Achieving Survey-Readiness Through Standardized Infection Prevention Rounding Tools

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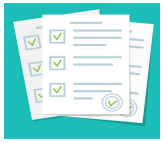
Background

National Infection Prevention (IP) environmental guidelines were developed to prevent healthcare associated infections from an environmental source. These standards have become extensive and can be difficult to interpret and implement. Our integrated health system began a yearlong project to develop a standardized, comprehensive IP rounding program to create robust data, a safer environment of care (EOC), and a constant state of survey-readiness.



End Result: Leader has a stack of individual reports with non-aggregated data

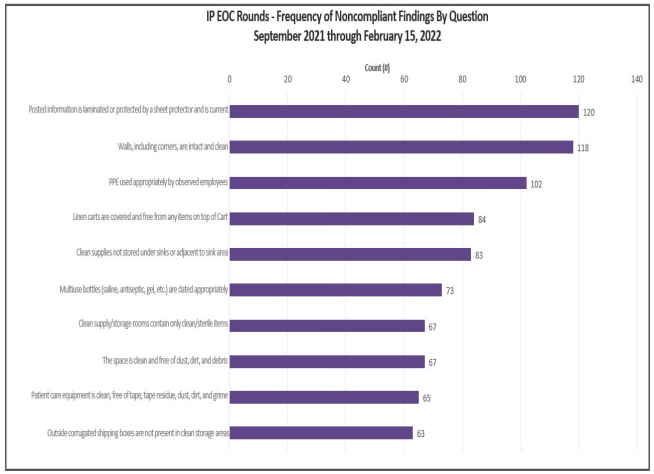
Methods

IP's focus on the EOC requires partnerships with hospital leadership and Accreditation. This team engaged Accreditation partners to collaborate on a standardized approach and leverage their knowledge, data, and software platform, Joint Commission Resources (JCR). Our large, integrated 11 hospital health system had various rounding tools in place and all were evaluated. The team recognized the significance of high-risk areas, such as Procedural Areas, and common accrediting survey findings and created specialized tools to address these. Finally, the team confirmed all survey items were evidence-based and mapped to Joint Commission (JC) standards.

Results

The survey evaluation resulted in nine standardized general and specialized rounding tools housed in the JCR platform. The previous non-standardized tools were retired, and new tools implemented. Prior to implementation, 26 infection preventionists were educated on EOC rounding and use of the tool. All survey items were mapped to JC standards, allowing users to connect their observations to relevant findings. Utilizing one standard platform allowed for one data repository for the program and streamlined reporting to unit leadership. The team grouped findings by frequency for local hospitals and the overall system. Custom reports were created for each hospital and department to communicate opportunities.

Custom Report Samples



System-wide IP EOC Rounds - Frequency of Noncompliant Findings By Question
September 2021 through February 2022

Question	# of Times Surveyed (n)	Compliance	Action Plan
Posted information is laminated or protected by a sheet protector.	586	79.5%	
Walls, including corners, are intact and clean	646	81.7%	
PPE used appropriately by observed employees	569	82.1%	
Linen carts are covered and free from any items on top of cart. Clean linen stored in covered cabinet or in enclosed closet. Clean linen room/closet must have the appropriate air pressure	622	86.5%	
Clean supplies not stored under sinks or adjacent to sink area	645	87.1%	
Multiuse bottles (saline, antiseptic, gel, etc.) are dated appropriately and discarded per expiration date	502	85.5%	
Clean supply/storage rooms contain only clean/sterile items	645	89.6%	
The space is clean and free of dust, dirt, and debris	649	89.7%	
Patient care equipment is clean, free of tape, tape residue, dust, dirt, and grime	633	89.7%	
Outside corrugated shipping boxes are not present in clean storage areas	646	90.2%	

Conclusion

Workflow standardization is a priority in a large health system. The EOC impacts patients, IP programs, and accreditation status. A standardized EOC rounding program provides actionable data to hospital leadership, improves performance and aligns care practices across a system. Data is used to show improvement over time and results in fewer JC survey findings.

References:
- The Joint Commission (2020). Full-Year 2019 Top Noncompliance Data. *The Joint Commission Perspectives, 40(4).*
- The Joint Commission (2019). Full-Year 2018 Top Standards Noncompliance Data. *The Joint Commission Perspectives, 39(4).*

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Nothing to Disclose