Resources for Infection Preventionists in Skilled Nursing Facilities

Infection Preventionist Training for Skilled Nursing Facilities
Healthcare-Associated Infections Program
Center for Health Care Quality
California Department of Public Health



Objectives

- Review infection prevention resource websites for skilled nursing facilities
- Discuss suggested texts as references for new Infection Preventionist (IP)
- Describe various professional organizations that add value and resources to aid the IP



Finding the CDPH HAI Program Website



I am looking for I am a Programs A-Z Index

Home | Programs | Center For Health Care Quality | Healthcare-Associated Infections Program | HAI Program Home

HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM

HAI Reports/Maps

HAI Advisory Committee

How to Contact Us

Me and My Family

HAI Prevention and Reporting

Antimicrobial Resistance >

Public Health Partners

The Healthcare-Associated Infections (HAI) Program in the California Department of Public Health Center for Health Care Quality oversees the prevention, surveillance, and reporting of HAI and antimicrobial resistance (AR) in California's hospitals and other healthcare facilities. Unfortunately, infections acquired as a result of receiving health care remain a public health problem; most HAI are preventable by following infection prevention care practices. Since 2010, the HAI Program:

- Receives and publicly reports California hospital HAI data to provide hospital quality information to the public and prompt providers to take action to prevent infections;
- Follows up with hospitals that have high infection rates;
- Convenes statewide and regional HAI/AR prevention collaboratives to coordinate prevention efforts among facilities that commonly share patients;
- Assists local public health agencies to investigate unusual infection occurrences and outbreaks that occur in healthcare facilities.



Me And My Family

- HAI Definitions and Information
- Central line-associated Bloodstream



HAI Prevention and Reporting

- 2-Day Infection Prevention Course
- Adherence Monitoring Tools

HAI Program Website

(www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/HAIProgramHome.aspx) lichealth

HEALTHCARE-ASSOCIATED INFECTIONS (HAI) PROGRAM

Monitoring Adherence to Healthcare Practices that Prevent Infections Tools

Antimicrobial Resistance

Environmental Cleaning

Preventing HAI in California Skilled Nursing Facilities (SNF)

Guidance for Hospital Infection Prevention Programs

HAI Reporting and NHSN Guidance Specific To California Hospitals

HAI Investigation for Hospitals And Clinicians

HAI Education For Health Care Professionals

Injection Safety >

HAI Liaison IP Program

HAI Specific Legislation, Regulations and AFLs

HAI Prevention and Reporting



What Can We Do To Prevent HAI?

Health care providers can take action to prevent healthcare-associated infections (HAI). Consistently adhering to core, evidence-based infection prevention practices reduces the risk of HAI and spread of antibiotic-resistant bacteria or other pathogens. California law requires each hospital to designate a physician hospital epidemiologist (or committee chair) who has completed CME training specific to infection surveillance, prevention, and control. Hospitals must also provide annual infection prevention training to all staff and contractors (Health and Safety Code 1288.95).

HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM



Establishing an Effective Infection Prevention and Control Program



Detecting and Controlling Outbreaks



Preventing the Most Common HAI



Using Antibiotics Appropriately



Ensuring a Clean and Safe Care Environment



Tracking Infections (Surveillance)



(www.cdph.ca.gov/Programs/C
HCQ/HAI/Pages/PreventingHAI
_in_LTC_Facilities.aspx)

From the HAI

Prevention and

Reporting homepage:

HAI in California Skilled

Click on "Preventing

Nursing Facilities"



Preventing Transmission of Multi-drug Resistant Organisms

Establishing an Effective Infection Prevention and Control Program webpage



Establishing an Effective Infection Prevention and Control Program

What elements should be included in a SNF IP program?

