

Infection Prevention *and* - Environmental Service Department -



Teaming up Against Health Care Associated Infections (HAI)

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Expert care with a personal touch

Plan and Commitment

- Implemented Best Practices
 - AHA and AHE C.H.E.S.T Program
- Education and Certification
 - Simulation Room
- Enhancement to Cleaning/Disinfection
 - Implemented UV Technology
- Monitor effectiveness of cleaning/disinfecting
 - ATP testing
- Collaborations with IP and Clinicians



Frontline Training Program



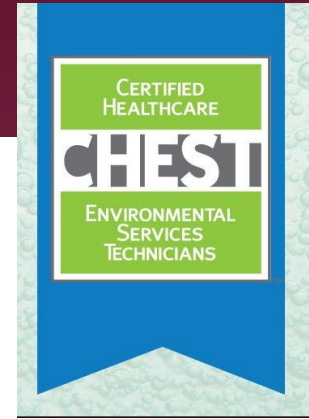
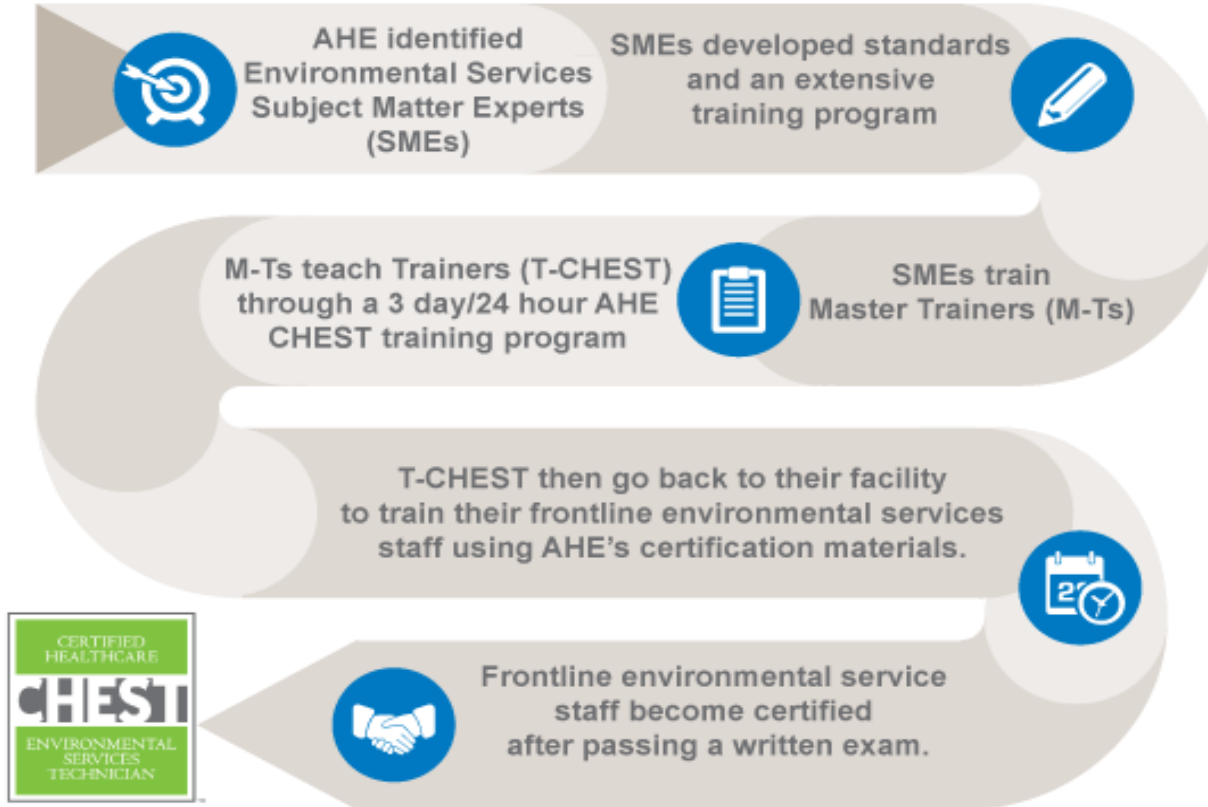
- ✓ Implemented Best Practices
- ✓ Education and Certification

About CHEST

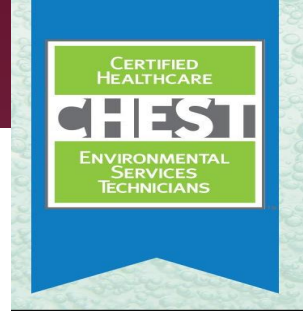
- The Certified Healthcare Environmental Services Technician (CHEST) program offers a new certification for Environmental Services frontline workers.
- It is a comprehensive, healthcare specific, **best practice** referenced training program for supervisors and the frontline staff they lead.
- **CHEST** is built on an innovative “Train-the-Trainer” model. Healthcare facilities can choose to train one or more of their staff through AHE to deliver the **CHEST** certification program directly in their hospitals.



