

ICAR Frequent Findings 2025- Ask the ICAR Team Panel

Jordan Taghon
Morgan Messer
Shea Griffith
Megan Compson



What We Do

-  Infection Control and Response Assessments (ICAR)
-  Educational Resources
-  Fit Testing Events
-  Skill's Fair Events
-  On-site or Remote Assistance
-  Free Consultation
-  Antimicrobial Stewardship Consulting

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Jordan Taghon, RN, CIC

Morgan Messer, RN

Shea Griffith, LPN

Megan Compson, LPN

Faye Salzer, RN



Emily Perry, PharmD

Meet the ICAR Team

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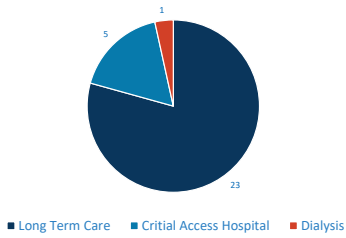
Infection Control and Response Visits (ICAR)

- Assist in assessing infection prevention practices
- Address identified gaps
- Guide quality improvement activities
- Content varies by setting and services provided
- Use additional tools depending on facility needs
- In-person or remote

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2025 ICAR Visits

2025 ICAR Visits by Facility Type



1. Hand Hygiene



- Hand hygiene is one of the more important interventions you can perform to prevent transmission of pathogens and other bugs

- Hand hygiene means cleaning your hands in key moments with:

- Water and soap
- Antiseptic hand rub, usually alcohol-based foam or gel

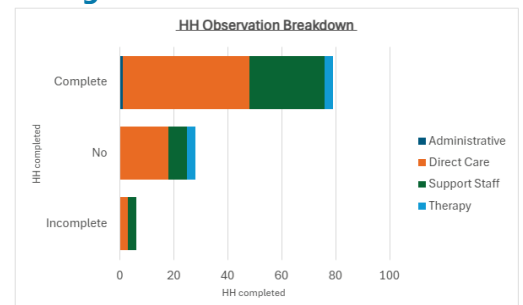
Most Common Gaps Identified



1. Hand hygiene
2. Cleaning & disinfection
3. Education & training for staff
4. Odds & ends

Hand Hygiene During ICARs

- Total of 113 audits
 - HH Completed: 79
 - HH Not Done: 34
 - HH Incomplete: 6

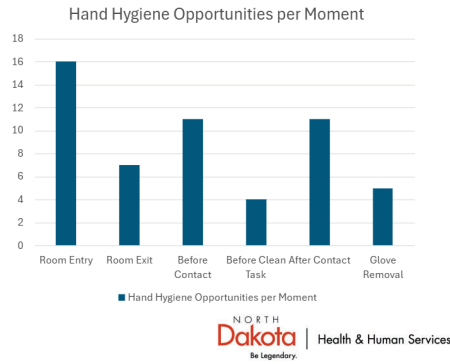


Moments of Hand Hygiene and Opportunities

• Top Three Opportunities per Moments of Hand Hygiene:

1. Room Entry – 16
2. Before Contact – 11
3. After Contact – 11

*Note: Numerous moments are recorded under one audit



2. Cleaning and Disinfection



- Reusable equipment not being cleaned and disinfected between uses
- Cleaning and disinfection products not being used according to their product label; for example, not following the correct contact time
- Potentially contaminated surfaces not being cleaned and disinfected after wound care activities are completed

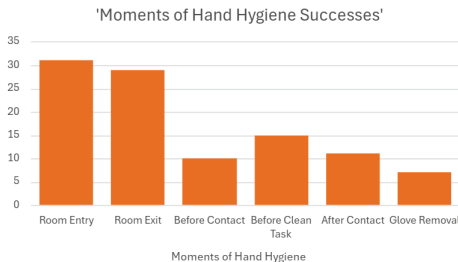
Moments of Hand Hygiene and Successes

• Top Three Successes per

Moments of Hand Hygiene:

1. Room Entry – 30
2. Room Exit - 29
3. Before Clean Task – 15

*Note: Numerous moments are recorded under one audit



Why Cleaning & Disinfecting Reusable Equipment is Important

- Reusable medical equipment can transmit pathogens between patients
- Microorganisms can survive on surfaces for hours to days
- Cleaning removes organic material; disinfection kills remaining germs
- Prevents healthcare-associated infections (HAIs)
- Required by CDC guidelines and facility policies
- Protects patients/residents, staff, and visitors

