



# QUICK TIPS FOR CRITICAL PARTNERSHIPS

## Simple Ways to Encourage Collaboration to Prevent Disease Transmission

By Gail Fraine, RN, MMHC, BSN, CIC

**A**s director of infection prevention at Ascension Health St. Thomas Midtown in Nashville, I describe the relationship between our team of infection preventionists (IPs) and environmental services as minimizing risk and increasing safety when it comes to preventing disease transmission.

### Environmental Services and Infection Prevention

Somewhat rare in the industry, the environmental services team reports to infection prevention and serves on its committee. David Cope, director of Environmental Services at St. Thomas, and the system’s director in the city, Michael Martin, work closely with our infection prevention team. We are very collaborative and discuss issues and changes to processes or products. For instance, ATP testing is performed on all positive *C. difficile* discharge patient rooms and other random samplings. The team is notified of any positive results. Rooms that are positive are re-cleaned, retested, and must pass before releasing the room for the next patient.

**Tip:** ATP testing is a good educational and validation tool to identify how well a room has been cleaned.

### Environment-of-Care Rounds

Together these teams do weekly Environment of Care rounds joined by safety, facilities, nursing, and pharmacy representatives striving for continuous improvement. As with many facilities nationwide, priorities include cleanliness and maintenance of the facility, proper trash removal, safety, and other environmental concerns.

The team made a huge difference in OR turn-around times between cases by appointing one environmental services lead to oversee proper cleaning and turning of the room. Our focus on training, monitoring, and inspecting rooms with a ready resource keeps things on track and improves the overall environment.

**Tip:** Environment of Care rounds are best performed as a team due to the collaborative nature of consensus building, educational opportunities, and immediate attention to issues that are identified.

### Preventing Disease Transmission

An example of helping to decrease transmission of disease to patients is preventing *C. difficile* on the front end with a bundle that includes:

- Hand hygiene
- Antimicrobial stewardship
- Isolation

- Proper decontamination of the environment
- Proper decontamination of the equipment
- Early recognition of patients with potential for *C. difficile*

On the back end, ATP testing immediately lets teams know how they are doing related to environmental cleaning. It educates and breeds competition between members to keep passage rates high (95 percent or greater). St. Thomas Health extends the test to hands, cell phones, thermometers, and other equipment to make sure the importance of the environmental services’ role in getting rooms ready and the severity of results is well understood.

**Tip:** Testing of additional items offers immediate feedback on performance and can be an eye-opener on ways that the environment can become contaminated. It should include transparency of passage rates that can spark a healthy competition between teams getting rooms ready.

### Preventing Sharps Injuries

Minimizing disease transmission at St. Thomas also focuses on what ECRI lists as a “top 10 health technology hazard—sharps injuries (SI).” A proactive exchange of reusable sharps containers allows hospitals to

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minimize disposal SIs. The facility changed to a sharps management service and saw a 10 percent decrease in needle sticks. The burden was eased on the environmental services and health care personnel (HCP) teams to monitor containers because the sharps management service took care of it for us. Only during periods of high volume, environmental services teams may be asked to change a container, but this is infrequent. There have been no issues, and

the exchange of reusable sharps containers frees HCP and environmental services to focus on their main work.

**Tip:** Taking HCP away from the handling of sharps containers has helped reduce sharps injuries and potential for disease transmission.

### C. difficile and Sharps Container Considerations

Recently a survey (found at [www.bd.com/sharps/pdf/AJIC-MP-sharps-poster.pdf](http://www.bd.com/sharps/pdf/AJIC-MP-sharps-poster.pdf)) attempted to associate reusable sharps containers with transmission of *C. difficile*. There are several reasons I believe that there is a very low probability that reusable sharps containers play any role in disease transmission. If a container is full, environmental services will change it, but not HCP who has patient contact. Following care of our *C. difficile*-positive patients, HCP use a hand-washing technique with soap and water for 15 seconds before leaving the room and seeing the next patient. This step lessens the chance for cross-contamination to the environment and to themselves or others. This facility has not had any correlation in *C. difficile* infections related to reusable sharps containers, which have been used for more than five years.

**Tip:** Follow stringent IP practices and policies like hand hygiene, isolation, equipment disinfection, and sharps practices that are intended to keep HCP and patients safe.

Creating a collaborative atmosphere between environmental services and infection prevention teams, including the shaping of Environment-of-Care Rounds to include multiple departments and having a best-practice bundle, highlights the various ways to prevent disease transmission. Using reusable sharps containers not only prevents sharps injuries, as a service managed by a third party partner, but they may help minimize disease transmission. ●



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