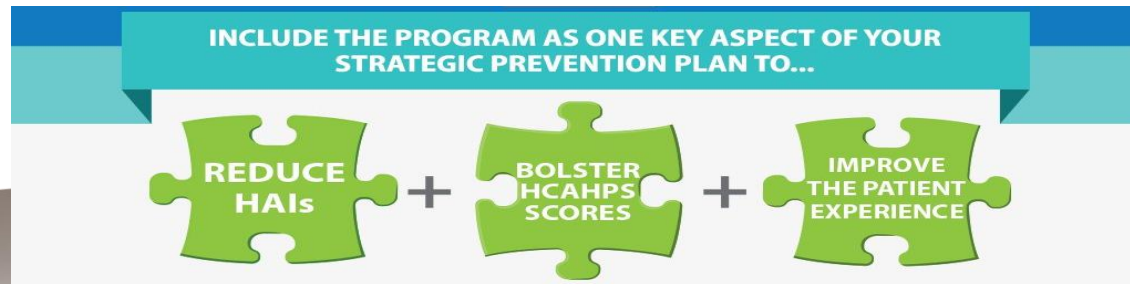
Train the Trainer Model:



Why CHEST?



- Achieve quality outcomes
 - ✓ Reduce HAIs
 - ✓ Higher HCAHPS rating
 - ✓ Improve medical reimbursements
- CHEST program validates competency of Environmental Services Technicians
- Technicians not only learn the proper way to perform their duties, they also learn “why” they perform it.

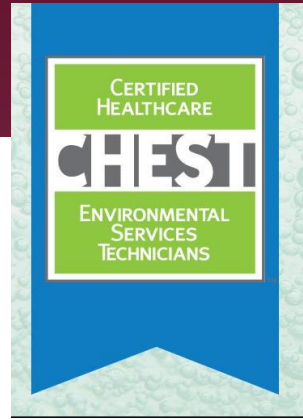


CHEST Training Methods:

Utilizes a variety of media:

- Video
- PowerPoint presentations
- Class activities and participation:
 - Study guides
 - Q & A / Chapter reviews
 - Real-world scenarios and examples
 - Games

All designed to help engage participants, help them retain information, improve on-the-job performance and heighten awareness.



Program/Certification Aspects:

- The program covers all aspects of a frontline worker's typical tasks and accountabilities.
- Environmental Service Technicians must complete the required training hours.
- Environmental services technicians must pass a written assessment (Exam) to earn the CHEST title.



PVHMC Plan and Phased Approach

1. First Phase:
 - ✓ EVS Management T-CHEST, certified Trainers
2. Second Phase:
 - ✓ EVS Leads
3. Third Phase:
 - ✓ All Relief Leads
4. Final Phase:
 - ✓ Key EVS Associates
 - ✓ Continued Education (CEU's)



CHEST Program Sections:

- **Infection Prevention**
- **Cleaning and Disinfection of all areas**
- **Environmental Services Equipment and Supplies**
- **Working Safely and Responsibly**
- **Basic Floor Care and Maintenance**
- **Environmental Monitoring and Quality Control**
- **Waste Removal**
- **Linen/Laundry Handling**
- **Multi-cultural Differences/Ethical Decision-Making**
- **Effective Communication and the Patient Experience of Care**



