



**Indiana**  
**Department**  
**of**  
**Health**

# 2021 INFECTION CONTROL ASSESSMENT RESPONSE (ICAR) AND OUTBREAK REPORT (ORT)

JANUARY 2021-DECEMBER 2021

*5/31/2022*

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IP EPIDEMIOLOGIST

OUR MISSION:

To promote, protect, and improve the health and safety of all Hoosiers.

OUR VISION:

Every Hoosier reaches optimal health regardless of where they live, learn, work, or play.



# OVERVIEW

- ❑ The Numbers
- ❑ Analysis Information
- ❑ “What is a Pareto Chart?”
- ❑ ORT Strengths
- ❑ ICAR Strengths
- ❑ ORT Gaps
- ❑ Outbreak Summaries (Sept-Dec 2021)
- ❑ ICAR Gaps
- ❑ Notable Improvements from 2020
- ❑ Resources
- ❑ Questions/Discussion





# The Numbers

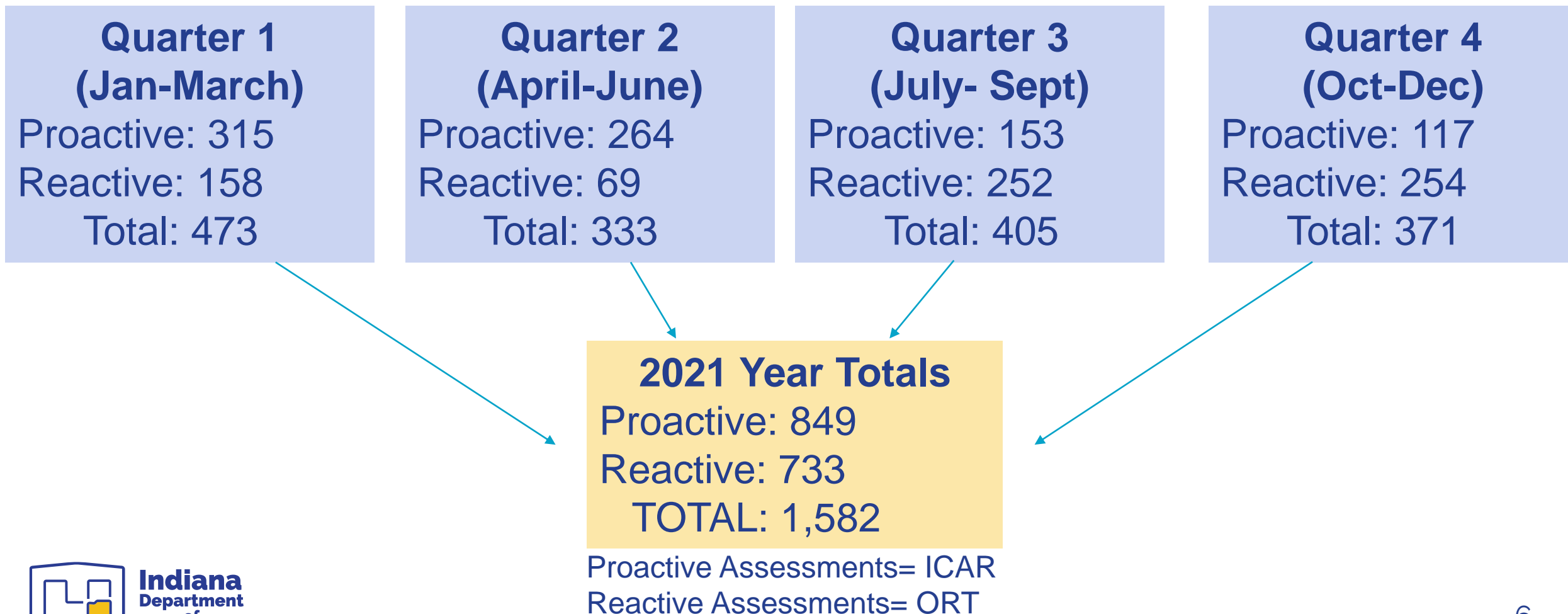


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# 2021 IDOH IP Visit Totals

INDIANA IP DISTRICTS - 2021			
District	Prevention-based Assessments (ICAR)	Outbreak-based Assessments (ORT)	Total Prevention-based (ICAR) & Outbreak-based (ORT) Assessments
1	93	100	193
2	101	39	140
3	80	58	138
4	71	76	147
5	162	100	262
6	71	82	153
7	65	65	130
8	63	92	155
9	54	59	113
10	89	62	151
	849	733	1582

# 2021 Visit Totals by Quarter



\*534 ICAR assessments completed using the comprehensive 2021 IDOH ICAR tool

# Information about Analysis

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## ➤ Things Potentially Affecting Data

- Updated guidance & recommendations
- Change in assessments tools (removed, altered, & added questions)
- Some information is self-reported from the facilities
- Leaving responses blank
- Quarter 1 for ICARs, we did not have the IDOH ICAR REDCap

## ➤ Assessment tools

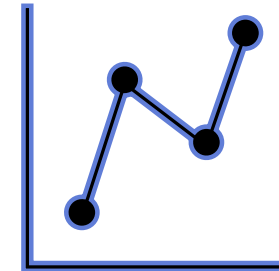
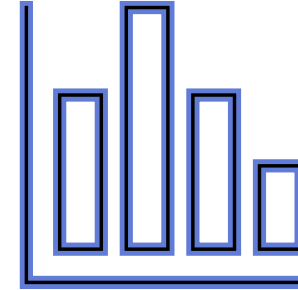
- 2021 IDOH LTC ICAR (April 2021-Dec 2021)
- 2020 IDOH LTC ORT (Jan 2021 – Dec 2021)

## ➤ IPC Strengths

- “yes” or “checked”

## ➤ IPC Gaps

- “no” & “unknown”





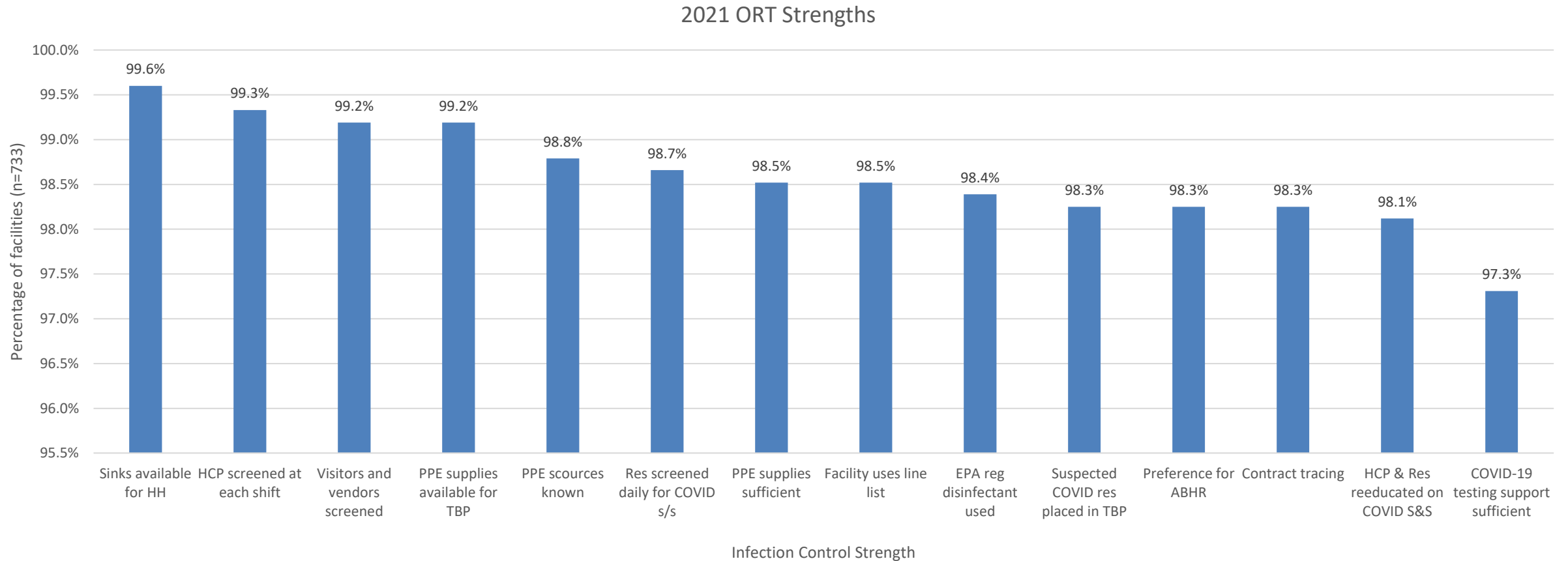
# COVID-19 ORT Strengths



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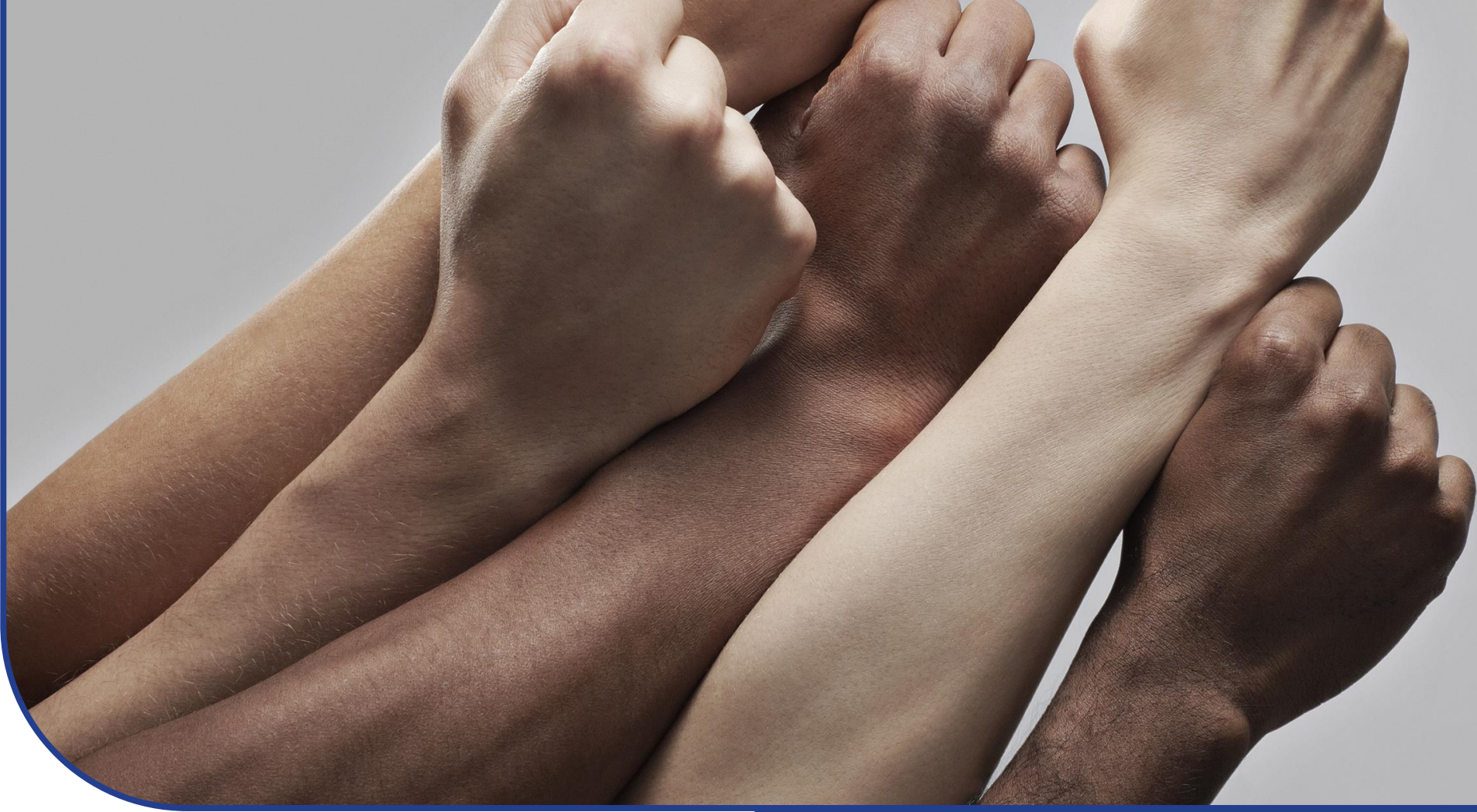
# 2021 COVID-19 ORT Strengths



# COVID-19 ORT Strengths 2021

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- COVID Screenings
  - Staff, visitors, vendors, and residents
- PPE supplies are available, and sources are known
- Line lists and contact tracing
- Preference for ABHR
- HCP/residents are educated on s/s of COVID & suspected COVID + residents are placed in TBP

