Promoting Solutions for Making the Built Environment Safer During COVID-19

Cohort 2 Session 14

March 2, 2021

11:00 am

Please note, Project ECHO collects registration, participation, questions/answers, chat comments, and poll responses for some ECHO programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives.

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Today's Agenda

Follow-up from Promoting Safe Visitation during COVID-19

Promoting Solutions for Making the Built Environment Safer During COVID-19

Performance Improvement Discussion

Wrap-up and Poll

Questions & Answers

Follow-up on Promoting Safe Visitation during COVID-19

Your Visitation Innovations

Dwyer Home

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Promoting Solutions for Making the Built Environment Safer During COVID-19

Key Elements for Ensuring a Safe Environment

Physical Environment

- Reimagining Space
- Ventilation
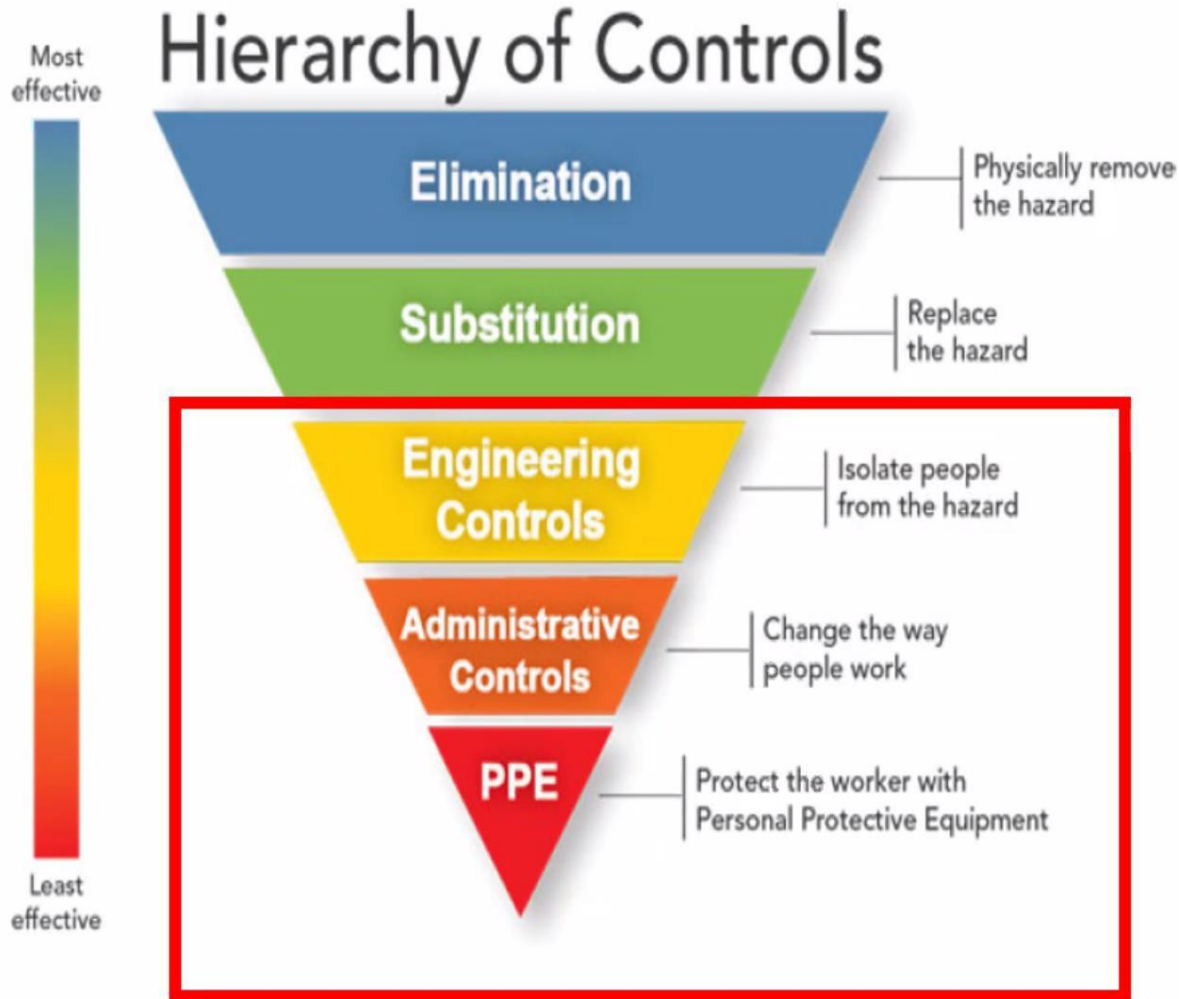- Design for Success
- Cleaning & Disinfecting

Monitoring Safety

- Rounding
- Photos for QI

Communicating Safety

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Physical Environment

The pandemic and preventing COVID introduction and transmission is a daily challenge for all facilities. Always remember:

- **THE BASICS!** Ensuring basic infection prevention practices are in place to prevent bacterial and viral infections.
- **TO BE SAFE!** Maintaining a safe work environment, for the protection of all.
- **WHEN WE KNOW BETTER, WE DO BETTER!** Quality assurance and performance improvement is *always* ongoing!

