

Assessment and Response (ICAR) Program Trends

Rebecca Hamel, RN, MHI, CIC HAI/AR Program October 8th, 2025

MEET THE TEAM

- Dr. Elizabeth Ohlsen, MD, MSc HAI/AR Staff Physician
- Grace Lee, MD, MPH, CIC HAI/AR SME Consultant
- Clayton Weingartner, MPH
 Healthcare Associated Infection(HAI)/Antibiotic Resistance (AR)
 Program Manager
- Rebecca Hamel, RN, MHI, CIC HAI/AR Infection Preventionist ICARist
- Paula Kunkel, MT (ASCP), DAOM, L.AC., MTCM, FABORM, CTT Microbiologist II

HAI/AR Lab Coordinator

Program Framework

- Collection of tools used to comprehensively assess your Infection Prevention and Control (IPC) Program
- Structured modules used to gather information, systematically review IPC practices and provide guidance for improvement activities
- Audits and observations to inform and supplement assessments
- Formal written report with recommendations, resources and actionable interventions
- Non-regulatory, non-punitive, voluntary, no cost



Partnership

- Infection Prevention leader in collaboration with other leadership, i.e. Nursing, Environmental Services, Quality/Safety, Risk/Regulatory, etc.
- Key leaders are involved and engaged in partnering throughout the process
- The IP leader, key leaders and staff partner, collaborate and share in the accountability of ongoing improvement projects and activities identified, i.e. education/training, auditing, etc.
- HAI/AR Program IP is available to partner, support, inform and guide

Purpose

- Informs what is needed to establish and manage an effective, sustainable IPC Program
- Helps to identify and prioritize ongoing quality improvement
- Supplements the already great work of the IP leader and teams
- Supports the integration of guidance and the consistent use of evidence-based IPC practices the <u>WHY</u> behind the <u>WHAT</u>!



Where in the state is the ICARist?



Completed:

Anchorage (3), Juneau (3), Seward, Bethel, Homer, Kenai/Soldotna (2), Valdez, Petersburg, Cordova (2), Palmer/Wasilla (3), Kodiak, Juneau/Sitka

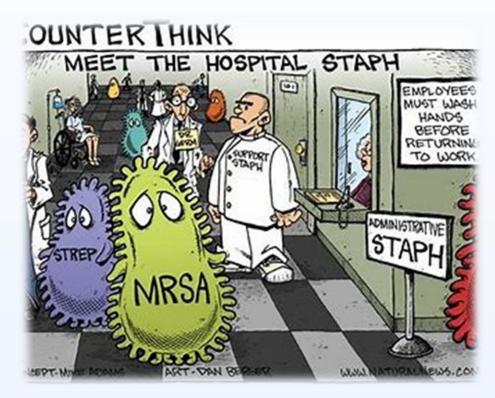
Revisits: Juneau, Homer, Cordova **Planned:** Anchorage (3), Petersburg (2026)

TOTAL TO DATE: 23



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Module 1 – Training, Audits, Feedback [PDF – 5 pages]
           <u>Hand Hygiene</u> 🔼 [PDF – 7 pages]
    19
           <u>Transmission-Based Precautions (TBP)</u> 🔼 [PDF – 30 page
    16
           Environmental Services (EVS) 🔼 [PDF – 18 pages]
    18
          <u>> High-level Disinfection and Sterilization</u> 🔼 [PDF – 13 pag
Module 6 – Injection Safety 🔼 [PDF – 11 pages]
Module 7 – Point of Care (POC) Blood Testing 🔼 [PDF – 8 pages]
Module 8 – Wound Care [PDF – 9 pages]
Module 9 – Healthcare Laundry 🔼 [PDF – 9 pages]
          <u>>– Antibiotic Stewardship</u> 🔼 [PDF – 5 pages]
    13
Module 11 – Water Exposure 🔼 [PDF – 18 pages]
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Infection Prevention and Control Gaps



Art by Dan Berger | www.naturalnews.com

- Environment of Care (EOC)
- Transmission Based/Enhanced Barrier Precautions (TBP/EBP)/PPE
- Hand Hygiene
- Environmental Services/Cleaning and Disinfecting
- High-Level Disinfection/Sterilization