A SNF IP program includes but is not limited to:

Element Includes:

Visible, tangible leadership support for IP

- Leadership accountable for the success of infection prevention activities
- · Sufficient resources allocated so that infection prevention practice adherence is fee
- Individual with infection prevention training assigned to manage the program is given

A written annual risk assessment

- Numbers of HAI in the facility over the past year
- Gaps in infection prevention care practices such as hand hygiene, Standard and Tra environmental cleaning and disinfection
- · Community rates of infectious disease such as tuberculosis (TB) and influenza
 - Review local public health reports for these data

Sample annual risk assessme

Establishing an Effective Infection Prevention and Control Regram

(www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/SNF_EstablishingIC_Program.aspx)"

Detecting and Controlling Outbreaks



Detecting and Controlling Outbreaks

ABOUT

Infection preventionists need to be able to identify any increase in disease frequency and unusual infectious disease occurrences, report the incident to their local health department (LHD) and CDPH Licensing & Certification District office, and implement appropriate infection control measures to protect residents and healthcare workers.

What is an outbreak?

An outbreak is defined by the occurrence of cases of a disease above the expected or baseline level, over a given period of time, in a geographic area or facility. The number of cases indicating the presence of an outbreak will vary according to the disease agent, size and type of population exposed, previous exposure to the agent, and the time and place of occurrence. For example, a single case of a communicable disease long absent from a population or the first invasion by a disease not previously recognized may warrant additional investigation as a possible outbreak.

How does an outbreak occur?

Outbreaks can result from lapses in infection control practices such as hand hygiene (HH), use of personal protective equipment (PPE), and environmental cleaning and disinfection. Occasionally, outbreaks occur as a result of a contaminated medical product or device.

How can SNF prevent outbreaks?

SNF should ensure consistent implementation and adherence monitoring of evidence-based infection prevention strategies to help prevent outbreaks. See the Establishing an Effective IP Program webpage for additional information on infection prevention strategies in SNF.

Detecting and Controlling Outleaks

Cultionia Department of Public Health

Preventing the Most Common HAI



Preventing the Most Common HAI

ABOUT

An estimated 1 to 3 million serious infections occur in SNF residents and as many as 380,000 die of their infections each year. Common HAI in SNF include urinary tract infection (UTI), pneumonia, and *Clostridioides difficile* infection (CDI).

Urinary tract infections (UTI)

Urinary tract infections (UTI) are the most common type of HAI in SNF. Asymptomatic bacteriuria is also common in SNF residents but does not always cause a UTI: 35-50% of SNF residents have asymptomatic bacteriuria, and residents with urinary catheters have a 3-10% increased risk of bacteriuria each day.

Prevention

- · Ensure adequate nutrition and hydration.
- Perform hand hygiene.
- · Perform good personal hygiene, particularly perineal care.
- · Assess for UTI symptoms.
 - Ensure signs and symptoms are indicative of UTI. Key UTI symptoms include new or increased dysuria, frequency, incontinence, urgency, and costovertebral or suprapubic pain.
 - o Screening for asymptomatic bacteriuria is not beneficial and is not recommended.
- · Use antibiotics only when appropriate.
 - o Prophylactic antibiotics are not recommended.
 - Treating asymptomatic bacteriuria is not beneficial and is not recommend.

Preventing the Most Common HAI

SNF Antibiotic Stewardship Program Implementation Toolkit

Skilled Nursing Facility Antibiotic Stewardship Program Implementation Toolkit

The CDPH skilled nursing facility (SNF) antibiotic stewardship program (ASP) toolkit compiles resources for California SNF to implement ASP. The toolki can be used by SNF medical directors, administrators, directors of nursing or staff development, infection preventionists, pharmacy consultants, and at other staff seeking guidance, resources, and practical examples for developing ASP practices.

ASP optimize the treatment of infections and reduce unnecessary antibiotic use. Improving antibiotic use can reduce adverse events including Clostridioides difficile infections, prevent emergence of resistance, and lead to better outcomes for SNF residents.

In California, all SNF are required by law to implement an antibiotic stewardship policy consistent with guidelines developed by the Centers for Disease Control and Prevention (CDC), the Centers for Medicare and Medicaid Services, the Society for Healthcare Epidemiology of America, or similar recognized professional organizations. This toolkit is aligned with the CDC "Core Elements of Antibiotic Stewardship for Nursing Homes (PDF)". The toolkit includes suggestions for implementing the core elements as well as webinar recordings, examples and tools shared by SNF.



Element 1. Leadership Commitment

SNF leadership commitment support helps ensure adequate funding and staffing of the ASP, and facilitates buy-in among clinicians.

