Guidance and responses were provided based on information known on 7/12/2023 and may become out of date. Guidance is being updated rapidly; users should look to CDC and NE DHHS guidance for updates.

Infection Prevention Updates for Acute Care and Outpatient Settings

July 12, 2023

ICAP
Infection Control Assessment and Promotion Program

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

Presenters & Questions and Answer Session

Presenters today are:

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Moderated by Margaret Deacy mdeacy@nebraskamed.com

Please use the Q&A box in the webinar platform to type a question to be read aloud. If your question is not answered during the webinar, please e-mail it to nebraskaicap@nebraskamed.com or call Monday – Friday 8:00 am – 4:00 pm CST to speak with one of our Infection Preventionists.

Slides and a recording of this presentation will be available on the Nebraska ICAP website
https://icap.nebraskamed.com/events/webinar-archive/

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1.0 Nursing Contact Hour is awarded for the LIVE viewing of this webinar

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In order to obtain either contact hour, you must be present for the entire live webinar and complete the post webinar survey

No conflicts of interest were identified for any member of the planning committee, presenters or panelists of the program content

This CE is hosted by Nebraska Medicine and UNMC along with Nebraska ICAP and Nebraska DHHS

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FACULTY

The faculty have nothing to disclose: Jody Scebold, EdD, MSN, RN, CIC Jenna Preusker, Pharm.D., BCPS

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The planning committee members have nothing to disclose:

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Margaret Deacy	Rebecca Martinez, BA, BSN, RN, CIC	Chris Cashatt, RN, BSN, CIC	Sarah Stream, MPH, CDA, FADAA

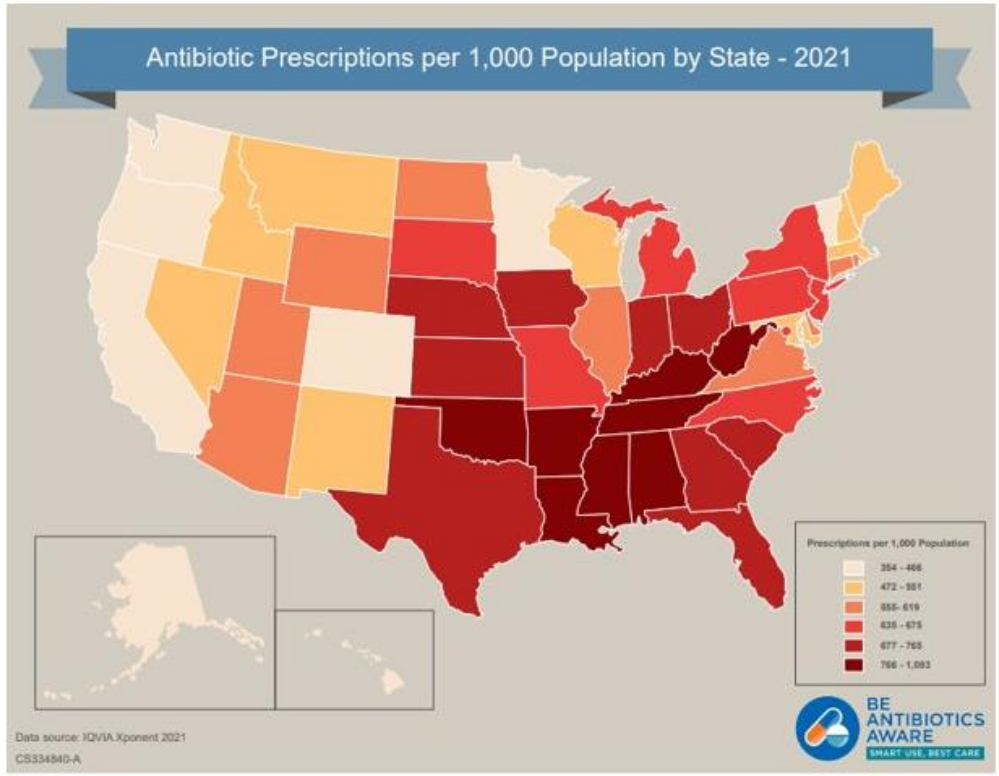
CDC and Nebraska ASAP Be Antibiotics Aware (BAA) Educational Effort

Jenna Preusker, PharmD, BCPS, BCIDP
Nebraska ASAP Pharmacy Coordinator

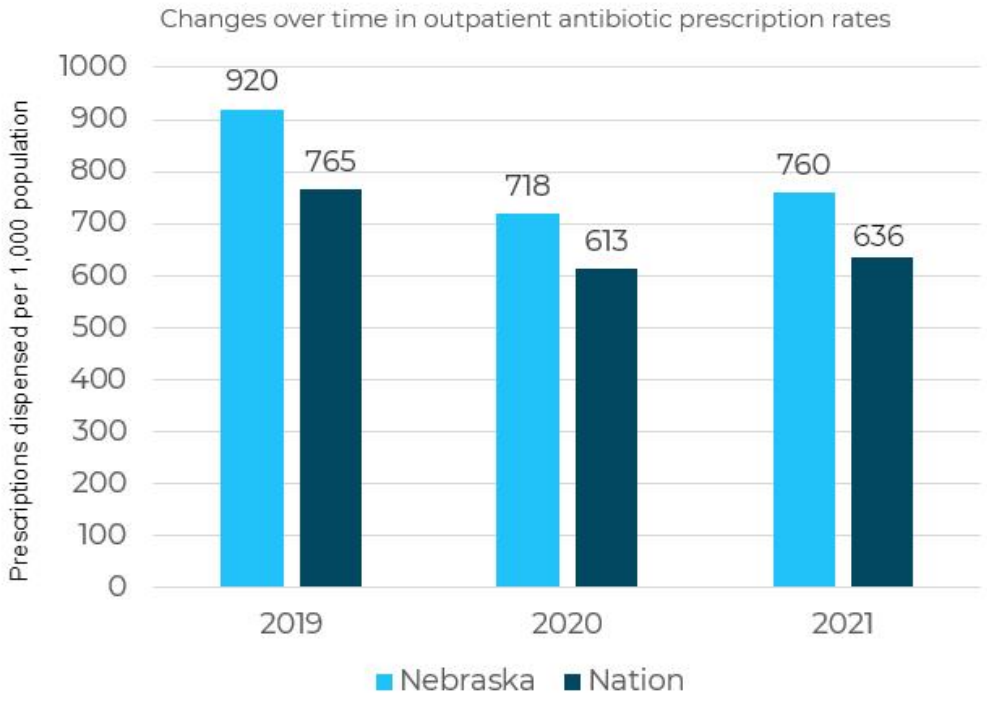
BE ANTIBIOTICS AWARE
SMART USE, BEST CARE

