

Residents can be put at risk for infections if they are exposed to bloodborne pathogens or other potentially infectious materials as a result of an infection control breach. An example of a breach is when a single-use item (e.g., needle, syringe, lancing device, insulin pen) is used for more than one resident.

When you are made aware of a possible breach, take quick action to identify what happened, put measures in place to protect residents, communicate to stakeholders, and make sure follow-up occurs. The steps involved may not happen in sequence.

Point your phone's camera at the QR code for a CMS memo about infection control breaches and when you should contact the local health department.



Infection Prevention Checklist



1. Identify what happened: Describe the infection control breach

a. Questions you need to ask:

- What was the time frame of the breach?
- Which residents may have been impacted?
- What procedure or practice was happening when the breach occurred?
- What were the body fluids and areas of body involved in the breach?
 - If potential blood exposure was involved, has the bloodborne pathogens exposure protocol been implemented?

b. Things you need to do:

- Observe and talk to people who perform the procedure or practice to help you better understand how the breach happened.
- Look for opportunities to prevent this breach from happening again. Make immediate changes that could prevent this breach from re-occurring (e.g., education, change in practice).
 - If changes cannot be immediately made (e.g., product change, technology changes), seek leadership support.
- Review residents' medical records to confirm who was impacted and their baseline hepatitis B virus, hepatitis C virus, and HIV status.

2. Communicate: Notify and involve key stakeholders

a. Identify stakeholders who should be involved and engage them as early as possible.

- This may include providers, risk management, administration, local health department, and the Virginia Department of Health Office of Licensure and Certification.

- b. Discuss the risk for infection transmission in collaboration with the local health department, using the information you gathered in step 1 and additional resources from the health department or CDC.
 - c. Determine the next steps for notifying residents and performing bloodborne pathogen testing (if needed).
- 3. Follow-up with staff, residents, and caregivers**
- a. Create messages with stakeholders to notify staff, residents, and their caregivers.
 - b. Put together plans for post-exposure prophylaxis and follow-up testing (if needed).
 - c. Decide who will do testing, obtain consent, and/or perform counseling, if appropriate.
 - d. Prepare to handle media and legal issues.

Additional Resources



CDC – Injection Safety Patient Notification Toolkit:

<https://www.cdc.gov/healthcare-associated-infections/hcp/patient-notification-toolkit>

- Includes sample patient/resident notification letters, primary healthcare provider notification of testing recommendations letter, fact sheets and resources, and other risk communication materials

The Council for Outbreak Response: Healthcare-Associated Infections and Antimicrobial-Resistant Pathogens - Infection Control Breach Investigations:

<https://www.corha.org/wp-content/uploads/2022/10/Supplement-B.pdf>