Environment of Care Risks







- Presence of outside shipping cardboard
- Equipment storage on/too near floor
- Lack of separation of clean and dirty (storage of supplies)
- Uncleanable surfaces/furniture
 - Paper/tape signs
- Open containers/food in clinical areas
- Construction





Precautions/PPE Risks

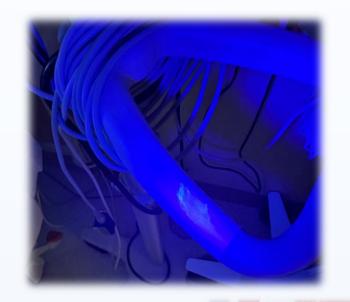
- Delays in putting patients in precautions
- Enhanced Barrier Precautions adoption varies
 - Lack of understanding
- Glove/Mask Use Dos/Don'ts
- PPE types, sizes/ABHS not readily available
 - N95 Respirators
- Hold over pandemic PPE practices
 - Reuse of PPE gowns, respirators
 - Supplies stocked that staff do not use, unknown use
 - Command hooks everywhere

Hand Hygiene Risks



- Lack of auditing, feedback
- Overall nonadherence
- Gloves replacing hand hygiene
- ABHS not readily available
- Product expired, empty, broken
- Sink splash zone
- Lotion not understood





EVS/Cleaning, Disinfecting Risks

- Unlabeled, Expired products
- Products not readily available
- No clear indication/notification non-critical equipment is clean, ready for use
 - Assumption another staff member cleaning
- Manufacturer instructions for use not followed
- Lack of training, understanding of EVS best practices
 - Product uses, risks
 - Standardized, stocked EVS carts











HLD/Sterilization Risks



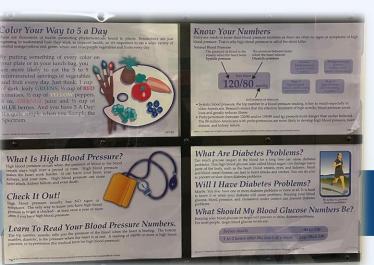
- Limited understanding of HLD options, ex. vaginal transducers
 - Disinfectant solutions have complex, time consuming IFUs
 - Cost of reprocessing equipment
- Excess instruments of unknown use
- Instructions for use instruments, disinfectants, autoclaves, peel pouches
- Point of use process
- Lack of training, inconsistent practices
- COMPETENCIES

BEST PRACTICES

















High-Contact Resident Care Activities (for EBP)

- Dressing
- Bathing/Showering
- Transferring
- Providing Hygiene (brushing hair/teeth, shaving)*
- Changing Linens
- Changing Briefs or Assisting with Toileting
- Device Care or Use (Indwelling Catheter, Trach/Vent, Central Line, Feeding Tube)
- Wound Care (care of any chronic wound)

*When bundled with other high-contact activities





































Cleaning and Disinfection with Donna

Reading a Disinfectant Label



Scan the code or visit

https://nearlife.io/share/t/760/p/1699/s/36
77/g/3677 to play the game.

Setting Up an Environmental Services Cart



Scan the code or visit

https://nearlife.io/share/t/760/p/1699/s/44

79/g/4479 to play the game.

