

A collage of travel-related items including a straw hat, a compass, a map, a leather bag, a pair of glasses, and a vintage camera.

Welcome

BEFORE WE BEGIN, ANSWER IN THE CHAT
What are your summer vacation plans or favorite past vacation?

INSTRUCTION FOR CONTACT HOUR

- Your display name **MUST** match your evaluation name for CEU credit. If it does not, type your name and facility in the chat.
- Enjoy the entire program.
- Complete the post-evaluation by **June 27, 2025, 5:00 PM** (available on the last slide)
- Certificate will be emailed to you by **July 15, 2025**.

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San Diego Skilled Nursing Facility Infection Prevention Collaborative

Grow - Collaborate - Succeed

Coordinated by the County of San Diego
Healthcare-Associated Infections (HAI) Program

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Reminders



Recording is on!



PHS.HAI.HHSA@sdcounty.ca.gov



Keep your lines muted



Participate in the polls and chat



Use the chat box for questions



Slides will be emailed

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Type into the chat your:

- Name
- Title
- Facility



Land Acknowledgement



Public Health Services would like to begin by acknowledging the Indigenous Peoples of all the lands that we are on today. While we are meeting on a virtual platform, I would like to take a moment to acknowledge the importance of the lands, which we each call home. We respectfully acknowledge that we are on the traditional territory of the Kumeyaay. We offer our gratitude to the First Nations for their care for, and teachings about, our earth and our relations. May we honor those teachings.

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Agenda



Welcome

General Updates

Announcements

Featured Topic: Germ Patrol: Infection Control Rounding Essentials

Next Collaborative

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SNF IP
Email List



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Respiratory Virus Update

San Diego County Respiratory Virus Surveillance Report

Prepared by Epidemiology and Immunization Services Branch

www.sdepi.org

This report will be issued monthly on the second Thursday of the month.
Weekly reporting will resume in October.

COVID-19

Cases
28,505

Deaths
267

Outbreaks*
239

6/30/2024 – 6/7/2025

Influenza

Cases
39,203

Deaths
216

Outbreaks*
90

6/30/2024 – 6/7/2025

RSV

Cases
5,735

Deaths
19

Outbreaks*
6

6/30/2024 – 6/7/2025

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*In residential congregate settings

Respiratory Virus Update

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*Episode date is the earliest available of symptom onset date, specimen collection date, date of death, date reported. Data for the most recent week may be incomplete.

Figure 1.1. San Diego County **COVID-19** Confirmed and Probable Cases (N=28,505)



Figure 1.2. San Diego County **Influenza** Cases (N=39,203)

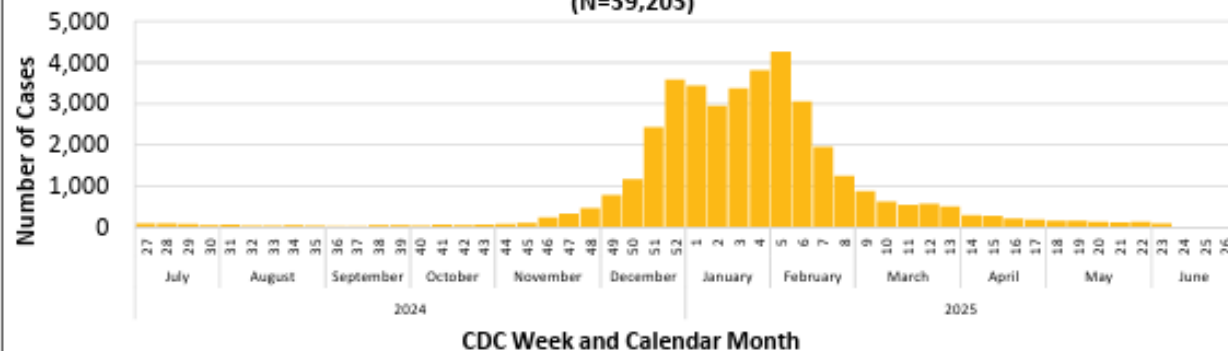
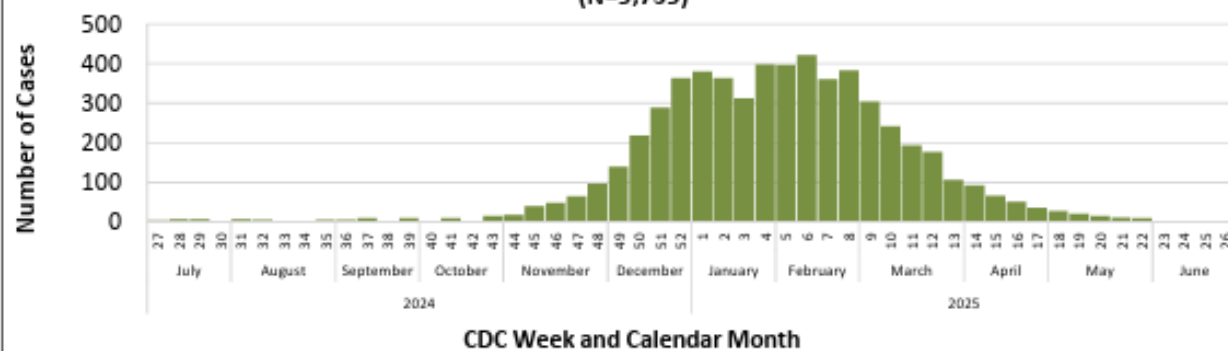


