

Home Care Infection Prevention and Control Program

Home Care & Hospice IPC Forms and Reference Documents

SURVEILLANCE, IDENTIFICATION, AND REPORTING OF INFECTIONS	
Reference Document	Purpose
1. Home Care and Hospice Surveillance Definitions	To determine if a patient infection meets the surveillance definition for select home care-onset healthcare-associated infections.
2. State-specific List of Reportable Diseases/Conditions and Reporting form(s)	To select the state's list of reportable diseases/conditions and download the list and reporting forms.
Forms	Purpose
1. Outcome Measures to Calculate a Home Care-onset Healthcare-associated Infection	To document the selected surveillance event(s) by the type of care and select the surveillance formulas (i.e., numerator, denominator, and multiplier) to calculate the outcome data.
2. Process Measures to Calculate Compliance with Infection Prevention Activities	To document the selected surveillance event(s) by the type of activity and select the surveillance formulas (i.e., the numerator, denominator, and multiplier) to calculate the data.
3. Outcome Measures to Calculate Occupational Health Surveillance Activities	To document the selected occupational health surveillance event(s) by the type of event and determine the surveillance formulas (i.e., numerator, denominator, and multiplier) to calculate the outcome data.
4. Skin and Soft Tissue Infection Surveillance Worksheet	To document the analysis of a potential skin and soft tissue infection related to wound care, its outcome, and actions planned.
5. Urinary Tract Infection Surveillance Worksheet	To document the analysis of a potential urinary tract infection related to patient care, its outcome, and actions planned.
6. Central Line-associated Bloodstream Infection Surveillance Worksheet	To document the analysis of a potential central line-associated bloodstream infection related to patient care, its outcome, and actions planned.
7. Central Line-associated Bloodstream Infection Line List	To document the central line days and calculate the CLABSI rate.

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8. Urinary Tract Infection Line List	To document the patient days and indwelling catheter days and calculate the CA-SUTI and SUTI rates.
9. Skin and Soft Tissue Infection Line List	To document the patient days and wound care days and calculate the SSTI rate.
10. Surveillance Denominators	To document denominator data for multiple types of infections.
11. Home Care and Hospice Surveillance Report	To document the patients that met the surveillance criteria for select home care-onset healthcare-associated infections.
12. Home Care and Hospice Surveillance Report Summary	To document the data aggregation for patients that met the surveillance criteria for select home care-onset healthcare-associated infections.
13. Home Care & Hospice Infections Present on Admission and Other Excluded Infections	To document an infection present on admission and its reason for meeting the home care and hospice surveillance definition criteria.
14. Home Care & Hospice Infections Present on Admission and Other Excluded Infections Summary	To aggregate the data for infections considered present on admission and the reasons for not meeting the home care and hospice surveillance definition criteria.
15. Home Care Infection Prevention and Control Transfer Summary	To provide documentation to a transferring facility when the patient is suspected or confirmed of having a communicable illness at the time of transfer.
16. Multidrug-resistant Organism and <i>C. difficile</i> Prevalence and Incidence Log	To document the patients with a Multidrug-resistant Organism (MDRO) or <i>C. difficile</i> on treatment at admission or who became infected.

HAND HYGIENE	
Reference Document	Purpose
1. CDC vs. WHO Hand Hygiene Guideline Comparison	To compare the CDC and WHO hand hygiene guidelines and select a guideline or specific policies to follow during patient care activities.

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CLEANING AND DISINFECTION	
Forms	Purpose
1. Medication and Vaccine Refrigerator Temperature Log	To document the temperature of an “in-use” refrigerator where medications or vaccines are stored.
2. Food Refrigerator Temperature Log	To document the temperature of an “in-use” refrigerator where patient food is stored.
3. Temperature and Humidity Log	To document the temperature and humidity of a room where sterile supplies are stored.
4. Troubleshooting Record	To record the actions taken when temperature variances are identified in a refrigerator, freezer, or storage room.
5. Equipment and Supplies Storage: Vehicle Inspection Checklist	To document an inspection of the supplies stored in a staff member’s vehicle.

ISOLATION PRECAUTIONS	
Reference Documents	Purpose
1. Sequence for Putting on Personal Protective Equipment	To list the steps for donning personal protective equipment.
2. Sequence for Removing Personal Protective Equipment: Option One	To list the steps in removing personal protective equipment safely.
3. Sequence for Removing Personal Protective Equipment: Option Two	To list an alternative method to remove personal protective equipment safely.
4. Management of MDROs in the Home and Facility-based Hospice Setting	To summarize the CDC guidelines for the <i>Management of Multidrug-Resistant Organisms in Healthcare Settings</i> , specific to care in the home and IPU.
5. Category A Bioterrorism Agents	To provide a summary of agents of bioterrorism to consider in the ICRA and emergency preparedness.
Forms	Purpose
1. Criteria to Determine the Type of Isolation Precautions for a Patient with <i>C. diff.</i> or a Multidrug-Resistant Organism	To document the decision-making process and select the type of isolation precautions.
2. Pandemic Preparedness Self-Assessment	To document the organization’s readiness for another pandemic.

BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN	
Forms	Purpose

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BLOODBORNE PATHOGENS EXPOSURE CONTROL PLAN	
1. Sharps and Safety Device Evaluation	To document the evaluation of a new safety device before staff implementation.
2. Blood and Body Fluid Exposure	To document the circumstances of a blood or body fluid exposure and follow-up actions taken.
3. Sharps Injury Log	To document a needlestick injury or cut from a sharp object contaminated with another person's blood or other potentially infectious materials.
4. Source Patient Blood Test Consent/Declination	To document the consent from the person whose blood from a sharps injury resulted in an occupational exposure to bloodborne pathogens.

RESPIRATORY PROTECTION PLAN	
Forms	Purpose
1. Respirator Medical Questionnaire and Examination	To document the staff's history of prior respirator use and medical conditions that may impact their ability to wear a respirator.
2. Verification of Qualitative Fit Test (QLFT)	To document the results of respirator fit testing activities.
3. Voluntary Respirator Use	To document acknowledgment of the risks and actions needed when wearing a respirator voluntarily.
4. TB Risk Assessment Tool	To document the assessment and evaluation for TB risks and determine the frequency of respirator fit testing.

OCCUPATIONAL HEALTH PROGRAM	
Reference Documents	Purpose
1. Staff Work Restrictions for Certain Diseases and Conditions	To determine when staff must be excluded from work and for how long.
2. Staff Work Restrictions for Certain Vaccine-Preventable Diseases and Conditions	To determine when staff with a vaccine-preventable illness must be excluded from work and for how long.
Forms	Purpose

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OCCUPATIONAL HEALTH PROGRAM	
1. Health Screening	To document the staff's health history and results of their health screening activities.
2. Hepatitis B Vaccination Acceptance/Declination	To document the acceptance and administration of the Hepatitis B vaccine or its declination.
3. Influenza Vaccination Acceptance/Declination	To document the acceptance and administration of the influenza vaccine or its declination.
4. Observation Checklist for Placing a Tuberculin Skin Test	To document the competency of the person conducting the TB skin test.
5. Observation Checklist for Reading a Tuberculin Skin Test	To document the competency of the person reading the results of the TB skin test.
6. Immunization and TB Screening	To document the staff's vaccination history and the results of TB testing.
7. Tuberculin Skin Test Record	To document the placement and results of staff's TB skin testing.
8. Tuberculosis Symptom Evaluation & Risk Assessment	To document the presence or absence of TB symptoms and their TB risk factors.
9. Occupational Illness & Injury Log	To document the self-reported communicable illnesses and injuries and actions taken.
10. COVID-19 Staff Exposure Risk Assessment	To document the evaluation activities following a staff's exposure to COVID-19.
11. COVID-19 Log Form	To document when a staff member tests positive for COVID-19.

PATIENT AND STAFF EDUCATION	
Forms	Purpose
1. Infection Prevention and Control Skills Review	To document the staff's competence in performing a myriad of activities in a manner that prevents and controls infection.
2. Hand Hygiene Knowledge Assessment	To document the staff's knowledge of hand hygiene activities.
3. Hand Hygiene Knowledge Assessment Answer Key	To provide the correct answers to the hand hygiene knowledge assessment and references.

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QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT	
Reference Document	Purpose
1. Infection Prevention and Control Program Data Collection Matrix	To summarize the infection prevention and control data to be collected, their frequencies, and suggested forms.
Forms	Purpose
1. Home Care Infection Prevention and Control Risk Assessment Tool	To document the self-assessment activities to score the infection prevention and control prioritized risks.
2. Infection Prevention and Control Program Targeted Goals	To document the selected organization-wide infection prevention and control goals.
3. Infection Prevention and Control Skills Review Data Summary	To document the data aggregation, analysis, and actions planned for the staff's competence assessment activities.
4. 2024-2025 Influenza Vaccination Summary	To document the influenza vaccination data aggregation, analysis, and actions planned.
5. Occupational Illness & Injury Data Summary	To document the occupational health surveillance data aggregation, analysis, and actions planned.
6. Infection Prevention and Control Program Targeted Goals Evaluation	To document the comprehensive data aggregation, analysis, and actions planned for the organization-wide infection prevention and control goals.
7. Home Care Surveillance Summary	To document the patient surveillance data aggregation.
8. Home Care Surveillance Summary Analysis	To document the patient surveillance data analysis and actions planned.