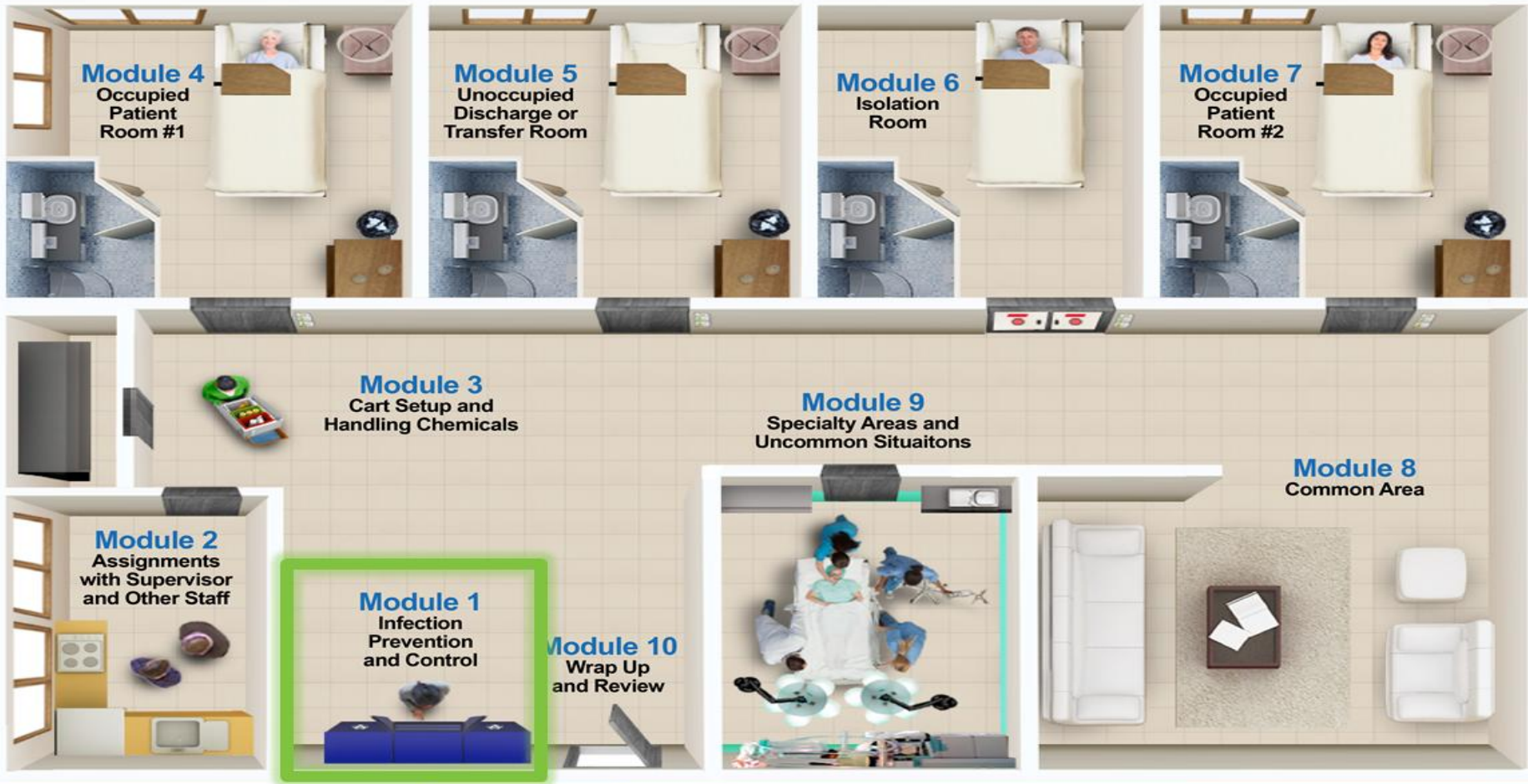
Program Components:

The program covers seven domains.

DOMAINS	CONTENT
	20% Cleaning and Disinfection
	10% Waste Handling
	5% Floor Care
	10% Linen Handling
	20% Infection Prevention
	15% Safety
20% Communication	

Domains are taught in 10 modules.

MODULES	
Infection Prevention and Control	4.0 hours
Assignments with Supervisor and Other Staff	1.5 hours
Cart Set-up and Handling Chemicals	2.5 hours
Occupied Room #1	2.0 hours
Unoccupied Discharge or Transfer Room	1.5 hours
Isolation Room	2.0 hours
Occupied Patient Room #2	1.75 hours
Common Area	2.0 hours
Specialty Areas, Uncommon Situations	2.0 hours
Wrap up and Review	2.0 hours
Additional Practice	1.5 - 2 hours