Figure 1.3. San Diego County **RSV** Cases (N=5,735)



*Episode date is the earliest available of symptom onset date, specimen collection date, date of death, date reported. Data for the most recent week may be incomplete.

Resources: Antimicrobial/Diagnostic Stewardship



New healthcare worker education posters available

- Addressing Asymptomatic Bacteriuria (ASB)
 - What is Asymptomatic Bacteriuria
 - Asymptomatic Bacteriuria vs. Urinary Tract Infections
 - Suspected UTI Algorithm
 - Myths about UTI Diagnoses
 - Loeb Criteria for UTI in SNFs
 - Identifying Delirium
 - Treating and Preventing Delirium
 - Causes of Delirium in the Elderly
 - Talking to Residents/Families about ASB

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<https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/hai-program/ar.html#Antimicrobial>

ASYMPTOMATIC BACTERIURIA

WHAT IS ASYMPTOMATIC BACTERIURIA?

Asymptomatic bacteriuria (ASB) is when there are bacteria in urine (positive urine culture) but no signs and symptoms of a urinary tract infection (UTI).



SHOULD ASB BE TREATED WITH ANTIBIOTICS?

- ASB is not an infection. Treatment with antibiotics is generally **NOT RECOMMENDED**, except during pregnancy or with urological procedures.
- ASB has been recognized as a major contributor to patients receiving antibiotics unnecessarily. This promotes antimicrobial resistance, making infections more difficult to treat.

POPULATIONS WITH A HIGH PREVALENCE OF ASB



- Patients with chronic indwelling catheters
- Patients that are older (>65 years) and/or institutionalized



- Patients with spinal cord injury
- Patients with diabetes

THE SIGNS AND SYMPTOMS OF UTI

If bacteriuria and/or abnormal urinalysis are associated with these signs and symptoms, then treatment is indicated.



- Suprapubic heaviness, fullness, pain
- Dysuria and/or gross hematuria
- Increased urinary frequency or urgency
- Worsening incontinence
- Flank pain
- Leukocytosis
- Fever, chills or other altered vital signs
- Nausea or vomiting



Model CLS, Gupta AK, Dr. Jeffrey S. et al. Clinical Practice Guideline for the Management of Asymptomatic Bacteriuria. 2019. <https://doi.org/10.1093/cid/ciy111>

This recommendation is based on the current literature and does not represent clinical judgment.



