

**Module 3**  
*Section B: Patient Safety*

**Term**  
Adverse event

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**Module 3**  
*Section B: Patient Safety*

**Term**  
Lapse

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*Section B: Patient Safety*

**Term**  
Near-miss

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**Module 3**  
*Section B: Patient Safety*

**Term**  
Organizational culture

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**Module 3**  
*Section B: Patient Safety*

**Term**  
Sentinel event

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**Module 3**  
*Section B: Patient Safety*

**Term**  
Slip

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**Module 3**  
*Section D: IPC Risk Assessment Tools, and  
Other Risk Assessments*

**Term**  
Checklist

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**Module 3**  
*Section K: Infection Prevention Research*

**Term**  
Cohort

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An internal failure occurring from failures of memory and memory storage.

Any negative impact event involving one or more patients in a healthcare setting, including but not limited to sentinel events, drug-related errors, HAIs (including surgical site infections), technical or nontechnical competency errors, diagnostic mishaps, therapeutic mishaps, or process errors.

The set of values, guiding beliefs, or ways of thinking that are shared among members of an organization.

An event in which the unwanted consequences were prevented because there was a recovery by planned or unplanned identification and correction of the failure. (AHRQ)

An external failure in a plan due to reduced intentionality.

An event resulting in death or serious physical or psychological harm or the risk thereof.

A group sharing a common experience, such as the use of central lines.

A tool that helps ensure that each list element is thoroughly considered or reviewed, that nothing is missed; checklist elements should reflect evidence-based good practices and requirements.

**Module 3**

*Section K: Infection Prevention Research*

**Term**

Implementation science

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**Module 3**

*Section A: Planning and Implementing Risk-Based IPCPs*

**Term**

IPC team

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**Module 3**

*Section A: Planning and Implementing Risk-Based IPCPs*

**Term**

Infection prevention and control program (IPC program)

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**Module 3**

*Section A: Planning and Implementing Risk-Based IPCPs*

**Term**

Infection preventionist (IP)

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**Module 3**

*Section A: Planning and Implementing Risk-Based IPCPs*

**Term**

Risk assessment

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Balancing measure

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Clinical measure

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Minimum performance threshold

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The group of people responsible for carrying out all aspects of the IPC program as delegated by facility leadership; the core of this team includes the IP, the chair of the IPC committee, the healthcare epidemiologist (if this position is staffed at the facility), and possibly someone responsible for occupational health or administration.

Methods to promote the use of evidence-based practices to improve healthcare quality.

Professionals who make sure that healthcare workers and residents are doing all the things they should to prevent infections. (APIC)

An evidence- and risk-based comprehensive system that promotes a culture of patient safety, sets policies and procedures to minimize or reduce healthcare-associated infections (HAIs) in hospitals and other healthcare settings, monitors compliance, and addresses the need to continuously improve.

A performance measure that looks at a system from multiple angles or dimensions to avoid unintended consequences from a change in a different part of the system.

A diagnostic tool for identifying trends and interventions that will help prevent and control infections.

The level below which the process being used to reach a higher goal needs revision or improvement.

A type of performance measure designed to evaluate the processes or outcomes of care associated with the delivery of clinical services, to allow for intra- and interorganizational comparisons to be used to continuously improve resident health outcomes, and to focus on the appropriateness of clinical decision making and implementation of these decisions.

**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Mission statement

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Performance improvement

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Performance measure

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Quality assurance

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Structural measure

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**Module 3**

*Section E: Planning for Quality Assurance and Performance Improvement*

**Term**

Vision statement

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**Module 3**

*Section F: Implementing Quality Assurance and Performance Improvement*

**Term**

Care bundle

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**Module 3**

*Section F: Implementing Quality Assurance and Performance Improvement*

**Term**

Failure mode and effect analysis (FMEA)

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An ongoing continuous cycle that focuses on resident clinical outcomes, customer satisfaction, and service.

A description of the organization's purpose or goal; used to guide decision making and actions.

A process of meeting quality standards and assuring that care reaches an acceptable level. (CMS)

A quantitative tool that provides an indication of an organization's performance in relation to a specified process or outcome.

A snapshot of an organization's intended future.

A measure that assesses features of a healthcare organization or clinician relevant to its capacity to provide healthcare. (CMS)

A systematic, proactive method for evaluating a process to identify where and how it might fail and to assess the relative impact of different failures in order to identify the parts of the process that are most in need of change.

A small, straightforward set of evidence-based practices that, when performed collectively and reliably, have been proven to improve patient outcomes. (IHI).

**Module 3**

*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Flowchart

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**Module 3**

*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Gap analysis

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*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Off-label use

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*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Pareto chart

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**Module 3**

*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Product evaluation

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**Module 3**

*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Reproducibility

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**Module 3**

*Section F: Implementing Quality Assurance  
and Performance Improvement*

**Term**  
Root cause analysis (RCA)

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**Module 3**

*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**  
Airborne precautions

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A technique to compare best practices with current processes and determine the steps to take to move from a current state to a desired future state.

A diagram with boxes that show process steps, questions, people, systems, or other data of interest, with lines illustrating how the elements are interrelated.

A type of bar chart that sorts a data series into vertical bars, each of which depicts an action or cause of interest, in descending order of height from left to right.

The application of a product for a purpose that is not included in the approved device labeling.

Evaluates whether findings can be repeated consistently when applied to new populations, to different institutions, or by different individuals. (Quality Indicator Study Group)

A process of appraisal that considers the value and significance of quality, cost, safety, and practitioner choice for product selection. (APIC)

Used to prevent the transmission of infectious organisms that remain suspended in the air and travel great distances due to their small size.