Suggestions:

- Create a written statement in support of ASP, including demonstration of adequate funding and staffing resources to support the program
- Establish antibiotic stewardship as a Performance Improvement Program under the facility Quality Assurance-Performance Improvement (QAPI) initiative as recommended by the Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention (CDC)
- o Routinely review ASP activities during the facility quality improvement committee meetings

Skilled Nursing Facility Antibiotic Stewardship Program Implementation Tookie

Environmental Cleaning



Role of Environmental Surfaces in Disease Transmission



Effective Cleaning Strategies



Monitoring Cleaning



Emerging Technologies



Barriers to Effective Cleaning and Disinfection

CDPH Adherence Monitoring Tools



Contact Precautions

Reduction of C. difficile and other multi-drug resistant organisms (MDRO) requires strict adherence to contact precautions and proper use of personal protective equipment. Use this tool to determine if staff members are correctly adhering to contact precautions practices. Feedback of results to staff has been shown to increase adherence to these practices.

- Contact Precautions Adherence Monitoring Tool (PDF)
- CDC 2007 Guidelines for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (PDF)
- CDC Guidance for the Selection and Use of Personal Protective Equipment in Healthcare Settings



Environmental Services

Pathogens are transmitted in healthcare setti adequately cleaned and disinfected between adhering to appropriate environmental clean shown to increase adherence to these practice

- Environmental Services Adherence Mon
- Fluorescent Marker Assessment Adherer
- CDC Guidelines for Environmental Infect

Available tools for SNF:

- Contact Precautions
- Environmental Cleaning
- Hand Hygiene
- Central Line Maintenance
- Urinary Catheter Maintenance
- Blood Glucose Monitoring
- Injection Safety Practices

CDPH Adherence Monitoring Tools

(www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/MonitoringAdherenceToHCPracticesThat PreventInfection Programs

CDPH COVID-19 Main Page



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I am looking for

l am a

Programs

A-Z Index

Home | Covid 19 | Latest Updates & Information | Main Page



COVID-19 Home

Protect Your Health -

Get Latest Guidance →

See the Numbers +

Learn More -

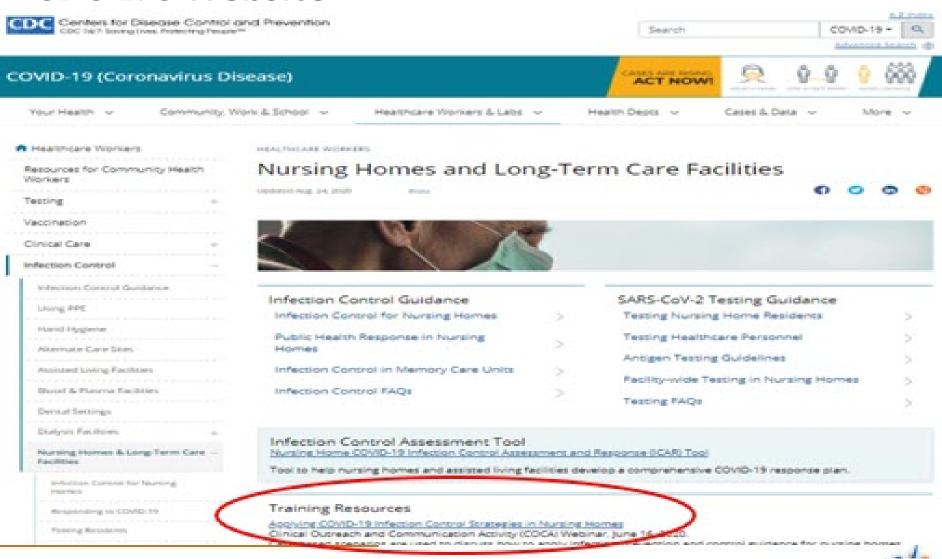
CDPH COVID-19 Main Page

(www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019:35px)Health

Centers for Disease Control and Prevention (CDC) Main Page



CDC LTC Website



CDC COVID-19 Main Page

(www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-home-long-term-care: html)