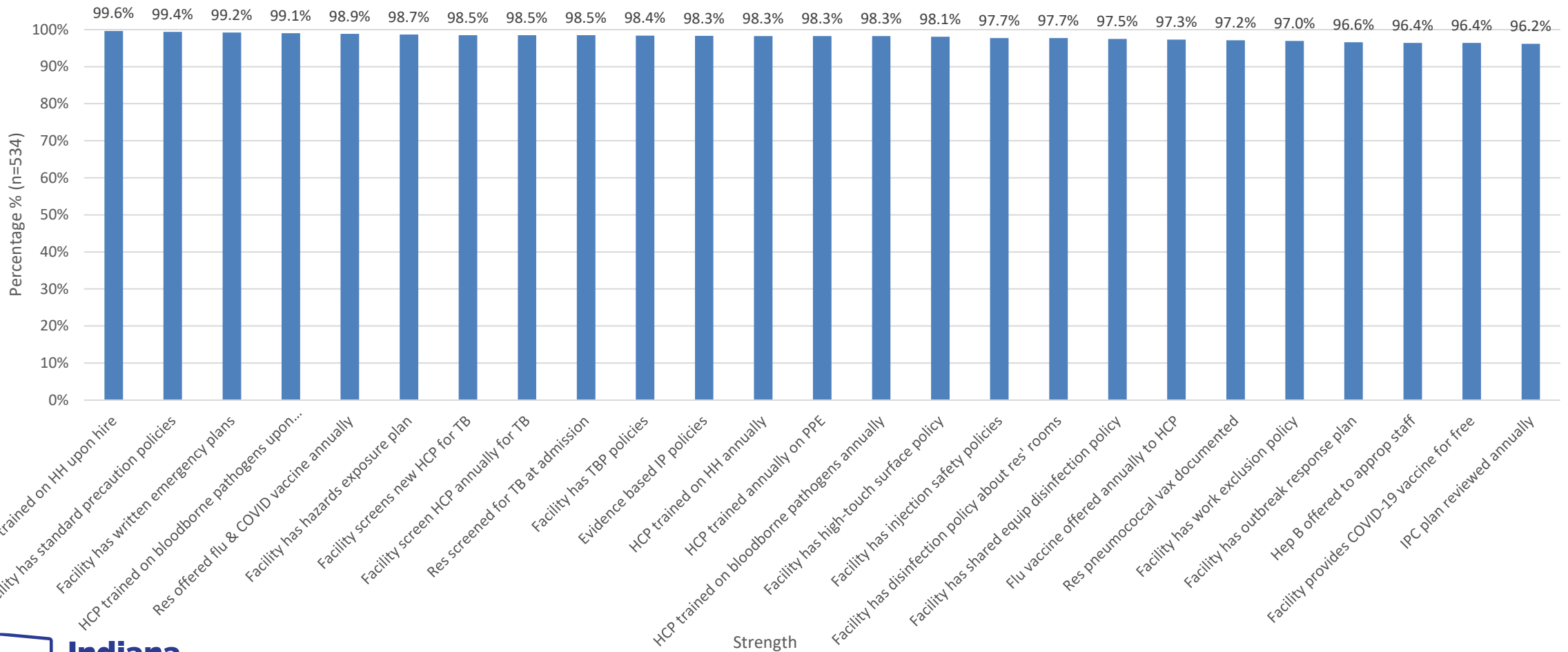


# Infection Control (ICAR) Strengths



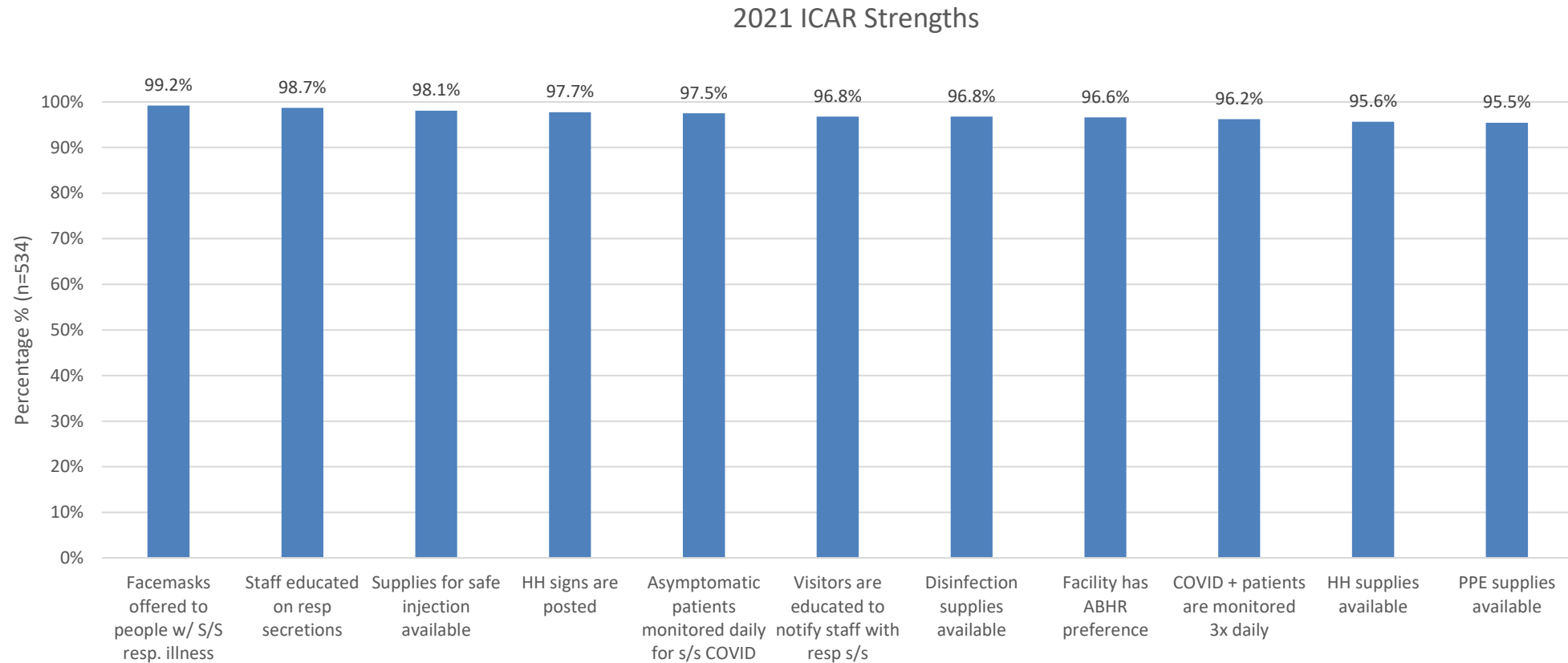
# Infection Control (ICAR) Strengths 2021\*

2021 ICAR Strengths: Policies, training, vaccines



\* Quarter 1 is not represented, as the IDOH ICAR tool was not introduced until April 2021

# Infection Control (ICAR) Strengths from 2021\*



# Infection Control (ICAR) Strengths Reported 2021\*

- **Policies**

- Ex: TB policies, Injection safety policies, sick/work exclusion policy, standard precaution policies, etc.