ASAP
Nebraska Antimicrobial Stewardship Assessment and Promotion Program

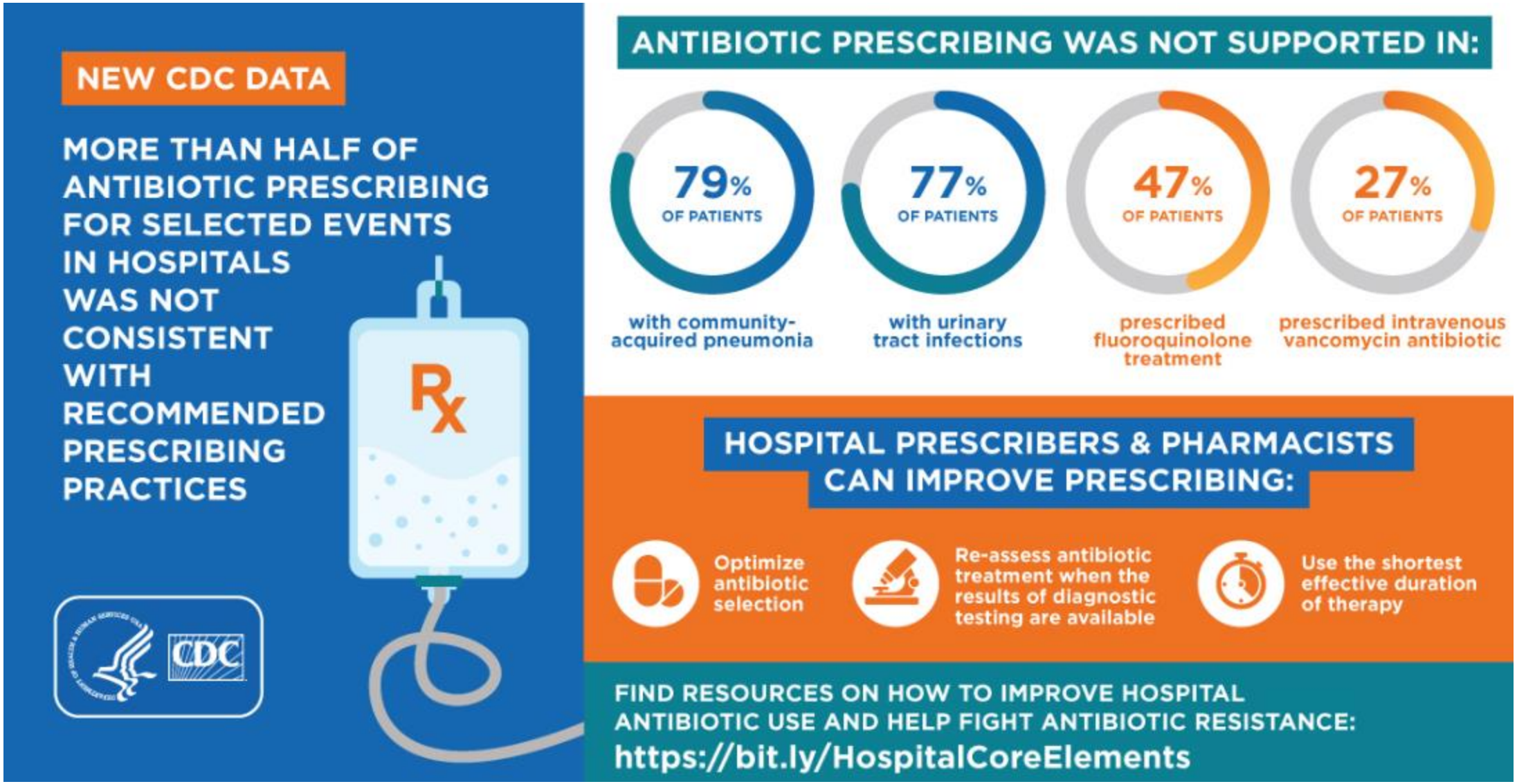
Community Antibiotic Prescribing Rates Nebraska, 2021



https://www.cdc.gov/antibiotic-use/data/report-2021.html



https://arpsp.cdc.gov/profile/geography/nebraska



Core Elements of Hospital Antibiotic Stewardship Programs | Antibiotic Use | CDC

CDC and Nebraska ASAP
Be Antibiotics Aware (BAA) Educational Effort

- **By raising knowledge and awareness, and motivating behavior change among intended consumer and healthcare professional (HCP) audiences, the Centers for Disease Control and Prevention (CDC) Be Antibiotics Aware (BAA) national educational effort seeks to:**
  - **Optimize antibiotic prescribing and use**
  - **Improve patient safety and healthcare quality**
  - **Combat antibiotic resistance**

- **CDC is conducting a targeted pilot assessment intervention, including a large-scale paid media buy and partner promotion over a 3-month period in the state of Nebraska (beyond the ongoing national initiative).**

Be Antibiotics Aware: Smart Use, Best Care | Patient Safety | CDC

BE ANTIBIOTICS AWARE
SMART USE, BEST CARE

ASAP

CDC and Nebraska ASAP
Be Antibiotics Aware (BAA) Educational Effort

- **Based on primary practice setting, CDC will send relevant hardcopy BAA materials to you FREE of charge.**
  - **If you are interested in receiving these educational materials, please fill out the survey.**
  - **Requests will be sent by Nebraska ASAP to the CDC, who will send copies of requested educational materials directly to your mailing address.**
  - **Please note the delivery time to receive materials is about 4 weeks from placing the order.**

- **We appreciate your support with this important project!**

You may open the survey in your web browser by clicking the link below:
Be Antibiotics Aware (BAA) Educational Effort

If the link above does not work, try copying the link below into your web browser:
https://redcap.nebraskamed.com/surveys/?s=CLELJN3PEDFJ4ATA

Be Antibiotics Aware: Smart Use, Best Care | Patient Safety | CDC

CDC & Nebraska ASAP Educational Effort
Acute Care Resources

Please select your primary setting type

* must provide value

- (●) Acute Care
- ( ) Long-Term Care
- ( ) Urgent Care/Outpatient Clinic
- ( ) Dental Office
- ( ) Community Pharmacists

Please indicate the number of copies you need for the following:
Across all audiences (Community dwelling older adults, 65+ / Healthy Adults who visit Urgent Care, ages 18-64 / Family Caregivers of nursing home (long-term care) residents)
o Viruses/Bacteria Chart (English)

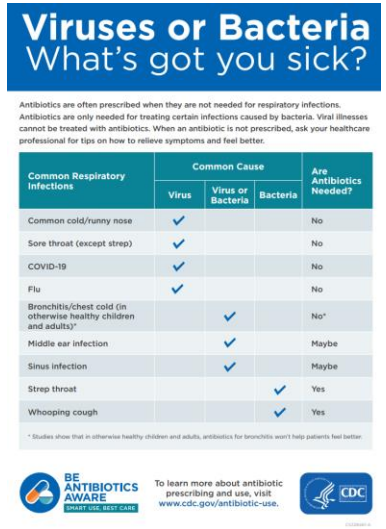
* must provide value

Please indicate the number of copies you need for the following:
Across all audiences (Community dwelling older adults, 65+ / Healthy Adults who visit Urgent Care, ages 18-64 / Family Caregivers of nursing home (long-term care) residents)
o Antibiotics Aren't Always the Answer Brochure (English)

* must provide value

Please indicate the number of copies you need for the following:
Hospitalists
o Hospital Inpatient Fact Sheet

* must provide value



[Be Antibiotics Aware (BAA) Educational Effort (nebraskamed.com)]

ASAP

CDC & Nebraska ASAP Educational Effort
Outpatient/Urgent Care Resources

Please select your primary setting type

* must provide value

- ○ Acute Care
- ○ Long-Term Care
- ◉ Urgent Care/Outpatient Clinic
- ○ Dental Office
- ○ Community Pharmacists

Please indicate the number of copies you need for the following:
Across all audiences (Community dwelling older adults, 65+ / Healthy Adults who visit Urgent Care, ages 18-64 / Family Caregivers of nursing home (long-term care) residents)
o Viruses/Bacteria Chart (English)

* must provide value

Please indicate the number of copies you need for the following:
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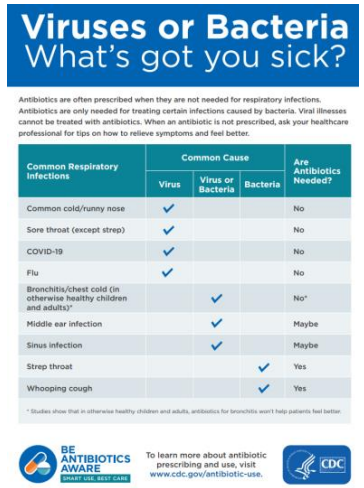
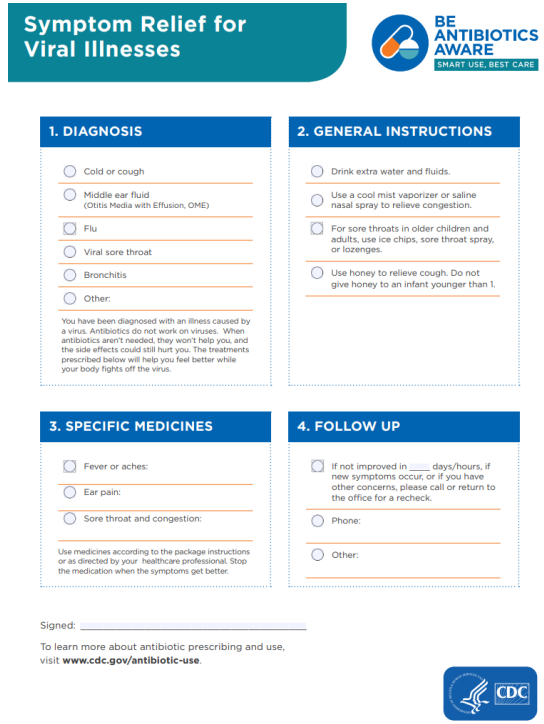
o Antibiotics Aren't Always the Answer Brochure (English)

* must provide value

Please indicate the number of copies you need for the following:
Healthy Adults who visit Urgent Care, ages 18-64
o Symptom Relief for Viral Illnesses Rx Pad (English)

* must provide value





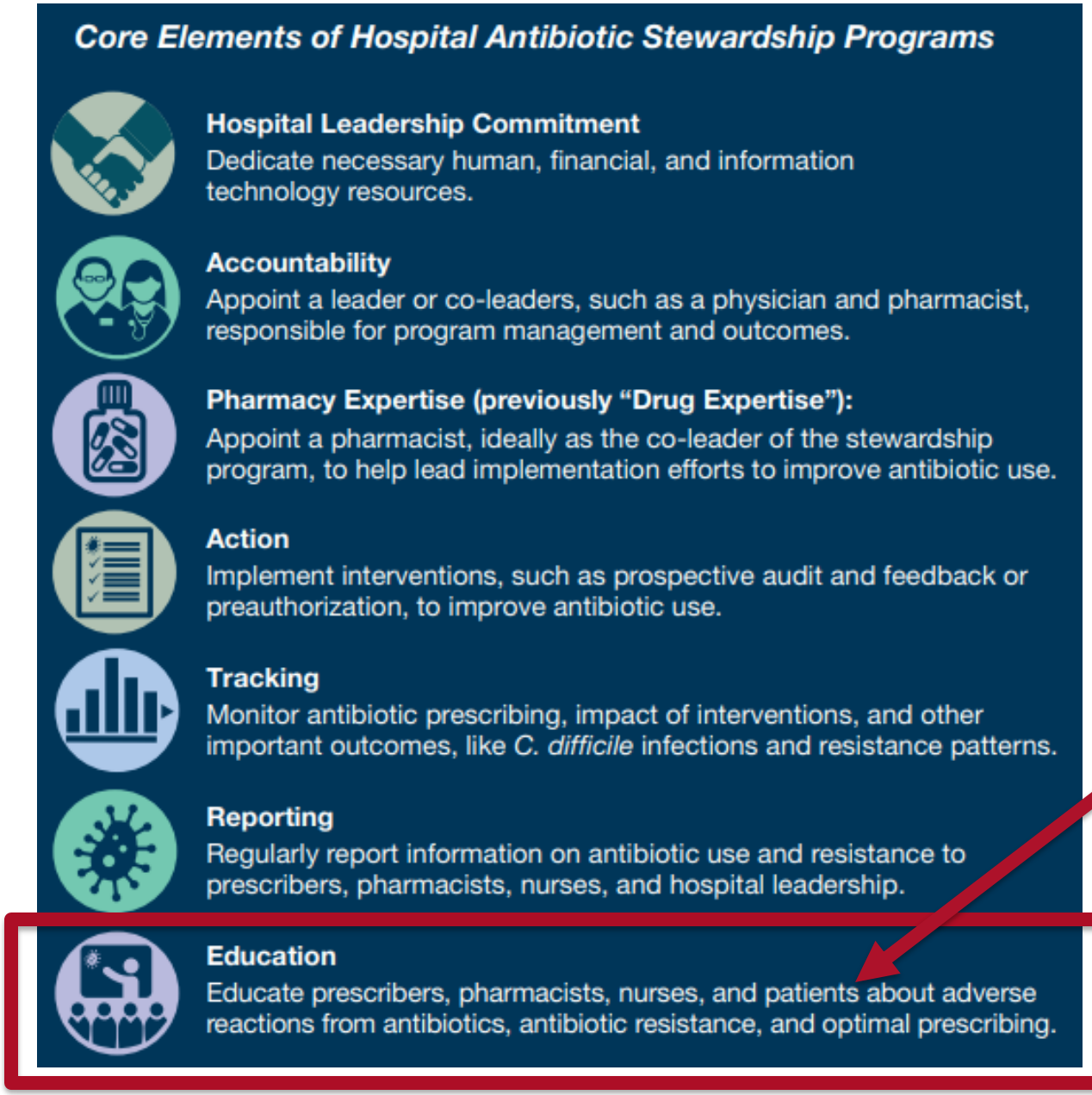
Be Antibiotics Aware (BAA) Educational Effort (nebraskamed.com)

ASAP

Be Antibiotics Aware (BAA) Educational Effort Other settings

- **Long-Term Care**
  - ✓ VirusOrBacteria-Original-P.pdf (cdc.gov) (For LTC caregivers/family)
  - ✓ Antibiotics Aren't Always the Answer (cdc.gov)
  - ✓ Antibiotic use: Nursing home (cdc.gov)
  - ✓ VirusOrBacteria-NH-P.pdf (cdc.gov) (For LTC residents and caregivers/family members)
- **Dental Offices**
  - ✓ Antibiotic Use For A Safe Dentist Visit (cdc.gov)
- **Community Pharmacies**
  - ✓ VirusOrBacteria-Original-P.pdf (cdc.gov) (For LTC caregivers/family)
  - ✓ Antibiotics Aren't Always the Answer (cdc.gov)
  - ✓ Symptom Relief for Viral Illnesses (cdc.gov)

Survey Link: Be Antibiotics Aware (BAA) Educational Effort (nebraskamed.com)



[Core Elements of Hospital Antibiotic Stewardship Programs | Antibiotic Use | CDC]

Questions and Answer Session

Please use the QA box in the webinar platform to type a question

Attendees also have the option to upvote other attendee's questions

Questions will be read aloud by the moderator

A recording of the discussion will be made available on the Nebraska ICAP website
https://icap.nebraskamed.com/events/webinar-archive/

If time does not allow and we are unable to answer your question, please email us at NE ICAP or call 402.552.2881

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Lacey Pavlovsky, MSN, RN, CIC, LTC-CIP
Juan Teran Plasencia, MD

Observing and Auditing in Sterile Processing: Instrument Preparation and Sterilization

Jody Scebold, EdD, MSN, RN, CIC
Infection Preventionist, NE ICAP

ICAP
Infection Control Assessment and Promotion Program

NE ICAP Webinar Series on SSI and SPD

Nebraska ICAP is here for you and in case you missed it, we have our recent webinar slides and recordings available on-line. The below are some recent webinars related to SSI prevention and the sterile processing department with lots of helpful tips on observing and auditing.