Considerations: Physical Environment

Re-imagine your space

- **Resident rooms:** The ability to physically separate residents is greatly enhanced when rooms are occupied by only a single resident.
- **Plastic curtains as separators**
- **MAB Infusion Areas**
- **Vaccine Clinics**
- **Use of dining areas, chapel, activities rooms for visitation**
- **One way "traffic flow" for COVID positive units**
- **Donning and Doffing areas**
- **Hallway "activities"**

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Considerations: Physical Environment

Ventilation

- Reduce risk of transmission by:
  - Open windows where possible in COVID-naïve units
  - Industrial fans
  - Supplementing systems with equipment that can further purify air (e.g., air ionization, air purifiers)
  - Adjusting existing systems to support infection control (e.g., creating negative pressure, replacing filters)
  - Air scrubbers

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Considerations: Physical Environment

Design for Success

To help staff do the right thing, make it easier by putting things where they are likely to see or use them. (Ex: dispenser location and visibility within resident's rooms significantly affected hand hygiene adherence)

Engage direct care staff in work environment redesign; those closest to the work will know best how to make it better

Consideration: Physical Environment

Cleaning & Disinfecting

CDC Recommendations:

- Increase the frequency of routine environmental cleaning including bathrooms and around the resident's living space

- Particular attention should be given to cleaning objects that are frequently touched

  - Use dedicated medical equipment whenever possible
    - If not possible, clean AND disinfect prior to use with another resident

  - Always follow facility policies and procedures for cleaning and disinfection

  - First clean and then disinfect with EPA List N disinfectant

  - Laundry, Food Service Utensils and Medical Waste can all be managed using routine procedures

Enhanced Cleaning Technology

- Electrostatic sprayers

- UV Disinfection Lighting

https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

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Cleaning & Disinfection Audit Tool

Infection Prevention and Control Manual
Interim Cleaning and Disinfection Audit
COVID-19 Pandemic

Cleaning and Disinfection Audit - COVID-19 A

PROCEDURE	YES	NO	COM
Resident Room - Confirmed COVID-19			
Preparation			
1. Prepares disinfectant to be used in cleaning and disinfecting resident room following product label			
a. EPA-List N			
2. Performs Hand Hygiene			
Donning of Personal Protective Equipment			
1. All recommended PPE is gathered prior to entering the room (Gown, gloves, eye protection, N95 or mask)			
2. Gown is donned first and tied at waist and neck			
3. Dons mask or N95 respirator			
4. Secures nosepiece with both hands			
5. Secures elastic bands or tie securely			
6. Mask or N95 fits snug to face and below chin			
7. Goggles or face shield is donned			
8. Gloves extend to cover wrist of isolation gown			
Resident Room			
1. Housekeeping cart does not enter the resident room			
2. Unattended chemicals should be securely locked			
3. Performs cleaning and disinfection of high touch areas:			
a. Doorknobs			
b. Handrails			
c. Bath rails			
d. Skin handles			
e. Call buttons			
f. Call light cords			
g. Soap dispensers			
h. Telephones			
i. Remote controls			
j. Wheelchairs			
k. Walkers			
l. Bedside tables			
m. Light switches			

Infection Prevention and Control Manual
Interim Cleaning and Disinfection Audit
COVID-19 Pandemic

n. Other surfaces near resident bed/chair			
4. Cleans and disinfect bathroom			
5. Mops floor			
6. Performs cleaning and disinfection from cleanest surfaces to dirtiest surfaces			
a. If surfaces are visibly soiled, clean first then disinfect			
7. Cleans areas that are not re-contaminated			
8. Cleaning cloths and solutions are used for only one room			
9. Cleaning cloths do not soak in dirty cleaning solution			
10. Mop head is laundered after each use			
Removal of Personal Protective Equipment			
Gloves			
1. Grasps outside of glove with opposite gloved hand and peels off			
2. Holds removed glove in gloved hand			
3. Slides fingers of ungloved hand under remaining glove at wrist			
4. Peels glove off over first glove			
5. Discards gloves in waste container			
Gown			
1. Unfastens ties			
2. Pulls away from neck and shoulders, touching inside of gown only			
3. Turns gown inside out			
4. Folds or rolls into a bundle and discards			
a. Disposable gowns: Discards in waste receptacle			
b. Reusable/cloth gowns:			
c. Places in soiled laundry receptacle			
Exits Room after Glove/Gown Removal			
Perform Hand Hygiene			
Goggles/Face Shield			
1. Removes goggles/face shield using care to pull away from face not to touch front of shield or goggles			
Mask or Respirator			
1. Grasps bottom, then top ties or elastics and removes			
2. Does not touch the front of the mask or respirator (contaminated)			
3. Disposes of properly			

Infection Prevention and Control Manual
Interim Cleaning and Disinfection Audit
COVID-19 Pandemic