5/23/25



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County/CDPH Briefings



- **County LTC Sector Bi-Monthly Telebriefing:**
 - Bi-monthly 4th Thursday @ 2PM-3PM
 - Next briefing is on **7/24/25**



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Contact Hour Instructions

Ensure

- Ensure your full name identifies you on Teams

Enjoy

- Enjoy the full presentation

Complete

- Complete the post-evaluation

Presenters

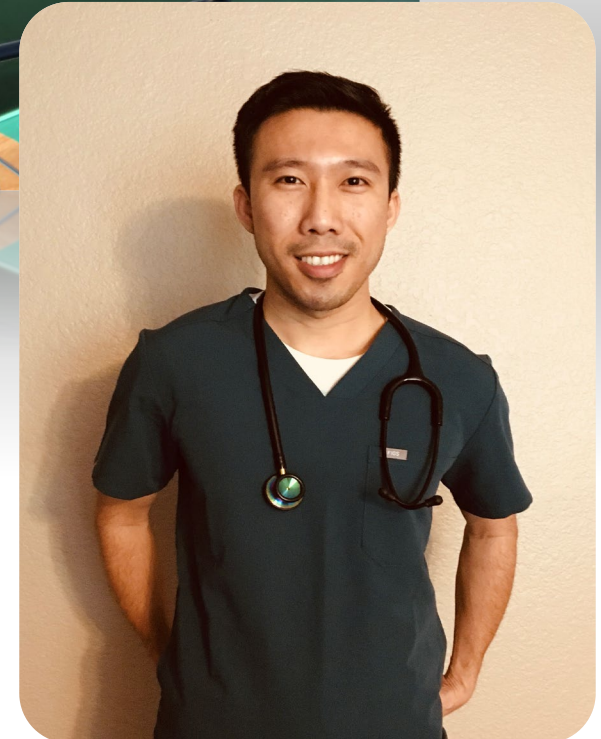
Germ Patrol: Infection Control Rounding Essentials

Shelby Canino, BSN, RN, PHN, CIC

Senior Public Health Nurse/Infection Preventionist
County of San Diego
Healthcare-Associated Infections Program

Man Nguyen, BSN, RN, PHN, PCCN

Public Health Nurse/Infection Preventionist
County of San Diego
Healthcare-Associated Infections Program



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Germ Patrol: IPC Rounding Essentials



OBJECTIVES

After completing this training, the participant will be able to:

- List 3 strategies to guide infection prevention rounds.
- Name 3 common findings during infection prevention rounds
- Verbalize 2 principles for evaluating an EVS Cart.

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Germ Patrol: IPC Rounding Essentials



What is it?

- **It has many names:**
 - Surveillance Rounds, Safety Rounds, ICAR, IP Rounds, "walk and talk", environment of care rounds
- **The name doesn't matter. It's what you do:**
 - the act of conducting in person observations by walking through your facility to:
 - identifying infection control gaps
 - lapses in adherence of IP measures
 - finding holes in the program that could lead to transmission and spread of disease.



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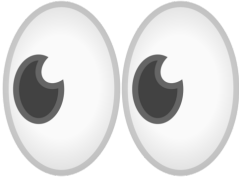

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Germ Patrol: IPC Rounding Essentials



Why Do it?

If you don't **see** 
what's happening,
You don't **know** 
what's happening.

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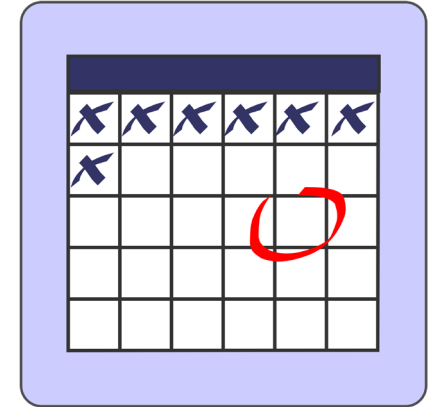


Germ Patrol: IPC Rounding Essentials



Make **ROUNDING** a priority & stick to a schedule!

- **Set aside some time at a regular frequency to conduct IP Rounds at your facility.**
 - Ex: designate it on a calendar that you use regularly.
- **Make sure that you have conduct IP Rounds at least once a month with a team that includes:**
 - DON, DSD, EVS Supervisor/Manager/Director, Administrator, Department leads (Wound Care, Respiratory, Rehab, etc.)



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Germ Patrol: IPC Rounding Essentials



DON'T BE SHY. Ask LOTS of questions!!!!