Acute and Outpatient Facilities

2.8.23 Acute & OP – SSI Prevention

Slide deck

Acute and Outpatient Facilities

6.22.22 Acute & OP – Surgical Site Infections

Slide deck

Acute and Outpatient Facilities

2.22.23 Acute & OP – SSI: Intraoperative Anesthesia Infection Prevention Audit Tool

Slide deck

Acute and Outpatient Facilities

4.12.23 Acute & OP – Observing and Auditing in the OR – Opening Sterile Supplies

Slide deck

Acute and Outpatient Facilities

4.26.23 Acute & OP – Observing and Auditing in Sterile Processing

Slide deck

https://icap.nebraskamed.com/events/webinar-archive/

SPD: Policy and Procedure Review

- Staff Orientation, Education, and Annual Competencies
- Staff Attire (facility provided scrub tops/bottoms/jackets and employee-owned shoes)
- PPE (decontamination vs. clean side or transition from dirty to clean in one-room set-up)
- Hand and Wrist Jewelry/Fingernails
- Environmental (cleaning frequency including walls/vents/ceilings, responsibilities (EVS vs SPD staff))
- Utilities (HVAC- frequency of monitoring temp, humidity, air exchanges, air pressure)
- Water Quality ("critical water")
- Steam Quality/Purity
- Handwashing (soap/H2O and ABHR available)
- Eye Wash Stations

SPD: Policy and Procedure Review (cont.)

- Equipment Maintenance and Testing (per cycle/load, daily, weekly, monthly, annual)
- Instructions for Use (equipment, instruments, consumables)
- Instrument Repair Process
- Chemical Indictor/Integrators and Biological Monitoring
- Implants (including BI monitoring)
- Loaner Instruments (including pre-inventory of instrumentation/implants, timeframe before use (e.g., 48 hours before scheduled case, IFU for processing, unique rigid container system (if applicable))
- Traffic Control (including vendor accessibility/limitations)
- Point of Use Decontamination (to include OR/Procedure/Clinic responsibility)
- Manual and Automated Cleaning and Disinfection
- Transport and Receiving
- Process Failures and Recalls
- Instrument Identification (etching/barcode labels/instrument tape)
- Storage

CDC ICAR Resources

CDC Infection Control Assessment and Response ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Module 5: High-Level Disinfection and Sterilization Facilitators Guide

- Interview questions
  - Environmental assessment
    - Types of reprocessing (HLD/sterilization) (onsite or offsite)
  - Policies/Procedures:
    - Reprocessing errors
    - Reprocessing equipment maintenance per IFUs
- Sterilization observation questions
  - IFU availability, adequate instrument inventory, hand hygiene, PPE, separation of soiled/clean workspaces, enzymatic use, brushes, appropriate wrap/package for sterilization, chemical and biological indicators, instrument tracking (load numbers/date), documentation/sterilization logs, IUSS, inspection/integrity of sterilized items

CDC Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Section 3: Observation Form- High-Level Disinfection and Sterilization

- Sterilization observation questions (same as above)

Additional CDC ICAR Resources

- Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Module 1: Training, Auditing and Feedback Facilitator Guide
  - General assessment for staff training (all staff, not focused on SPD)
  - Does not address ongoing training, education, competencies, and respective documentation. Department can adapt form to reflect evidence-based guidelines

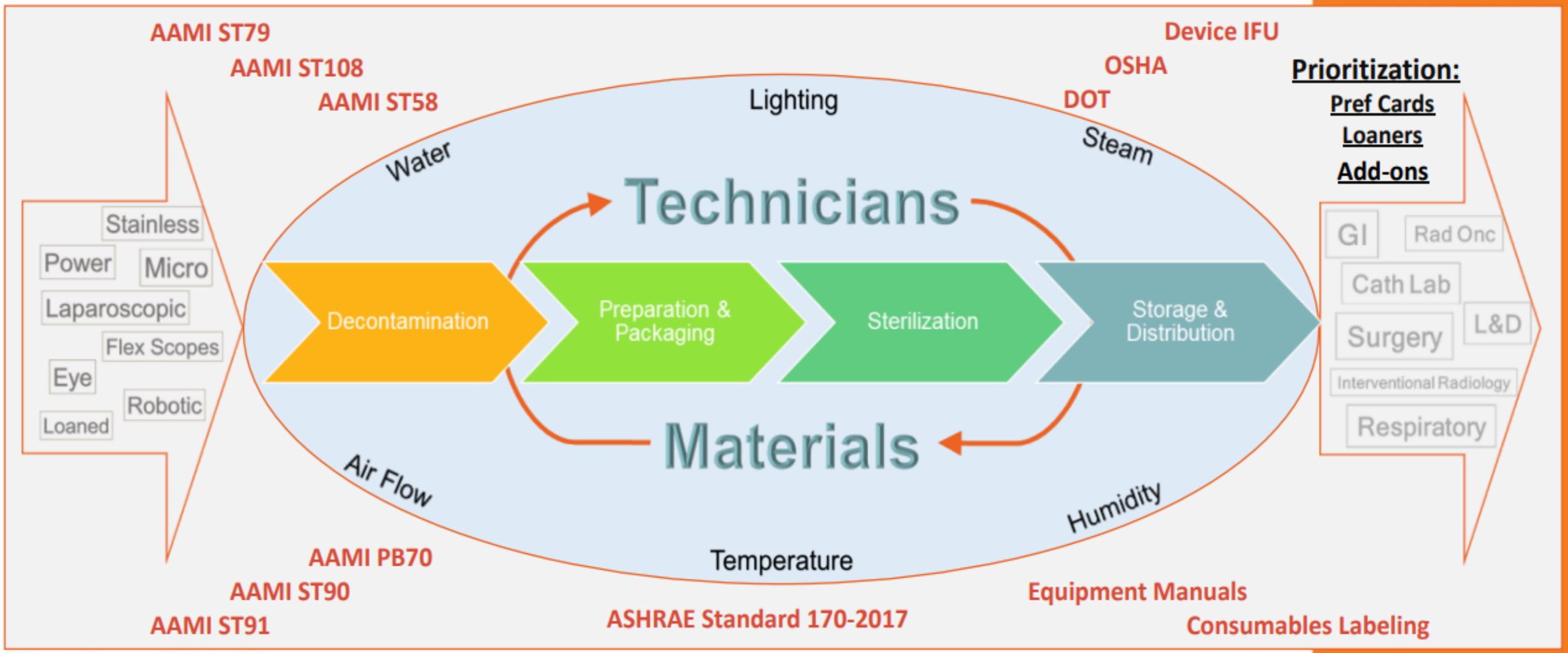
- Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Module 4: Environmental Services Facilitator Guide
- Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Section 3: Observation Form - Environmental Services (EVS)
  - Focuses on patient care areas; however, questions can be adapted to reflect sterile processing

- Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Module 2: Hand Hygiene
- Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings: Section 3: Observation Form- Hand Hygiene

