Creating Healthy Work Environments 2019

Revision of Standard Operating Procedures for a Hospital-Based Infectious Disease Response Team

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Purpose: The purpose of this project is to determine the need to revise the current standard operating procedures (SOPS) for a hospital based infectious disease response team (IDRT) and involves the review of current standards of procedure, the addition of missing recommendations, and the update of existing standards to improve team preparedness.

Background/ Supporting Literature: The impetus for the project is that several gaps were identified in December 2017 during the IDRT statewide transport disaster drill. One gap is challenges in communication amongst the team members while in full Personal Protective Equipment (PPE). A second gap is the challenges associated with moving patients from the site to the decontamination zone. A third gap is difficulty for the team observer to see in the patient room to monitor the staff for ill effects of prolonged PPE wear and or breaches in PPE. A fourth, is lack of checklists which identify the supply items that are needed in the patient rooms, as well as supplies needed for the ambulance service. Some team members did not have a standard operating procedure, nor an updated procedure for performing the specific role. According to the U.S Department of Health and Human Services, National Guidance for Healthcare System Preparedness, (2012) many of the same identified gaps have been identified by other healthcare organizations and include lack of communication, issues with transportation, and lack of equipment and supplies.

As a result of these gaps, updates and recommendations will be made based on an assessment of the teams response to hospital wide drills during the fourth quarter of 2018 and the first quarter of 2019. The hospital IDRT team has been in existence since 2014 and this project is the first review of standard operating procedures (SOPS). SOP’s are the guidelines of operation in the event of an infectious disease outbreak for the IDRT. The SOP’s are vital to the provision of safe care for patients with infectious disease, necessary for self-protection of the team, and essential for the safety of the community. According to Schultz, Koenig, Whiteside, & Murray of the National Standardized All Hazard Disaster Core Competencies Task Force (2012), creating disaster curricula and training based on core competencies and performance objectives will confirm that medical personnel are prepared to treat patients and avert catastrophe.

Procedure: The infectious disease response team (IDRT) will be surveyed for performance measures utilizing a nine -question Likert scale survey and an additional open- ended question for comments. The team will be surveyed during the fourth quarter 2018 and first quarter 2019 after hospital IRDT simulations. A comparison will be completed using a t-test for between survey results, and qualitative answers analyzed for common responses for the open ended question. The intervention between the 4th and 1st quarter training is updating the standard operating procedures, focusing primarily on the checklists for donning and doffing of wet/dry Personal Protective Equipment (PPE).

The donning and doffing PPE wet/dry checklists are the most important guidelines for team safety. If something goes wrong in any of these checklist steps, the entire team risks the chance of exposure to a highly infectious disease.

Recommendations/Conclusions: With the comparison of the completed surveys and review of accepted standards it is anticipated the SOP’s will be updated with feedback from the team members and leaders. The updated SOPs will improve quality and safety of care provided to patients in the event of an infectious disease outbreak.
Title:
Revision of Standard Operating Procedures for a Hospital-Based Infectious Disease Response Team

Keywords:
Competencies, Disasters and Emergency Medicine

References:


Abstract Summary:

The purpose of this project, to determine the need for revisions of standard operating procedures for a hospital based infectious disease response team, following fourth quarter, and first quarter training. Experiences associated with the training will be assessed via electronic survey, using Likert scale responses and an open-ended question.

Content Outline:

Purpose: The purpose of this project is to determine the need to revise the standard operating procedures (SOPs) for a hospital based infectious disease response team (IDRT) and involves the review of current standards of procedure, the addition of missing recommendations, and the update of existing standards to improve team preparedness.

Methods: The IDRT will be surveyed for performance measures utilizing a nine-question Likert scale survey, with the last question an open-ended question for comments. The team will be surveyed during the fourth quarter training, 2018 and first quarter training, 2019. A comparison will be completed using a t-test for between survey results, and qualitative answers analyzed for common responses for question number ten.

The intervention between the 4th and 1st quarter training is updating the standard operating procedures, focusing primarily on the checklists for donning and doffing of wet/dry Personal Protective Equipment (PPE).

The donning and doffing PPE wet/dry checklists are the most important guidelines for team safety. If something goes wrong in any of these checklist steps, the entire team risks the chance of exposure to a highly infectious disease.

Results: Several gaps were identified in December 2017 during the IDRT statewide transport drill. One gap, lack of guidelines/SOP’s for team members job performance. According to the U.S Department of Health and Human Services, National Guidance for Healthcare System Preparedness, (2012) the same gaps have been identified by other healthcare organizations. The purpose of this project is to determine the need to revise the SOP’s, for the IDRT.

Conclusions: The team has been in existence since 2014 and this project is the first review of standard operating procedures (SOPs). Literature review indicates a need to update the SOP’s. Without the SOP’s the team cannot function as they should to provide safe care for patients of suspected highly infectious diseases. With the comparison of the completed surveys, it is anticipated the SOP’s will be updated with feedback from the team.

The aim of this project is to survey a hospital based infectious disease response team (IDRT) to determine a need for updates to SOP’s. In December 2017, the IDRT participated in an infectious disease statewide transport drill. A needs assessment/gap analysis was performed. There were several gaps identified in the analysis. One gap is challenges in communication among the team members while in full Personal Protective Equipment (PPE). A second gap, challenges with moving patients from the site to the decontamination zone. A third gap, difficulty for the team observer to see in the patient room to monitor the staff for ill effects of prolonged PPE wear and or breaches in PPE. A fourth, lack of checklists which identify the supply items that are needed in the patient rooms, as well as supplies needed for the ambulance service. A fifth, which is the focus of this quality improvement project, lack of standard operating procedures, specifically Donning and Doffing of PPE. According to the U.S Department of Health and Human Services, National Guidance for Healthcare System Preparedness, (2012) many of
the same gaps have been identified by other healthcare organizations and include lack of communication, issues with transportation, lack of equipment and supplies, and lack of SOP's. The SOP's are vital to the provision of safe care for patients with infectious disease, necessary for self-protection of the team, and for the safety of the community. According to Schultz, Koenig, Whiteside, Murray, National Standardized All Hazard Disaster Core Competencies Task Force (2012), creating disaster curricula and training based on core competencies and performance objectives will confirm that medical personnel are prepared to treat patients and avert catastrophe.

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**Professional Experience:** I am a Masters prepared nurse, with a background in Nursing Education. I have been a nurse for 37 years. I am currently a Doctorate of Nursing Practice (DNP) student, expected graduation date May, 2019. I am an adjunct nursing faculty member at a local University.

**Author Summary:** Monica is a Masters prepared nurse, with a focus in Education. She is an adjunct nursing professor, and an Advanced Holistic nurse, Board Certified. She is currently enrolled in a Doctorate of Nursing Practice program, expected date of graduation, May, 2019. Monica is passionate about the education of future nurses.