Cleaning and Disinfecting Occupied Patient and Resident Rooms



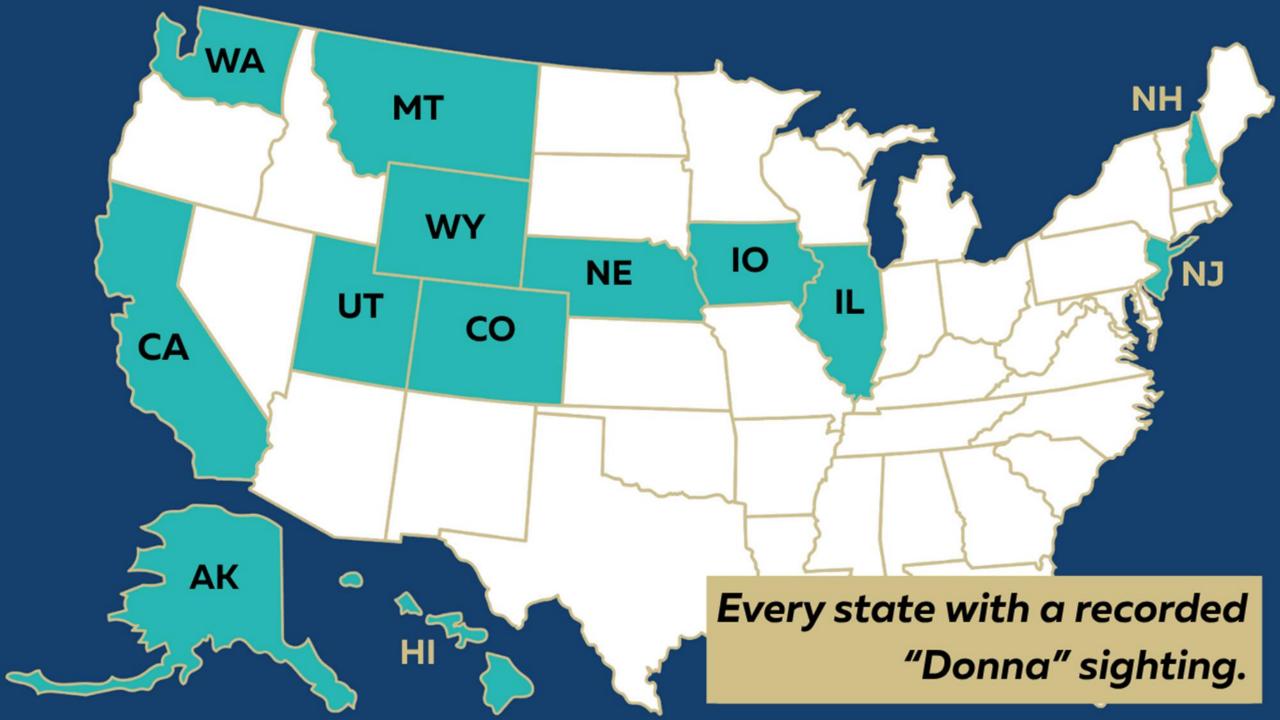
Scan the code or visit

https://nearlife.io/share/t/760/p/1699/s/46
58/g/4658 to play the game.



Source: https://www.cdc.gov/project-firstline/media/pdfs/howtoreadalabel-infographic-508.pdf







Microlearning - 15 minutes or less

Project Firstline offers bite-sized, engaging sessions to strengthen your infection prevention knowledge.

- Do We Really Need to Talk About Hand Hygiene? Again? Yes!
- Ventilation in Healthcare Settings
- Cleaning and Disinfecting
- · What's Wrong with this Picture: Emergency Room
- · What's Wrong with this Picture: Workstation
- · What's Wrong with this Picture: Outpatient Exam Room
- · What's Wrong with this Picture: Low Level Disinfection
- What's Wrong with this Picture: High Level Disinfection and Sterilization
- · What's Wrong with this Picture: Environment of Care



Technical Assistance:

Contact Hannah LaRue for help with navigation or course completion.

hannah.larue@alaska.gov

Get started today!



Create a Moodle account to access courses.



Complete lessons, quizzes and evaluations to earn certificates.



Apply infection control best practices in your workplace!

MICROLEARN SERIES

- Monthly pre-recorded, involved AKIPN members
- Asynchronous = at any time
- ≤15 minutes
- Continuing Education/Certification of Completion



Responding to Common Outbreaks in Alaskan Healthcare Settings

April 2025

- Alaska's Long-Term Care Facilities (LTCF) Outbreak Guide
- Adapted from Montana State Public Health resource
- Healthcare Facility Outbreak Guide dropdown



COMING SOON

PFL Donna and YOU Facilitator Guide

- Includes using the three short interactive training videos
- Quick refreshers, less than 30 minutes each, with discussion and talking points
- Helps with planning three interactive and engaging educational sessions
- Resources for supplemental training and education



QUESTIONS?

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