5. The employee used the proper technique and order to don and removed PPE			
6. PPE was removed at doorway or anteroom			
7. Perform Hand Hygiene			
Medical Equipment			
1. Cleaning and Disinfection of medical equipment is performed following manufacturer's instructions and use of EPA List N Disinfectant			
Comments			

Employee _____ Date _____

Evaluator _____ Date _____

References and Resources:

- Centers for Disease Control and Prevention. Coronavirus Disease 2019 (COVID-19). Preparing for COVID-19 in Nursing Homes. June 25, 2020: https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html
- Centers for Disease Control and Prevention. Clinical Questions about COVID-19: Questions and Answers. August 4, 2020: https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html
- Centers for Disease Control and Prevention. Interim Infection Prevention and Control recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic. July 15, 2020: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html
- Centers for Medicare and Medicaid Services. QSO-20-14-NH. Guidance for Infection Control and Prevention of Coronavirus Disease 2019 (COVID-19) in Nursing Homes (REVISED). March 13, 2020: https://www.cms.gov/files/document/qso-20-14-nh-revised.pdf
- Centers for Medicare and Medicaid Services. Interim Final Rule Updating Requirements for Notification of Confirmed and Suspected COVID-19 Cases Among Residents and Staff in Nursing Homes. QSO-20-29. May 2, 2020: https://www.cms.gov/files/document/qso-20-29-nh.pdf
- United States Environmental Protection Agency (EPA). Pesticide Registration List N: Disinfectants for Use Against SARS-CoV-2: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2

Your Built Environment Innovations

Dwyer Home

Negative pressure units
with HEPA filtration

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Your Built Environment Innovations

Mt. Greylock

"HVAC system added to our outside Garage. We needed to add the system for PPE storage. Gloves, masks and gowns cannot get too cold or hot. We had to do this as we do not have enough storage space in our facility and we are required to keep several weeks of PPE on hand."

Kimball Farms – updated reception area

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Discussion

- Where are some areas in which you can make the design more intuitive to improve it?

- What are some of the modifications you have made to your physical environment to keep people safe and prevent the spread of COVID?

Monitoring for Safety

What are Walking, or Environmental Rounds?

- Walking rounds are "seeing" the direct experiences of:
  - **Patients:** Going to the bedside, including the resident's bathroom, with a structured focus, and assessing the resident, and their environment for potential improvement opportunities to prevent harm and foster healing.
  - **Staff:** Going to the staff environment (bedside, work areas, rest areas)…are they effective and efficient?
  - **Visitors:** Does the environment allow for safe connections?

Why Perform Walking Rounds?

- Rounding processes are about **changing habits and communication patterns**

- Rounds are helpful in **organizing the work** in such a way as to decrease chaos, structure conversations, and design an opportunity to "see" patient and staff needs more reliably.

- *Infection prevention, and a culture of safety, cannot be totally improved from sitting at a desk all day.*

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What You Can Gain from Rounding

1. Approachability; staff will start to inform you

2. Improved trust; over time, more information will be shared

3. Greater awareness of what's going on

4. Accountability; the key is to follow-up, be consistency

5. Morale may improve when staff are listened to

6. Productivity; additional creative ideas may develop

7. Meet new residents, develop relationships

A sense of personal gratification may be obtained when resident care, and the environment, is improved and made safer.

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Walking Rounds – Tool & Checklist

Environmental Rounds Worksheet for Infection Control (USF Health)

A Picture Speaks a Thousand Words

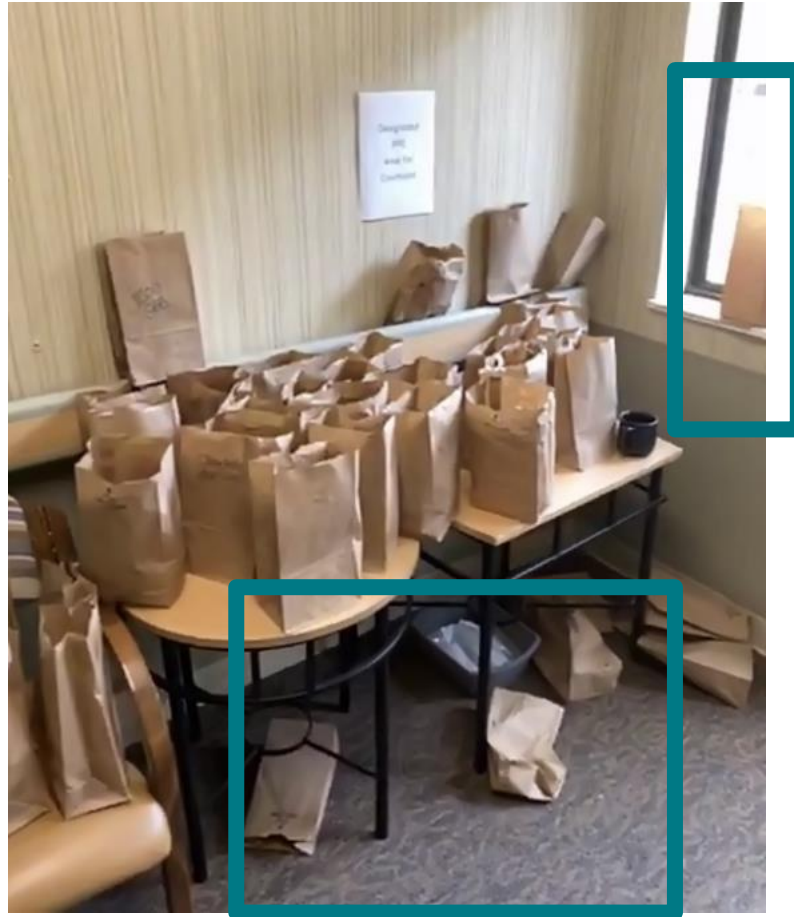Using photos as a "no blame, no shame" QI approach