- **Training**

- Ex: Staff are trained on HH upon hire and annually, Staff trained on PPE annually, HCP trained on bloodborne pathogens, etc.

- **Vaccines offered/infectious disease screenings**

- Ex: Residents offered flu vaccine annually, Hep B vaccines offered to appropriate staff, HCP screened annually for TB, etc.

- **Supplies available**

- Ex: Supplies are available (injection safety, PPE, HH, disinfection)

- **Monitoring for COVID**

- Ex: COVID patients checked for worsening symptoms, visitors are reminded to inform facilities of s/s, etc.

- **Preference for ABHR and HH signs are posted**



\* Quarter 1 is not represented, as the IDOH ICAR tool was not introduced until April 2021



# What's a Pareto Chart?



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# Pareto Charts

- Often used in quality assurance and business
- A bar graph that is made in descending order with cumulative percentage on a second vertical axis and represented by a line graph
- 80/20 Rule
  - Approximately 80% of effects occur due to approximately 20% of causes
- Vital Few vs Trivial Many
- Helps answer “What should I focus on improving?”

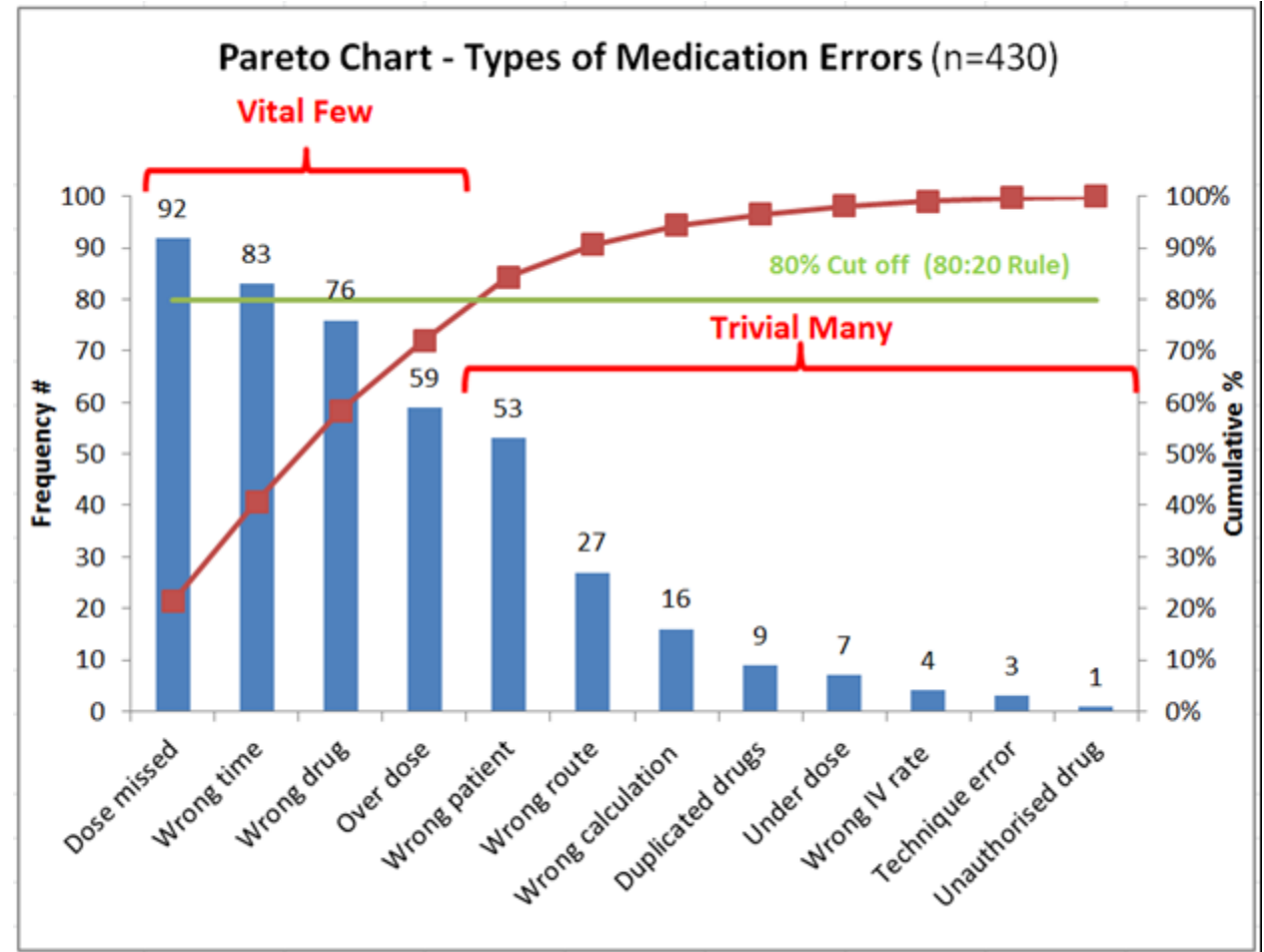


Image from: <https://www.cec.health.nsw.gov.au/Quality-Improvement-Academy/quality-improvement-tools/pareto-charts>