Certified Healthcare Environmental Services Technician

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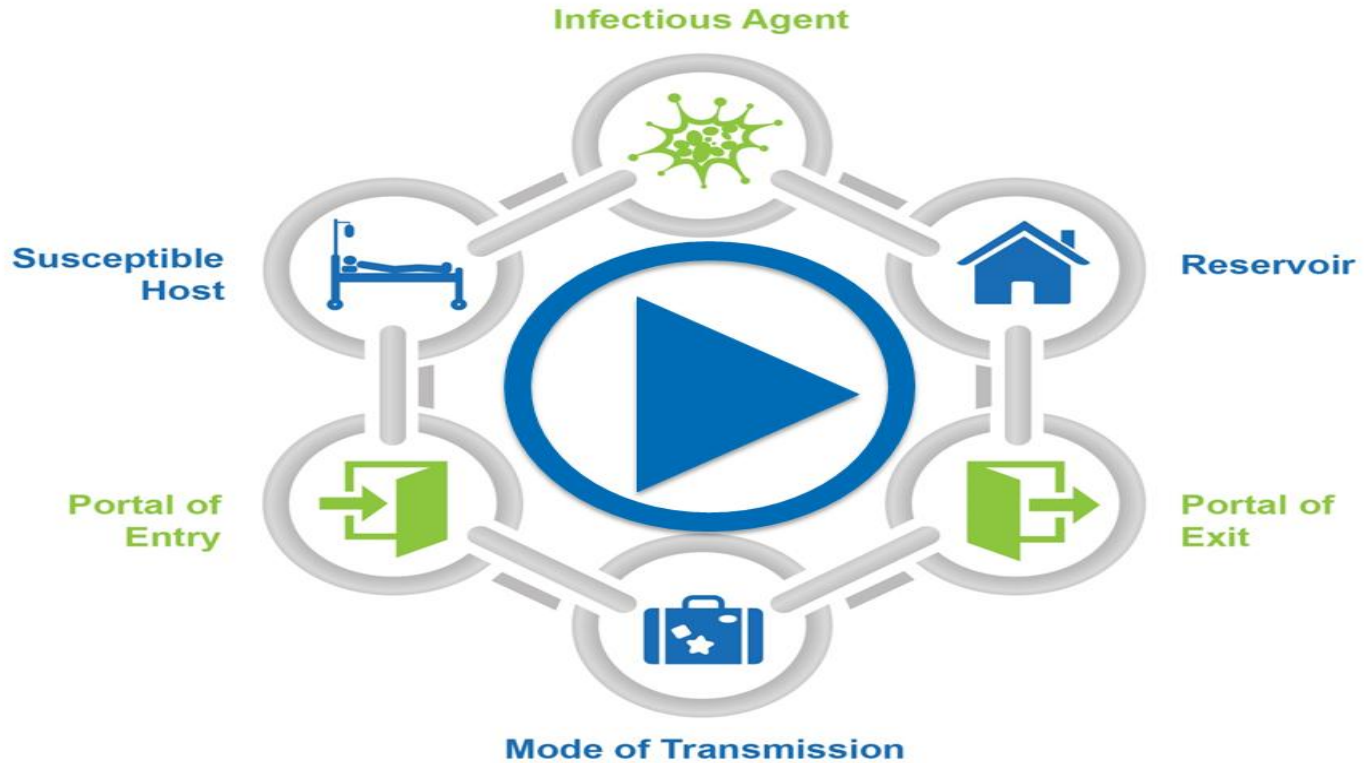
Expert care with a personal touch

Program Focus: Infection Prevention & Control



- 1. Chain of infection/breaking chain**
 - 6 links
- 2. Behaviors to control/prevent infection**
 - Know pathogen
 - Proper cleaning/chemical/tool/disinfection process-dwell time
 - Proper PPE
 - Sneeze/Cough etiquette
 - Hand Hygiene
- 3. Cleaning vs. Disinfecting**
 - Disinfection classifications
- 4. Standardized cleaning process:**
 - Clean clock/counterclock
 - Clean to dirty
 - Clean top to bottom
 - Unidirectional wiping
- 5. PPEs:**
 - Donning & Doffing
- 6. Standard precautions**
- 7. Transmission based precautions**

The chain of infection





Cleaning vs. disinfecting

Cleaning

- The removal of material like dust, soil, blood, and bodily fluid.
- Physically removes rather than kills microorganisms. Accomplished with water, detergents, and mechanical action.
- Always essential prior to disinfection or sterilization.
- A surface that has not been cleaned effectively cannot be properly disinfected or sterilized.

