



Infection Surveillance should not be time consuming or difficult to implement. As a requirement of Federal Regulation F880 (infection prevention and control or IPC), it's the most-cited violation year after year, topping the list yet again in 2020.

AMS Infection Prevention Partners is a clinical practice that builds Infection Surveillance platforms for F880 compliance, and – more importantly – to keep your residents and staff safe from all infections.

Successful surveillance identifies communicable diseases and infections before they spread. AMS has a unique approach to building and maintaining continuous surveillance systems to protect our seniors in long-term care. Our certified Infection Preventionists (IPs) perform both Process and Outcome Surveillance onsite at regular intervals. That intelligence is analyzed and used to implement your facility-specific infection prevention plan, focusing on your highest risks which we help to identify.

PROCESS SURVEILLANCE

Every quarter our IPs review all IPC processes, policies, QA plans and antibiotic stewardship policies, and observe all nursing home staff to determine a facility's compliance.

OUTCOME SURVEILLANCE

AMS utilizes PCR-based laboratory diagnostics to collect patient infection risk data, which is assessed by our Infectious Disease physicians and proprietary infectious disease analytics. The analyzed clinical data provides an aggregate report on your facility's infection risks, generates an antibiogram, antibiotic prescribing recommendations, and more.

DATA ANALYSIS, DOCUMENTATION, and REPORTING

Insights learned from our onsite process surveillance and outcome surveillance are assessed by AMS, then we recommend a 90-day Quality Assurance (QAPI) IPC plan. Over the 90 days, our IPs mentor, educate and guide your IP to your facility-specific QAPI plan successes.

Two unique approaches to Outcome Surveillance: AMS provides both Targeted and Comprehensive Infection Surveillance*. Your clinical leadership chooses which is best for your resident population.

COMPREHENSIVE SURVEILLANCE - STERESIS

- Identifies all infection risks among all residents; conducted quarterly
- PCR-based diagnostics targets 37 respiratory pathogens and an antibiotic gene resistance test
- Diagnostic testing data maximizes analytics, reporting and QAPI infection prevention plans

TARGETED SURVEILLANCE - PINPOINT

- Generally focused on symptomatic residents only
- Employs a "Decision Tree": PCR-based testing model beginning with COVID-19; if negative, then to respiratory viral pathogens; if negative, then to full respiratory panel testing including an antibiotic gene resistance test; if still negative, then contact the medical director with other testing recommendations

Note: Facilities that choose Pinpoint must choose AMS lab partners for their COVID-19 testing

* See the CDC's National Health and Safety Network infection surveillance recommendations, January, 2020

No-cost options are available. Unsure which plan is right for your LTC facility? [Drop us a line.](#) We're happy to help.