

INFECTION CONTROL  
1<sup>ST</sup> QUARTER 2011

I. DESIGN-TOPIC/MEASURE INDICATORS/DATA:

A. Volume indicators:

1. Nosocomial infections:

None

2. Community acquired infections:

Jan 26 with an attack rate of 65%

Feb 21 with an attack rate of 48%

March 07 with an attack rate of 35%

A. Antibiotics

1. Jan of 28 patients given antibiotics 27 were for therapeutic reasons.

2. Feb 30 patients given antibiotics 23 were for therapeutic reasons

3. March of 09 people given antibiotics all were for therapeutic reason.

3. Breakdown of nosocomial infections:

None identified

4. Appearance of clinical infection at new site:

None identified.

5. New organism at same or different site:

None identified.

6. Surveillance of XYZ Home Health Infections:

Please see attached report.

7. Surgery:

See attached reports from Physicians no post-op infections

B. Quality Indicators:

1. Number of potential problems referred:  
No cases referred
2. Follow up on exposure to communicable diseases;  
None
3. Compliance with annual health regulations:  
There has been 100% compliance with annual TB screening. They are completed each August.
4. Compliance with isolation policies and procedures:  
There have been no problems with isolation.
5. Hand washing techniques:  
All new employees are required to complete an in-service on hand washing during orientation. All employees must perform above orientation yearly and employees and Doctors are spot-checked. Alcohol based hand products are available for employees as well as the public throughout the facility and in the clinics. Masks and tissues are available in the front lobby and upon request throughout the hospital.

6. General sanitation:

There have been no problems reported.

Hood cleaning:	<u>Jan</u>	<u>100 %</u>
	<u>Feb</u>	<u>100%</u>
	<u>March</u>	<u>100%</u>

6. Handling of waste and Linen:  
The linens continue to be observed and reported by the head of housekeeping.  
Possibility we may be changing linen companies. Have not been informed of any changes yet.

7. Identification of employees with possible infectious processes:

Employees with flu like symptoms are being sent home and we are following all CDC guidelines.

10. Orientation of new employees to infection control:  
All new employees have a general overview of the infection control program at the Copper Queen Hospital with an in-service on hand washing policies and procedures.

11. Department in-service in Infection Control:  
OSHA required education program by Smith Kline and Beecham is given monthly for Blood Borne Pathogens.

12. Refrigerators:

Acute medication refrigerator

Jan	100 %
Feb	100%
March	100%

Food refrigerator

Jan	100%
Feb	100%
March	100%

E.R. refrigerator

Jan	90%
Feb	89%
Dec	90%

13. Other:

CONCLUSIONS:

There were no nosocomial infections reported this quarter. There is no possibility of cross contamination. In-services in Blood Borne Pathogens and Infection Control, including hand washing will be provided during hospital orientation and annually to maintain competency for all personnel. The linens will continue to be monitored.

II. RECOMMENDATIONS:

1. Continue to monitor all present indicators.

III. ACTIONS TO IMPROVE CARE:

1. Staff was reminded of importance of checking refrigerators, will continue to follow. This has improved over the last quarter.
2. Hand washing and alcohol based hand sanitizer is available.
3. Masks and tissues available to public.

EVALUATION OF EFFECTIVENESS OF THIS ACTION:

Effectiveness will be provided