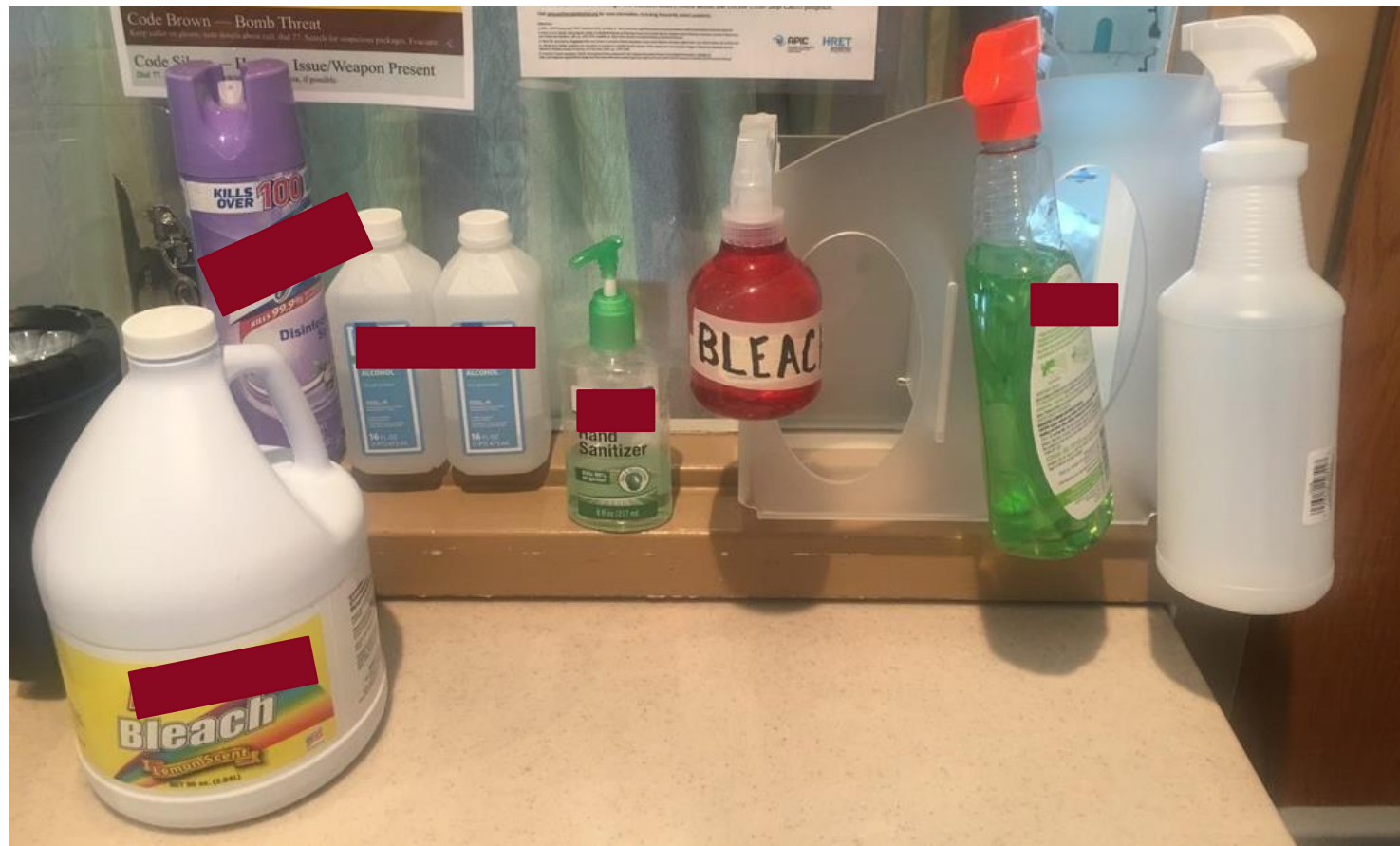# Keeping an 'Eye' on Care Practices and Photography

- Using pictures of the environment

- Must know, and adhere to, your facility's photography policy and procedure.

