

Long-Term Care Survey Alert

Infection Control: Stave Off Infections And Related Adverse Outcomes With These 3 Tips

These strategies will protect your residents, caregivers - and staffing ratios.

'Tis the season where respiratory infections and flu can drive residents into the hospital and wreck the best laid staffing plans - but you can stop infection before it stops you.

Facilities can take three simple steps that will go a long way toward keeping everyone well - and their CMS 2567 free of F tags for infection control, staffing shortfalls and related negative outcomes (such as pressure ulcers, falls or dehydration).

1. Continue to vaccinate new admissions to the facility throughout the flu season. Facilities should begin immunizing residents for both influenza and pneumonia in October - and complete vaccinations by November, says the **Centers for Disease Control & Prevention**.

But infection-conscious facilities continue to immunize new admissions throughout the flu season. **Baptist Home** in Brooklyn, NY, for example, offers the flu shot to new residents through the end of January if they haven't received it already. "The facility may continue to immunize new residents even later in the flu season if the facility has an outbreak," reports **Linda Carson, LPN**, the facility's infection control nurse.

2. Implement a campaign to offer staff free flu vaccination. In addition to your annual campaign to immunize residents against flu, offer and encourage staff to take advantage of free flu vaccinations.

Staff who get immunized will protect residents from catching the flu, and they will stay well and on the job during an influenza outbreak.

"Evidence shows that when staff aren't immunized against the flu, elderly nursing home residents will still develop flu outbreaks - even when the residents have a high rate of influenza immunization," cautions **Raymond Strikas, MD**, the CDC's associate director for adult immunization services.

Yet CDC figures show that only 38 percent of direct care providers, as of 2002, had received flu immunization the previous year, Strikas notes.

Tip: "Health care settings that use organized strategies to offer and recommend flu immunizations to their care providers tend to have higher rates of immunization," Strikas adds. "Let staff know it's the right thing to do [for residents] and counter any myths they may have about the immunization," he advises.

For example, some health providers still believe the flu shot causes serious side effects, that it doesn't really work, or that it gives them the flu. "Not true," Strikas says.

In spite of the unexpected flu vaccine shortage due to suspension of a major British vaccine maker's license, the CDC is advising health care workers who provide direct patient care to be vaccinated, says agency spokesperson **Llewyn Grant**.

In an Oct. 5 directive, the CDC says healthy nonpregnant people ages five to 49, including health care workers, should be encouraged to take the intranasally administered live attenuated flu vaccine (unless they provide care to severely immunocompromised patients in "special care units"). People who take care of children under six months of age should

not receive the nasal flu vaccine, says the CDC.

To read the CDC's interim influenza vaccination recommendations for the 2004-2005 flu season, go to www.cdc.gov/flu/protect/whoshouldget.htm. Additional information on the flu is available at www.cdc.gov/flu/index.htm.

3. Teach staff to identify cases of potential respiratory infection early and to think through the goal of isolation techniques as they provide daily care. For example, a corporate nurse manager saw a "respiratory isolation" sign on the door of a resident whom nurses were preparing to take out for a chest X-ray.

"The nurses put on surgical masks and brought the patient out into the hall ... but the patient should have been wearing a mask," said the manager during a June 2004 **National Association of Directors of Nursing Administration in Long Term Care** workshop on staff recruitment, retention and training.

See the CDC-recommended infection control procedures for caring for a patient with the flu, Article 9.