



MONTANA STATE HOSPITAL POLICY AND PROCEDURE

Healthcare Associated Infections

Effective Date: June 1, 2020

Policy: IC-13

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- I. PURPOSE:** To specify infection surveillance procedures.
- II. POLICY:** The tracking of health care associated infection is necessary to monitor overall effectiveness of Infection Prevention practices.
- III. DEFINITIONS:**
 - A. Health care associated infections are infections acquired in a hospital or healthcare facility.
- IV. RESPONSIBILITIES:**
 - A. Nursing staff are often the first to observe changes related to possible healthcare-associated infections. Communication of concerns to the medical provider and/or Infection Control Nurse are crucial along with the need to complete the Infection Prevention Report to ensure the accurate timely reporting of diagnosed infections.
 - B. *Licensed Independent Practitioners:* Order cultures of infectious materials when indicated and are active participants in Infection Surveillance.
 - C. *Infection Control Nurse:* Maintains surveillance records and utilizes the data gathered to make recommendations to the Infection Prevention Group.
 - D. *Infection Prevention Group:* Monitor surveillance data and coordinate corrective action activities when indicated to ensure quality care and to maintain a safe working and treatment environment.
- V. PROCEDURE:**
 - A. All infections must be reported to the Infection Control Nurse using the Infection Prevention Report form (see Attachment A). Upon receipt, the Infection Preventionist will review and compare them to prior reports to evaluate for trends or areas of concern. Treatment nursing staff will be contacted to evaluate effectiveness of treatment.

- B. The Infection Prevention Group will review and evaluate all suspected health care-associated infections. The diagnosis and appropriateness of treatment will be reviewed by a staff physician. Attempts will be made to prevent reoccurrence.
- C. Copies of the Infection Surveillance Reports will be made available to all members of the Infection Prevention Group, all nursing supervisors, Medical Director, Medical Clinic Physicians, Director of Nursing, Hospital Administrator, and other appropriate parties.
- D. While infections of all kinds are reportable, the following are the major classifications which are considered hospital associated infection.
 - 1. Central line-associated bloodstream infections (CLABSI).
 - 2. Catheter-associated urinary tract infections (CAUTI).
 - 3. Surgical site infection.
 - 4. Clostridium difficile.
 - 5. Methicillin-resistant staphylococcus aureus (MRSA) infection.
- E. Prevention of healthcare associated infections.
 - 1. Remove unnecessary central lines.
 - 2. Follow proper IV and urinary catheter insertion practices.
 - 3. Comply with hand hygiene recommendations.
 - 4. Use appropriate agent for skin antisepsis.
 - 5. Perform adequate hub/access port disinfection practices.
 - 6. Provide staff education on peripheral and central line maintenance practices.
 - 7. Provide staff education on urinary catheter maintenance practices.
 - 8. Avoid overuse or overprescribing of antibiotics.

VI. REFERENCES:

- A. Centers for Disease Control (2016, March). *Healthcare-associated infections*. <https://www.cdc.gov/hai/index.html>
- B. U.S. Department of Health and Human Services (2020, May). *Healthcare-associated infections*. <https://www.healthypeople.gov/2020/topics-objectives/topic/healthcare-associated-infections>.

VII. COLLABORATED WITH: Infection Control Nurse; Medical Clinic Physicians.

VIII. RESCISSIONS: IC-13 *Health Care Associated Infections* dated January 12, 2016; IC-13, *Nosocomial Infections* dated November 25, 2009; IC-13, *Nosocomial Infections* dated October 30, 2006; IC-13, *Nosocomial Infections* dated March 30, 2003; IC-13, *Nosocomial Infections* dated December 18, 2002; IC-13, *Nosocomial Infections* dated February 14, 2000; HOPP 8-ON.080884, *Nosocomial Infections* dated April 11, 1996.

IX. DISTRIBUTION: All hospital policy manuals.

- X. ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per ARM § 37-106-330.
- XI. FOLLOW-UP RESPONSIBILITY:** Infection Control Nurse.
- XII. ATTACHMENTS:** For internal use only.
- A. [Infection Prevention Report](#)

Signatures:

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