A process for identifying the basic or causal factors that underlie variation in performance.



**Module 3**

*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**

Contact precautions

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**Module 3**

*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**

Droplet precautions

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*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**

Protective environment

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**Module 3**

*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**

Standard precautions (SP) strategies

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**Module 3**

*Section G: Preventing/Controlling the  
Transmission of Infectious Agents*

**Term**

Transmission-based precautions (TBP)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Community-acquired pneumonia (CAP)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Healthcare-acquired pneumonia (HCAP)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Hospital-acquired pneumonia (HAP)

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Used to prevent the transmission of infectious organisms that are spread through large respiratory droplets from coughing, sneezing, or talking.

Used to prevent the transmission of infectious organisms that are spread by contact with the patient or the patient's environment.

A series of evidence-based procedures, used for all patients in all settings, to reduce the presence of microbiological agents in a healthcare facility and to prevent cross-contamination between HCP, patients, and the environment.

A type of TBP that is designed to protect a patient from others who may be potentially harmful to them by placing them in a specialized area.

Pneumonia occurring in any patient admitted to the hospital from the community.

Procedures used with residents who are known or suspected to be infected or colonized with infectious agents, including certain epidemiologically important pathogens.

Pneumonia developing  $\geq 48$  hours after admission to the hospital.

Pneumonia occurring in patients with any of the following special epidemiological characteristics: (1) hospitalized in an acute care hospital for 2 or more days within 90 days of the current infection; (2) resided in a nursing home or LTC facility; (3) received recent intravenous antibiotic therapy, chemotherapy, or wound care within the past 30 days of current infection; or (4) attended a hospital or hemodialysis clinic.

**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Non-ventilator hospital-acquired pneumonia (NV-  
HAP)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Pneumonia

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Vascular access device (VAD)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Ventilator-associated event (VAE)

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**Module 3**

*Section H: Controlling Infections Associated  
with Medical Procedures*

**Term**

Ventilator-associated pneumonia (VAP)

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**Module 3**

*Section I: Vaccines*

**Term**

Active immunization

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**Module 3**

*Section I: Vaccines*

**Term**

Antitoxin

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**Module 3**

*Section I: Vaccines*

**Term**

Immunobiologic

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A severe inflammation of the lungs in which the alveoli (tiny air sacs) are filled with fluid.

Pneumonia identified in patients not on mechanical ventilation.

A condition that results in a significant and sustained deterioration in oxygenation.

Any device used to access the vascular system for hemodynamic monitoring, medication administration, infusions, blood sampling, or dialysis. (APIC)

Antibodies against a specific disease produced by the immune system. Active immunity can be acquired in two ways: by contracting the disease, or through vaccination.

A type of HAP that develops in patients who have been intubated and have received mechanical ventilation for at least 48 hours.

An antigenic substance or antibody containing preparation used to induce immunity and prevent infectious disease.

A solution of antibodies derived from the serum of animals immunized with specific antigens.

**Module 3**  
*Section I: Vaccines*

**Term**  
Immunoglobulin (Ig)

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**Module 3**  
*Section I: Vaccines*

**Term**  
Passive immunization

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**Module 3**  
*Section I: Vaccines*

**Term**  
Precaution

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**Module 3**  
*Section I: Vaccines*

**Term**  
Toxoid

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**Module 3**  
*Section I: Vaccines*

**Term**  
Vaccine

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**Module 3**  
*Section J: Infection Prevention Education*

**Term**  
Active learning

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**Module 3**  
*Section J: Infection Prevention Education*

**Term**  
Audits

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**Module 3**  
*Section J: Infection Prevention Education*

**Term**  
Certification

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Use of an preparation containing antibodies produced by another human or animal to enhance or restore immunity.

A sterile solution containing antibodies from human blood.

A modified (nontoxic) bacterial toxin that is capable of stimulating antitoxin formation.

A condition in a potential vaccine recipient that might increase the risk for either a serious adverse event or that might compromise the ability of the vaccine to produce immunity in the recipient.

The concept that learners learn more and retain their learning longer if they acquire it in an active rather than a passive manner.

A preparation that is used to stimulate the body's immune response against diseases. (CDC)

A standardized measure enabling a person to demonstrate a predetermined competency level deemed necessary for persons practicing infection. prevention and control.

Direct observations of HCP practices in the healthcare setting, often facilitated using checklists.

**Module 3**

*Section J: Infection Prevention Education*

**Term**

Continuing education

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

Formative evaluation

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

Hawthorne effect

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

In-service training

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

Licensure

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

Return demonstration

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**Module 3**

*Section J: Infection Prevention Education*

**Term**

Summative evaluation

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A training evaluation conducted during the planning of an educational session to provide immediate feedback and to allow appropriate changes to be made.

Opportunities to acquire general or focused knowledge through lecture, discussion, or interactive methods.

Formal and/or informal work-related systematic training delivered on site in a group training session by the employer to provide continuing professional development related to HCP knowledge, skills, and behaviors.

When individuals modify their behavior in response to their awareness of being observed.

An activity in which HCP demonstrate proper exercise of a given competency by performing the required processes as they were taught.

Recognition by a governmental agency (e.g., a state or provincial nursing or medical board) that an individual has met the minimum requirements to practice in the jurisdiction.

A training evaluation that occurs after a program is completed to determine impact and overall effectiveness.