Importance of Using Cleaning & Disinfection Products According to the Product Label

- Product labels provide required instructions for safe and effective use
- Correct contact time is necessary to kill targeted microorganisms
- Insufficient contact time reduces disinfection effectiveness
- Overuse or misuse can damage surfaces and equipment
- Required by EPA, CDC, and facility policies
- Supports patient/resident safety and infection prevention



Identified Gaps

Gaps	Observed	Importance
Training during outbreaks	Less consistently conducted	Outbreaks are high-risk times needing urgent refreshers
Post-training skill checks	Not universal	Without checking skills, training may not lead to safe practice
Variability in "other" training methods	"other" methods, unclear details	Lack of standardization reduces training effectiveness

3a. Education and Competency

Training Frequency

- Training commonly occurs:
 - Upon hire
 - When new processes/products are implemented
 - Annually



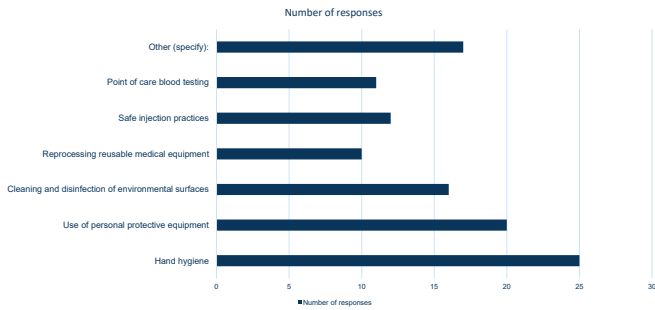
3b. Audit & Monitoring Gaps

Areas most audited:

- Hand Hygiene
- Use of Personal Protective Equipment (PPE)



Audit by practice area



4a: Laundry Handling

Common Gap	Importance	Corrective Actions
Sharps container not available in the soiled laundry area	Increases risk of needlestick injuries to laundry staff; possibly bloodborne pathogen exposure	Install approved sharps containers in all soiled laundry areas
Hand cleaning stations not available in soiled & clean laundry areas	Increases risk of cross-contamination between soiled and clean textiles	Install handwashing sinks or alcohol-based hand sanitizer in these areas
Not monitoring healthcare textile quality assurance measures	Gaps go unnoticed and unresolved	Implement routine audits and assign accountability to staff



4. Odds & Ends Gaps

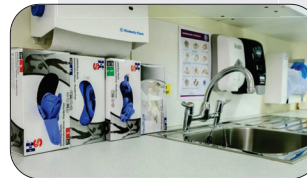


These issues may seem minor, but collectively they increase the risk for cross-contamination and healthcare-associated infections

- Laundry handling
- Patient storage of supplies
- Dietary areas

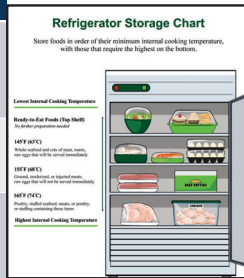
4b: Patient/Resident Supply Storage

Common Gap	Importance	Corrective Action
Patient/resident care supplies stored underneath sinks	Water may leak or the area may develop moisture and contaminate supplies	Relocate all supplies. Post signage on the cabinet as "no patient/resident supply storage"
Patient/resident care supplies stored in the splash zone	Risk of contamination from water splashes, aerosols, and droplets	Store all patient/resident care supplies out of the 3-foot splash zone



4c: Dietary Areas

Common Gap	Importance	Corrective Action
Placement of food in refrigerator	Risk of cross-contamination between raw and ready to eat foods	Store food by proper hierarchy
Dry storage- food placed on floor	Increase risk of contamination from the floor	Store all dry goods at least 6 inches off the floor
Corrugated cardboard boxes used for fresh produce storage	Cardboard can harbor bacteria, moisture, pests, and mold	Remove produce from boxes and store in a wipeable container



Thank you!

Questions?

Email us at hhsicar@nd.gov

ND Prevention App

Scan the QR to download the app!

