



INFECTION PREVENTION PRACTICE CHANGE ASSESSMENT

The assessment utilizes questions from the Center for Disease Control and Prevention’s (CDC) Infection Control Assessment and Response (ICAR) tool to assess current HAI prevention practices, policies and procedures in your hospital. The goal of this assessment is to provide hospitals with a comprehensive review of broad infection prevention practices and to measure effectiveness of interventions and education provided by the National Project Team. Note that if your hospital has completed the ICAR with your State Health Department within 12 months of the onset of participation in this initiative, then those results will be used for baseline. A similar assessment will be administered at the end of the program to monitor any changes in practice, policies and procedures after program participation.

This form should be completed by the facility project team leader in collaboration with individuals with strong knowledge of current clinical and safety practices in the hospital such as the infection preventionist, quality leader, clinical educator or clinical nurse specialist.

After you complete this assessment, you can download your responses to a minimally formatted Microsoft Word document. You can also return to this assessment at a later date to download your responses.

To get started, please tell us which infection(s) do you plan to focus on addressing as part of this initiative? (Mark all that apply)

Catheter-associated urinary tract infection (CAUTI)	
Central line-associated bloodstream infection (CLABSI)	
C. difficile infection (CDI)	
Methicillin-resistant Staph aureus (MRSA) bacteremia	

	Yes	No
Will you be answering these questions based on information gathered from a previously completed ICAR?	<input type="radio"/>	<input type="radio"/>

If yes, please provide the date the ICAR was completed.

Competency-based training

Please answer the following questions related to Hand Hygiene:

	Yes	No
Is training provided to all healthcare personnel, including all ancillary personnel not directly involved in patient care but potentially exposed to infectious agents (e.g., food tray handlers, housekeeping, volunteer personnel)?	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to provision of care at this hospital?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with hand hygiene following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of hand hygiene competency for all personnel?	<input type="radio"/>	<input type="radio"/>

Comments:

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Please answer the following questions related to Personal Protective Equipment (PPE):

	Yes	No
Is training provided to all personnel who use PPE?	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to provision of care at this hospital?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Does the training include appropriate indications for specific PPE components?	<input type="radio"/>	<input type="radio"/>
Does the training include proper donning, doffing, adjustment, and wear of PPE?	<input type="radio"/>	<input type="radio"/>
Does the training include proper care, maintenance, useful life, and disposal of PPE?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with selection and use of PPE (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of PPE competency for all personnel who use PPE?	<input type="radio"/>	<input type="radio"/>

Comments:

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Please answer the following questions related to Environmental Cleaning:

	Yes	No
Is training provided to all personnel who clean and disinfect patient care areas? Personnel may include, but are not limited to, environmental services staff, nurses, nursing assistants, and technicians.	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to being allowed to perform environmental cleaning?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with environmental cleaning (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of competency with environmental cleaning procedures for all personnel who clean and disinfect patient care areas?	<input type="radio"/>	<input type="radio"/>
If the hospital contracts environmental services, does the contractor have a comparable training program?	<input type="radio"/>	<input type="radio"/>

Comments:

Please answer the following questions related to urinary catheter insertion:

	Yes	No
Is training provided to all personnel who are given responsibility for insertion of urinary catheters? Personnel may include, but are not limited to, nurses, nursing assistants, medical assistants, technicians, and physicians.	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to being allowed to perform urinary catheter insertion?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with insertion (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of competency with urinary catheter insertion for all personnel who insert urinary catheters?	<input type="radio"/>	<input type="radio"/>

Comments:

Please answer the following questions related to urinary catheter maintenance:

	Yes	No
Is training provided to all personnel who are given responsibility for urinary catheter maintenance (e.g., perineal care, emptying the drainage bag aseptically, maintaining the closed drainage system, maintaining unobstructed urine flow)? Personnel may include, but are not limited to, nurses, nursing assistants, medical assistants, technicians, and transport personnel.	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to being allowed to perform urinary catheter maintenance?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with catheter maintenance (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of competency with urinary catheter maintenance for all personnel who maintain urinary catheters?	<input type="radio"/>	<input type="radio"/>

Comments:

Please answer the following questions related to central line insertion:

	Yes	No
Is training provided to all personnel who are given responsibility for insertion of central venous catheters? Personnel may include, but are not limited to, physicians, physician assistants, and members of line insertion teams.	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to being allowed to perform central venous catheter insertion?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with insertion (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of competency with central venous catheter insertion for all personnel who insert central venous catheters?	<input type="radio"/>	<input type="radio"/>

Comments:

Please answer the following questions related to central line maintenance:

