

Introduction to an Infection Control Breach

Samantha Mullins MSN, APRN, FNP-C and Melissa Scott, Epidemiologist

June 13, 2024

Immunization Summit - Day 1



Objectives

By the end of this session participants will be able to:

- Identify steps for investigating infection control breaches.
- Report an infection control breach to the appropriate agency.
- Articulate the difference between Category A and Category B infection control breaches.

Introduction and Background

- Healthcare Associated Infections (HAIs):
 - are infections that occur while patients are receiving care.
 - are a threat to patient safety and can cause illness and death.
 - cost the United States healthcare system billions each year.
- At any given time, about 1 in 31 inpatients have an infection related to hospital care.
- Over the past several years, healthcare delivery has shifted from acute inpatient settings to a variety of outpatient settings.
- Outbreaks and patient notifications related to infection control breaches have been reported in primary care clinics, pediatric offices, pain management clinics, oncology clinics, and even health fairs.
- The infection control breaches associated include:
 - Reuse of syringes to access medication vials.
 - Failure to reprocess reusable equipment.
 - Reuse of single dose vials for more than one patient.
 - Syringe reuse from one patient to another.
 - Same fingerstick device used on more than one patient.

Oh No! An Infection Control Breach

Identification of a breach

- Identify the nature of the breach, type of procedure, biological substance involved.
- Review the techniques and methods for reprocessing.
- Stop practice and institute corrective actions as quickly as possible.

Start data gathering

- Determine timeframes, number of patients.
- Identify exposed patients.
- Review literature and pull in experts if necessary.

Notify and involve key stakeholders

- Determine timeframes, number of patients.
- Identify exposed patients.
- Review literature and pull in experts if necessary.

Assessment of breach

- Assign classification of breach (Category A or B).

Oh No! An Infection Control Breach (cont'd)

Decision for Patient Notification and Testing

- Patient notification and testing warranted.
- Potential transmission.
- Public concern.
- Duty to warn vs. harm of notification.

Communication and logistics

- Develop communication materials.
- Consider post exposure prophylaxis.
- Determine who is conducting testing.
- Determine follow up testing.
- Facilitate public inquiry and communication.
- Address media and legal issues.

Typical Day in the Office

It is Wednesday afternoon in the HAI's program office when a call comes in from an infusion therapy center manager. The manager is very concerned and states, "I think I have a problem...a big problem!" The manager reports an outpatient infusion therapy nurse was observed taking a large saline flush into the room where patients were receiving various infusions. She was seen moving from patient to patient flushing various lines with the same syringe.

What is Needed?

To begin the investigation, what additional information is needed?

- How long has this practice been going on?
- Does anyone else in the practice do this?
- What type of training is offered to employees?

Case Scenario (cont'd)

Here's a little more information...

When questioned about this practice, the nurse believed there was no issue as she did not draw anything from the patient into the syringe and the blunt plastic cannula was changed between patients. She further indicated she would also change the needleless port to draw the saline from a large bag of saline kept in the medication room. The nurse had worked in this infusion center for approximately four months.

Category A Breach

- Breaches that have an established precedent for the transmission of bloodborne pathogens and involve a gross error or demonstrated high risk procedure.
- Examples of Category A breaches include:
 - Reuse of needles or syringes between patients.
 - Reuse of contaminated syringes to access multi-dose medication vials or intravenous fluid bags.

Category B Breach

- Breaches that involve infection control where the likelihood of blood exposure resulting from the breach is uncertain but thought to be less than would occur with Category A breach.
- Examples of Category B breaches include:
 - Scope reprocessing performed with incorrect disinfectant solutions or those performed with a shorter duration than is recommended by the manufacturer.
 - Probes and needles that were sterilized but the retained tissue was not physically removed from biopsy probe channel.

What is the classification of this infection control breach?

If you chose Category A

You Are Right

Case Scenario-Next Steps

The HAI and outbreak team meet to discuss next steps. To get a better understanding of the processes in the facility and to conduct observations of the practices, the next step will be to conduct an on-site infection control assessment. Let's go!

Questions

A panel question and answer session will be held at the end of the day.

Sources

The Centers for Disease Control and Prevention. *Outbreaks and Patient Notifications in Outpatient Settings, Selected Examples, 2010-2014*. Retrieved February 7, 2024. www.cdc.gov/hai/settings/outpatient/outbreaks-patient-notifications.html

The Centers for Disease Control and Prevention. *Steps for Evaluating an Infection Control Breach*. Retrieved February 2, 2024. www.cdc.gov/hai/outbreaks/index.html

Contact Information



Samantha Mullins, MSN, APRN, FNP-C

HAI AR Director

West Virginia Department of Health

Bureau for Public Health

Office of Epidemiology and Prevention Services

Division of Infectious Disease Epidemiology

500 Summers Street

Charleston, WV 25301

Phone: (304) 558-5358

Email: samantha.l.mullins2@wv.gov

Melissa Scott RN, Epidemiologist

West Virginia Department of Health

Bureau for Public Health

Office of Epidemiology and Prevention

Division of Infectious Disease Epidemiology

Outbreak/Emerging Infectious Disease Program

500 Summers Street

Charleston, WV 25301

Phone: (304) 558-5358

Email: melissa.a.scott@wv.gov