Disinfecting

- The inactivation of pathogens.
- Usually involves chemicals, heat, or ultraviolet light.
- Sterilization destroys microbial life including bacteria, viruses, spores, and fungi and is not performed by environmental services.
- The most common disinfectants used are quaternary ammonium compound products, hydrogen peroxide-based products, and sodium hypochlorite (bleach).

Putting on PPE



Taking off PPE



Benefits:

Frontline Environmental Services Staff

- Increased professionalism
- Engaged environmental services staff
- Improved Department morale and respect

Department/Facility

- Improved interdepartmental communication
- Earned credential recognized by the American Hospital Association
- Ability to perform and compete at the highest level for environmental services jobs

Patients

- Greater satisfaction
- Better experience of care
- Improved outcomes



Advantages of CHEST Certification:

- 90% of those who hold a certification through the American Hospital Association say it's a valued achievement in their career.
- 86% of healthcare human resource managers and directors take a closer look at employees with certifications.
- Employees who are more confident in achieving their work goals are 83% more likely to be engaged on the job, which correlates to greater job satisfaction.*



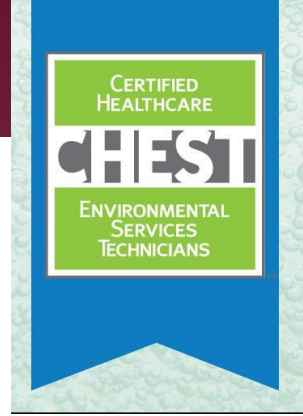
**Source: Society for Human Resource Management (2012). 2012 Employee Job Satisfaction and Engagement.*

Graduation Ceremony ~ July 13, 2017



In Summary:

- Healthcare Environmental Services Technicians are an **instrumental** part of the patient care team.
- Meticulously trained frontline workers in healthcare are critical to positive outcomes.
- CHEST program incorporates a systematic process for cleaning practices.
- Certification empowers frontline staff – Certified Staff are proud and confident.
 - ❖ 1300 certified in the U.S.
 - ❖ 79 certified at PVHMC



Enhancement to Terminal Disinfection:

- Added UV disinfecting technology

**** In addition to routine discharge cleaning/disinfecting****

- Effective against C. difficile spores
 - All ICU rooms
 - All isolation rooms



Measuring Effectiveness

- ATP Testing
 - ✓ Patient care areas
 - ✓ Public areas and restrooms



Measuring Effectiveness:

POMONA VALLEY HOSPITAL MEDICAL CENTER
2017 PERFORMANCE IMPROVEMENT REPORT

Environmental Services

Representative: John Mursa

Plan Maintain High Cleaning Effectiveness, which assists with HAI Reductions.

Design **Required by Title 22 and The Joint Commission.**

Define / Background Numerator/Denominator. Maintain high cleaning effectiveness through education, training, process changes, staffing, technology and other means, which also assists with HAI reduction.

What data will be collected? Data will be collected to measure desired results of PI indicator. Data includes:
 ATP testing of high touch surfaces (HTS) is monitored from reports provided from 3M software using Relative Light Units (RLU).

How will the data be collected, tabulated, and documented? **Numerator:** Total levels of HTS below 250 RLU.

Denominator: Total number of HTS inspected each month.

ATP testing of HTS Results	1st Qtr 2017			2 nd Qtr 2017			3 rd Qtr 2017			4 th Qtr 2017			YTD
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Goal: ≥ 90%	89.2%	91.2%	93.1%	91.8%	91.4%	93.7%	97.3%	97.8%	97.9%	96.9%			96.1%
Numerator	157	281	324	213	477	1169	1858	1698	1600	2280			10057
Denominator	176	308	348	232	522	1247	1909	1737	1634	2352			10465

Assess **October** - Goal met. ATP testing done increased. The total for UV light used in ICUs for the month was 268. All failed tests were retested and passed after cleaning to assure a passing score.

Overall judgment of the situation? Goal met or not met? Common causes of deviation and evaluation the process.

Collaborations with IP and Clinicians:

- IP & EVS Task Force
 - Strategize and work closely to implement HAI reduction plans.
 - Updates in the daily patient room cleaning policy.
 - Participate in Hand Hygiene Audits.
 - Cubicle curtain cleaning initiatives.
 - Infection Prevention advocate for future project planning.

Collaborations with IP and Clinicians:

- Surgical Site Infection Committee

- ✓ Revise Policies
- ✓ Develop & Implement updated AORN standardized processes
- ✓ Training & Education
- ✓ Future consideration to implement UV light technology in OR Suites



Guidelines for Cleaning & Disinfecting Procedure Areas

WE CLEAN & DISINFECT TO PROTECT

This section describes the OR Quick Guide Cleaning Procedures, which is the standard method for cleaning all Surgical and Procedural areas zones (Between Case Cleaning, Terminal Cleaning, Total Cleaning and Sub-Sterile Room Cleaning).

Methodology to any cleaning process:

- Clean stock or counterbalances (ensures items do not get missed).
- Clean to dirty (reduces change of spreading contaminants & increases efficiency).
- Clean from top to bottom (Dirt/dust falls from high surfaces onto lower surfaces).
- Wipe in one direction called **unidirectional wiping** (to prevent wiping and re-contaminating areas just clean & ensures solution is applied to entire surface).

Zones

Unrestricted Area	Semi-Restricted Area	Restricted Area
Street clothes are permitted in this area: Offices, staff lounge, & recovery room (PACU) located before the red line on the floor.	Street clothes are not permitted. Associates must put on gowns and hair/facial hair must be covered. Inter-visit corridors, sub-sterile rooms (except in Main OR & C-Section suites), clean supply storage rooms, the nurse station, areas behind the red floor line, but not the ORs or Procedure rooms.	Street clothes are not permitted. Associates must put on gown, all hair including facial hair must be covered and masks are worn if open sterile supplies and equipment are present or being used. ORs or Procedure rooms.

Cleaning Type:

Between Case Cleaning	Daily Terminal Cleanings	Weekly Total Cleanings	Sub-Sterile Room Cleaning
After each surgical procedure, a safe, clean environment will be re-established by between case, turnover cleanings.	The surgical procedure rooms and the surgical suite should be terminally cleaned daily after last case or every 24 hours and shall be properly documented in cleaning log.	Weekly scrubbing of surgical area floors and wiping of ceiling surfaces if applicable. In addition to terminal cleanings and shall be properly documented in cleaning log. **Floor scrubber and damp-duster extension handle (for weekly total cleanings. To include Sub-Sterile Room Cleaning. ** Run UV light weekly after weekly total cleaning is completed.	Cleanings will be done daily and throughout the day as needed. Associates assigned to total cleaning the surgical suites are also responsible for applying the same total cleaning procedures to the adjoining sub-sterile rooms.

Cleaning Checklist — Before First Case of the Day

Operating or Procedure Room (USER)
1.) Remove unnecessary equipment.
2.) Damp dust from top to bottom: <ol style="list-style-type: none"> Overhead lights All reachable flat surfaces <ol style="list-style-type: none"> Furniture Booms Equipment Countertops

Operating or Procedure Room (Between Cases (after the patient has left the area))	Operating or Procedure Room (Terminal Cleaning)
<ol style="list-style-type: none"> Perform hand hygiene Don personal protective equipment Collect linen Remove soiled linen Remove large debris from floor Remove trash Clean and disinfect <ol style="list-style-type: none"> Anesthesia cart & equipment (IV Poles & pumps, *user, inside cart) Anesthesia Machine (user) Patient Monitors OR beds Reusable table straps Bed attachments Positioning devices Patient transfer devices Overhead procedure lights Tables Mayo stands Mobile & fixed equipment <ol style="list-style-type: none"> Suction Equipment, Neptune Imaging monitors (user) Radiology equipment (user) Electrosurgical units (user) Robots (user) Lasers (user) Floors and walls if soiled or potentially soiled (splash, splatter or spray) Don PPE (both) Perform hand hygiene (both) 	Terminal Cleaning includes everything performed with between cases cleaning from column 1, to include the following: <ol style="list-style-type: none"> All floors-wet vacuum or single-use mop Storage cabinets, supply carts, and furniture Light switches Door handles and push plates Telephones & mobile communications devices Computer accessories Chairs, stools, and step stools Trash linen receptacles ** Please refer to the Weekly Total Cleaning**

In Closing:

Healthcare Environmental Services Technicians are a vital part of the healthcare team and their work impacts many components of the daily operations of a facility including infection prevention, patient satisfaction, improved outcomes, and reimbursement.

With so much at stake for healthcare facilities, training and certifying Environmental Services Technicians in critical areas of competency needs to be an essential aspect of the facility's training program.

Questions?