Accessing CDC Training Website

Training Resources

Applying COVID-19 Infection Control Strategies in Nursing Homes

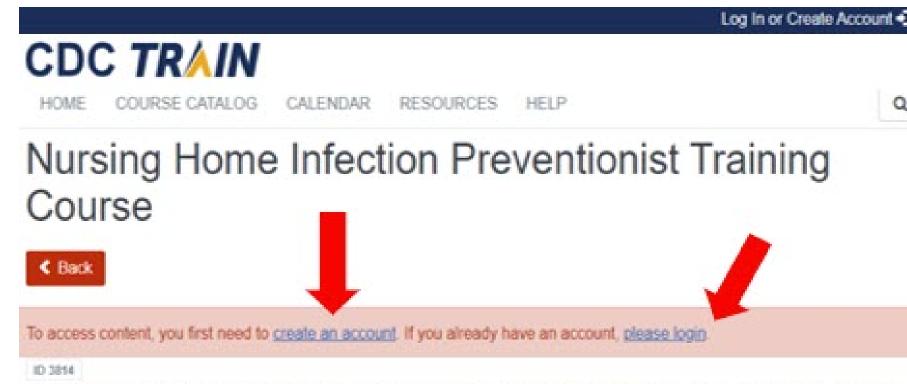
Clinical Outreach and Communication Activity (COCA) Webinar, June 16, 2020.

Case-based scenarios are used to discuss how to apply infection prevention and control guidance for nursing homes and other long-term care facilities preparing for and responding to COVID-19.

Nursing Home Infection Preventionist Training Course (CDC TRAIN)

CDC TRAIN course, a free service from the Public Health Foundation

CDC Train Nursing Home Infection Preventionist Training Course, cont'd

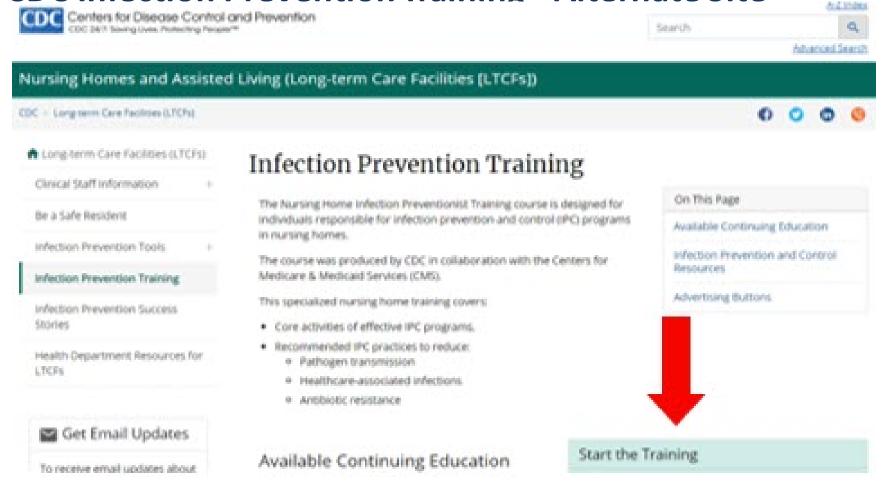


If you wish to earn continuing education (CME, CNE, or CEUs) or obtain an overall certificate of completion, you must first register for the Nursing Home Infection Preventionist Training Course by selecting the blue Register button at the top right of this page. Select the Show More link below for information about the course, including tips and resources to guide you in completing modules and obtaining continuing education (CE) or overall certificate of completion.

Program Description:

CDC Train Nursing Home Infection Preventionist Training Course

CDC Infection Prevention Training - Alternate Site



CME from CDC: What You Need to Know About Infection Control

(www.cdc.gov/infectioncontrol/training/cme-info.html)

CDC Infection Prevention Colling (www.cdc.gov/longtermcare/training.html)

CDC Infection Control Assessment and Response Tool (ICAR)

- Infection ControlProgram andInfrastructure
- II. HCP and Resident Safety
- III. Surveillance and Disease Reporting
- IV. Hand Hygiene
- V. Personal Protective Equipment
- VI. Respiratory/ Cough Etiquette
- VII. Antibiotic Stewardship
- VIII. Injection safety and Point of Care Testing