- Sometimes, you might have to recreate the pictures to preserve resident dignity.

- Clinical pictures may strongly influence thinking and practice changes
  - Catching YES! That…
  - "Seeing" what needs some attention

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Improvement Opportunity

Improvement Opportunity

CDC. Guidelines for environmental infection control in healthcare facilities. https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf.
OSHA. General duty clause. https://www.osha.gov/laws-regs/oshact/section5-duties. Accessed October 25, 2020.
OSHA. The hazard communication standard. https://www.osha.gov/dsg/hazcom/. Accessed October 25, 2020.

Discussion

- How can using photos enhance education?

- Is this something you might try or have tried?

Communicating to Your Colleagues

- Keep the emotion out of the discussion; may want to vent with a friend, first

- In a timely manner, share findings with your leadership team.

- Be tactful, speak softly, with findings

- Share the reason why the correction is needed

- Keep the emotion out of the discussion

- Try to have the staff member make the corrections; reinforces positive, future behaviors

- Pictures**, taken per facility policy**, may be helpful.

Discussion

Based on the previous slide, with no blaming or shaming, how would you guide this conversation?
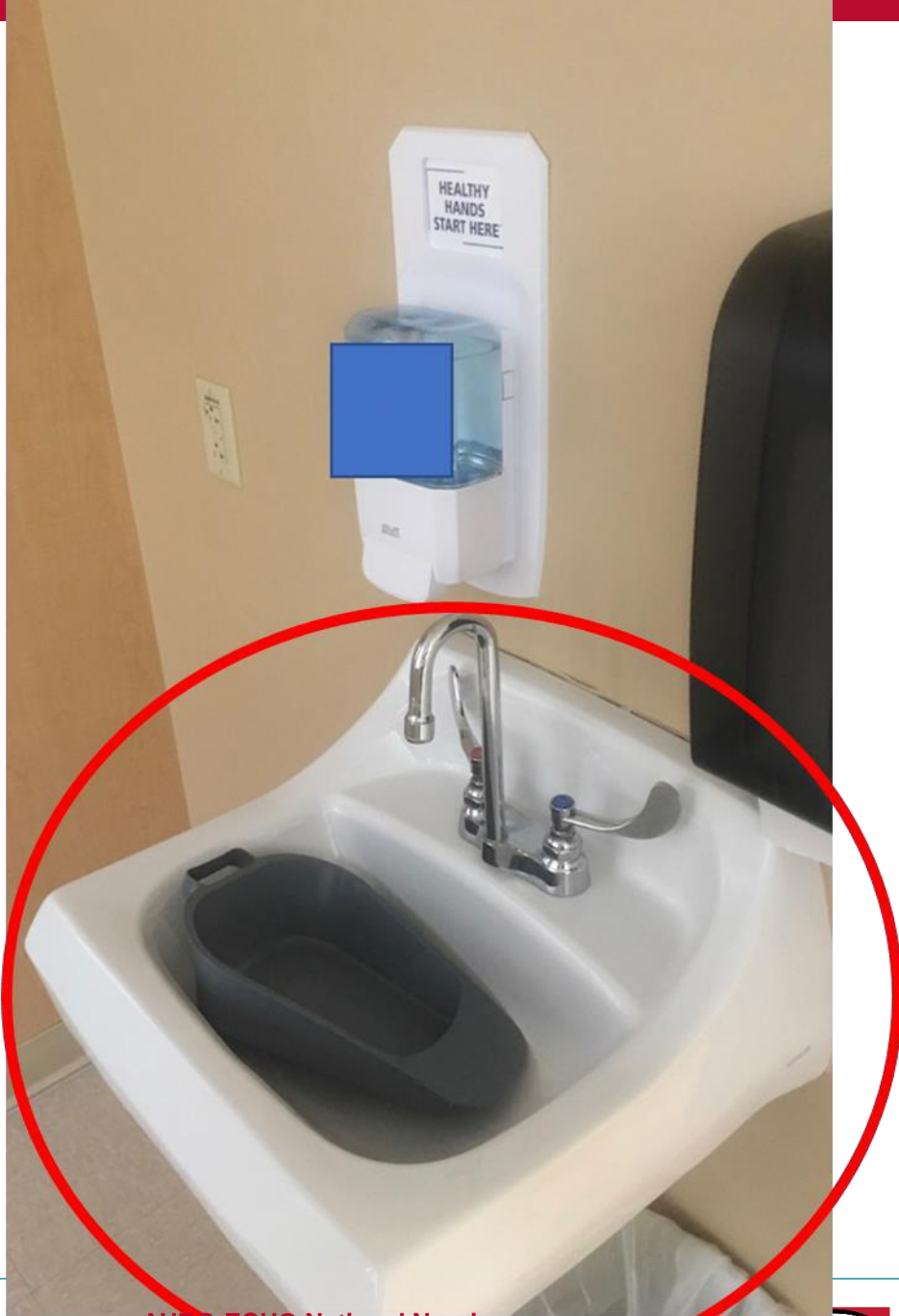
Performance Improvement

Improvement teams

Brian Bjoern, IHI

Report back from last week

- What is ONE small change that you have worked on alone or with your team?

