



PROACTIVE ISOLATION

Presented by Tina Hornung, MSN, RN
Infection Preventionist, Story County Medical Center

BACKGROUND

Patients with suspected contagious conditions or symptoms should be placed in isolation until testing is complete proving otherwise.

Based on the CDC guidelines, isolation orders should be implemented to prevent the spread of infectious disease to other patients and staff.

Healthcare staff must follow protocols when caring for and communicating with patients, families and staff.

OBJECTIVES

- Preventing transmission of Infectious Agents
- Protect Patients and Staff
- Support Patient Care and Safety
- Ensure Compliance and Competency
- Optimize Resources
- Maintain Continuity of Care
- Support Infection Prevention Goals

ANALYSIS

These charts explain the risk and benefit of using Proactive Isolation. The Facility Charge Ranges show how our facility benefits financially from isolation orders. The reimbursement covers the cost of the PPE used and the time invested while a patient is in isolation.

The ED orders represent the percentage of time that the isolation orders were properly placed over the past fiscal year. We are constantly evaluating tools and methods to improve statistics and, most importantly, to protect our patients, staff, and community from contagious diseases.

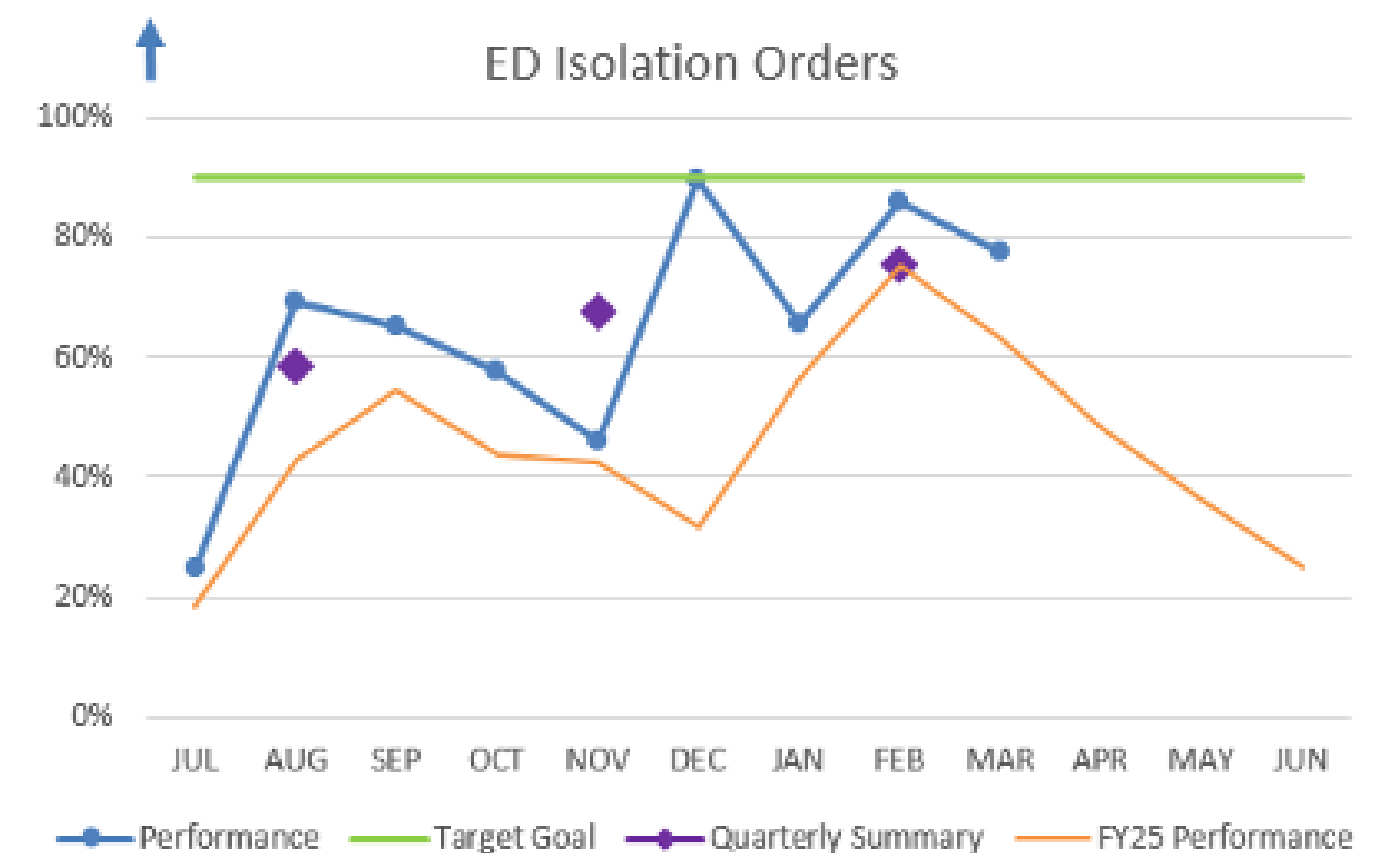
Facility Charge Ranges

From Score:	To Score:	Charge:
1	15	HC ED LEVEL 1
16	35	HC ED LEVEL 2
36	60	HC ED LEVEL 3
61	99	HC ED LEVEL 4
100	1000	HC ED LEVEL 5
1001	10000	HC CRITICAL CARE 30-74 MIN
-4000	0	HC NO CHARGE ED

Isolation ✓

This rule assigns 30 points, one time, when the Isolation Precautions Needed row is documented with a value of Yes or Isolation orders are placed.

Infection Prevention & Control



METRICS

- Process Metric
 - Patient Safety
 - Staff Safety
 - Financial

ACTIONS TAKEN

- Evaluated the need
- Communicate the rationale
- Implemented the plan
- Monitored as Quality Measures

NEXT STEPS

- Continue tracking compliance
- Review and adjust procedure as needed