

INFECTION CONTROL RISK ASSESSMENT INSTRUCTIONS

The purpose of a risk assessment is to not only assess what your risk is, but to ensure you have policies and practices in place to deal with those risks.

The attached “Sample Infection Control Risk Assessment” is a sample only. You **MUST** customize it to your facility and your particular needs. You are encouraged to add lines, should you note more risk areas.

The columns are as follows:

- Area/Issue/Topic: Include any issue you feel is a risk area for infection control in your facility.
- Current Status: Include what is currently seen/done at your facility or may impact your facility.
- Desired Status: This is the outcome you strive for.
- Gap: This is the gap between your current and desired status.
- Action Plan and Evaluation: Include your plans for lessening the gap and/or maintaining your current status.
- Priority: This is subjective. However, most issues related to infection control are medium or high risk due to the nature of surgical site infections (SSI).

Geographic Risks

- List any geographic issues you might have that impact or may be impacted by infection control issues. An example of this would be mold if you are in an area impacted by flooding.
- Ensure all columns match your facility.

Community Risks

- Call your local health department for the top five communicable diseases in your local area. Ensure all columns match your facility.
- Area/Issue/Topic: Type in the name of your local department.
- Current Status:
 - Type in the top five communicable diseases and any others that are of concern to you. One example is on the “Sample Infection Control Risk Assessment.” Another example may be your No. 1 communicable disease is Influenza. This may be of concern to you, and you may choose to add items to your action plan.
 - Perform a TB Risk Assessment and type in your risk level where indicated. Please note that if you are higher than a low-risk facility, you will need additional items in your desired status and action plan columns.

At Risk Patient Populations

- Area/Issue/Topic: Type in your patient population(s).
- Ensure all columns match your facility.

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Infection Risks

- Reduce risk of post-operative infection associated with surgeries being performed.
 - Area/Issue/Topic: Type in any specific surgeries you have infection control concerns with.
 - Current Status: Type in your resource for hand hygiene.
- Analyze infection and follow-up data.
 - Current Status: Type in your infection rate and the number of infections that you had during a stated timeframe.
- Reduce the risk of the occurrence of <TASS>. Note that this sample includes ophthalmic procedures. Determine if you have any particular procedures that may need to be mentioned.
- Incomplete implementation of Hand Hygiene Guidelines.
 - Current Status: Type in your current hand hygiene compliance rate.
 - Desired Status: Type in your facility goal for hand hygiene compliance.
- Ensure all columns match your facility.

Employee Risks

- Current Status: Type in your flu vaccination compliance rate.
- Desired Status: Type in your flu vaccine compliance goal.
- Ensure all columns match your facility.

Supplies and Equipment Risks

- Current Status: Type in what type of sterilizers you use at your facility.
- Ensure all columns match your facility.

Environment Risks

- Current Status: Type in the organizations you use for guidelines on cleaning and disinfecting areas within your facility.
- Ensure all columns match your facility.

Staff Development

- Ensure all columns match your facility.

SAMPLE INFECTION CONTROL RISK ASSESSMENT

| Area/Issue/Topic | Current Status | Desired Status | Gap (Describe) | Action Plan & Evaluation | Priority: High, Medium, Low |
|---|---|--|---|---|-----------------------------|
| Geographic Risks | | | | | |
| Natural disasters such as a massive winter storm that might impact infection control activities in the ASC. | <ul style="list-style-type: none"> No winter storms required a change in operating hours or patient care needs. | <ul style="list-style-type: none"> No changes | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Ensure a contingency plan is in place. Include patient and staff notification of reduced or cancelled services. Ensure the ASC has a backup power supply source. | Medium |
| Community Risks | | | | | |
| Proactive surveillance of XXX Department of Health Communicable Disease reporting. | <ul style="list-style-type: none"> Current status shows the top five reportable diseases are: chlamydia; gonorrhea; campylobacteriosis; syphilis, early; and Lyme disease based on most recent data (2015) from the public health department. Due to our scope of care, these communicable diseases are not of immediate concern. The ASC does not admit patients with any known communicable disease. The ASC has protocols in place of what to do if a patient arrives with a suspected communicable disease. The ASC is a low-risk facility for TB, as outlined in the TB Risk Assessment. | <ul style="list-style-type: none"> Ensure the top five communicable diseases are known and precautions are in place, as needed. | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Continue annual review of communicable disease reporting policy and protocols. | Low |

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|---|--|--|---|--|--------------------------------|
| At Risk Patient Populations | | | | | |
| <p>Large percentage of patients over the age of 55.</p> | <ul style="list-style-type: none"> Complete H&Ps are performed on all surgical patients. Patients are monitored during the surgical procedure. Proper pre- and post-op medications are prescribed to reduce risk of infection, if applicable. Physicians are queried for post-operative complications and infections every 30 days. | <ul style="list-style-type: none"> No surgical complications during the procedure or post-procedure infections. | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Continue to ensure H&Ps are obtained on all patients. Continue to query surgeons for post-operative infections on a monthly basis. | High |
| Infection Risks | | | | | |
| <p>Reduce risk of post-operative infection associated with surgeries being performed.</p> <ul style="list-style-type: none"> Cataract surgery endophthalmitis. | <ul style="list-style-type: none"> The ASC follows national recommendations for pre-op medications. Stringent surgical preparation of the operative site is performed. Hand hygiene process based on the 2002 CDC Hand Hygiene recommendations. Physicians are queried for post-operative infections every 30 days. Surgical infections will be investigated and tracked. | <ul style="list-style-type: none"> Zero infections. | N/A | <ul style="list-style-type: none"> Perform hand hygiene surveillance on a regular basis. Perform proper technique with sterilization procedures. Continue with other actions. | High |

