CDC’s ICAR Tool

Infection Prevention and Control Assessment Tool for Acute Care Hospitals

This tool is intended to assist in the assessment of infection control programs and practices in acute care hospitals. If feasible, direct observations of infection control practices are encouraged. To facilitate the assessment, health departments are encouraged to share this tool with hospitals in advance of their visit.

Overview

Section 1: Facility Demographics
Section 2: Infection Control Program and Infrastructure
Section 3: Direct Observation of Facility Practices (optional)
Section 4: Infection Control Guidelines and Other Resources

Infection Control Domains for Gap Assessment

I. Infection Control Program and Infrastructure
II. Infection Control Training, Competency, and Implementation of Policies and Practices
   A. Hand Hygiene
   B. Personal Protective Equipment (PPE)
   C. Prevention of Catheter-associated Urinary Tract Infection (CAUTI)
   D. Prevention of Central Line-associated Bloodstream Infection (CLABSI)
   E. Prevention of Ventilator-associated Event (VAE)
   F. Injection Safety
   G. Prevention of Surgical Site Infection
   H. Prevention of Clostridium difficile Infection (CDI)
I. Environmental Cleaning
J. Device Reprocessing

- **Catheter-associated Urinary Tract Infection (CAUTI)**

- **Central line-associated bloodstream infection (CLABSI)**

- **Ventilator-associated Event (VAE)**

- **Surgical Site Infection (SSI)**

Expansion of Resources
NJDOH: Communicable Disease Service (CDS)

https://www.nj.gov/health/cd/
CDS: Healthcare-Associated Infections & Antimicrobial Resistance

Emergence of Antibiotic Resistance Through MCR-1 and MCR-2 Plasmid Resistance

CDC has released guidance for healthcare facilities and health-care workers on how to manage emerging antibiotic-resistant isolates with resistance. Hospitals and laboratories should report any emerging antibiotic-resistant bacteria to a National MRSA-4 to the Antimicrobial Resistance Coordinator.

Drug Diversion

Drug diversion is a growing concern in New Jersey healthcare facilities. When healthcare workers temper or use medications meant for patients, they put patients at risk.

Learn more about drug diversion.

Infection Control Assessment & Response (ICAR) Program

The Infection Control Assessment and Response (ICAR) program is one of New Jersey’s recent initiatives to help reduce HAIs in healthcare facilities.

Learn more about ICAR.

HAI and Multi-Drug-Resistant Organism Reporting

As per NJAC 8:57, all occurrences of disease should be immediately reported to the appropriate agency.

Antimicrobial Resistance and Stewardship Programs

Antimicrobial-resistant infections happen when bacteria in your body become resistant.

Drug Diversion

Drug diversion is a growing concern in New Jersey healthcare facilities. When healthcare workers temper or use medications meant for patients, they put patients at risk.

Learn more about drug diversion.

Injection Safety

In 2011, NJDOH created the first Safe Injection Ambassador Program to teach healthcare professionals about safe injection practices across the healthcare spectrum. NJDOH is also part of multiple injection safety-related programs. These programs include the Safe Injection Practice Coalition (SIP) and the One and Only Campaign.

Learn more about injection safety.

What are Healthcare Associated Infections?

Healthcare associated infections (HAIs) refer to any type of disease acquired at a healthcare facility. Examples of HAIs include someone getting a staph infection after being exposed to an untold hospital bed. Antibiotic-resistant organisms are often associated with healthcare facilities and unsafe injection practices and instead of drug diversion can put patients at risk of acquiring HAIs.

Additional Resources

https://www.nj.gov/health/cd/topics/hai_ar.shtml
ICAR Video Leader Guide

- Stimulate discussion
- Self-evaluation
- Engaging
- Q&A
- Additional resources
- Recently updated

Injection Safety & Drug Diversion

- Safe Injection Ambassador Program
- Drug Diversion Exercise Facilitator Guide (Acute & ASC)
- Drug Diversion Policy Templates
- Conferences

http://www.oneandonlycampaign.org/partner/new-jersey
Local Health Departments (LHD)

- Identify the LHD by county or municipality
- After hour emergency contact phone numbers
- New Jersey Local Information Network and Communications System (NJLINCS)

NJLINCS Health Alert Network
Public Health Advisory
Distributed by the New Jersey Department of Health

Subject: Ebola Virus Disease - Outbreak Update
Date: 3/5/2019, 14:45:56
Message#: 103750-3-5-2019-PHAD
Contact Info: Kimberly Cervantes, NJ Department of Health
Phone: 609-826-5964; Email: Kimberly.Cervantes@njdhcs.net
Attachments: LINCS_Msg_for_clinicians_mar_5_2019.pdf

The ongoing outbreak of Ebola virus disease (EVD) in the Democratic Republic of Congo (DRC) serves as a reminder for U.S. healthcare facilities to review their infection prevention and control processes to safely identify and manage patients with communicable infections. Please see attached memo containing information on triage, clinical and epidemiological assessment, infection control, and public health reporting.
New Jersey Administrative Code (N.J.A.C.) is available [here](#). For setting specific regulations refer to:

- N.J.A.C. Title 8, Chapter 39 Standards for licensure of Long-term Care Facilities
- N.J.A.C. Title 8, Chapter 45A Manual of Standards for Licensing of Ambulatory Care Facilities
- N.J.A.C. Title 8, Chapter 45G Hospital Licensing Standards
- N.J.A.C. Title 8, Chapter 42 Licensing Standards for Home Health Agencies
- N.J.A.C. Title 8, Chapter 57 Communicable Diseases
  - Instructions for using LexisNexis are available [here](#).
Communicable Disease Service

- Regional Epidemiology Program (REP)
- Vaccine Preventable Disease Program (VPDP)
- Infectious and Zoonotic Disease Program (IZDP)
  - Healthcare-Associated Infections Coordinator
  - Antimicrobial Resistance Coordinator
Networking & Professional Development
Networking & Education Opportunities

- New Jersey Hospital Association
  - TAP Workshop
- The Association for Professionals in Infection Prevention and Epidemiology (APIC)
  - APIC Northern New Jersey
  - APIC Southern New Jersey
Appendix
• LexisNexis- Free online public access
• Title 8. Health
• Chapter 43G. Hospital Licensing Standards
• Subchapter 14. Infection Control

https://www.state.nj.us/oal/rules/accessp/
Electronic Code of Federal Regulations (e-CFR)

Electronic Code of Federal Regulations

e-CFR data is current as of February 14, 2019

USER NOTICE

Browse: Select a title from the list below, then press "Go".

Title 42 - Public Health
E-CFR (cont’d)

• Title 42: Public Health > Chapter IV > Subchapter G > Part 482

$482.41  Condition of participation: Physical environment.
$482.42  Condition of participation: Infection control.
$482.43  Condition of participation: Discharge planning.
$482.45  Condition of participation: Organ, tissue, and eye procurement.

https://www.ecfr.gov
Surveyor Training

- CMS Survey and Certification Group-Integrated Surveyor Training Website

<table>
<thead>
<tr>
<th>Activity Information</th>
<th>Course Information</th>
<th>Type</th>
</tr>
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<tbody>
<tr>
<td>0CMSSafeReprocessingFlexEndoscopes-Archived Available On Demand</td>
<td>Archived - Safe Reprocessing of Flexible Endoscopes <strong>Description:</strong> On July 15, 2016, the Survey and Certification Group at CMS, presented a webinar to provide information for surveyors that will aid their ability to observe endoscope reprocessing. Karen Hoffmann, Infection Prevention Consultant to SCG and Mary Ann Drosnock, co-chair of AAMI ST91 and Manager of Clinical Education for Healthmark Industries, covered the following topics: updated manufacturer’s reprocessing guidelines from AAMI, CDC, FDA, the impact of endoscope reprocessing breaches, the need to improve practices on the frontline, and monitoring processes for effective cleaning and disinfection of endoscopes.</td>
<td>Archived Webinar</td>
</tr>
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https://surveyortraining.cms.hhs.gov/
### Module 4: Patient Tracers

#### Section 4.A. Indwelling Urinary Catheters

<table>
<thead>
<tr>
<th>Elements to be assessed</th>
<th>Surveyor Notes</th>
<th>Surveyor Notes</th>
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<tbody>
<tr>
<td>Urinary catheters are inserted, accessed, and maintained in a manner consistent with hospital infection control policies and procedures to maximize the prevention of infection and communicable disease including the following:</td>
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**Insertion:**

- **4.A.1** The hospital has guidelines for appropriate indications for urinary catheters.
  - Yes
  - No

*If no to 4.A.1 cite at 42 CFR 482.24(c)(2)(vii) (Tag A-0467)*

- **4.A.2** The hospital can provide evidence that only properly trained personnel are given the responsibility of inserting and maintaining urinary catheters.
  - Yes
  - No

*If no to 4.A.2 cite at 42 CFR 482.23(b)(5) (Tag A-0397)*
Coming Soon

- Hand hygiene support for post-acute care
- Audit tool guidance
- Webinars- setting specific
  - LTC debuting March 2019
- Antimicrobial Stewardship Recognition Program

New Jersey Antimicrobial Stewardship Recognition Program
2019 Application for General Acute Care Hospitals

About the Acute Care Application
This application should be completed by healthcare facilities in New Jersey that are licensed as an “Acute Care Hospital.” A separate application should be completed for every physical hospital, even if elements
Resources