- You want to be familiar with processes being used in your facility by ALL departments, even if it's not in your wheelhouse of training.
 - If you don't know, ASK!!
 - Tell me how you do that?
 - How does that work?
- How are organisms moving about the "Cabin"?
 - Is there designated equipment for those that should need it? (i.e., patients on transmission-based precautions)
 - Is there shared equipment being used that is not disinfectable? (i.e., cloth BP Cuff, vital signs machines, personal stethoscopes)
 - Is the process being used increasing risk of spread or transmission? (i.e., EVS cleaning a room starting at the bathroom and then back out to patient areas)



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Germ Patrol: IPC Rounding Essentials



ACKNOWLEDGE THE “GOOD” THAT IS HAPPENING!

- **Celebrate!!!!**
 - Staff LOVED being acknowledge for doing a stellar job!
- **Have great adherence monitoring numbers?**
 - Let the staff know in the huddles
 - Post it on employee info boards
 - Make it special and a “BIG DEAL”
- **You witnessed someone following an infection prevention measure during your rounds?**
 - Just in time acknowledgment will help staff feel valued and appreciated! (give a high five, fist bump, a verbal “woot-woot”)
 - There is nothing like being told you are doing a “Good Job!” in front of your peers!



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Germ Patrol: IP Rounding Essentials



Part of doing IP rounds means:

Standing at the end of the hallway and **WATCH** how people do their job.

ASK YOURSELF:

- Are you seeing people perform hand hygiene?
- Are you seeing people disinfecting shared equipment?
- Are you seeing people following precautions signs?
- Are there places in the environment that could put someone at risk for transmission of an organism or illness?

DOCUMENT:

- Take notes of what you are seeing
- Use the CDPH tools for adherence monitoring
- Don't analyze while doing observations.
- Provide educations or just in time training for only the things that are egregious.



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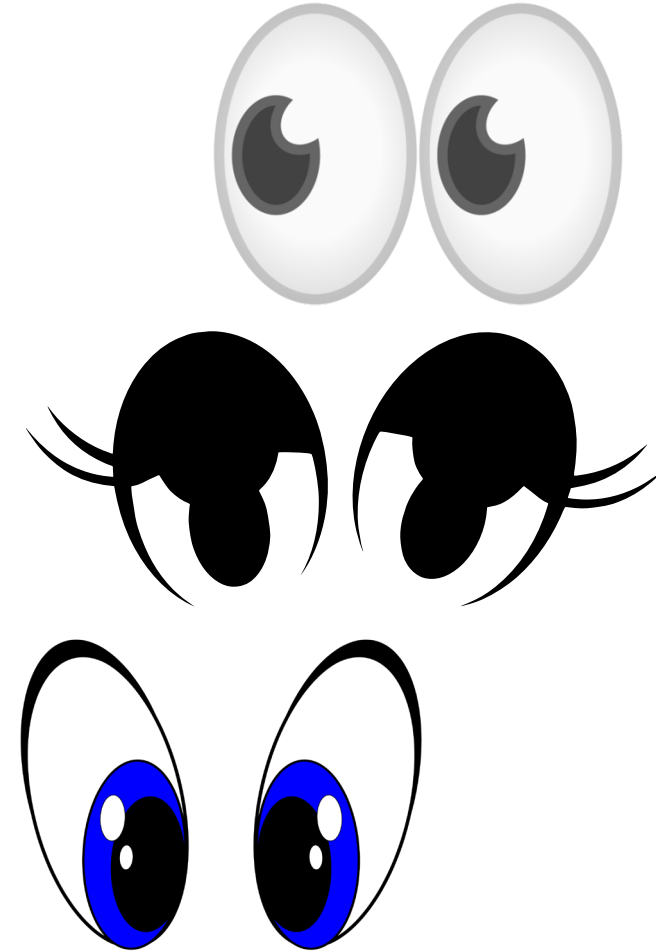


Germ Patrol: IPC Rounding Essentials



Virtual IP Rounds with your SNF IP peers!!!