QAPI
Temperature Check

Chat Waterfall

- We will ask you **two questions** about how you organize your QAPI work

- Don't hit send until I count you down!
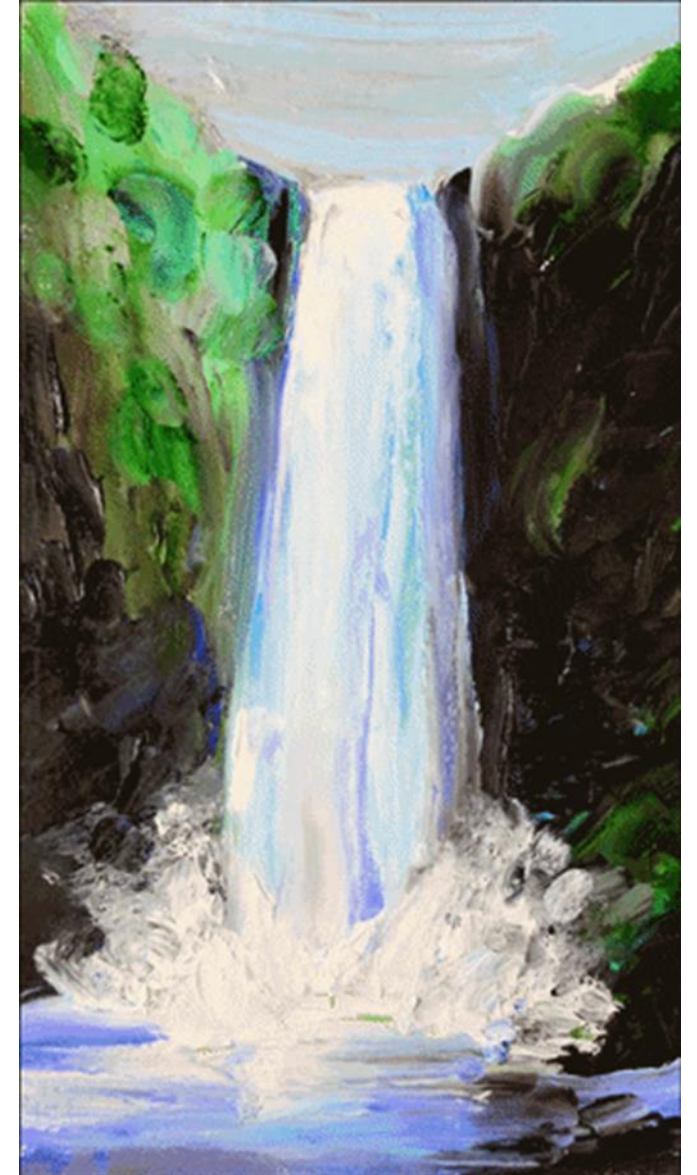
Last Name Between A-K

- Type your response to the question below

- Respond "Everyone"

- **DO NOT HIT SEND UNTIL I TELL YOU TO!**

- Here is the question:
  - How many members on your QAPI Committee? Are all members always able to go to the meeting?