IX. Environmental Cleaning

HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM

Section 2: Infection Control Program and Infrastructure

I.	Infection Control Program and Infrastructure			
	Elements to be assessed	Assessment		
Α.	The facility has specified a person (e.g., staff, consultant) who is responsible for coordinating the IC program.	O Yes	O No	
0.	The person responsible for coordinating the infection prevention program has received training in IC			
	Examples of training may include: Successful completion of initial and/or recertification exams developed by the Certification Board for infection Control & Epidemiology; Participation in infection control courses organized by the state or recognized professional societies (e.g., APIC, SHEA).	O Yes	O No	
C.	The facility has a process for reviewing infection surveillance data and infection prevention activities (e.g., presentation at QA	O Yes	O No	
H.	Healthcare Personnel and Resident Safety			
	Elements to be assessed	Assess	ment	
He	althcare Personnel			
A.	The facility has work-exclusion policies concerning avoiding contact with residents when personnel have potentially transmissible conditions which do not penalize with loss of wages, benefits, or job status.	O Yes	O No	
В.	The facility educates personnel on prompt reporting of signs/symptoms of a potentially transmissible illness to a supervisor	O Yes	O No	
C.	The facility conducts baseline Tuberculosis (TB) screening for all new personnel	O Yes	O No	

CDC ICAR Tool(PDF)

(www.cdc.gov/infectioncontrol/pdf/icar/ltcf.pdf

Completing the ICAR for Improvement

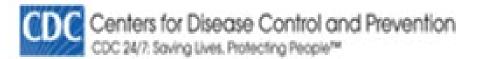
IV.	Hand Hygiene, continued			
	Elements to be assessed	Assessmen	nt	Notes/Areas for Improvement
В.	All personnel receive training and competency validation on HH at the time of employment.	⊘ Yes O	No	Click here to enter text.
C.	All personnel received training and competency validation on HH within the past 12 months.	Q/res O	No	Click here to enter text.
D.	The facility routinely audits (monitors and documents) adherence to HH ote: If yes, facility should describe auditing process and provide documentation of audits	O Yes 🗸	No	Click here to enter text.
E.	The facility provides feedback to personnel regarding their HH performance. ote: If yes, facility should describe feedback process and provide documentation of feedback reports	O Yes 🧭	No	Click here to enter text.
F.	Supplies necessary for adherence to HH (e.g., soap, water, paper towels, alcohol-based hand rub) are readily accessible in resident care areas (i.e., nursing units, resident rooms, therapy rooms).	Yes O	No	Click here to enter text.



ICAR Hand Hygiene and Contact Precautions **Adherence Monitoring Tool**

Staff type*	Type of opportunity	HH performed?	Gown or glove indicated?	Gown/glove used?
Click here to	O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact	O No HH done	OBoth	O Both
	O Before glove O After glove O Other: Click here to enter text.		O No	O Neither
Click here to	O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact	O No HH done	O Both	O Both
	O Before glove O After glove		O No	O Neither
Click here to	O Other: Click here to enter text. O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact	O No HH done	O Both	O Both
	O Before glove O After glove	No HH done	2000	O Neither
Click here to	O Other: Click here to enter text.		1	O Neither
enter text.	O Room entry O Room exit O Before resident contact	O Alcohol-rub	O Gown only	O Gown used
enter text.	O After resident contact	O Hand Wash	O Glove only	O Glove used
	O Before glove O After glove	O No HH done	O Both	O Both
	O Other: Click here to enter text.		O No	O Neither
Click here to	O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact O Before glove O After glove	O No HH done	OBoth	O Both
	O Other: Click here to enter text.		O No	O Neither
Click here to	O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact	O No HH done	O Both	O Both
	O Before glove O After glove O Other: Click here to enter text.		O No	O Neither
Click here to	O Room entry O Room exit	O Alcohol-rub	O Gown only	O Gown used
enter text.	O Before resident contact	O Hand Wash	O Glove only	O Glove used
	O After resident contact	O No HH done	O Both	O Both
	O Before glove O After glove	O NO FIN GOILE	O No	O Neither





Search

COVID-19 (Coronavirus Disease)



HEALTHCARE WORKERS

Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for COVID-19

Updated Dec. 14, 2020

Print

Infection Control Assessment and Response (ICAR) tools are used to systematically assess a healthcare facility's infection prevention and control (IPC) practices and guide quality improvement activities (e.g., by addressing identified gaps).