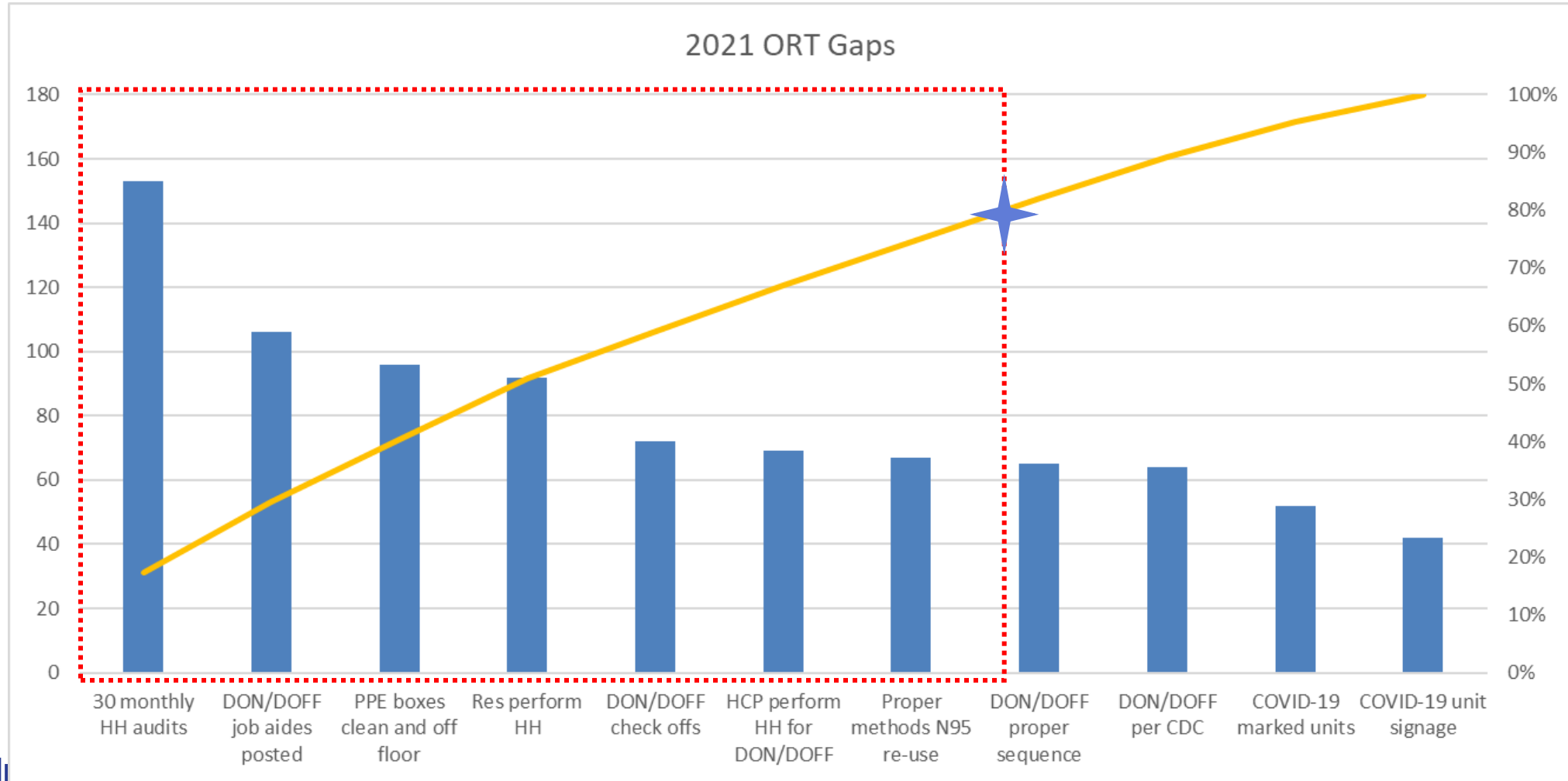


# COVID-19 ORT Gaps



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# COVID-19 ORT Gaps for 2021 (n=733)



