

NJDOH Update: Strategies to Prevent Hepatitis C Virus Transmission in Patients Undergoing Hemodialysis

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Agenda



- ▶ **Review CDC Health Alert Network Summary dated January 27, 2016 as it relates to State and Federal ESRD Regulations**
- ▶ **Review commonly cited deficiencies related to infection prevention and control in the hemodialysis unit and screening of HCV negative patients**
- ▶ **NJDOH regulatory update**

State Regulation



- ▶ **8:43A-24.8.(d) Infection prevention and control - The facility shall maintain dialysis infection control standards as recommended in the current guidelines from CDC.**
- ▶ **8:43A-24.4.(b) Infection control policies and procedures specific to the renal dialysis unit that include standard industry precautions in accordance with (CDC) publication “Recommendations for Preventing Transmission of Infections Among Chronic Hemodialysis Patients, MMWR, Vol. 50, No. RR-5, April 27, 2001, as amended and supplemented.**

CDC Health Alert Network
January 27, 2016



▶ CDC Health Advisory

**CDC Urging Dialysis Providers and Facilities
to Assess and Improve Infection Control
Practices to Stop Hepatitis C Virus
Transmission in Patients Undergoing
Hemodialysis**

CDC Recommendations:

- ▶ Evaluate infection control practices in each facility and ensure adherence to infection control standards.
- ▶ If gaps are identified, promptly address any issues to protect patients' health and safety
 - ▶ Take action to improve injection safety
 - ▶ hand hygiene
 - ▶ Take action to improve routine environmental disinfection procedures, as appropriate
 - ▶ Ensure staff are aware of and trained to implement infection control guidelines for hemodialysis settings. Facilities should provide regular (e.g., annual) training of staff to ensure adherence to infection control recommendations

Facility Infection Prevention & Control



- ▶ Facility Staff (All are responsible):
- ▶ 8:43A-14.1.(b),(c) Infection Control Professional (ICP).
- ▶ 8:43A-14.2.(a) Infection Control Committee (includes the medical director, the ICP, representation from administration and the nursing service).
- ▶ 8:43A-24.8.(a) staff member who is responsible for the direction, provision, and quality of infection prevention and control services at the facility.
 - ▶ (Requires training or experience in surveillance, prevention, and control of nosocomial infection).

Infection Prevention & Control QAPI - Federal



- ▶ **V637 – 494.110(a)(2)(ix) Infection Control; with respect to this component the facility must –**
- ▶ **(A) Analyze and document the incidence of infection to identify trends and establish baseline information on infection incidence;**
- ▶ **(B) Develop recommendations and action plans to minimize infection transmission, promote immunization; and**
- ▶ **(C) Take actions to reduce future incidents.**

Infection Prevention & Control QAPI - State



- ▶ **8:43A-14.7. The Infection Control Professional shall develop & implement a program of QAPI that is integrated into the facility QAPI program; and**
- ▶ **Regularly collecting and analyzing data to help determine the effectiveness of infection control practices.**
- ▶ **When corrective actions need to be taken based on data collected, the Infection Control Committee shall recommend, implement, and monitor those actions.**
- ▶ **The Infection Control Professional shall supervise these QAPI activities. These QAPI activities shall be overseen by the Continuous_QAPI program.**

Infection Prevention & Control QAPI



- ▶ If there is a Hepatitis C Seroconversion:
- ▶ Review all patients' routine laboratory test results to identify additional cases. Investigate potential sources for infection to determine if transmission might have occurred within the dialysis unit, including review of newly infected patients' recent medical history (e.g., blood transfusion, hospitalization), history of high-risk behavior (e.g., injecting-drug use, sexual activity), and unit infection prevention and control practices and procedures.

CDC Recommendations:



- ▶ Follow CDC recommendations for HCV screening of hemodialysis patients and management of patients who test positive:
- ▶ CDC recommends that chronic hemodialysis patients be screened for HCV antibody (anti-HCV) upon admission to the dialysis clinic and every six months thereafter if susceptible to HCV infection.
- ▶ For those patients with a positive anti-HCV test result, the test should be followed with a Nucleic Acid Test (NAT) for HCV RNA. Follow CDC recommendations for interpretation of test results and further actions.

CDC Recommendations:



- ▶ Follow CDC recommendations for interpretation of test results and further actions. Ensure patients identified to have HCV infection are aware of the diagnosis and are referred to appropriate care and evaluation. Persons with chronic HCV infection, including those with end-stage renal disease, may benefit from treatment.
- ▶ Immediately report any case of new HCV infection among patients undergoing hemodialysis to the state or local health department (e.g. NJ – State).