This tool is an update to the previous ICAR tool for nursing homes preparing for COVID-19. Notable changes as of November 20, 2020 include:

Infection Prevention and Control Assessment Tool for Nursing Homes Preparing for College 19

(www.cdc.gov/coronavirus/2019-ncov/hcp/assessment-tool-for-nursing-homes.html)**

CDC COVID-19 Website





Coronavirus (COVID-19)

ASL Videos | Language

Your Health V

Community, Work & School >

Healthcare Workers & Labs >

Health Depts v

Cases & Data v

More v

1

COVID-19 Alert: Cases are Rising

COVID-19 cases, hospitalizations, and deaths across the United States are rising. As cold weather moves in, people spend more time indoors, and the holidays approach, take steps to slow the spread of COVID-19. Wear a mask, stay at least 6 feet apart, avoid crowds, and wash your hands often. The more steps you take, the more you are protected against COVID-19. View <u>Cases in the U.S. and your state on the data tracker</u>.



data-tracker/#cases_casesper100klast7days others to help protect you from getting and spreading

VACCINES

Information for you & your family >

WINTER HOLIDAYS

How to celebrate safely >

CDC Medical Conditions & COMD-19

(www.cdc.gov/coronavirus/2019-nCoV/index.html)**

NHSN Long Term Care Facility

Long-term Care Facilities (LTCF)

The NHSN, Long-term Care Facility (LTCF) Component provides long-term care facilities with a customized system to track infections and prevention process measures in a systematic way.

Tracking this information allows facilities to identify problems, improve care, and determine progress toward national healthcare-associated infection goals.

Facilities eligible to report into all modules of this component include nursing homes, skilled nursing, chronic care, and developmental disability facilities. Assisted living facilities can only report into the prevention process measures module.

Long-term acute care hospitals (LTACHs) are not eligible to report into this component.



LONG-TERM CARE FACILITY COMPONENT MODULES

Click on each module to access relevant training, protocols, data collection forms, supporting materials, analysis resources, and FAQs.

CDC NHSN LTCF Component

(www.cdc.gov/nhsn/ltc/)

Training for NHSN LTC: Video and Slide Set

- 2019 NHSN LTCF Training Healthcare Personnel Safety
 Component
 (www.youtube.com/watch?app=desktop&v=QBsnQZES-eo&feature=emb_title)
- 2020 Long-term Care Facility Component Annual Updates and Annual Facility Survey Review (PDF) (www.cdc.gov/nhsn/pdfs/training/2020/ltcf/2020-ltcf-updates-508.pdf)



Association for Professionals in Infection Control and Epidemiology (APIC)

- Nationally known infection prevention site
- Includes information for skilled nursing facilities and training courses online
- Certification in Infection Control (CIC) information found on this site



HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM



What Does APIC Offer?

LTC education

- LTC Certificate
- APIC EPI® in Long-Term Care
 Certificate Series
 (apic.org/educationand-events/ltc-certificate/)
- Webinars for CEUs

APIC Text for Long-Term Care

Publications:

- Prevention Strategist
- American Journal of Infection Control

Guidelines to download or can be in book form

- Some free to members but charge non-members
- Some free to all



Long-Term Care



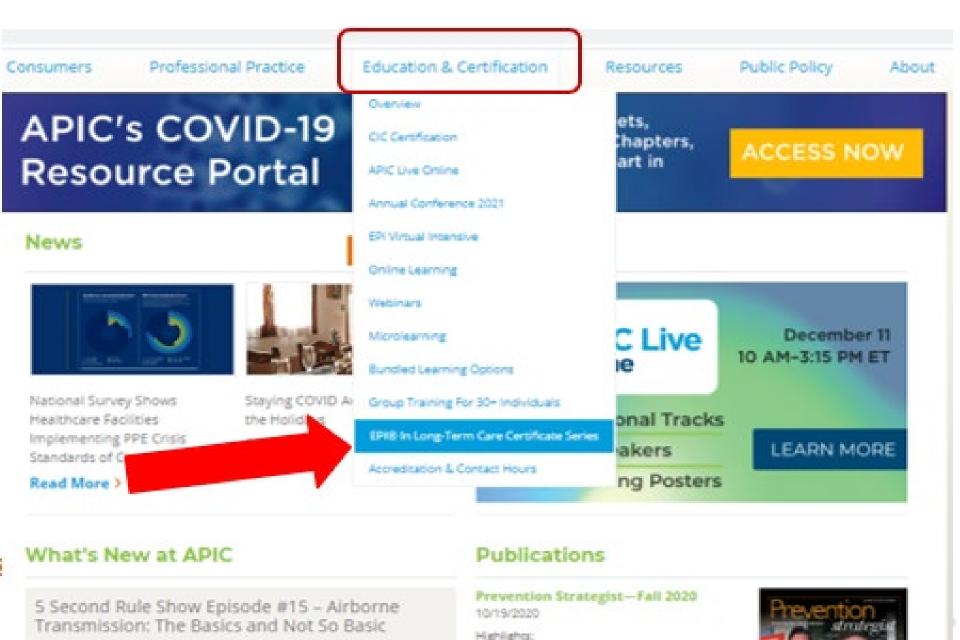


An APIC Guide

Guide to the Elimination of Methicillin-Resistant Staphylococcus aureus (MRSA) in the Long-Term

Care Facility

LTC IP Course from APIC





▲ Sign in - My Ac

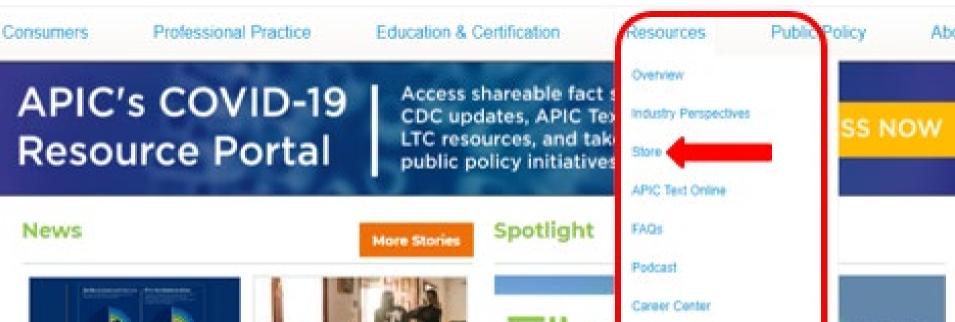
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National Survey Shows Healthcare Facilities Implementing PPE Crisis Standards of Care

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Staying COVID Aware During the Holidays

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RN MORE

APIC Consulting Services, Inc.

Topic-Specific Infection Prevention

Intection Prevention And You

APIC Program Of Distinction

Cost Calculators

Topic-Specific Intection Prevention

TO LONG-TERM CARE

2nd Edition

APIC's Infection Prevention Guide to LTC

- A good resource for the new SNF Infection Preventionist
- Templates for surveillance

Infection **Prevention** Guide

APIC Store

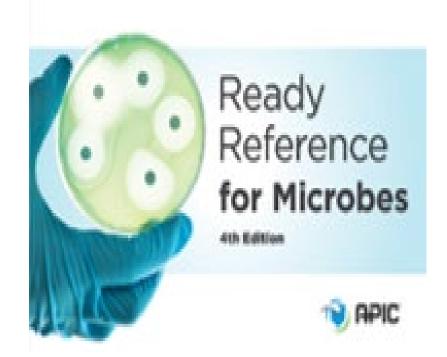
(secure.apic.org/web/apic/EStore/Store.aspx)





Purchasing Textbooks From APIC

 A great resource for quickly looking up a microbe



APIC Store

(secure.apic.org/web/apic/EStore/Store.aspx)



What is the California APIC Coordinating Council (Ca-APIC)?



About CA APIC +

Resources

Join

Members Only -

Meetings & Events -

Welcome to the California APIC home page!

CA APIC is a coordinating council that represents all <u>10 local APIC chapters in California</u>. Anyone who is a member of an APIC chapter in CA is automatically a member of CA APIC.