SPD Operating Overview

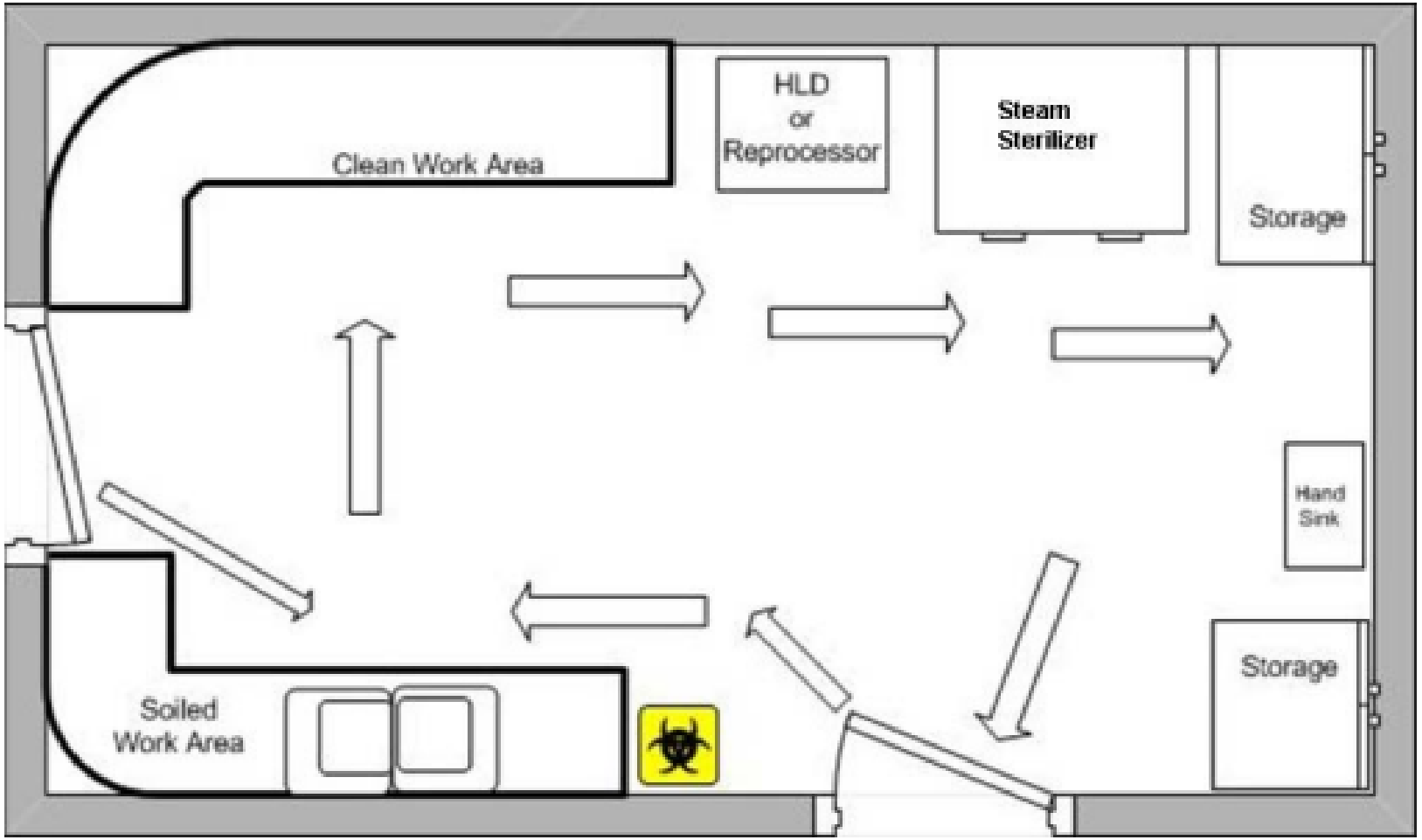
#APIC2023

Sterile Processing is a Complex Production and Compliance Environment



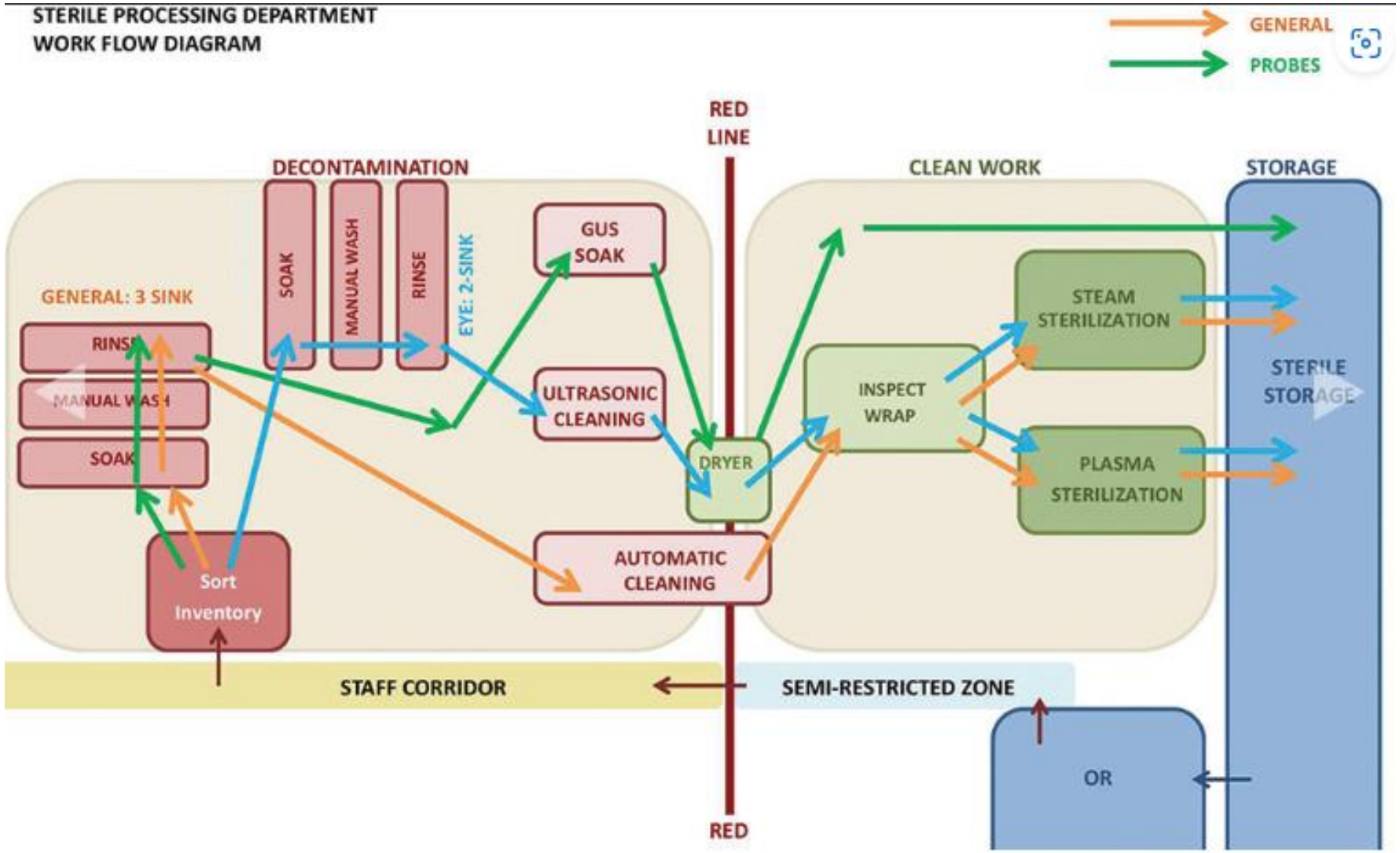
Eccleston, R., & Hall, H. (2023). *Five crucial domains for sterile processing quality outcomes*. Presentation conducted at the conference of the Association for the Professionals in Infection Control, Orlando, FL.