CDC Recommendations:



- ▶ **New HCV infection can present as a change in anti-HCV status from negative to positive, in the absence of signs or symptoms.**
- ▶ **Communicate test results to the patient and arrange for clinical evaluation for possible treatment of HCV infection.**
- ▶ **Determine the HCV infection status of all other patients receiving care in the facility.**
- ▶ **Be transparent. Inform patients if HCV transmission is suspected to have occurred within the facility, and explain steps being taken to address the problem.**

Infection Prevention & Control Training



- ▶ Training is conducted at orientation, annually and when indicated.
- ▶ The topics include at a minimum:
- ▶ Proper hand hygiene technique
- ▶ Proper use of personal protective equipment (PPE)
- ▶ Infection control practices recommended for hemodialysis units and differences from Standard Precautions
- ▶ Special precautions for HBsAg-positive patients
- ▶ Proper infection control techniques for initiation, care, and maintenance of access sites
- ▶ Modes of transmission for bloodborne viruses, pathogenic bacteria, and other microorganisms as appropriate

Infection Prevention & Control Training



- ▶ Modes of transmission for bloodborne viruses, pathogenic bacteria, and other microorganisms as appropriate
- ▶ Proper handling, preparation, and administration of parenteral medications maintaining aseptic technique; and
- ▶ Proper methods to clean and disinfect equipment and environmental surfaces to minimize transmission of microorganisms
- ▶ Initial and ongoing training program for infection control practices, which includes information on the prevention of intravascular catheter-related infections

Facility Infection Prevention & Control



- ▶ Screen all patients for possible HCV infection using anti-HCV and ALT test on facility admission.
- ▶ For susceptible patients (i.e. anti-HCV negative), perform anti-HCV testing semiannually and ALT monthly.
- ▶ Inform newly infected patients of the change in their HCV status and arrange for clinical evaluation/management. 8:43A-24.4(b)
- ▶ New Jersey Reporting Requirements for Communicable Diseases and Work-Related Conditions, July 2013, www.nj.gov/health/cd (e.g. Hepatitis C Seroconversion)

CDC Recommendations:

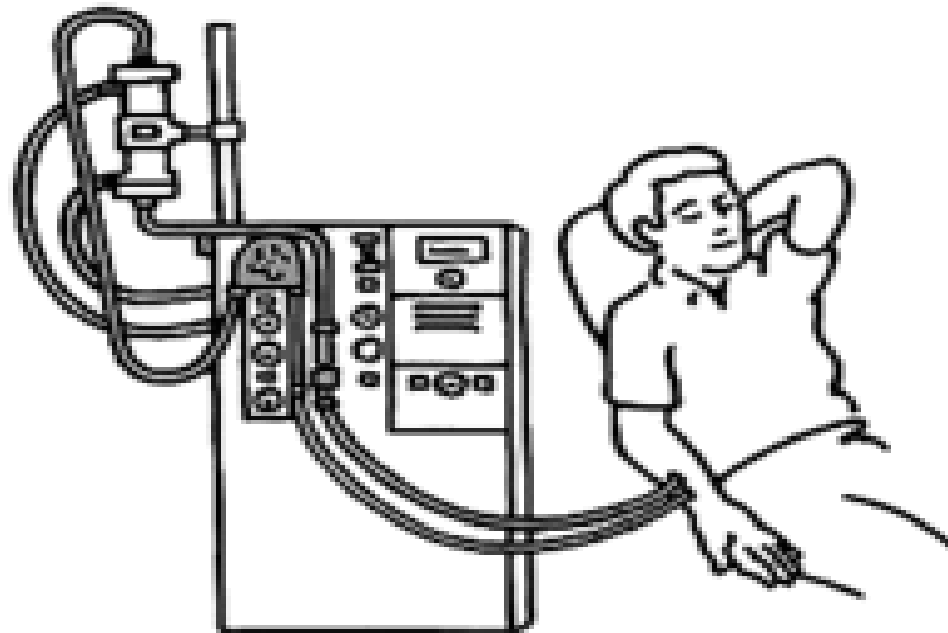


- ▶ Recommendations for Patients:
- ▶ If you do not know if you have or might have hepatitis C, ask your healthcare provider.
- ▶ Ask your healthcare providers questions about your dialysis care, such as: ◦ Do you follow CDC recommendations?
- ▶ Do I need to be tested for hepatitis C virus?
- ▶ What can be done to prevent me from getting an infection during my dialysis treatment