- 3-2-1 BEGIN

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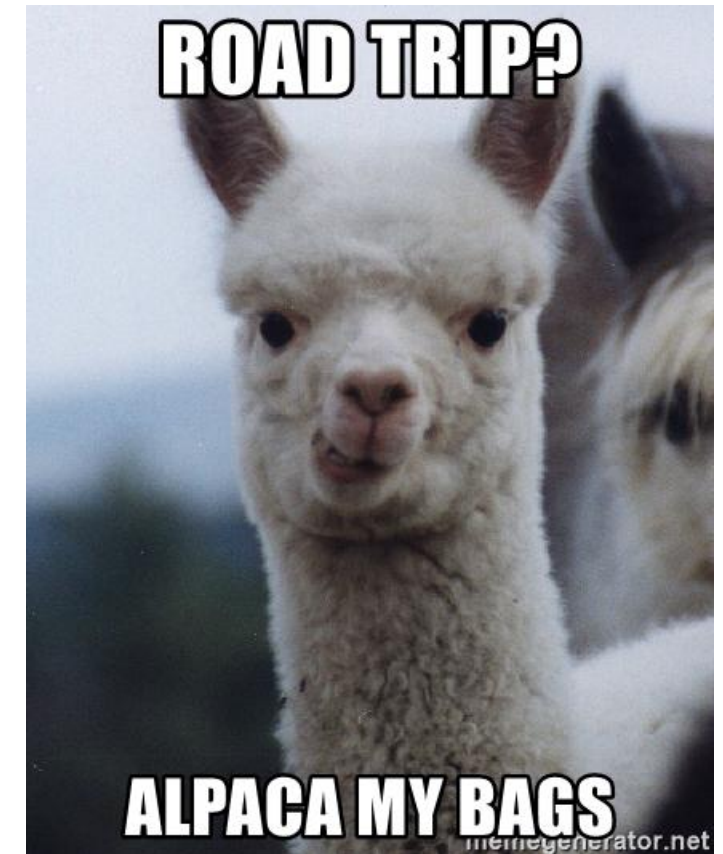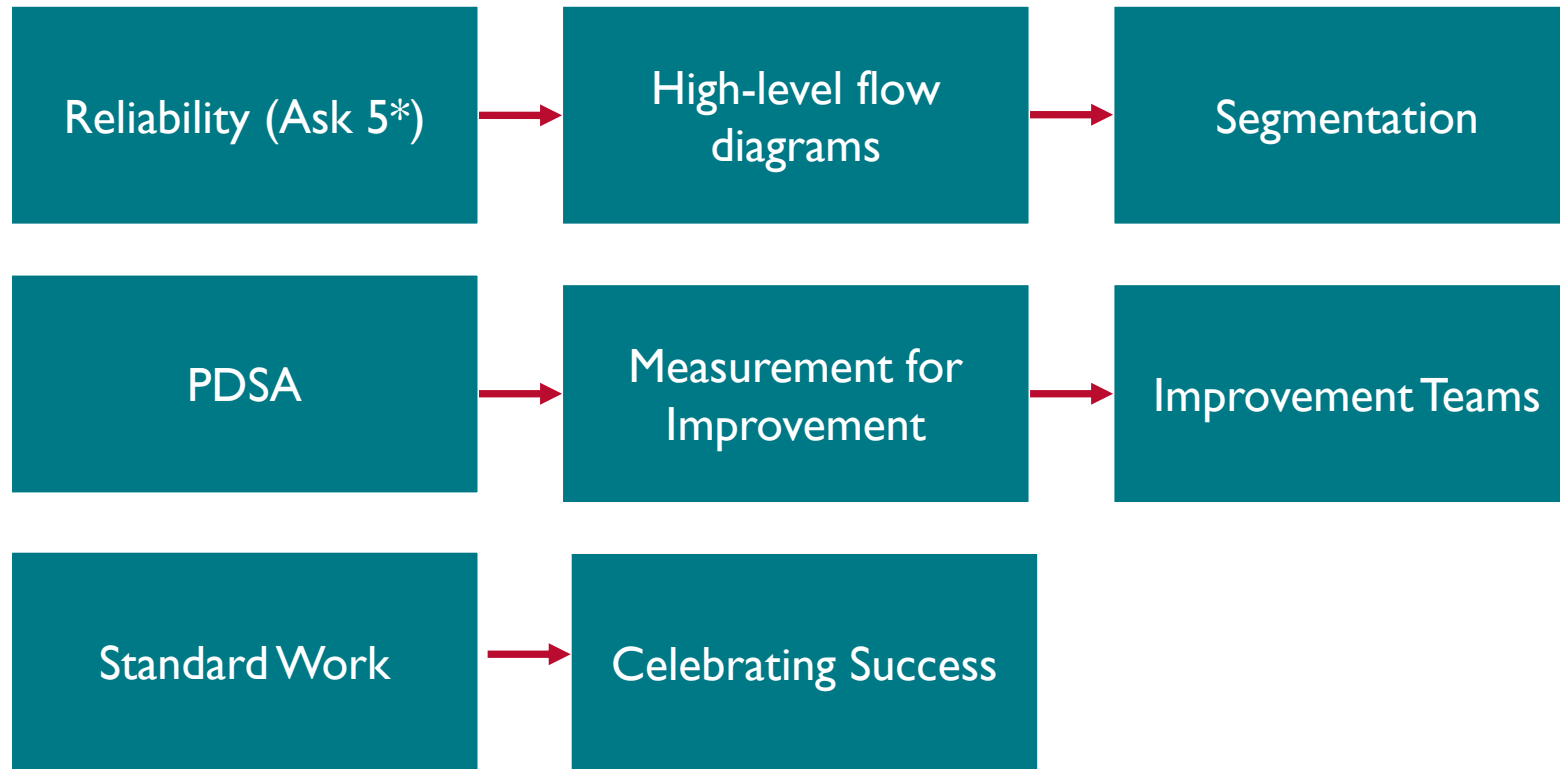
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Last name between L-Z

- Type your response to the question below

- Respond "Everyone"

- **DO NOT HIT SEND UNTIL I TELL YOU TO!**

- Here is the question:
  - What was the biggest barrier to progress with your QAPI work pre-Covid?