Workflow Patterns: Single Room



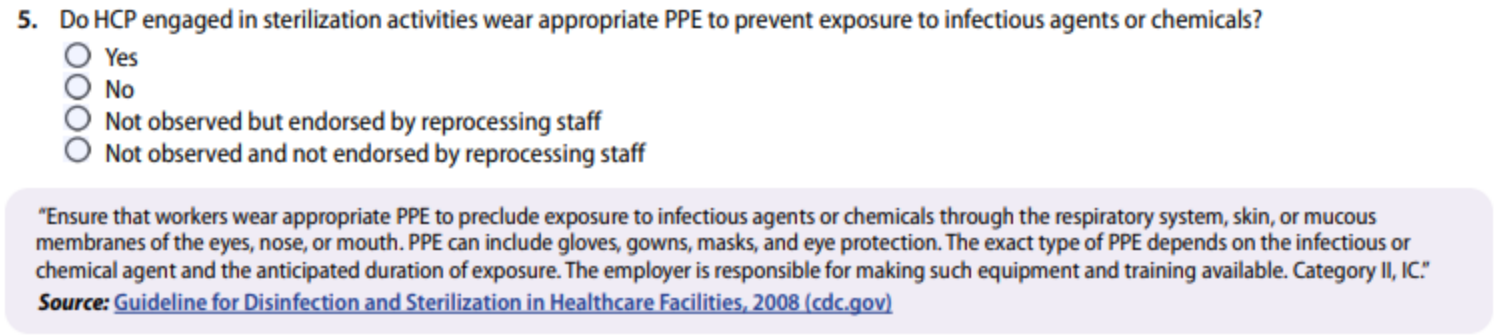
ANSI/AAMI ST79

Workflow Patterns: Two Room



MCD Medical Construction & Design

Personal Protective Equipment



5. Do HCP engaged in sterilization activities wear appropriate PPE to prevent exposure to infectious agents or chemicals?
   - ○ Yes
   - ○ No
   - ○ Not observed but endorsed by reprocessing staff
   - ○ Not observed and not endorsed by reprocessing staff

"Ensure that workers wear appropriate PPE to preclude exposure to infectious agents or chemicals through the respiratory system, skin, or mucous membranes of the eyes, nose, or mouth. PPE can include gloves, gowns, masks, and eye protection. The exact type of PPE depends on the infectious or chemical agent and the anticipated duration of exposure. The employer is responsible for making such equipment and training available. Category II, IC."

Source: Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 (cdc.gov)

What is missing?

- Does not delineate PPE for dirty and clean side (two-room) or workflow for dirty to clean in a single-room
- Does not account SPD staffing structure (e.g., OR staff fulfilling SPD roles, dedicated SPD staff for decontamination area versus clean side)

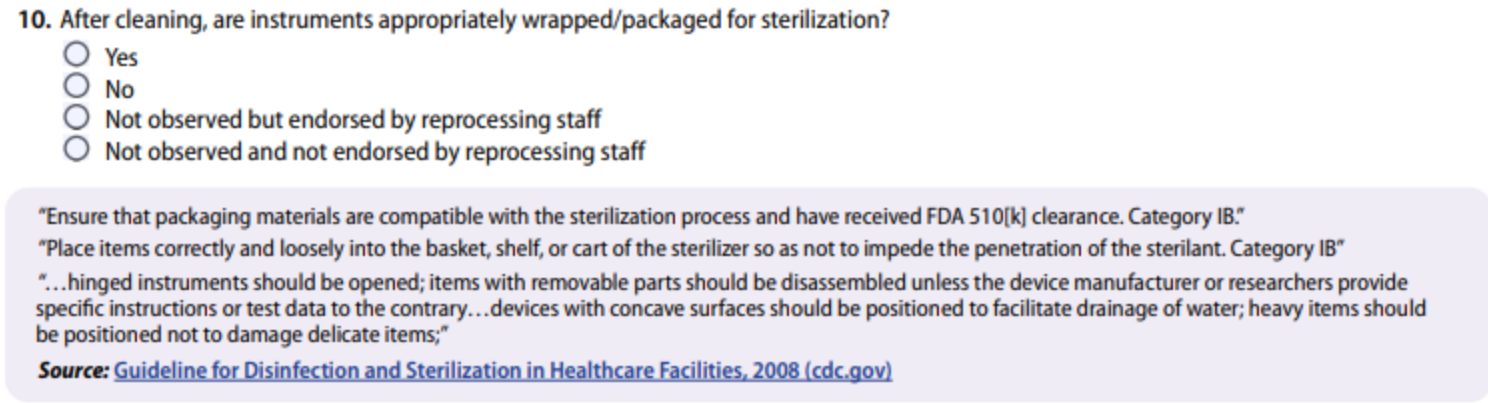
What is occurring within your facility?

- Policies and procedures outline PPE requirements for SPD
- Centralized SPD department or is sterilization/HLD occurring in multiple locations (e.g., off-site ASC or clinics)

Additional resources to assist in identifying PPE for SPD

- AAMI ST79 (AAMI ST 58 for HLD)
- Healthcare Sterile Processing Association (HSPA)
- AORN, SGNA

Wrapped/Packaged for Sterilization



10. After cleaning, are instruments appropriately wrapped/packaged for sterilization?

- ○ Yes
- ○ No
- ○ Not observed but endorsed by reprocessing staff
- ○ Not observed and not endorsed by reprocessing staff

"Ensure that packaging materials are compatible with the sterilization process and have received FDA 510[k] clearance. Category IB."

"Place items correctly and loosely into the basket, shelf, or cart of the sterilizer so as not to impede the penetration of the sterilant. Category IB"

"…hinged instruments should be opened; items with removable parts should be disassembled unless the device manufacturer or researchers provide specific instructions or test data to the contrary…devices with concave surfaces should be positioned to facilitate drainage of water; heavy items should be positioned not to damage delicate items;"

Source: Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 (cdc.gov)

What is missing?

- Mention of referencing IFUs for instrumentation, packaging/containers, sterilizers

What is occurring within your facility?

- What types of sterilization processes are occurring within your facility?
- Are the instruments prepared and packaged according to the IFU in addition to the IFU for the type of package/wrap/container and sterilizer?
- What accessories are utilized (e.g., inserts or tip protectors)?

Additional resources

- IFUs: instrumentation, packaging/containers, sterilizers
- AAMI ST79 (AAMI ST 58 for HLD)
- Healthcare Sterile Processing Association (HSPA)

Sterilization Logs

15. Are sterilization logs current and complete (include results from each load)?

- ○ Yes
- ○ No
- ○ Not observed but endorsed by reprocessing staff
- ○ Not observed and not endorsed by reprocessing staff

"For each sterilization cycle, record the type of sterilizer and cycle used; the load identification number; the load contents; the exposure parameters (e.g., time and temperature); the operator's name or initials; and the results of mechanical, chemical, and biological monitoring. Category II"

Source: Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 (cdc.gov)

What is missing?

- How is this information recorded? Manual or electronic?
- Frequency recording (e.g., after each load?)
- How are load contents identified?
- Does staff know how to read a sterilization print-out?
- Documentation associated with maintenance activities

What is occurring within your facility?

- Policies and procedures outline documentation requirements
- Auditing as part of continuous quality assurance program

Additional resources

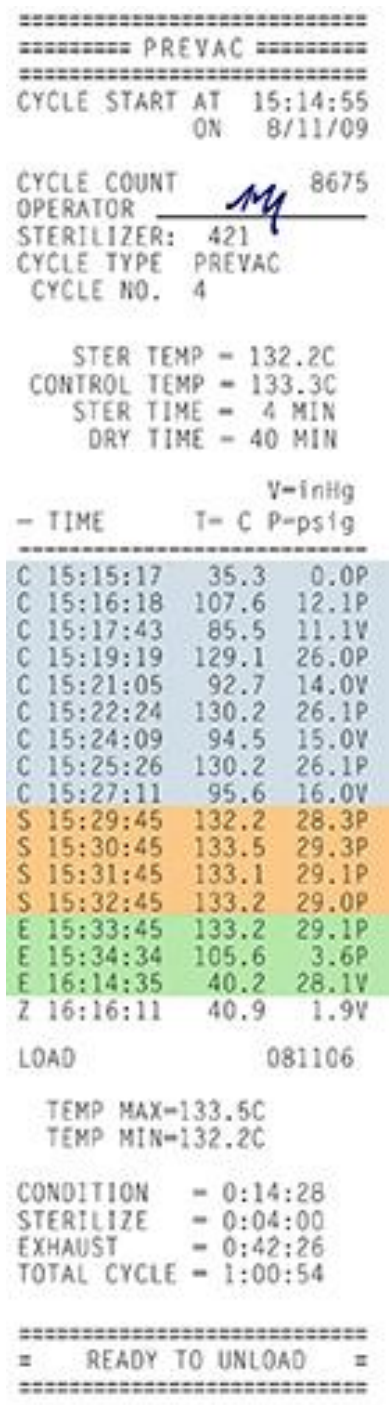
- Regulatory or accreditation requirements
- Sterilizer IFUs
- AAMI ST79 (AAMI ST 58 for HLD)

