



Infection Prevention and Public Health Update

OKLAHOMA STATE DEPARTMENT OF HEALTH

2011 2nd Quarter

National Healthcare Safety Network

18 Hospitals Participate in the Surgical Site Infection Prevention Collaborative

The OSDH has sponsored the development of this Surgical Site Infection (SSI) Prevention Collaborative to accomplish two main purposes:

1. The overarching purpose of this HAI Collaborative is to prevent SSIs in the state of Oklahoma. The Oklahoma SSI Prevention Collaborative will support participating hospitals and their surgical team collaborative members by offering guidance, education, methodology, and evidence-based practice interventions which have demonstrated improvement in surgical patient outcomes.
2. The secondary purpose of the collaborative is to prepare and assist Oklahoma hospitals that perform surgery to successfully report SSIs via the NHSN electronic surveillance system as surveillance is an integral part of infection prevention and control programs in hospitals. Standard data collection and analysis is vital to monitor progress towards the reduction of SSIs and other HAIs at both the facility and state level.

On February 28 the Oklahoma State Department of Health hosted the Kick-Off call to outline the guidance for participating in the Surgical Site Infection (SSI) Prevention Collaborative. Participating hospitals must perform at least one NHSN operative procedure a minimum of twelve times per year in order to participate in the Oklahoma SSI Prevention Collaborative. Qualifying hospitals must agree to report surgical denominator data monthly for at least one NHSN operative procedure. Participating hospitals will need to submit a root cause analysis form that corresponds to each identified SSI event, including prevention strategies determined by the hospital collaborative team. The main objective is to identify and implement prevention strategies that build a *culture of patient safety* and move beyond the culture of blame.

There will be numerous activities during the course of the collaborative. The initial learning lessons which will cover surveillance and root cause analysis. Other prevention strategies will be discussed over the next few months of the collaborative. At the close of the collaborative the Oklahoma State Department of Health will host an event to shout the successes at an Outcomes Congress. Again we want to thank those hospitals who are participating in the SSI Prevention Collaborative to work together to improve the surgical outcome of our citizens in Oklahoma.

“Excellence is not a singular act, but a habit. You are what you repeatedly do.” Shaquille O’Neal

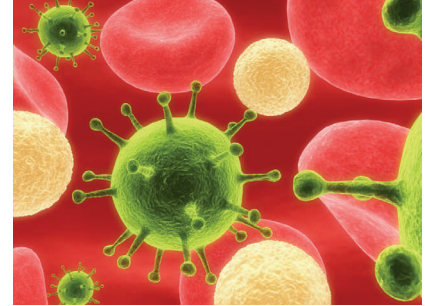


Infection Preventionist Training provided for “FREE”

The Oklahoma State Department of Health has awarded a training contract to the Oklahoma based company: [CIP Consulting LLC](#) for the purpose of training hospital staff in infection prevention. Co-owners Jennifer Perry R.N. and Michele Barr R.N. are both CIC (Certified in Infection Control) by the Certification Board of Infection Control and Epidemiology, Inc. which is accredited by the National Commission for Certifying Agencies. Both nurses have a wealth of knowledge and experience in the field of infection control and prevention.

The series of trainings will occur over the next few months. Each hospital may send two staff members to the training. The series of Infection Prevention Trainings will be held in the four quadrants of the State of Oklahoma. The course will consist of three 8 hour trains in each quadrant of the state, which will cover “Beginner Infection Prevention”, “Intermediate Infection Prevention” and “Advance Infection Prevention”.

The Oklahoma State Department of Health would like to thank the HAI Workgroup Education Sub-committee for their guidance and direction in developing the requirements for this training offering.



HAI Prevention Coordinator

Description:

This position serves as the HAI State Plan Coordinator for OSDH and will report to the Director of Quality Initiatives within the Medical Facilities Service. Duties include, but are not limited to:

- Assisting with the development, administration and implementation of the HAI Prevention State Plan for OSDH through teamwork with the Director of Quality Initiatives, other OSDH staff, and external public health partners.
- Assisting hospitals with the administration, enrollment and implementation of reporting of HAIs such as central line-associated bloodstream infections, surgical site infections, and ventilator-associated pneumonia into the National Healthcare Safety Network.
- Performing analyses of data reports submitted by participating hospitals around the state.
- Directing the implementation of the OSDH Surgical Site Infections Prevention Collaborative, and assisting participating hospitals with team activities, analyses, and reporting.
- Assisting with the negotiation, preparation and monitoring of contracts with vendors, emphasizing on an infection-control education contract.
- Delivering information and educational programs to partners on HAI prevention strategies through oral presentations and written reports.
- Assisting with the preparation of reports and continuing grant applications required by the Centers of Disease Control and Prevention (CDC).
- Facilitating meetings of and communication with members of the Oklahoma HAI Prevention Workgroup.
- Working with various partners at both the state and local level to perform program evaluation and planning needs of the HAI prevention program.
- Advising the Director of Quality Initiatives concerning hospital and clinical issues that impact the overall HAI prevention program activities.

Education and Work Experience:

Requirements consist of the ability to communicate effectively, both orally and in writing; to work with multiple individuals and organizations in implementing the state healthcare-associated infections prevention program; to deliver training to a variety of audiences, both lay and medical professionals; to organize and be self-motivating; and to give presentations to groups. Requirements also consist of knowledge of regulatory requirements and project management/administration; of hospital and healthcare provider needs related to healthcare-associated (cont. page 4)



APIC 2011

The 38th Annual Educational Conference and International Meeting will be held June 27-29, 2011 at the Baltimore Convention Center in Baltimore, Maryland. Annually the APIC Conference is the largest gathering of infection preventionist. The conference offers premier educational opportunities for healthcare professionals who have infection prevention responsibilities regardless of their work setting. In addition to the educational opportunities, this conference facilitates networking opportunities amongst peers and experts.

Along with the opening and closing keynote speaker presentations, the APIC Conference Planning Committee members used the input they received from you and your peers to select sessions on the most common challenges faced in the field of infection prevention.

If you would like additional information on the APIC 2011 Conference : Translating Science Sustainable Solutions, please visit the APIC website at www.apic.org.



Acknowledgement

On behalf of the Oklahoma State Department of Health's HAI Prevention staff, we would like to congratulate **Lela L. Luper, RN,BS,CIC of Valley View Hospital, Ada, Oklahoma** on being selected as a member of the 2012 Annual Conference Committee.

As a conference committee member, Lela will be tasked with helping to develop the overall clinical and professional program agenda which includes speaker recommendations and program proposal review. The APIC Conference Planning Committee takes primary responsibility for assessing and proactively identifying educational opportunities and needs to ensure that APIC meets the learning needs of the members.

In addition to offering our congratulations, we would like to thank Lela for agreeing to participate on the committee and dedicating her time and efforts for the benefit of her peers.

Let's send the organisms packing, it's a dirty job but someone's got to do it.



(Cont. from page 2) infection prevention strategies; and skill in the use of the Microsoft Office Suite of software applications. Previous experience with the National Healthcare Safety Network database is beneficial.

Knowledge, Skills and Abilities:

Requirements consist of a Bachelor's degree in nursing with a current certification as a CIC through APIC, and a minimum of three years experience in a hospital setting in the area of infection-control. Preference may be given to candidates with a Master of Public Health degree with a focus in epidemiology combined with infection-control experience

\$40.00 to \$60.00 per hour (based on education and experience)*

*Note: This is a temporary position not to exceed 999 hours.

Send Resume and Cover Letter to :

VonnieM@health.ok.gov

Reducing bloodstream Infections

Making Health Care Safer

Vital^{CDC}signs™

The Centers of Disease Control and Prevention has launched a new website as a resource document for the public about various health topics. One of special interest to educate the public on HAI's can be found at <http://www.cdc.gov/VitalSigns/HAI/>. The graphics and text in this section are from that website.

1 in 20



41,000

37,000

A central line is a tube that a doctor usually places in a large vein of a patient's neck or chest to give important medical treatment. When not put in correctly or kept clean, central lines can become a freeway for germs to enter the body and cause serious bloodstream infections. These infections can be deadly. Of patients who get a bloodstream infection from having a central line, up to 1 in 4 die. Bloodstream infections in patients with central lines are largely preventable when healthcare providers use CDC-recommended infection control steps. Medical professionals have reduced these infections in hospital intensive care unit (ICU) patients by 58% since 2001. Even so, many still occur in ICUs, in other parts of hospitals, and in outpatient care locations. In 2008, about 37,000 bloodstream infections occurred in hemodialysis* outpatients with central lines.

*Use of a machine to clean or filter the blood when kidneys no longer work.