- 3-2-1 BEGIN

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The QI Journey

Reliability (Ask 5*) → High-level flow diagrams → Segmentation

PDSA → Measurement for Improvement → Improvement Teams

Standard Work → Celebrating Success

Ask 5: Who, When, Where, How, What
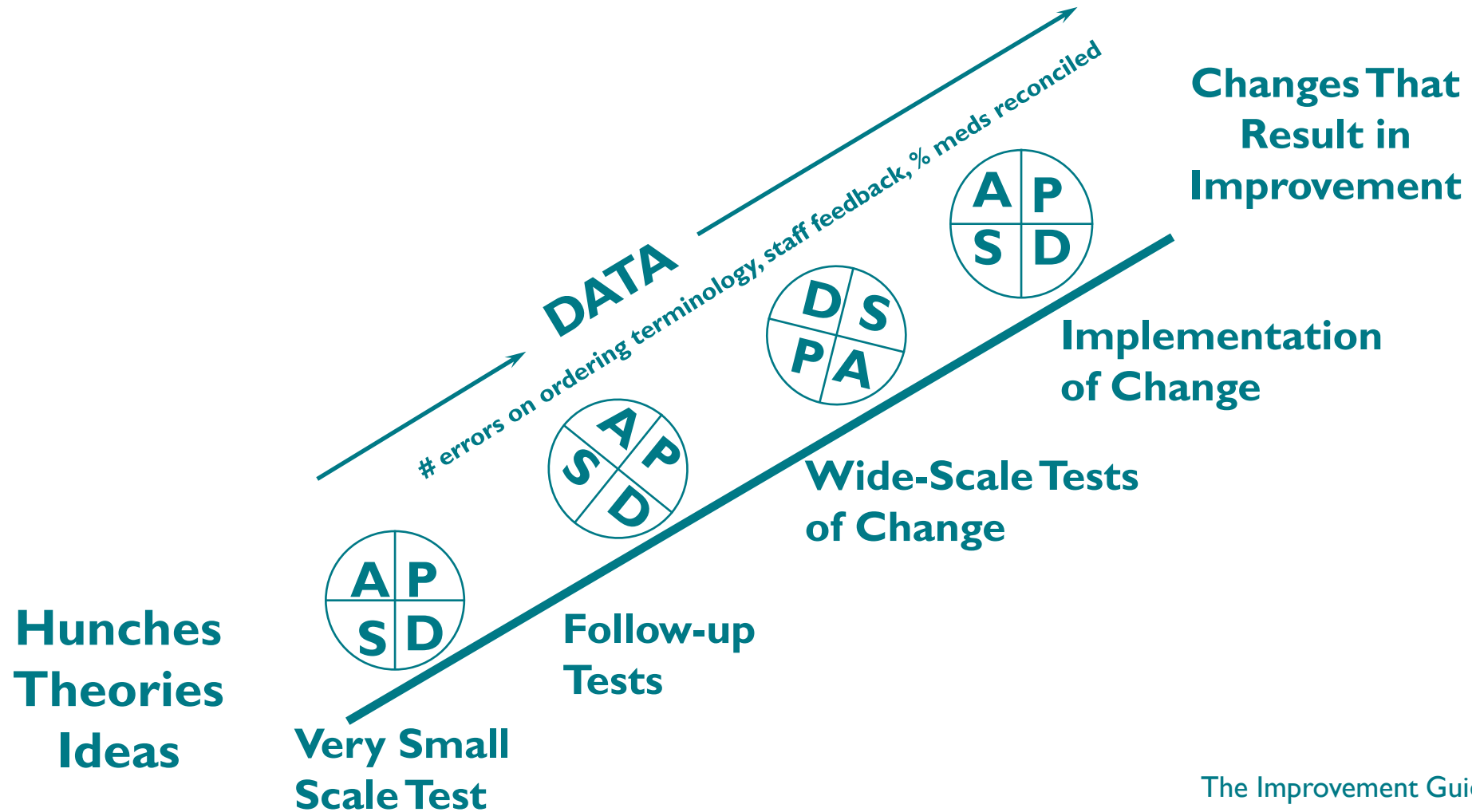
QAPI Committee vs. Improvement Team

- **QAPI Committee**
  - Ownership
  - Regulatory compliance
  - Direction
  - Priorities
  - Defines the problem

- **Improvement Team**
  - Boots on the ground
  - Testing ideas
  - Creative
  - Speed
  - Finds the solution that works

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Repeated Use of the PDSA Cycle

DATA
errors on ordering terminology, staff feedback, % meds reconciled

Changes That Result in Improvement

Implementation of Change

Wide-Scale Tests of Change

Follow-up Tests

Hunches Theories Ideas

Very Small Scale Test

The Improvement Guide Pg 146

Improvement Team

- Specific to the problem at hand

- End users of the process must be included

- Volunteer or voluntell?

- Keep it small or scheduling will get in the way

- Provide basic training

The ideal team size for improvement is … 2

- You need at least one person to question your ideas

- Two people can find time to talk more easily than a larger group

- Formal meetings not necessary for small team

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Leave in action

- Think about how you have celebrated success and what will you do in the future

- Next week: **CELEBRATION**

What to expect next…

Next Session: March 9, 2021

Topics:

- Session 15: What's Next for Nursing Facilities & How to Prepare?

Brenda Chen: bchen@maseniorcare.org

Wrap Up and Poll

- Please watch your screen and respond to our 2 poll questions as they launch

Questions?