Mechanical Monitoring

Standard Steam Sterilization Cycles:

- Gravity
- Pre-Vacuum and/or Post-Vacuum
- Liquids
- Flash/IUSS

- Reading a sterilizer print-out
  - Cycle type
    - Condition
    - Sterilize
    - Evacuation



```
========== PREVAC ==========
CYCLE START AT  15:14:55
            ON   8/11/09

CYCLE COUNT              8675
OPERATOR
STERILIZER:  421
CYCLE TYPE  PREVAC
 CYCLE NO.  4

   STER TEMP - 132.2C
CONTROL TEMP - 133.3C
   STER TIME -  4 MIN
    DRY TIME - 40 MIN

                    V-inHg
- TIME       T- C P-psig
-------------------------
C 15:15:17   35.3   0.0P
C 15:16:18  107.6  12.1P
C 15:17:43   85.5  11.1V
C 15:19:19  129.1  26.0P
C 15:21:05   92.7  14.0V
C 15:22:24  130.2  26.1P
C 15:24:09   94.5  15.0V
C 15:25:26  130.2  26.1P
C 15:27:11   95.6  16.0V
S 15:29:45  132.2  28.3P
S 15:30:45  133.5  29.3P
S 15:31:45  133.1  29.1P
S 15:32:45  133.2  29.0P
E 15:33:45  133.2  29.1P
E 15:34:34  105.6   3.6P
E 16:14:35   40.2  28.1V
Z 16:16:11   40.9   1.9V

LOAD              081106

  TEMP MAX=133.5C
  TEMP MIN=132.2C

CONDITION   - 0:14:28
STERILIZE   - 0:04:00
EXHAUST     - 0:42:26
TOTAL CYCLE - 1:00:54

==========================
=    READY TO UNLOAD     =
==========================
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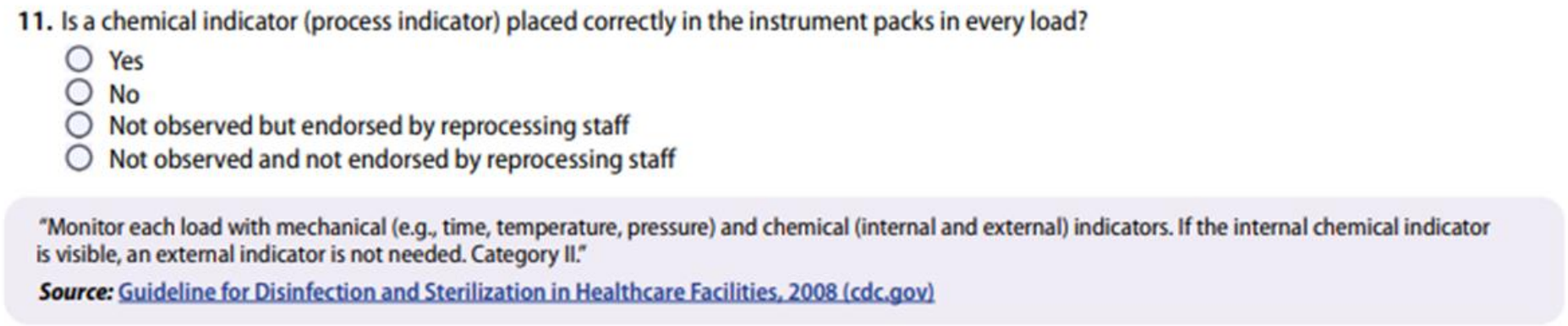
Steris: Everything About Autoclaves

Chemical Indicators (CI)



11. Is a chemical indicator (process indicator) placed correctly in the instrument packs in every load?

- ○ Yes
- ○ No
- ○ Not observed but endorsed by reprocessing staff
- ○ Not observed and not endorsed by reprocessing staff

"Monitor each load with mechanical (e.g., time, temperature, pressure) and chemical (internal and external) indicators. If the internal chemical indicator is visible, an external indicator is not needed. Category II."

Source: Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 (cdc.gov)

What is missing?

- Referencing IFUs for CIs, placement in packaging/container/sterilizer
- Type of CI based on cycle selection and/or load type
- Does not delineate between gaseous/vapor and solution indicators

What is occurring within your facility?

- What type of CIs are used in SPD?
- Are sterilization/HLD processes occurring outside of SPD (e.g., clinics)
- How are results documented?

Additional resources

- Chemical indicator IFU
- AAMI ST79 (AAMI ST 58 for HLD)

Key Points

- Review departmental policies and procedures
- Essential to meet with SPD department leadership and educator
    - Establishes goals and learning opportunities for the IP
- Observations and audits can focus on one component of the entire process. Do not expect to learn it all in one setting!
- Incremental steps when learning SPD:
    - Workflow
    - Equipment (instrumentation, washers, sterilizers, accessories)
    - Chemicals and monitoring practices
    - Documentation (to include staff education and competencies)
    - Resources
        - IFU
        - Regulations
        - Professional organizations

Additional Resources

CDC Infection Control Assessment and Response (ICAR) Tool for General Infection Prevention and Control (IPC) Across Settings

CDC Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 (Update: May 2019)

Centers for Medicare & Medicaid Services Hospital Infection Control Worksheet

Centers for Medicare & Medicaid Services Ambulatory Surgical Center (ASC) Infection Control Surveyor Worksheet

FDA-Cleared Sterilants and High Level Disinfectants with General Claims for Processing Reusable Medical and Dental Devices

Healthcare Sterile Processing Association

Association for the Advancement of Medical Instrumentation

OSHA Bloodborne Pathogens Standard 29 CFR 1910.1030

Questions and Answer Session

Please use the QA box in the webinar platform to type a question

Attendees also have the option to upvote other attendee's questions

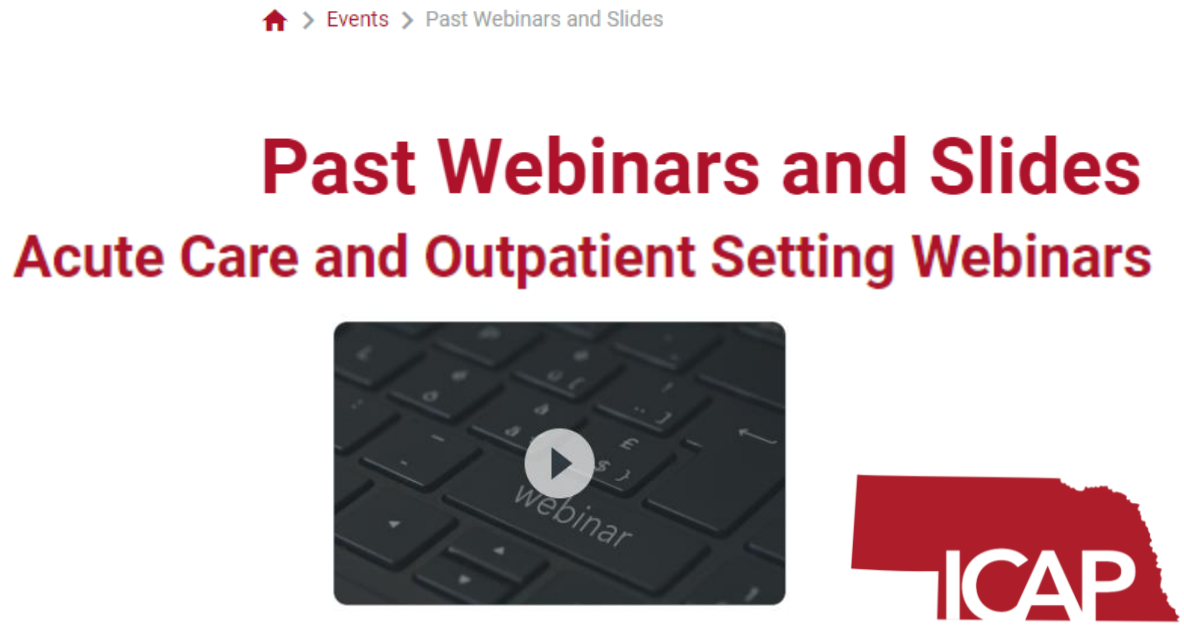
Questions will be read aloud by the moderator

A recording of the discussion will be made available on the Nebraska ICAP website
https://icap.nebraskamed.com/events/webinar-archive/

