Dialysis Assessment and Response Tool (DART) for Infection Prevention and Control

Training, Auditing, and Feedback

This form is intended to aid a DART facilitator in generally assessing areas where training, auditing, and feedback are performed by the facility. Additional questions allow for a more detailed assessment of specific areas (e.g., hand hygiene, environmental cleaning).

At a minimum, a more detailed assessment should be conducted if interviews or observations identify gaps in a particular area. For example, if gaps in environmental cleaning are identified during the DART assessment, a more detailed assessment of environmental cleaning training, auditing, and feedback, using the additional questions, might be warranted. In addition, even if observations do not identify a gap, reviewers could consider a more detailed assessment in one or more areas as part of the review.

Training Interview Questions

1. Does the facility provide job-specific education and training in the following areas? (*select all that apply*)

- ☐ Hand hygiene
- ☐ Use of personal protective equipment
- ☐ Cleaning and disinfection of environmental surfaces
- ☐ Cleaning and disinfection of reusable equipment
- ☐ Safe injection practices
- ☐ Point of care blood testing
- ☐ Catheter and other vascular access care
- ☐ Precautions for respiratory infections
- ☐ Water/Biomedical practices
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

Additional questions if doing a more detailed assessment:

1a. Which healthcare personnel (HCP) are targeted for training?

1b. How often is training conducted? (*select all that apply*)

- ☐ Upon hire, prior to the provision of patient care
- ☐ During orientation, after patient care has begun
- ☐ Annually
- ☐ Whenever new processes or products are implemented
- ☐ In response to outbreaks
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

1c. How does the facility provide the training? (*select all that apply*)

- ☐ Online course
- ☐ In-person lecture/direct instruction
- ☐ Demonstration/simulation
- ☐ HCP read a training manual
- ☐ Corporate/Large dialysis organization provided education and training
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

1d. What content is included in the training? (e.g., indications for hand hygiene, indications for personal protective equipment, aseptic technique)

1e. Following training, is HCP knowledge assessed (i.e., using a quiz or test)?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

1f. Following training, is HCP technique assessed (i.e., skill is demonstrated)?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

1g. Does the facility maintain records of training?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

Rationale:

Facilities should, "develop processes to ensure that all healthcare personnel understand and are competent to adhere to infection prevention requirements as they perform their roles and responsibilities."

Training should include all HCP who are assigned responsibility for a particular task. For example, all HCP should receive training on hand hygiene. However, training on point-of-care blood testing would only be provided to those responsible for performing such testing or for cleaning and disinfecting point-of-care blood testing equipment.

"Require training before individuals are allowed to perform their duties and at least annually as a refresher. Provide additional training in response to recognized lapses in adherence and to address newly recognized infection transmission threats (e.g., introduction of new equipment or procedures)."

Training should be job-specific and include information about why, how and when specific practices should be performed.

Competency-based assessment is defined as, "The verification of IP competency through the use of knowledge-based testing and direct observation. If direct observation is not included as part of a competency assessment, an alternative method to ensure that healthcare personnel possess essential knowledge, skills, and abilities should be used."

Sources:

https://www.cdc.gov/infection-control/hcp/core-practices/index.html

https://www.cdc.gov/healthcare-associated-infections/php/toolkit/icar.html

https://www.cdc.gov/dialysis-safety/media/pdfs/Dialysis-Core-Interventions-P.pdf

Notes

Auditing Interview Questions

2. Does the facility audit adherence to recommended practices in the following areas? If yes, how many audits of each observation type are collected each month (*select all that apply*)

- ☐ Hand hygiene = _____
- ☐ Dialysis catheter connection = _____
- ☐ Dialysis catheter disconnection = _____
- ☐ Dialysis catheter exit site care = _____
- ☐ AV fistula and graft cannulation = _____
- ☐ AV fistula and graft decannulation = _____
- ☐ Cleaning and disinfection of reusable patient care equipment = _____
- ☐ Dialysis station routine cleaning and disinfection = _____
- ☐ Medication preparation = _____
- ☐ Medication administration = _____
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____ = _____

Additional questions if doing a more detailed assessment:

2a. How does the facility audit adherence to recommended practices? (*select all that apply*)

- ☐ Direct observation of practices
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

2b. Who conducts these audits? (*select all that apply*)

- ☐ Facility director/administrator
- ☐ Infection preventionist
- ☐ Facility designated HCP in charge of infection prevention
- ☐ Registered nurse(s)
- ☐ Dialysis technician(s) or Licensed Vocational Nurses/Licensed Practical Nurse(s)
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*): _____

Rationale:

"Monitor adherence to infection prevention practices and infection control requirements." Audits are an important means of noting when additional training in response to lapses may be needed. Audits include, "Direct observation or monitoring of healthcare personnel adherence to job-specific IP measures." Formal audits include collection and aggregation of data to determine what proportion of time personnel are adhering to facilities policies and processes.

"Train performance monitoring personnel and use standardized tools and definitions"

"Hand hygiene observations

Perform observations of hand hygiene opportunities monthly and share results with clinical staff."

"Catheter/vascular access care observations

Perform observations of vascular access care and catheter accessing quarterly. Assess staff adherence to aseptic technique when connecting and disconnecting catheters and during dressing changes. Share results with clinical staff."

Audits should include assessment of critical practices.

CDC does not recommend a certain number of observations be collected. However, small sample sizes may result in bias and may not allow for valid assessment of improvements. In general, efforts should be made to assess the practices of all HCP who perform the particular practice being audited; such observations could count as their annual competency assessment.

Sources:

https://www.cdc.gov/dialysis-safety/media/pdfs/Dialysis-Core-Interventions-P.pdf

https://www.cdc.gov/dialysis-safety/hcp/tools/index.html#cdc_listing_res2-core-interventions-audit-tools-and-checklists

https://www.cdc.gov/infection-control/hcp/core-practices/index.html

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Feedback Interview Questions

3. Does the facility have a process for addressing nonadherence to recommended practices?

- ◯ Yes
- ◯ No
- ◯ Unknown
- ◯ Not assessed

Additional questions if doing a more detailed assessment:

3a. How is feedback about adherence or nonadherence to recommended practices provided to HCP? (*select all that apply*)

- ☐ Feedback not provided to HCP
- ☐ One to one when lapses are observed/just in time
- ☐ Aggregated data by HCP role (e.g., patient care technician [PCT] adherence to hand hygiene observations)
- ☐ Aggregated facility-level data by observation type
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*please describe*):

3b. To whom is audit data reported? (*select all that apply*)

- ☐ Medical director
- ☐ Front line HCP
- ☐ Facility director/administrator
- ☐ The Quality Assessment and Performance Improvement (QAPI) committee
- ☐ Unknown
- ☐ Not assessed
- ☐ Other (*specify*):

3c. How frequently are these data shared?

- ◯ Weekly
- ◯ Monthly
- ◯ Quarterly
- ◯ Unknown
- ◯ Not assessed
- ◯ Other (*specify*):

Rationale:

"Provide prompt, regular feedback on adherence and related outcomes to healthcare personnel and facility leadership."

Feedback is defined as, "a summary of audit findings that is used to target performance improvement." Immediate verbal feedback, while valuable, does not replace targeted performance improvement activities.

Perform observations of care and share results with clinical HCP.

Sources:

https://www.cdc.gov/dialysis-safety/media/pdfs/Dialysis-Core-Interventions-P.pdf

https://www.cdc.gov/infection-control/hcp/core-practices/index.html

https://www.cdc.gov/healthcare-associated-infections/php/toolkit/icar.html

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