- We are going to show you some slides that may or may not have potential IPC issues.
- All the pictures shown are from facilities in the county. These are meant to be used as learning moments and not to call anyone out.
- The goal is to simulate what it would be like when you are walking through your facility during your rounds.
- We are hoping this will help you develop your **“IP Eyes”**



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What do you see? Looking down the hallway...

- Wipes are available.
 - Is this disinfectant effective against the organisms we need to kill?
What is the contact time?
 - Many of the lids are open.
- Hand hygiene stations are easily available. Are they working?
- Shower gurney is blocking the fire door.
- The hallway is crowded with equipment. Is it supposed to live here?

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What do you notice?

1. Staff personal items stored in the hallway
2. Staff water bottle kept in hallway
3. Bedside table in hallway. Is it disinfected?
4. Glove box stored on sharps container
5. What is being done with the fan?
6. Personal care item on the handrail on the wall.



Does this make your IP eye twitch?

- The clean linen cart and clean PPE cart is sitting right next to the trash can.
 - Higher risk of getting contaminated by staff when being used.
 - Contaminated linens and PPE are used directly with staff and residents. It's important to keep them clean and organisms free as much as possible.
- No Hand Hygiene available near by to don PPE
 - To perform Donning of PPE correctly, staff need to do Hand Hygiene either with Alcohol based hand rub or soap/water.

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Why would this be problematic for IPs?

- Having a soiled linen cart touching the cover of a clean linen cart is problematic because the potential cross contamination of organisms.
- Ideally you would want to store these two items away from each other.

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Why is this signage confusing?

- Which sign do you follow?
 - One precaution sign requires hand soap/water for hand hygiene and bleach for disinfection of surfaces and shared equipment
 - One precautions signs does not.
- If a staff see this sign configuration, what should they do?

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Open Every Door, Look In Every Drawer



Original shipping boxes



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Are these clean or dirty?
How do you know?

Is this item clean or dirty?
Should it be stored here?



What do you see?

- Do we know which ones are cleaned and which are dirty?
- Hoyer lift directly next to a soiled linen that has a full bag.
- Soiled linen cart blocking access to cabinets, sink and soap.

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EVS Closet



- Is this dilution machine made for these chemicals?
- When was it calibrated last?
- The basin is very dirty.

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EVS Closet



- Are all the chemicals present being used?
- Ask staff to show you how they prepare their carts.
- Watch the process and ask questions. What is that chemical used for?

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What do you see?

- What are the issues with the broom and dustpan?
 - They were brought into the rooms, could not be disinfected – leading to cross-contamination.

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What do you see?

Items found and why are they a problem?

- Soda cans
- Towel in the toilet brush holder
- Spray bottles
- Putty knife has a sticker on it
- Tape dispenser
- Floor signs are on top of cart
- One large scouring pad or scrubber

ASK YOURSELF:

1. Is there anything on the cart that shouldn't be there?
2. Is the cart organized in a way to decreased of cross contaminations of tools and supplies?
3. Are there items on the cart not authorized by the facility?
4. Are there things that **SHOULD BE** on the cart that are missing?

General Principles

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Don't forget the
outdoor and
adjacent
building areas

Open every door

Disaster
Storage

The Great
Unknown

EVS Closet

What
doors can
you think
of?

Catch all
Storage



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EVS Cart Video

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YouTube

Search

Q

Microphone icon

Environmental Services (EVS) Cart Set-Up

Play (k) COUNTY OF SAN DIEGO HEALTH AND HUMAN SERVICES AGENCY

LIVE WELL SAN DIEGO

Healthcare Associated Infections Program

Accredited Health Department PHAB Advancing Public Health Performance

0:01 / 6:28

Environmental Services (EVS) Cart Set-Up

<https://www.youtube.com/watch?v=5fJkWJoUiqw>

County of San Diego - Health & Human Services Agency

1.62K subscribers

Subscribe

Like

Dislike

Share

Save

More options



EVS Cart Video

For internal use only. Not for distribution.



**Example
of an effective
EVS cart set-up**



**Video
provides
guidance on
how to set
up an
effective
EVS cart.**

5:51 / 6:28



EVS Cart Video

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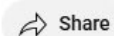


Video also discusses commonly seen struggles with EVS carts when doing audits.