# Vital Few Gaps for COVID-19 ORTs 2021

IPC Gaps	2021 Q1-Q4 (n=733)
Monthly hand hygiene audits	153 (21%)
Posting Don/Doff job aides	106 (14%)
PPE stored properly	96 (13%)
Residents perform hand hygiene	92 (12%)
Don/Doff competency check offs	72 (10%)
Hand hygiene when Don/Doff PPE	69 (9%)
Correct N95 re-use per CDC guidance	67 (9%)



# Data Summary of COVID-19 Outbreak Questions (Sept- Dec 2021)

Who was identified as first case?	n=384
HCP/Staff	55.2% (212)
Resident	40.1%(154)
Staff/Resident case ID'd same time	2.3% (9)

Vaccine Status of First Case	n=384
Fully vaccinated	47.1%(181)
Partially Vaccinated	3.7% (14)
Not vaccinated	43.0% (165)
Unknown/not assessed	6.3% (24)

Why was the + HCP tested? *more than one choice could be selected*	n=221
Sick/symptomatic	83
Routine Testing	57
Known Exposure	48
Community cases increased	47
Unknown/not assessed	23
Recent travel	11

Potential exposures of + res *more than one choice could be selected*	n=163
Recent visitors	75
Recently Hospitalized	40
Med Appt or Dialysis	28
Excursion	19
Unknown/not assessed	10
ER visit	3



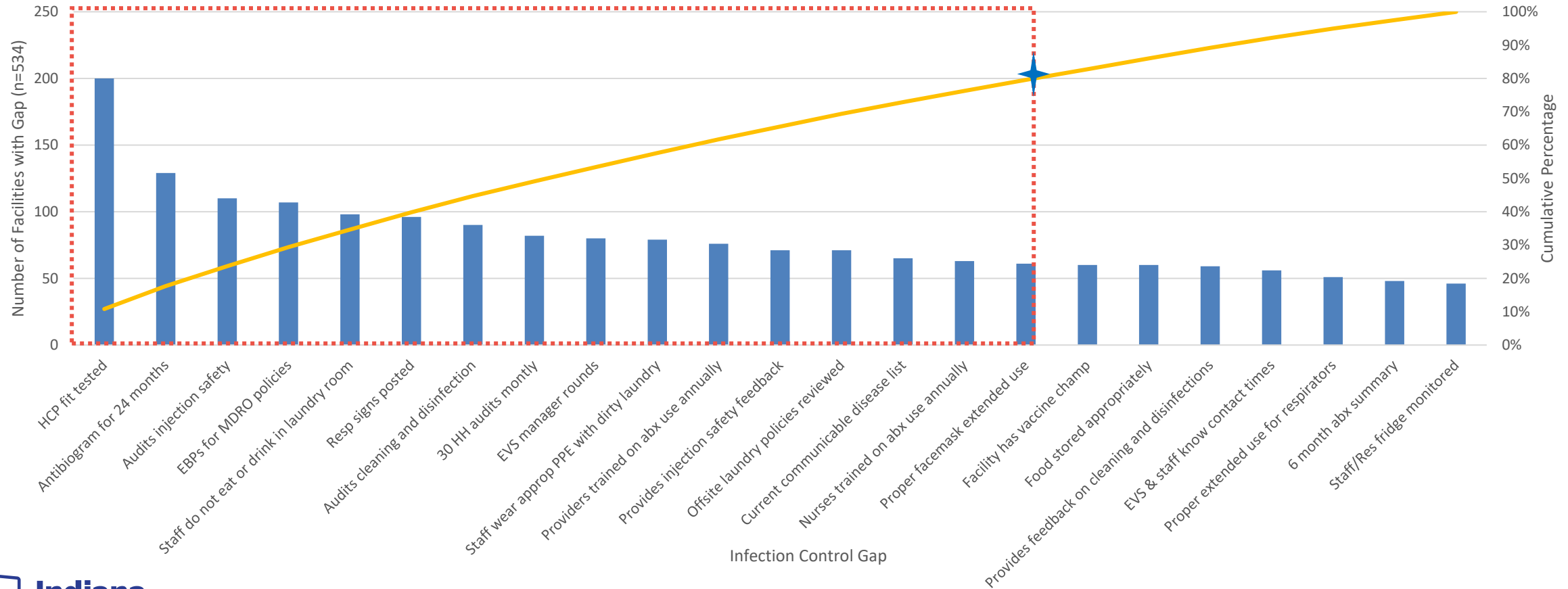
# Infection Control (ICAR) Gaps



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# 2021 Infection Control (ICAR) Gaps Pareto Chart

