled data for the entire facility. To document you will just click on each maroon header word and each one will pop up its own series of questions to be answered. You will need to save in between each question for the score calculations to work properly.

Inter-Facility IC Transfer

The **Inter-Facility Infection Control Transfer** form will pop up a Name Selection screen for you to select the resident name being transferred, and then it will load a Write screen. You will document your facility contacts and information, the type of infection the resident has along with their current symptoms, precautions, & antibiotics. Once documentation is completed, you will be able to print the form by clicking **^ IC Transfer Form,** which will then look something like the sample below, providing crucial infection details and information to other facilities:

Inter-facility Infection Control Transfer Form

This form must be filled out for transfer to accepting facility with information communicated prior to or with transfer.
Please attach copies of latest culture reports with susceptibilities if available.

Sending Healthcare Facility:

Patient/Resident Last Name	First Name	Date of Birth	Medical Record Number
Adams	John	11/25/1948	100057

Name/Address of Sending Facility	Sending Unit	Sending Facility Phone
American Data Nursing Home 711 21st Street Prairie du Sac WI	West	(608) 643-8022

Sending Facility Contacts	Contact Name	Phone	E-mail
Transferring RN/Unit	Jennifer Knull, RN	(608)643-8022	jennifer@american-data.com
Transferring physician	Dr. John Jacobson	(608)643-8022	doctorj@american-data.com
Case Manager/Admin/SW	Heather Ceasar, NHA	(608)643-8022	heather@american-data.com
Infection Preventionist	Jennifer Knull	(608)643-8022	jennifer@american-data.com

Does the person* currently have an infection, colonization OR a history of positive culture of a multidrug-resistant organism (MDRO) or other potentially transmissible infectious organism?	Colonization or history (Check if YES)	Active infection on Treatment (Check if YES)
Methicillin-resistant *Staphylococcus aureus* (MRSA)	X Yes	Yes

Graphs/Reports

All graphs are interactive in that you can click onto any of the data points (a bar within a bar graph or a slice in a pie graph) to be flipped to the specific documentation. This allows for easy data mining within each graph.

Gastroenteritis Line List

This report will compile all the gastroenteritis surveillance data entered in on both clients and providers for your selected time frame. When you click on the button to run the report, you will want to make sure that you are selecting BOTH clients and providers on the name selection screen. See the sample below:

08/06/2020

LTC Acute Gastroenteritis Surveillance Line List

Codes: N - nausea, F - fever, B - blood, LA - loss of appetite, S - stool, O - other
[Bacterial]: 1 - Salmonella, 2 - Campy, 3 - C. difficile, 4 - Shigella [Viral]: 5 - Norovirus, 6 - Rotavirus, 7 - Other

Case Demographics							Signs & Symptoms							Diagnostics					Outcome		
Name	Age	Gender (M/F)	Resident (R) or Staff (S)	Short stay (S) / Long stay (L)	Bldg/Floor/Unit	Room/Bed	Primary Assignment (location)	Food Handler	Symptom onset date	Abdominal pain/tenderness	Diarrhea	Vomiting	Additional S&S	Type of specimen collected	Date of collection	Type of test ordered	Pathogen detected	Symptom resolution date	Hospitalized	Died	Case
Adams, John	87	M	R	S	A / West unit	213-2			05/24/2020	Y	Y	N	B	S	05/25/2020	1	3	06/02/2020	N	N	Y
Adams, Suzanne C	89	F	R	L	B / North unit				05/27/2020	Y	Y	N	N B O	S	05/29/2020	1	5	05/31/2020	N	N	Y
Anthony, Susan B.	76	F	R	S	A / West unit	210-2			06/13/2020	Y	Y	N	LA O	S	06/15/2020	1	5	06/16/2020	N	N	Y
Atward, Jennifer RN	34	F	S				A / West unit	Y	05/21/2020	Y	Y	N		S	05/22/2020	1	5				
Atward, Josh RN	35	M	S				A / West unit		04/05/2020	Y	Y	N	O	S	04/08/2020	1	5	04/13/2020	Y	N	Y

Respiratory Line List

This report will compile all the respiratory surveillance data entered in on both clients and providers for your selected time frame. When you click on the button to run the report, you will want to make sure that you are selecting BOTH clients and providers on the name selection screen.

Employee Immunization History

This report will give you an individualized record of TB skin tests and other vaccinations, as well as when they may be due for something, for employees as documented on their Provider profile in the HR module.