Environmental Services (EVS) Cart Set-Up



County of San Diego - Health & Human Services Age...
1.64K subscribers



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EVS Cart Video



Video talks about evidence base practice recommendations for supplies and tools and the rationale behind the choices being mentioned



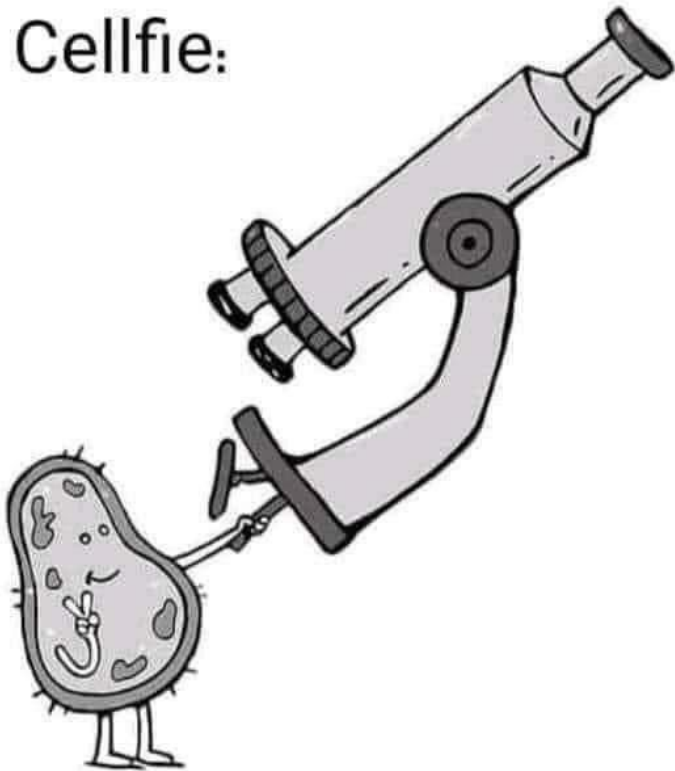
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What to do with all the information?



Cellfie:



- Document what you see systematically
- Prioritize the most important or egregious observations!!!!
- Look through the available tools. Use them if they work for you. Or use them as an example to create your own.
- Consider using a spreadsheet
- Communicate the data with graphs and tables
- **AND...**
- Share the information with leadership and floor staff
- If it is possible, round with other IPs at their facility

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Summary



Benefit of conducting IP rounds

- Observe and improve infection prevention practices: general IPC, HH compliance, availability of supplies, disinfection of shared equipment, proper signage, etc.
- Evaluate environmental conditions – fire safety, equipment condition, etc.
- Learn and share new findings – improve overall relationships



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Summary



- Open every door, look in every drawer, and open every cabinet to observe the process and identify IPC gaps.
- Invite others to round with you!
 - EVS manager – understand EVS cleaning process, advocate for a fair ratio, assess the list of disinfectant, and aid with the written cleaning process
 - Maintenance director
 - DON, DSD, Administrator, Corporate Consult



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County HAI Program can help!



Outbreak
response

Support IP
rounding

Interpret
state/federal
guidance

Support staff
in-services

Support
quality
improvement
projects

Share
resources
and tools



www.sdhai.org
phs.hai.hhsa@sdcounty.ca.gov

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Next Collaborative

*****July 23, 2025*****

11:00AM – 12:00PM

Microsoft TEAMS

Featured Topic:

“Bridging Microbiology and Prevention”

1 Contact Hour Offered

Submit questions or
feedback about today’s meeting to:

PHS.HAI.HHSA@sdcounty.ca.gov

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Contact Hour Instructions

- **Ensure your TEAMS name is your full name**
- **Complete by June 27th, 5:00 PM**
- **Expect your certificate by July 15th.**



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Contact us at:

PHS.HAI.HHSA@sdcounty.ca.gov



The Public Health Services department, County of San Diego Health and Human Services Agency, has maintained national public health accreditation, since May 17, 2016, and was re-accredited by the Public Health Accreditation Board on August 21, 2023.

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