April-December 2021 ICAR Gaps



# Vital Few 2021 Infection Control (ICAR) Gaps

IPC Gaps	2021 Q2-Q4 (n=534) <small>please note, IDOH ICAR tool was not utilized until Q2</small>
HCP are fit tested	<b>200 (37%)</b>
Antibiogram for 24 months	<b>129 (24%)</b>
Facility audits injection safety routinely	<b>110 (21%)</b>
Evidence based MDRO policies	<b>107 (20%)</b>
Staff do not eat/drink in the laundry room	<b>98 (18%)</b>
Respiratory etiquette signs posted	<b>96 (18%)</b>
Audits cleaning and disinfecting	<b>90 (18%)</b>
Hand Hygiene audits monthly (30 per 100 residents)	<b>82 (15%)</b>
EVS Manager rounds	<b>80 (15%)</b>
Laundry staff wear appropriate PPE	<b>79 (15%)</b>
Providers trained on antibiotic use annually	<b>76 (14%)</b>
Provides injection safety feedback	<b>71 (13%)</b>
Offsite laundry policies reviewed	<b>71 (13%)</b>
Current communicable disease list	<b>65 (12%)</b>
Nurses trained on antibiotic use annually	<b>63 (12%)</b>
Proper facemask extended use	<b>61 (11%)</b>



# ORT

## Notable Improvements 2020 Q4 to 2021 Q4



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# IPC Improvement Highlights (ORT)

## Q4 2020

85% of facilities preferred ABHR

93% of facilities have COVID-19 EPA registered disinfectants

75% of facilities' staff were donning and doffing in proper sequence



92% of facilities were cohorting appropriately

90% of facilities had a line list

65% of facilities were completing the recommended amount of HH audits monthly

## Q4 2021

99% of facilities preferred ABHR

99% of facilities have COVID-19 EPA registered disinfectants

93% of facilities' staff were donning and doffing in proper sequence

96% of facilities were cohorting appropriately

97% of facilities had a line list

77% of facilities were completing the recommended amount of HH audits monthly

**The IDOH 2020 LTC ORT used both years**

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**Resources to help  
decrease the gaps and  
increase the  
strengths!**



# Resources

- [IDOH Infection Prevention website](#)
- [The IDOH LTC Toolkit](#)
- [Project Firstline](#)
- [CDC's Long-term Care page](#)
- Your District IP



**District 1: 66 facilities**  
Janene Gumz-Pulaski RN,  
CIC [JGumzPulaski@isdh.in.gov](mailto:JGumzPulaski@isdh.in.gov)  
317-499-3877

**District 2 -72 facilities**  
Victor Zindoga RN  
[vzindoga@isdh.in.gov](mailto:vzindoga@isdh.in.gov)  
317-509-8964

**District 3- 72 facilities**  
Pam Bennett RN  
[pbennett@isdh.in.gov](mailto:pbennett@isdh.in.gov)  
317-476-0947

**District 4: 67 facilities**  
Angela Badibanga MPH  
[Abadibanga@isdh.in.gov](mailto:Abadibanga@isdh.in.gov)  
317-695-3335

**District 5: (shared 135)  
65 facilities each**  
Jason Henderson RN,  
[jahenderson@isdh.IN.gov](mailto:jahenderson@isdh.IN.gov)  
317-719-0776 and  
Deanna Paddack RN  
[dpaddack@isdh.in.gov](mailto:dpaddack@isdh.in.gov)  
317-464-7710

**District 6: 68 facilities**  
Tanya Canales RN  
[tcanales@isdh.in.gov](mailto:tcanales@isdh.in.gov)  
317-677-3583

**District 7: 60 facilities**  
Sara Reese RN  
[sreese1@isdh.in.gov](mailto:sreese1@isdh.in.gov)  
317-450-8049

**District 8: 72 facilities**  
Jennifer Brinegar RN,  
[jbrinegar@health.in.gov](mailto:jbrinegar@health.in.gov)  
317-903-5329

**District 9: 68 facilities**  
Mary Land RN  
[maland@isdh.in.gov](mailto:maland@isdh.in.gov)  
317-617-5034

**District 10: 63 facilities**  
Mary Enlow RN  
[menlow@isdh.in.gov](mailto:menlow@isdh.in.gov)  
317-727-8431

**Total 737 Facilities**



Jennifer Spivey MSN, RN, CNOR, CIC, FAPIC – Program Manager, Infection Prevention

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# THANK YOUs FROM FACILITIES

Thanks so much!

Thank you for your time and help.

Thank you again, we greatly enjoyed your visit and support!

Thank you

Thank you for this feedback. You gave us great insight and we will ensure we make the necessary adjustments.

Thank you. We appreciate your time.

THANK You!!!! Much appreciated.

Thank you for the guidance.

Thank you! We really appreciate you taking the time to come out to help us ensure we do everything in our power to combat this outbreak!

The senior communities are genuinely blessed to have you working with them to overcome all this. It has been a long couple of years; and we need you all, - like never before!!

Thanks for your report and visit! Appreciate your guidance and time.

Thanks so much! It was great to meet you!

Thank you so much! I appreciate you and love the knowledge and passion that you have !!

Your availability and knowledge as an Infection Control Specialist has been of great value to our team!

Thank you so much for visiting and providing information and recommendations. We appreciate your support.

Thank you - we appreciate your oversight and help.

THANK YOU  
FOR  
ALLOWING  
US INTO  
YOUR  
FACILITIES



Questions? Comments?