	Yes	No
Is training provided to all personnel who maintain central venous catheters (e.g., scrub the hub, accessing the catheter, dressing changes)? Personnel may include, but are not limited to, nurses, nursing assistants, physicians, and physician assistants.	<input type="radio"/>	<input type="radio"/>
Is training provided upon hire, prior to being allowed to perform central venous catheter maintenance?	<input type="radio"/>	<input type="radio"/>
Is training provided at least annually?	<input type="radio"/>	<input type="radio"/>
Is training provided when new equipment or protocols are introduced?	<input type="radio"/>	<input type="radio"/>
Are personnel required to demonstrate competency with maintenance (i.e., correct technique is observed by trainer) following each training?	<input type="radio"/>	<input type="radio"/>
Does your hospital maintain current documentation of competency with central venous catheter maintenance for all personnel who maintain central venous catheters?	<input type="radio"/>	<input type="radio"/>

Comments:

Regular Audits (monitor and document)

Does your hospital have a defined process to conduct audits for the following items:

	Yes	No
Adherence to Hand hygiene	<input type="radio"/>	<input type="radio"/>
Adherence to proper PPE selection and use, including donning and doffing	<input type="radio"/>	<input type="radio"/>
Adherence to cleaning and disinfection procedures, including use of products in accordance with manufacturer's instructions (e.g., dilution, storage, shelf-life, contact time)	<input type="radio"/>	<input type="radio"/>
Adherence to recommended infection practices for CDI prevention	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of central venous catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of central venous catheters	<input type="radio"/>	<input type="radio"/>

Comments:

Does your hospital have a defined frequency that audits are conducted for the following?

	Yes	No
Adherence to Hand hygiene	<input type="radio"/>	<input type="radio"/>
Adherence to proper PPE selection and use, including donning and doffing	<input type="radio"/>	<input type="radio"/>
Adherence to cleaning and disinfection procedures, including use of products in accordance with manufacturer's instructions (e.g., dilution, storage, shelf-life, contact time)	<input type="radio"/>	<input type="radio"/>
Adherence to recommended infection practices for CDI prevention	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of central venous catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of central venous catheters	<input type="radio"/>	<input type="radio"/>

Comments:

Does your hospital have a defined process for improvement when non-adherence is observed for the following?

	Yes	No
Adherence to Hand hygiene	<input type="radio"/>	<input type="radio"/>
Adherence to proper PPE selection and use, including donning and doffing	<input type="radio"/>	<input type="radio"/>
Adherence to cleaning and disinfection procedures, including use of products in accordance with manufacturer's instructions (e.g., dilution, storage, shelf-life, contact time)	<input type="radio"/>	<input type="radio"/>
Adherence to recommended infection practices for CDI prevention	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of urinary catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for insertion of central venous catheters	<input type="radio"/>	<input type="radio"/>
Adherence to recommended practices for maintenance of central venous catheters	<input type="radio"/>	<input type="radio"/>

Comments:

Feedback from Audits / Data

Does your hospital have a defined process for how feedback is provided for the following?

	Yes	No
Audits to personnel regarding their hand hygiene performance	<input type="radio"/>	<input type="radio"/>
Performance with selection and use of PPE	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their adherence to cleaning and disinfection procedures	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their adherence to recommended infection control practices for CDI prevention	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for insertion of urinary catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for maintenance of urinary catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for insertion of central venous catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for maintenance of central venous catheters	<input type="radio"/>	<input type="radio"/>
CDI data to frontline personnel	<input type="radio"/>	<input type="radio"/>
CAUTI data to frontline personnel	<input type="radio"/>	<input type="radio"/>
CLABSI data to frontline personnel	<input type="radio"/>	<input type="radio"/>

Comments:

Does your hospital have a defined frequency that feedback is provided for the following?

	Yes	No
Audits to personnel regarding their hand hygiene performance	<input type="radio"/>	<input type="radio"/>
Performance with selection and use of PPE	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their adherence to cleaning and disinfection procedures	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their adherence to recommended infection control practices for CDI prevention	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for insertion of urinary catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for maintenance of urinary catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for insertion of central venous catheters	<input type="radio"/>	<input type="radio"/>
Audits to personnel regarding their performance for maintenance of central venous catheters	<input type="radio"/>	<input type="radio"/>
CDI data to frontline personnel	<input type="radio"/>	<input type="radio"/>
CAUTI data to frontline personnel	<input type="radio"/>	<input type="radio"/>
CLABSI data to frontline personnel	<input type="radio"/>	<input type="radio"/>

Comments:

Infection Prevention Policies/Practices/Procedures

Please answer the following questions:

	Yes	No
Are supplies necessary for adherence to hand hygiene (e.g., soap, water, paper towels, alcohol-based hand rub) readily accessible in patient care areas? Comments:	<input type="radio"/>	<input type="radio"/>
Do hand hygiene policies promote preferential use of alcohol-based hand rub over soap and water in all clinical situations except when hands are visibly soiled (e.g., blood, body fluids) or after caring for a patient with known or suspected C. difficile or norovirus during an outbreak or if endemic rates are high? Comments:	<input type="radio"/>	<input type="radio"/>
Are supplies necessary for adherence to personal protective equipment recommendations specified under Standard and Transmission-based Precautions (e.g., gloves, gowns, mouth, eye, nose, and face protection) available and located near point of use? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have policies that clearly define responsibilities for cleaning and disinfection of non-critical equipment, mobile devices, and other electronics (e.g., ICU monitors, ventilator surfaces, bar code scanners, point-of-care devices, mobile work stations, code carts, airway boxes)? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have protocols to ensure that healthcare personnel can readily identify equipment that has been properly cleaned and disinfected and is ready for patient use (e.g., tagging system, placement in dedicated clean area)? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have a physician and/or nurse champions for CDI prevention activities? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have a physician and/or nurse champions for CAUTI prevention activities? Comments:	<input type="radio"/>	<input type="radio"/>
Is there a process or method used to trigger the daily assessments of patients with urinary catheters (e.g., patient safety checklist, daily rounds, and nurse directed protocol, reminders or stop orders)? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital routinely audit adherence to daily assessment of urinary catheter need? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have a physician and/or nurse champions for CLABSI prevention activities? Comments:	<input type="radio"/>	<input type="radio"/>

<p>Is there a defined process or methods used to trigger the daily assessments for central venous catheters (e.g., patient safety checklist, daily rounds, reminders)?</p> <p>Comments:</p>	O	O
<p>Does your hospital routinely audit adherence to daily assessment of central venous catheter need?</p> <p>Comments:</p>	O	O

Systems to Detect, Prevent, and Respond to Healthcare-Associated Infections and Multidrug-Resistant Organisms (MDROs)

Please answer the following questions:

	Yes	No
Are travel and occupational history included as part of admission and triage protocols? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have system to identify (flag) patients with targeted MDROs (e.g. MRSA) upon readmission so appropriate precautions can be applied? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospitals have a respiratory/hygiene cough etiquette program that includes: Posting signs at entrances Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospitals have a respiratory/hygiene cough etiquette program that includes: Providing tissues and no-touch receptacles for disposal of tissues Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospitals have a respiratory/hygiene cough etiquette program that includes: Providing hand hygiene supplies in or near waiting areas Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospitals have a respiratory/hygiene cough etiquette program that includes: Offering facemasks to coughing patients and other symptomatic individuals upon entry to the facility Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospitals have a respiratory/hygiene cough etiquette program that includes: Providing space in patient waiting areas (e.g., ED waiting room) and encouraging individuals with symptoms of respiratory infections to sit as far away from others as possible Comments:	<input type="radio"/>	<input type="radio"/>
During hospital stay, is there is a mechanism for prompt notification of the IP by the clinical microbiology laboratory when novel resistance patterns and/or targeted antimicrobial-resistant pathogens are detected? Comments:	<input type="radio"/>	<input type="radio"/>
Prior to transferring a patient to another facility, is there a defined process or method employed to ensure infectious status and isolation needs are communicated with receiving facilities? Comments:	<input type="radio"/>	<input type="radio"/>
Prior to transferring a patient to another facility, does your hospital have a system to notify receiving facilities of microbiological tests (e.g., cultures) that are pending at the time of transfer? Comments:	<input type="radio"/>	<input type="radio"/>

<p>Prior to accepting a patient from a different facility, is there a defined process or method employed to ensure infectious status and isolation needs are obtained from transferring facilities? Comments:</p>	O	O
<p>Prior to accepting a patient from a different facility, does your hospital have a system to follow-up on microbiological results (e.g., cultures) that are pending at the time of transfer? Comments:</p>	O	O
<p>Prior to accepting a patient from a different facility, is there a process in place to notify another facility if the hospital identifies an infection that may be related to care provided at that other facility (e.g., hospital, nursing home, clinic)? Comments:</p>	O	O
<p>Prior to transferring a patient within the hospital, to a different unit or care setting (e.g; radiology, physician therapy, emergency department) is there a defined process or method employed to ensure infectious status and isolation needs are communicated with receiving units? Comments:</p>	O	O

Surveillance (Monitoring and reporting)

Please answer the following questions:

	Yes	No
Does your hospital review National Healthcare Safety Network (NHSN) data for CDI?	<input type="radio"/>	<input type="radio"/>
Does your hospital review National Healthcare Safety Network (NHSN) data for CAUTI?	<input type="radio"/>	<input type="radio"/>
Does your hospital review National Healthcare Safety Network (NHSN) data for CLABSI? Comments:	<input type="radio"/>	<input type="radio"/>
Does your hospital have a defined process or method to use CDI data to direct prevention activities?	<input type="radio"/>	<input type="radio"/>
Does your hospital have a defined process or method to use CAUTI data to direct prevention activities?	<input type="radio"/>	<input type="radio"/>
Does your hospital have a defined process or method to use CLABSI data to direct prevention activities? Comments:	<input type="radio"/>	<input type="radio"/>

Please answer the following questions:

	Yes	No
Does your hospital have a surveillance program to monitor incidence of epidemiologically-important organisms (e.g., MRSA) and targeted healthcare-associated infections?	<input type="radio"/>	<input type="radio"/>
IF YES, is there a defined process in place to determine which organisms and HAIs the hospital will track?	<input type="radio"/>	<input type="radio"/>

Please answer the following questions:

	Yes	No
Does your hospital use surveillance data to implement corrective actions rapidly when transmission of epidemiologically-important organisms (e.g., MRSA) or increased rates or persistently elevated rates of healthcare-associated infections are detected?	<input type="radio"/>	<input type="radio"/>
IF YES, does the data collection method allow for timely response to identified problems? Comments:	<input type="radio"/>	<input type="radio"/>

Antibiotic Stewardship

Note: The antibiotic stewardship program should be assessed in consultation with personnel knowledgeable about antibiotic stewardship activities (e.g., physician or pharmacist stewardship lead). Responses can be obtained from or cross-checked with the NHSN Annual Hospital Survey Antibiotic Stewardship Practice questions (Q 23 – 34) if available.

Has your hospital's antibiotic stewardship program changed since you completed the most recent NHSN Annual Hospital Survey?

Yes (please answer questions below)	
No (skip to c. difficile question)	

If your antibiotic stewardship program HAS changed since you completed the most recent NHSN Annual Hospital Survey, please answer the questions below:

	Yes	No
Does your hospital have a written statement of support from leadership that supports efforts to improve antibiotic use (antibiotic stewardship)?	<input type="radio"/>	<input type="radio"/>
Does your hospital provide salary support for dedicated time for antibiotic stewardship activities?	<input type="radio"/>	<input type="radio"/>
Is there is a leader responsible for outcomes of stewardship activities at the hospital?	<input type="radio"/>	<input type="radio"/>
Is there is at least one pharmacist responsible for improving antibiotic use at the hospital?	<input type="radio"/>	<input type="radio"/>
Does your hospital have a policy that requires prescribers to document an indication for all antibiotics in the medical record or during order entry?	<input type="radio"/>	<input type="radio"/>
Does your hospital have hospital-specific treatment recommendations, based on national guidelines and local susceptibility, to assist with antibiotic selection for common clinical conditions?	<input type="radio"/>	<input type="radio"/>
Is there is a formal procedure for all clinicians to review the appropriateness of all antibiotics at or after 48 hours from the initial orders (e.g., antibiotic time out)?	<input type="radio"/>	<input type="radio"/>
Does your hospital have specified antibiotic agents that need to be approved by a physician or pharmacist prior to dispensing at the hospital?	<input type="radio"/>	<input type="radio"/>
Is there a physician or pharmacist that reviews courses of therapy for specified antibiotic agents and communicates results with prescribers?	<input type="radio"/>	<input type="radio"/>
Does your hospital monitor antibiotic use (consumption)?	<input type="radio"/>	<input type="radio"/>
Do prescribers receive feedback from the stewardship program about how they can improve their antibiotic prescribing?	<input type="radio"/>	<input type="radio"/>
Does the stewardship program provide education to clinicians and other relevant staff on improving antibiotic use?	<input type="radio"/>	<input type="radio"/>

Comments:

Please answer the questions below related to CDI:

	Yes	No
Does your hospital have strategies to reduce unnecessary use of antibiotics that are high-risk for CDI (e.g., fluoroquinolones, 3rd/4th generation cephalosporins)?	<input type="radio"/>	<input type="radio"/>
Does your hospital review appropriateness of antibiotics prescribed for treatment of other conditions (e.g., urinary tract infection) for patients with new or recent CDI diagnosis?	<input type="radio"/>	<input type="radio"/>
Does your hospital educate providers about the risk of CDI with antibiotics?	<input type="radio"/>	<input type="radio"/>
Does your hospital educate patients and family members about the risk of CDI with antibiotics?	<input type="radio"/>	<input type="radio"/>

Comments: