

We will begin in a moment

**Please join us in our activity before we get started.
Enter “What is a hobby that brings you joy/makes
you smile?” in the chat.**



Instructions for Contact Hour

1. Update your Zoom name to reflect your full name
2. Zoom name MUST match your evaluation name
3. Enjoy the entire program
4. Complete the post-evaluation by February 24, 2023, 5:00 PM (available on the last slide)
5. Certificate will be emailed to you by March 15, 2023

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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

Reminders

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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



"Right click" to rename



Type into the chat your:

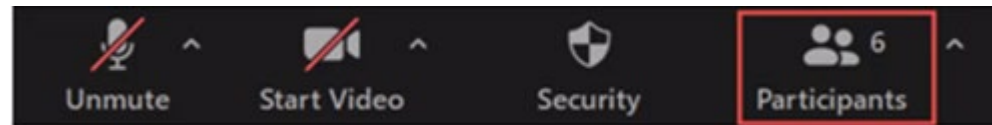
- Name
- Title
- Facility

Reminders

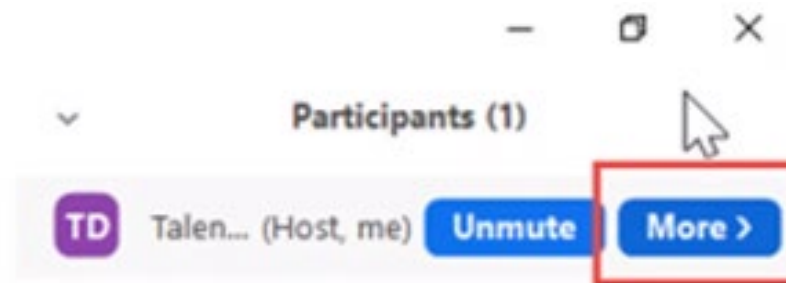
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Please update your name on the participant list

1. Find your name on the participant list



2. Hover over your name and click “MORE”



3. Click “RENAME:
4. Type your full name

Land Acknowledgement



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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.

Agenda



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Welcome

General Updates

Featured Topic: Enhanced Standard Precautions

Announcements

Next Collaborative

HAI WEBSITE

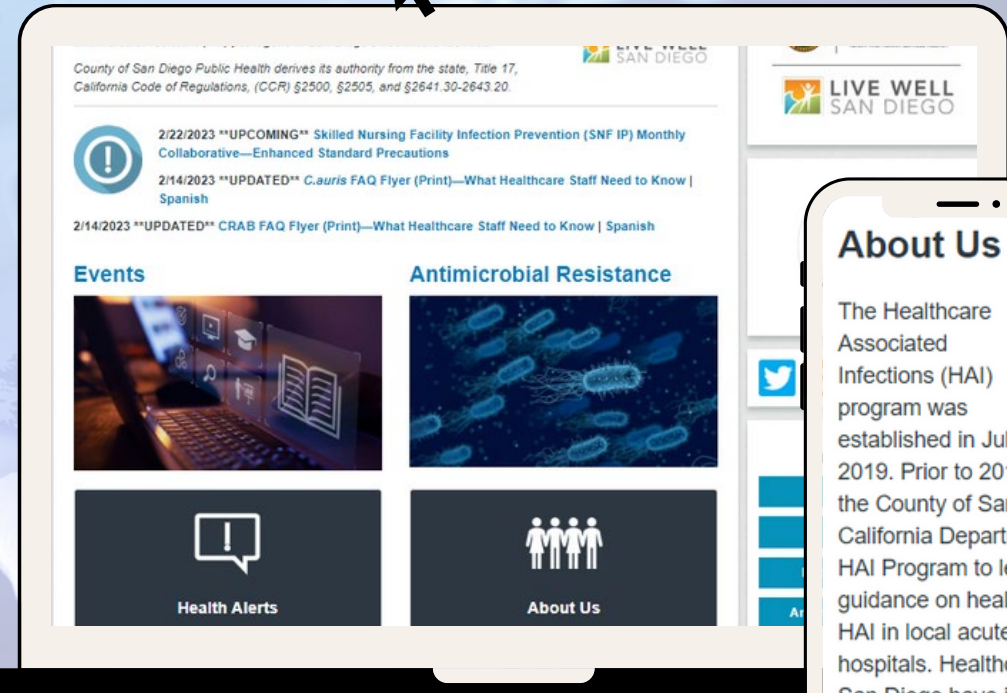


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Visit our
"About Us"
page

SCAN ME



General Updates

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- **New Health Alerts**
- **Respiratory Virus Update**
- **AFL Updates**

San Diego CAHAN



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To: CAHAN San Diego Participants

Date: Feb 10, 2023

From: Public Health Services

Health Advisory: Increase in Hepatitis A Virus Infections including Persons Experiencing Homelessness in San Diego County

Key Messages

- Six acute hepatitis A virus (HAV) infections have been confirmed in San Diego County residents, with symptom onsets beginning January 10, 2023, through February 6, 2023. None of the cases reported international travel, but three were persons experiencing homelessness (PEH).
- Early identification of cases, post-exposure prophylaxis, and vaccination of at-risk populations are the key to the prevention of hepatitis A.
- Report all suspect and confirmed HAV cases to the Epidemiology Unit by faxing a Confidential Morbidity Report, or by calling 619-692-8499 (Monday-Friday 8 AM-5 PM), or 858-565-5255 (after hours).

State Health Advisory



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TOMÁS J. ARAGÓN, M.D., Dr.P.H.
Director and State Public Health Officer

State of California—Health and Human Services Agency California Department of Public Health



GAVIN NEWSOM
Governor

Health Advisory: Emergence of *Candida auris* in Healthcare Facilities in Northern California February 2023

California Department of Public Health (CDPH) and local public health partners are alerting healthcare providers of the emergence of epidemiologically-linked *Candida auris* (*C. auris*) cases associated with acute care hospital (ACH), skilled nursing facility (SNF), and outpatient settings in Sacramento and Stanislaus counties since September 2022. Additionally, at the end of January 2023, CDPH was alerted to a case in Contra Costa county associated with an ACH and long-term care setting. These were the first reported

Respiratory Virus Update



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San Diego County Respiratory Virus Surveillance Report

Prepared by Epidemiology and Immunization Services Branch

www.sdepi.org

February 16, 2023

COVID-19

Cases
139,934

Deaths
344

Outbreaks*
345

7/3/2022 – 2/11/2023

Influenza

Cases
20,869

Deaths
40

Outbreaks*
23

7/3/2022 – 2/11/2023

*In residential congregate settings

COVID-19 and Influenza Cases by Episode Week, Fiscal Year-to-Date

Figure 2.1. San Diego County COVID-19 Confirmed and Probable Cases by CDC Episode Week*, 2022-23 Fiscal Year-to-Date (N=157,896)