CDC Recommendations:

- ▶ Recommendations for Patients:
- ▶ Review educational resources for patients on dialysis safety and hepatitis C provided by CDC and other partners.
- ▶ Patient Information
- ▶ CDC Website Hepatitis C FAQs for the Public
- ▶ Take Action to Prevent Infections
- ▶ Conversation Starter To Prevent Infections in Dialysis Patients
- ▶ CDC Patient Pocket Guide: 6 Tips to Prevent Dialysis Infections
- ▶ ESRD National Coordinating Center

Survey Activities



Deficiencies Related To Hemodialysis Care



- ▶ **Single dose vials used for one patient only and discarded.**
- ▶ **Do not carry medication vials, syringes, alcohol swabs, or supplies in pockets.**
- ▶ **Prepare medications in a clean area away from the dialysis station.**

Deficiencies Related To Hemodialysis Care



- ▶ Staff (visitors, other health care workers) perform hand hygiene before and after contact with patients and prior to performing procedures
- ▶ Ensure that gloves are changed and hand hygiene is performed when moving from one patient to the next and before accessing clean supplies
- ▶ Patient who held access site, remove gloves and perform hand hygiene

Deficiencies Related To Hemodialysis Care



- ▶ **Items taken into the dialysis station should either be disposed of, dedicated for use only a single patient or cleaned and disinfected before taken to a common clean area or used on another patient**
 - ▶ (e.g. clamps – cleaned and disinfected in the open position, once cleaned, remove from the dirty sink to avoid contamination.)
- ▶ **Supplies are stored in clean areas to prevent contamination from potentially infectious material**
 - ▶ (e.g. store clean items away from dirty sinks or blood samples.)

Deficiencies Related To Hemodialysis Care



- ▶ Visibly wet with disinfectant-soaked cloth/wipe machine top, front and side surfaces, dialysate hoses, Hansen connectors, and outside surfaces of dialysate concentrate containers.
- ▶ Wipe wet all surfaces of prime waste containers with a disinfectant-soaked cloth/wipe.
- ▶ Maintain procedures, in accordance with applicable State and local laws and accepted public health procedures, for the-(i) Handling, storage and disposal of potentially infectious waste.

Deficiencies Related To Hemodialysis Care



- ▶ **Equipment and medical devices are disinfected before being returned to a common area or taken to another station (e.g. stethoscope, pH/conductivity meter, thermometer).**
- ▶ **BP cuff and tubing, TV controls, the data entry station and counters around dialysis stations are wiped wet with disinfectant.**
- ▶ **When the chair is vacated; have chair fully reclined, wet all external front facing and side chair surfaces, including down sides of seat cushion and side table.**

Deficiencies Related To Hemodialysis Care



- ▶ **Minimize the transmission of infectious agents within and between the unit and any adjacent hospital or other public areas.**
- ▶ **Remove all bloodlines and disposable equipment and discard in biohazard waste.**
- ▶ **Avoid cross contamination when handling blood samples.**

Deficiencies Related To Staff Training



- ▶ **Staff members require education on infection prevention and control at orientation and, at a minimum, annually.**
- ▶ **Staff members assigned as person responsible for infection prevention and control has either training or experience in surveillance, prevention, and control of nosocomial infection.**

Deficiencies Related to Monitoring of HCV Negative Patients



- ▶ For susceptible patients (i.e. anti-HCV negative), perform anti-HCV testing semiannually and ALT monthly.
- ▶ New Jersey Reporting Requirements for Communicable Diseases and Work-Related Conditions, July 2013, www.nj.gov/health/cd (e.g. Hepatitis B - local health department and Hepatitis C Seroconversions – NJDOH)

NJDOH Update



- ▶ **Changes in Leadership for ESRD Team**
 - ▶ **New Supervisor of Dialysis Team**
Tara Hurley, BSN, RN
- ▶ **Health Facility Survey & Field Operations**
Plans for Federal Fiscal Year 2017

References



- ▶ **CDC Urging Dialysis Providers and Facilities to Assess and Improve Infection Control Practices to Stop Hepatitis C Virus Transmission in Patients Undergoing Hemodialysis, CDC Health Alert Network, 1/27/16**
- ▶ **N.J.A.C. Title 8, Chapter 43A Standards For Licensure Of Ambulatory Care Facilities**
 - ▶ **N.J.A.C., Title 8, Chap 57, Chap 58**
- ▶ **42 CFR Part 494 Conditions For Coverage For End-Stage Renal Disease Facilities**

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