If time does not allow and we are unable to answer your question, please email us at NE ICAP or call 402.552.2881

Speakers/ Panelists:

Jody Scebold, EdD, MSN, RN, CIC
Jenna Preusker, Pharm.D., BCPS
Daniel Brailita, MD
Kate Tyner, RN, BSN, CIC
Rebecca Martinez, BA, BSN, RN, CIC
Chris Cashatt, RN, BSN, CIC
Sarah Stream, MPH, CDA, FADAA
Josette McConville, BSN, RN, CIC
Lacey Pavlovsky, MSN, RN, CIC, LTC-CIP
Juan Teran Plasencia, MD



Focused ICAR Visits Are Available

Nebraska ICAP is available for on-site infection control assessment and response (ICAR) non-regulatory voluntary visits. Based on your request, we can provide a more focused assessment including some, or all of the below domains. An example would be an SSI focused ICAR looking at surgical suite practices including device reprocessing.

- Surgical Site Infection (SSI) Prevention
- Device Reprocessing including sterilization and high-level disinfection
- Infection Control Program and Infrastructure
- Hand Hygiene
- Personal Protective Equipment (PPE)
- Catheter-associated Urinary Tract Infection (CAUTI) Prevention
- Central Line associated Bloodstream Infection (CLABSI) Prevention
- Ventilator-associated Event (VAE) Prevention
- Injection Safety
- Clostridioides difficile infection (CDI) Prevention
- Environmental Cleaning & Disinfection (ATP testing offered during visit)
- Surveillance and Systems to Detect, Prevent, and Respond to HAIs and MDROs
- Healthcare Personnel Safety
- Water Management
- COVID-19 Prevention and Response
- Antimicrobial Stewardship (the NE ASAP program remains a resource for comprehensive assessments)

Please let us know if interested

nebraskaicap@nebraskamed.com
(402) 552-2881

Join Us on Upcoming Webinars

- **August 9, 2023**
  - Strategies to decrease the testing for and treatment of asymptomatic bacteriuria
- **September 13, 2023**
  - Strategies to prevent MRSA in acute care hospitals – 2022 SHEA Update
- If you have suggestions for future webinar topics, please include them in the continuing education (CE) survey or contact us with your requests! Call us at 402.552.2881 or email nebraskaICAP@nebraskamed.com
- You can also be added to our setting specific mailing lists, receive webinar and training invites and be connected to an Infection Preventionist that specializes in your area by filling out the contact form at: https://icap.nebraskamed.com/contact-us/

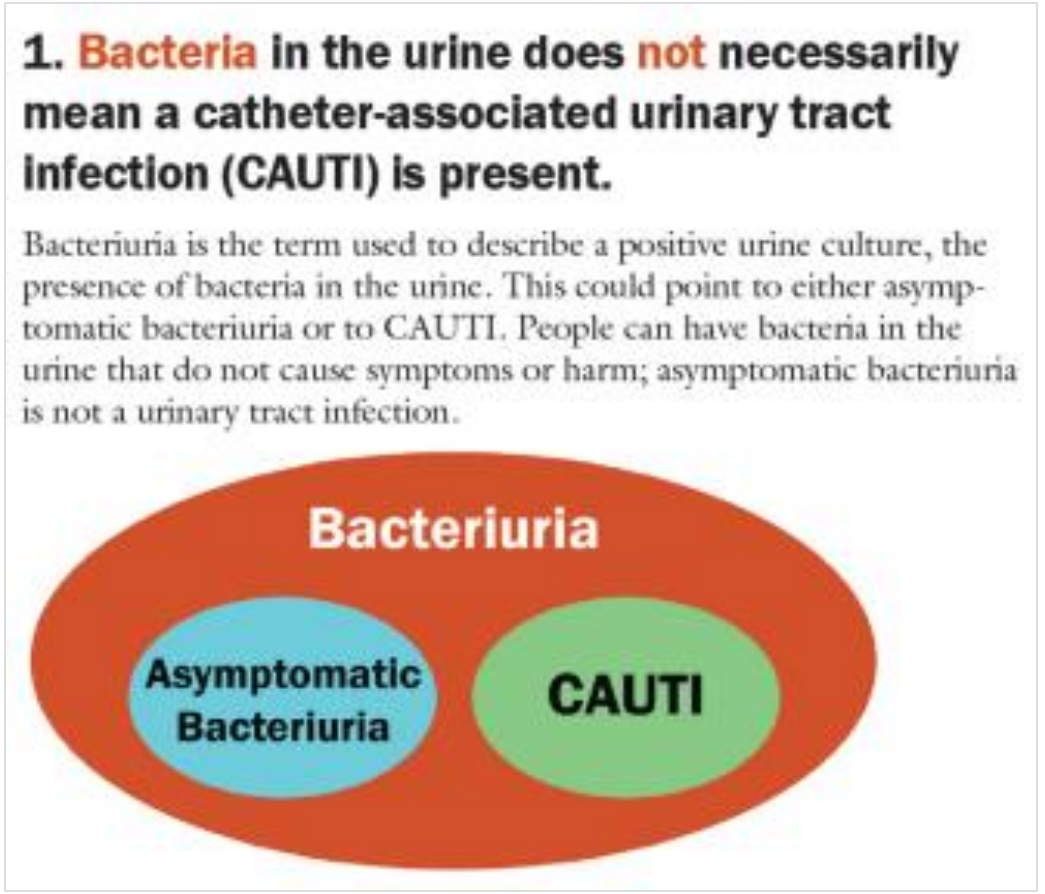


Image Courtesy of CDC NHSN Training 2018

Where can you find us?

Follow us on Facebook at @NebraskaICAP or
https://www.facebook.com/NebraskaICAP/

Listen to Dirty Drinks and The Mouthy IP wherever you listen to podcasts!

Find resources for all facility types at our website:
https://icap.nebraskamed.com/

Does your facility have questions about the NHSN Antibiotic Use and Resistance (AUR) Module?

Nebraska ASAP Pharmacists are here to help!

To schedule a Q&A meeting about AUR,

Call 402-552-2881

Office Hours are Monday – Friday
8:00 AM - 4:00 PM Central Time

NHSN
NATIONAL HEALTHCARE SAFETY NETWORK

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES

ASAP
Nebraska Antimicrobial Stewardship Assessment and Promotion Program

ICAP Contact Info

Call 402-552-2881

Office Hours are Monday – Friday
8:00 AM - 4:00 PM Central Time
Weekends and Holidays 8:00-4:00

On-call hours are available for emergencies only

Scan the QR Code to be taken to our website contact form. You can request a call back from an IP, Sign up for newsletters and reminders and request an ICAR Review for your facility.

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Webinar CE Process

1 Nursing Contact Hour is awarded by NE Medicine *

* Nebraska Medicine is approved as a provider of nursing continuing professional development by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

CNE Nursing Contact Hours:

- Completion of survey is required.
  - The survey must be specific to the individual obtaining credit.
  - (i.e.: 2 people cannot be listed on the same survey)
- One certificate is issued quarterly for all webinars attended
- Certificate comes directly from ICAP via email
- Survey functionality is lost on mobile devices