

Consultant well poised for Pa.'s new infection control law

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WORCESTER -- Two years ago, Phenelle Segal gave up her hospital job to start her own business helping nursing homes develop more effective and efficient infection control programs.

Infection control has taken on a heightened urgency in Pennsylvania with this summer's adoption of Act 52.

The legislation -- among the first components of Gov. Ed Rendell's proposed and extensive health-care reform proposal to become law -- requires health-care facilities to implement and submit detailed infection control plans to the state Department of Health by Dec. 31.

Segal, a native of South Africa who began her career as an intensive-care nurse, said that while most hospitals have specific people assigned full-time to infection control, the same isn't true for long-term-care providers.

"The job [at nursing homes] typically goes to whoever can take it on, like the director of nursing or the associate director, and it's usually part of a larger program like quality assurance or education," Segal said. "It's not a separate entity. Now it needs to be."

The law's requirements include infection surveillance policies and infection control interventions and protocols. The programs must address both nursing home residents and staff exposed to organisms linked to infectious diseases. The penalty for noncompliance is a fine of up to \$1,000 per day.

Since forming her company -- ICCS Infection Control Consulting Services -- in late 2005, Segal has consulted with about two dozen nursing homes.

To help nursing homes comply with Act 52, Segal authored and published a 283-page manual, divided into 12 sections, that can be customized for each institution.

The manual includes infection control and performance improvement compliance plans, systems for surveillance of infections, resident-care policies and exposure control plans.

"Everything a facility needs is right there in the manual," said Mary Grzybowski, the infection control nurse at the Madlyn and Leonard Abramson Center for Jewish Life in North Wales. "Phenelle thoroughly knows infection control and actually does so much above and beyond to help us and other long-term-care managers and staff. Her knowledge is up to the minute. Her passion for the industry and commitment to ensure everything is just right are exceptional qualities."

Nancy Markovchick, the long-term-care nursing director at Weatherwood, the Carbon County Nursing Home & Rehabilitation Center in Weatherly, Pa., said Segal designed an algorithm that serves as a resident "placement decision-making tree" for the nursing home.

"I use it every single day," Markovchick said. "The tree helps determine the proper placement of



Curt Hudson

Phenelle Segal, president of ICCS, demonstrates a germ-control handspray at a meeting of nursing home infection-control personnel at the Madlyn and Leonard Abramson Center for Jewish Life in North Wales.

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incoming and current residents so individuals with immune system problems are not paired with someone who may have an infection."

Segal also conducts seminars and conferences to educate nursing home staff members. In addition, Segal is developing a series of DVDs nursing homes can use for training.

Most of her clients are in Pennsylvania, but she has also worked with facilities in New Jersey, Michigan and Indiana. Segal, who is not aware of any other firms that work exclusively with nursing homes, expects the business to rapidly expand as the December deadline approaches. She declined discussing the fees she charges because the rate fluctuates based on the needs of the client.

The Pennsylvania Health Care Association, the statewide nursing home industry trade group, supported the passage of the new infection control law.

Dr. Stuart Shapiro, PHCA's president and CEO, said previous state and federal regulations mandated infection control measures for nursing homes. Act 52, he said, expands on those requirements.

Shapiro said the industry is working with the Pennsylvania Patient Safety Authority and the state Department of Health to finalize reporting requirements for health-care associated infections -- an area of concern for Segal's clients.

"We are fully cooperating with this legislation," said Shapiro, calling the law "perfectly logical and consistent" with the industry's ongoing quality improvement efforts.

When she started her business, Segal thought that states would, someday in the future, begin mandating strict infection control programs at nursing homes.

"I didn't think it would happen so soon," she said. "When it happened in July [with the passage of Act 52] I was just as stunned as everyone else."

Segal came to the United States in search of more opportunities to advance her career in the early 1980s, shortly after receiving a post-graduate degree in critical-care nursing in Johannesburg, South Africa.

Her first job was at Sinai Hospital in Baltimore, Md., where she was an intensive-care nurse. "After a while I felt what a lot of intensive-care nurses feel," she said. "I felt burned out."

Fortuitously, she noticed a posting for an infection control practitioner. Segal applied for the job and got it.

"The environment intrigued me," said Segal, one of about 11,000 board-certified infection control professionals nationwide, most of whom work in hospitals. "The field is so important and the challenges are stimulating. New organisms constantly emerge that can result in infectious diseases."

Segal's career took her from Baltimore to California to Pennsylvania, where she settled into a job at Bryn Mawr Rehab in Malvern. She got the idea for her business after noting the similarities between rehab and long-term care -- both of which serve patients with conditions that require lengthy stays.

"I know I can make a difference in infection control in long-term care," Segal said. "I have the expertise and I have the passion."