- · 3 Northern CA APIC chapters: San Francisco, Sierra, San Joaquin;
- 7 Southern CA APIC chapters: Greater Los Angeles, Tri-Valley, Coastline, Inland Empire, Kern County, Orange County, San Diego

CA APIC's aim is to **educate**, **participate**, **collaborate**, **and advocate** on behalf of Infection Preventionists in

Announcement

Contact Us Code of Conduct

Job posting and discussion board is available in the members-only section (menu bar above). Just sign in using your login for your APIC membership.

Click here for tutorial slides.

Contact California APIC (CACC)

CaliforniaAPIC@gmail.com

Access Ca-APIC Resources



About CA APIC - Resources Join Members Only

Coronavirus Disease 2019 Website

Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavir

Healthcare Infection Prevention and Control FAQs for COVID-19

Healthcare Supply of Personal Protective Equipment

What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection

Healthcare Professionals: Frequently Asked Questions and Answers

Interim Guidance for Discontinuation of Transmission-Based Precautions and Disposition of Hospitalized Patients

Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Patients Under Investigation for Specimens

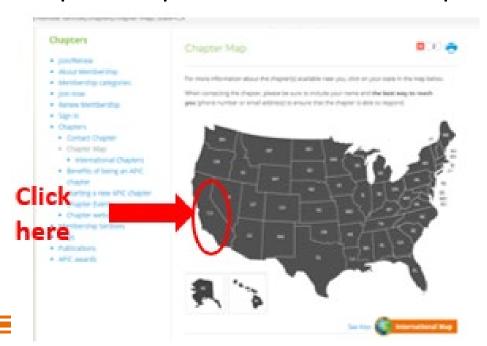
Evaluating and Reporting Persons Under Investigation

APIC CA Resources webpage

(community.apic.org/cacc/resources)

Finding Your Local APIC Chapter on National Website

- Location nearest your work or home
 - Accessed by APIC or Ca-APIC
 - Chapter map with list of local chapters



APIC Chapter Map

(apic.org/member-services/chapters/chapter-map/)

California Association for Health Facilities (CAHF)





Nursing Home Leader Academy California Association for Healthcare Facilities



NURSING HOME LEADER ACADEMY 2021

PROGRAMS > SPECIAL PROGRAMS > NURSING HOME LEADER ACADEMY 2021

Special Programs	•
Developmental Services	•
CAHF Disaster Preparedn	ess
Awards	,



CAHF Programs Website

(www.cahf.org/Programs)

HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM

Leading Age California

Another resource for nursing home education

Leading Age California Learning Center

(www.leadingageca.org/learning -center)







RESOURCES

AGE ON, RAGE



On-Demand Learning Center

LeadingAge California's On-demand Learning Center is a one-stop-shop that offers training anytime, anywhere there's access to the internet. With self-paced learning, the contract of the cont limitation is a thing of the past. The on-demand format provides flexibility and control of your learning.

With this robust system, you'll access a stimulating learning environment without the hassles of travel time or hotel costs. The courses combine video, reading, knowled checks, and interactive activities to create a unique learning experience.

Why On-Demand?

YOU CONTROL YOUR LEARNING EXPERIENCE

- Take the courses when and where you choose
- The modular structure adapts to any learning style
- Self-directed course allows you to go at your own pace
- Complete the training at your own pace

HIGH-QUALITY CONTENT FROM SUBJECT MATTER EXPERTS



AHRQ Unit Guide To Infection Prevention for LTC Staff

(www.ahrq.gov/hai/quality/tools/cauti-ltc/modules/resources/guides/infection-

Other sources for LTCs/SNFs

- Local health department websites
- The Joint Commission
 (www.jointcommission.org/)



Summary

- Infection preventionists in skilled nursing have many sources that are evidence-based
- Infection Preventionists have support and networking opportunities through local professional chapter meetings and education offerings
- There are reasonably priced textbooks, videos, and modules, both online and hard copy to aid the IP in the development or enhancement of their infection control program



Questions?

For more information, please contact

HAIProgram@cdph.ca.gov

Include "SNF IP Training Class" in the subject line

Post Test

Now that you have completed this module,
Click on the "Post Test" link when it pops up
To Return to
Learning Stream
and take the post test

If the Post Test link does not pop up, you will be sent a link via e-mail

