Infection Prevention Quick Guide: Infection Control Breach

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?
         o 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).
         o 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 (https://www.cdc.gov/hai/outbreaks/steps_for_eval_ic_breach.html).

   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 - Evaluating an Infection Control Breach webpage:
https://www.cdc.gov/hai/outbreaks/steps_for_eval_ic_breach.html

CDC – Injection Safety Patient Notification Toolkit:
https://www.cdc.gov/injectionsafety/pntoolkit/index.html
- Includes sample patient/resident notification letters, primary healthcare provider notification of testing recommendations letter, fact sheets and resources, and other risk communication materials