

SHIELD QAPI Program (Quality Assurance and Performance Improvement)



Facility Name: _____

PROGRAM OVERVIEW & PURPOSE

PROGRAM name:

- SHIELD: Shared Healthcare Intervention to Eliminate Life-threatening Dissemination of Multidrug-Resistant Organisms (MDROs).

Problem to be solved:

- Healthcare-associated infections (HAIs) due to MDROs are a recognized public health threat.
- Nursing home residents have more than 5-fold the amount of MDROs, such as MRSA, as compared to hospitals.¹⁻⁵ Carriage with MDROs is associated with infection.
- Recent estimates show that 64% of nursing home residents harbor at least one MDRO.³

Background:

- To address the threat of MDROs in our nursing home, we are adopting a decolonization strategy that has been **proven to reduce MDROs and HAIs** in large scale clinical trials and are considered a common set of activities to address high MDRO prevalence.⁶⁻⁹
- Decolonization includes use of antiseptic soap for bathing and showering and topical iodine in the nose to protect residents from MDROs. These products are available over-the-counter and have been safely used in healthcare for over 60 years.
- This strategy is not novel. Currently, 80-90% of U.S. hospitals use universal decolonization in their ICUs as standard nursing protocols.
- We view this strategy as a broad solution to prevent transmission of MDROs among residents in our nursing home and to reduce bacterial infections.
- This is a minimal risk strategy that our facility is approving as a **standing nursing protocol for all residents** as part of the admission agreement.
- We see this infection prevention and control quality improvement program as responsive to the Centers for Medicare and Medicaid Services (CMS) QAPI requirement and as an opportunity to reduce MDROs in our nursing home.

Goal(s) for this program:

- Reduce multi-drug resistant organisms (MDROs) in our nursing home
- Protect our residents from infection

Scope and Protocol:

- We are adopting an evidence-based preventative decolonization protocol as a quality improvement initiative approved by our nursing home leadership and Quality Assessment and Assurance (QAA) committee.
- Our facility uses the following products to protect all residents during their stay:
 - ✓ Antiseptic over-the counter soap called chlorhexidine (CHG) for all bathing and showering needs, starting on admission
 - ✓ Iodophor nasal product to remove bacteria from the front of the nose on admission and every other week after admission. This helps remove MRSA and other organisms that commonly cause infection. The swabs are given for 5 days twice a day and keep nasal germs away for about a week.
- This QAPI activity will be integrated across all care and service areas
- Refer to SHIELD Nursing Protocol

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PROGRAM APPROACH

PROGRAM Timeline:

Program Phase	Activities	Date(s)
Baseline Assessment	Measure baseline prevalence of HAIs	
QAA Approval	This project is approved as a QI project involving a standing nursing protocol. Approval is documented in our meeting minutes.	
Resident Communications	Discussion at Resident’s Council meeting	
	Ombudsman notification	
	Resident Admission Packet letter	
Staff Training	Direct-to-staff training with post-test	
Protocol Implementation	Switch to antiseptic soap for bathing/showering	
	Launch nasal decolonization protocol	
	Measure and assess protocol adherence. Our goal for protocol adherence is 85%.	
	Monitor and assess product acceptance and tolerability. Report side effects.	
Final Assessment	Measure prevalence of HAIs	

Program Team and Responsibilities:

Role(s)	Person(s) Assigned
<ul style="list-style-type: none"> Facilitate data collection Inform and speak to residents Oversee staff training Oversee protocol adherence 	<ul style="list-style-type: none"> Director of Staff Development and Director of Nursing

Resources:

- SHIELD Standardized Nursing Protocol
- SHIELD Training Module with Post-Test
- SHIELD Training Video for Nurses

Anticipated Barriers:

What could get in the way of success?	Possible Solutions
Acceptance of product	<ul style="list-style-type: none"> ✓ Provide information letter on admission (in admit packet) ✓ Use Resident Talking points ✓ Discuss at Resident’s Council ✓ Discuss with individual residents and ombudsman
Low adherence of program protocols	<ul style="list-style-type: none"> ✓ Measure/analyze adherence ✓ Continuous staff education

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