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|--|--|---|---|---|--------------------------------|
| Infection Risks (continued) | | | | | |
| Analyze infection and follow-up data. | <ul style="list-style-type: none"> Infection data and follow-up investigation will be collected, should an infection occur. The current infection rate is [redacted] for the year [redacted]. The number of infections was [redacted]. | <ul style="list-style-type: none"> Continued trend of no infections. | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Select infection control processes to monitor: <ul style="list-style-type: none"> Hand hygiene, Surgical scrub, Placement of sterile barriers, and Patient preparation pre-op. | High |
| Risk reduction of the occurrence of TASS. | <ul style="list-style-type: none"> National recommendations for risk reduction strategies related to the cleaning and sterilization process are being followed. | <ul style="list-style-type: none"> Zero incidence of TASS. | <ul style="list-style-type: none"> Monitoring of sterilization processes to ensure proper instrument management is not occurring based on manufacturer's instructions for use (IFU). | <ul style="list-style-type: none"> Review importance with OR staff regarding manufacturer's IFU and national standards of care to reduce the occurrence of TASS. | High |
| Incomplete implementation of CDC Hand Hygiene Guidelines | <ul style="list-style-type: none"> Policies and procedures are in place outlining indications for hand hygiene and surgical scrubs. Hand hygiene compliance is [redacted]. | <ul style="list-style-type: none"> Hand hygiene goal 80%. | <ul style="list-style-type: none"> Hand hygiene was not at facility goal. | <ul style="list-style-type: none"> Re-educate all staff on CDC guidelines. Monitor employee hand-hygiene opportunities for proper sequence and timelines. | High |

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|-------------------------------------|--|---|---|---|--------------------------------|
| Employee Risks | | | | | |
| Exposure to communicable diseases. | <ul style="list-style-type: none"> Two-step TB test conducted upon hire. Influenza vaccine offered, with declination rates tracked. Staff and patients are made aware of aware of hand hygiene and cough etiquette. Current flu vaccination compliance rate is [redacted] %. | <ul style="list-style-type: none"> Flu vaccine compliance goal of [redacted] %. Increased compliance with acceptance of influenza vaccine. | <ul style="list-style-type: none"> Staff not aware of the value of influenza vaccine or percentage goal of employees being vaccinated. | <ul style="list-style-type: none"> Communicate goals for compliance with influenza vaccination of all staff. | High |
| Supplies and Equipment Risks | | | | | |
| Proper instrument processing. | <ul style="list-style-type: none"> Prevac sterilizers are utilized for sterilization of surgical trays and instruments. Spore test is performed on each unit at the beginning of each work day. Internal and external indicators are used in each package. Use of distilled water for cleaning and rinsing of intraocular instruments based on manufacturer's IFU. Each load run is documented, and instruments can be tracked to specific patients. | <ul style="list-style-type: none"> 100% compliance with manufacturer's IFU on all equipment, including sterilizer, ultrasonic, and individual instruments. | <ul style="list-style-type: none"> N/A | <ul style="list-style-type: none"> Continue to collect and catalog all needed IFUs. Continue to review all instructions to ensure proper processes are being followed. Ensure impacted staff have adequate training around the importance and use of IFUs. | High |

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|---|---|---|---|--|--------------------------------|
| Environmental Risks | | | | | |
| Appropriate cleaning and disinfection of clinical contact surfaces. | <ul style="list-style-type: none"> • Policies for cleaning and disinfecting after each patient is recovered are being followed. • OR suites are cleaned and disinfected based on AORN and APIC guidelines and recommendations. | <ul style="list-style-type: none"> • 100% compliance with using manufacturer's instructions for use when utilizing surface cleaning and disinfection of clinical contact surfaces. | <ul style="list-style-type: none"> • Contact time for disinfection of surfaces was not adequate. | <ul style="list-style-type: none"> • Provide training on appropriate use of surface disinfectant processes. • Observe clinical staff for appropriate use of surface disinfect both in PACU and the OR suite. | High |
| Staff Development | | | | | |
| Infection control training for DON. | <ul style="list-style-type: none"> • The DON has taken initial training and annual training thereafter. | <ul style="list-style-type: none"> • Continue to obtain annual training, though not required by accrediting bodies or CMS. | <ul style="list-style-type: none"> • N/A | <ul style="list-style-type: none"> • Investigate training opportunities via online, conference or self-directed activities, when needed. | High |
| Training on instrument processing for sterilization technicians. | <ul style="list-style-type: none"> • Staff who are processing instruments have been trained and demonstrate competency. | <ul style="list-style-type: none"> • N/A | <ul style="list-style-type: none"> • N/A | <ul style="list-style-type: none"> • Investigate sterile processing courses available online in a webinar or self-study format by attending a live training, if needed. | High |