Immunization Record

Employee: *Atward, Jennifer RN*	Facility: *Site 1*	Hire Date: *05/24/2010*	Position: *Nurse*

TB Skin Test
NEXT TB DUE: 03/01/2017

Vaccines
INFLUENZA VACCINE GIVEN: 2019/20   INFLUENZA VACCINE DATE: 11/05/2019
HEPATITIS B: current upon employment

Resident Immunization Records

This report will give you an individualized record of pneumovax history, TB skin tests and any follow-up such as chest x-rays, influenza vaccines, and any other type of immunization charted on the resident's electronic record. See example:

IMMUNIZATION RECORD

Name: *Ben, Jerry N*		Room: *109*	Birthdate: *07/09/1932*	Age: *88 Yrs*	Sex: *M*
MRN: *10350032*	Admit Date: *08/08/2012*	Physician: *Dr. James Black*		Code Status:	

Pneumovax History		
04/06/2018	pneumococcal (PPV) PNEUMOCOCCAL TRADE NAME: PNU-IMUNE 23	
04/13/2018	pneumococcal (PPV) PNEUMOCOCCAL TRADE NAME: Prevnar 13	

Flu Vaccine		
04/13/2018	influenza INFLUENZA TRADE NAME: Flulaval DATE ADMINISTERED: 02/13/2018	

TB Skin Test		
04/06/2018	PPD ADMINISTERED: admission 04/06/2018 SITE: left forearm	
04/06/2018	PPD NOT ADMINISTERED: positive PPD reactor	
04/06/2018	CHEST X-RAY RESULT: negative	
01/16/2020	PPD RESULT: HDC	

Other Information		
04/06/2018	hepatitis B HEPATITIS B TRADE NAME: Comvax	

Gastroenteritis Summary Report

When you click on this button, you will be presented with a name selection screen and you will just need to filter for and select all active providers, as the report will then run a Common Task to narrow down the list to the fake provider profile for Infection Prevention &, Control. You will then need to click OK to run the report which will display all the information entered in for the outbreak period.

Respiratory Summary Report

When you click on this button, you will be presented with a name selection screen and you will just need to filter for and select all active providers, as the report will then run a Common Task to narrow down the list to the fake provider profile for Infection Prevention &, Control. You will then need to click OK to run the report which will display all the information entered in for the outbreak period. See the example report:

LTC Respiratory Outbreak Summary

1. Facility Information

Health Dept. Contact Name: **Susan Johnson** Health Dept. Contact Phone Number: **(608) 485-7374**
Health Dept. Fax Number: **(608) 364-5363** Date First Notified Local Health Dept.: **03/24/2020**
Total # of residents at facility: **15** Total # of employees (staff and contract personnel): **9**
Summary Form Status: Date initiated: **06/17/2020** Date completed: _____

2. Influenza Vaccination Status	3. Pneumococcal Vaccination Status
Total # of residents vaccinated: **14** Total # of staff vaccinated: **5**	Total # of residents vaccinated: **12**

4. Symptomatic Case Definition

Summarize the definition of a symptomatic case during the outbreak, including symptoms, time range and location (if appropriate) within facility: **Average COVID case had cough, fever, chills, body aches, sore throat, symptoms were usually only present about a day or two before an nasopharygeal swab would be sent to the lab confirming the positive case, resolution of symptoms in most**

5. Outbreak Period Information

Outbreak start: (Date of symptom onset of first case): **03/24/2020**
Average length of illness: **15** days
Outbreak end: (Symptom resolution date of last case): **05/22/2020**

Total # of Cases
Residents: **4**   Staff: **1**

6. Staff Information

Were any ill staff delivering resident care at the beginning of the outbreak? [x] Yes [ ] No   If yes, how many: **2**
Did any ill staff seek outside medical care at the beginning or during the outbreak? [x] Yes [ ] No   If yes, how many: **3**
ED Visit: [X] Yes [ ] No   If yes, how many: **1**   Hospitalization: [X] Yes [ ] No   If yes, how many: **2**

7. Diagnostic and Laboratory Tests

Chest x-ray: [X] Yes [ ] No	# performed: **2**	# abnormal: **2**

Which organisms were identified through laboratory testing:
Bacterial: Specify_____   **Viral:** Specify **COVID19**   **Other:** Specify_____

