Inspiring Practice Change through the use of Audit Tools

Presented by:
Mandy Deeves - RN, BScN, MPH, CIC
Director, Programs & Projects
IPAC Canada

ipac Infection Prevention and Control Canada

pci Prévention et contrôle des infections Canada

Objectives

- To introduce the IPAC Canada audit toolkit, a set of tools used to evaluate IPAC practice
- Describe the audit and feedback process recommended as part of this toolkit
- Describe how audit tools which can be used to evaluate practice at a facility, increase awareness about IPAC and educate staff at all levels of the organization about practices in real situations.

Why Audit?

- Highlights areas of good performance
- Identifies opportunities for improvement (e.g. meet best practice)
- Facilitates consistency
- Increased public interest in prevalence of HAIs
- To increase in public confidence
- To be transparent at all levels in your facility
- Promotes quality care at all levels to patients

Source: Microsoft Clip Art

ipac — Infection Prevention and Control Canada

pci — Prévention et contrôle des infections Canada

The Audit Process

- A sound understanding of IPAC principles is needed for auditing
- Audit tools can provide you with selected criteria/best practices to consider relevant to the specific audit tool
- Facilitate standardization of audits carried out by various staff
- Relevant audit criteria can be used to review facility policies and procedures
- Practice develops your auditing skills!

Image Source: IPAC Canada

---

ipac — Infection Prevention and Control Canada
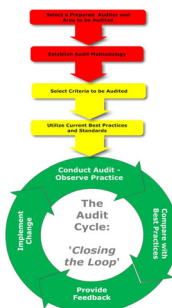
pci — Prévention et contrôle des infections Canada

IPAC Canada Audit Toolkit

www.ipaccanada.org

---

ipac — Infection Prevention and Control Canada

pci — Prévention et contrôle des infections Canada

Pre-audit Process

- Selection of a prepared auditor and area to be audited
- Establishment of the audit methodology
- Selection of criteria to be audited - must be reliable and reproducible
- Utilize best practice guidance and standards
- Conduct audit / observe practice

Conduct the audit

- Consists of 3 phases:
    1. Document reviews
    2. Staff interviews
    3. Observational tours

Document Review

- Accountability is defined for _____practices and quality improvement activities?
- Policies & procedures, manufacturer's guidelines are readily accessible and are being followed?
- Policies and procedures posted/readily accessible?
- Staff training parameters are met and training records are available?

Document Review:

- Documents are reviewed to ensure that there are policies and procedures in place relating to infection prevention and control

Image Source: IPAC Canada

Staff Interviews

- How is/are tasks being done, what equipment is being used, what are the potential IPAC risks etc.?
- What is the reporting process to report any IPAC problems?
- Do you have access to IPAC policies and procedures specific to the work you do? Where are they located?
- What _____training have you had and when did you last have it?

Staff Interviews:

- Employees provide subjective feedback to the auditor regarding knowledge and compliance with infection prevention and control policies and procedures

Image Source: IPAC Canada

Observational Tours

- What equipment is being cleaned, disinfected or sterilized?
- Is the proper workflow for housekeeping and reprocessing happening?
- Are sterilize, clean and dirty supplies being stored properly?
- Is what staff say is happening really happening? e.g. hand hygiene, tub disinfection.
- Are there activities going on that you were unaware of?

Observational Tours:
- Auditor objectively gathers information, validates the facts, and then compares them to standards used to measure infection prevention and control practices

Image Source: IPAC Canada

The Audit Process

In order to complete the auditing process successfully, **all three** of these auditing components must be performed during the auditing process

Image Source: IPAC Canada

11

Roles during the Audit

- Joint 'walkabouts'
  - Managers and IPAC
  - OH&S and IPAC
  - Environmental services and IPAC
  - Other combinations (e.g. clinical personnel)
- Communication on differences in expectations – makes these clearer

The Audit Cycle: 'Closing the Loop'

Image Source: IPAC Canada

Post audit analysis & feedback

- Summary of your findings including recommendations for improvement.
- Initial verbal report to the clinician / manager in charge
- Follow up with a written report, given to the area clinician/manager for action.

Image Source: IPAC Canada

Audit Summary Report

Name of Audit Tool: _____ Date of Audit: _____ Area Audited: _____

ELEMENT #	AUDIT DEFICIENCY	RECOMMENDED CORRECTIVE ACTION(S)	RISK LEVEL	AREA OF RESPONSIBILITY	REVIEW DATE	COMPLETION DATE	SIGNATURE

Image Source: IPAC Canada

Prioritize Deficiencies

- Done via consensus – get support for resolutions!
- Get the most appropriate, feasible and effective control measure based on collective experience!
- Someone else other than you likely has the accountability, responsibility and budget to resolve the issue!
- Reduces the risk of negative consequences as decisions will be based on collective experience!

Image Source: Microsoft Clip Art

Impact & Likelihood Deficiency Review

Image Source: IPAC Canada

Risk Level Matrix

LIKELIHOOD	IMPACT				
	Insignificant	Minor	Moderate	Major	Extreme
Almost Certain	MODERATE RISK	MODERATE RISK	HIGH RISK	CRITICAL RISK	CRITICAL RISK
Likely	LOW RISK	MODERATE RISK	HIGH RISK	CRITICAL RISK	CRITICAL RISK
Possible	LOW RISK	MODERATE RISK	MODERATE RISK	HIGH RISK	HIGH RISK
Unlikely	LOW RISK	LOW RISK	MODERATE RISK	MODERATE RISK	HIGH RISK
Rare	LOW RISK	LOW RISK	LOW RISK	MODERATE RISK	MODERATE RISK

Image Source: IPAC Canada

Action Planning Form

Critical Risk: STOP ACTIVITY!
- Risk management must be informed to initiate senior administrative notification
- Requires **immediate** written recommendations presented in person to Director and Manager
- Written action plans with timelines must be set
- **ACTION TIMELINE: Immediate action required**

High Risk: STOP ACTIVITY!
- Risk management must be informed to initiate senior administrative notification as required Requires written recommendations, preferably presented in person to Director and Manager within 48 hours
- Written action plans with timelines must be set
- **ACTION TIMELINE: 48 hours**

Moderate Risk:
- Written recommendations to Director and Manager
- Written action plans with timelines set
- **ACTION TIMELINE: 3 months**

Low Risk:
- Written recommendations to Manager
- Written action plans with timelines set
- **ACTION TIMELINE: 6 months or longer**

Image Source: IPAC Canada

Action Planning Form

- this form might not apply to all audits
- provides a useful method of summarizing deficiencies and follow-up required

---

"Closing the Loop"

Present your findings:

- Complete Audit Action Planning Form
- Meet with area manager, clinical department head and others who can facilitate improvements
- Present scope of audit, audit findings, references consulted and recommendations
- report results to a wider audience e.g. IP&C Committee, departmental meetings

---

In Closing

- Deficiencies are learning opportunities!!!!
- Staff engagement is key to success
- Auditing procedures can facilitate involvement and decision making/recommendations at all levels in the facility
- Continuous leadership involvement conveys the importance of the work being done and helps to showcase the successes to a broader audience