Total # of Laboratory Confirmed Cases	Culture	PCR	Other Diagnostic Tests: Specify
Organism 1 **COVID19**	Residents: **5** Staff: **3**	Residents: **1** Staff: **4**	Residents: ___ Staff: ___
Organism 2	Residents: ___ Staff: ___	Residents: ___ Staff: ___	Residents: ___ Staff: ___
Organism 3	Residents: ___ Staff: ___	Residents: ___ Staff: ___	Residents: ___ Staff: ___

8. If Influenza Identified During Outbreak:

Antiviral **treatment** offered: [x] Yes [ ] No
If yes, indicate total # : Residents **2**   Staff **5**

Antiviral **prophylaxis** offered: [x] Yes [ ] No
If yes, indicate total # : Residents **5**   Staff **7**

9. Resident Outcome

Hospitalizations: [X] Yes [ ] No   If yes, how many: **2**   Deaths: [ ] Yes [X] No   If yes, how many: ____

Resident

McGeer Criteria Assessment
This assessment allows the nursing staff to input the data to determine if a resident meets the criteria for an infection. It also provides additional pop-up info to take into consideration while documenting, and a report of compiled data.

Chart Resident Infections
Utilize this topic to chart all infection data. This will populate into an Infection Control Log. The origin, site, unit, pathogen/type, treatments, and risk factors are all areas that will be addressed within this topic. This topic is in the Quality Assurance section so may not be accessed by surveyors. The DATE OF INFECTION is a required word within this topic. Setup a FOLLOW UP REMINDER if you would like to be reminded to complete a follow-up note as the antibiotic course or other treatments come to an end.

Append onto the original entry to resolve the infection so it no longer appears on active infections lists. Utilize the words OUTCOME and DATE RESOLVED to knock the infection off the active list.

Resident Immunizations

Once in this screen you will see four columns for charting immunizations that were either Administered or Not Administered, tracking PPD results, and entering in any other vaccination related information. You will select you desired option such as **Influenza Administered** and it will pop up boxes or prompts for you to enter in various information such as the name of the vaccine, the lot #, the date administered, the site administered, and the expiration date, as well as if a fact sheet was given.

Infection Reports

- **Infection Graph (past month):** Displays two graphs – all infections as well as infections that are in house acquired. The bottom of the graphs will display a breakout of infections by unit.
- **Infection Graph (past year):** Displays three graphs – in hour infection rate per 1000 patient days, breakout of infection based on origin, and number of infections per unit.
- **Infection Detail:** This report is what is used as the general infection line list. It gives all the details of each infection that is being monitored.
- **Infection Types:** After selecting a date range, this report will give a breakout of all different infection types, with totals at the bottom of the report.

Employees

Chart Employee Health

Use this topic, which can be found within the Human Resources module, to chart all employee health data related to illnesses and/or for COVID-19 symptom screening. You will need to ensure that you are only selecting providers (employees) when charting in here. To ensure proper utilization of this topic, all employees must be entered in ECS as a provider. This will allow you to chart on them as you would a resident.

In addition to COVID monitoring, which will hopefully be a temporary thing, you will also come here to chart any employees who are leaving early or calling in due to an illness or physical symptoms. This will also allow you to track the unit(s) they last worked and the level of contact they have with the residents to compare to the resident illness data and see if there are any correlations.

Employee Immunizations

This topic is located under the Human Resources module and will give the option to document all immunizations an employee has had both before their hiring and throughout the course of their employment. You will also be able to attach a scanned copy of their immunization record if they present you with one.

Employee/Resident Illness

You will be presented with several different graph report options when clicking this button. The key is to make sure that you select both clients and providers as all graphs under this button look at the correlation between employee and resident illnesses/infections, and will allow you to narrow your information down to individual units, types of illness, and dates of

onset to better determine the source of a particular illness or outbreak so that more infection control measures can be implemented. The following graphs will be available to you, however your list may appear slightly different than the reports below as these may be customized to match the units at your facility.

- HR – Employee vs. Resident Illness per Unit A-B
- HR – Employee vs. Resident Illness per Unit C-D
- HR – Employee vs. Resident Illness per Unit E-F
- HR – Employee vs. Resident Illness Types
- HR – Employee vs. Resident Illness Onset Dates

QAPI

QAPI plans may be developed and tracked directly in ECS. Each QAPI topic may be utilized to track the QAPI plan, as well as the evaluation of each plan. They all have the same style formatting, so the process of charting would be the same in each topic. The Infection Preventionist has two QAPI topics they can chart in for Infection & Employee Health Impact.