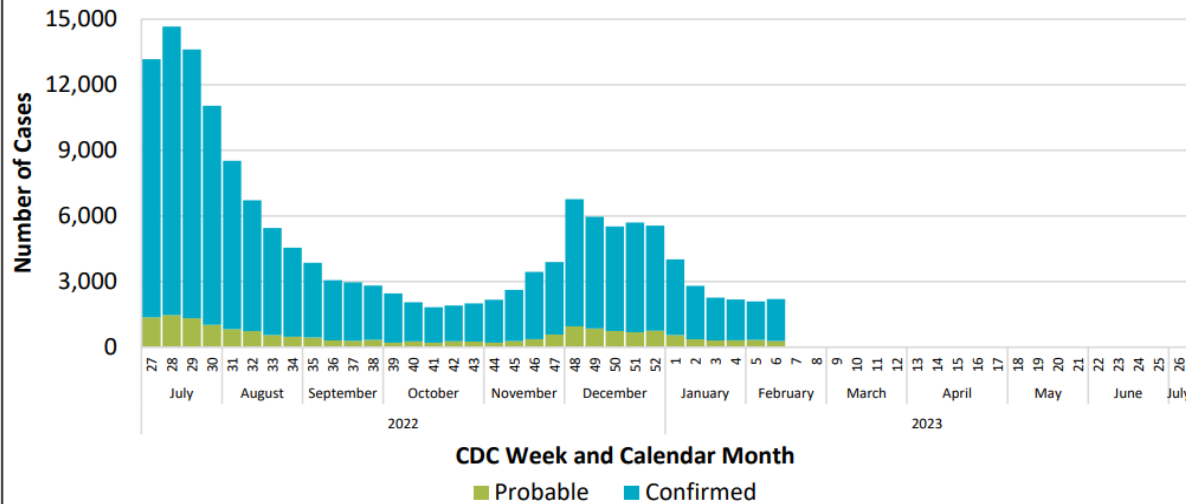
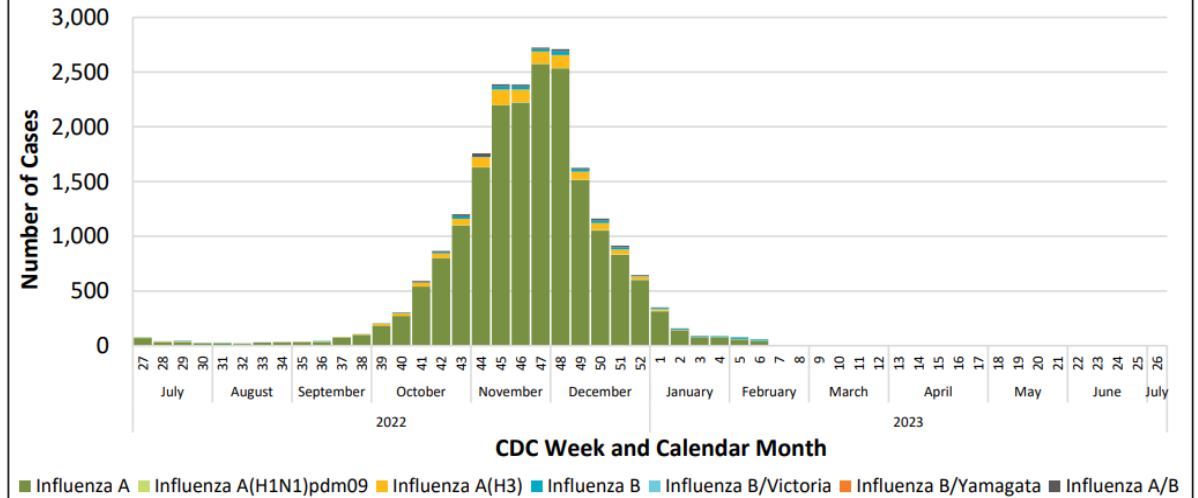


Figure 2.2. San Diego County Influenza Cases by Type and CDC Episode Week*, 2022-23 Fiscal Year-to-Date (N=20,869)



New AFLs



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- **AFL 23-13 (2/7/23)** - Notice of Expiration of Temporary Waivers Related to the COVID-19 Pandemic

County/CDPH Briefings



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- **County LTC Sector COVID Monthly Telebriefing:**
 - 4th Thursday @ 2PM-3PM
 - Next briefing is on 2/23/2023

- **CDPH Healthcare Facility Call:**
 - Bi-weekly Tuesday @ 8AM-9AM
 - Next call is on 2/28/2023 & 3/14/2023

- **CDPH/HSAG SNF IP Webinars:**
 - 2nd/4th Wednesday @ 3PM-4PM
 - Next webinar is on 2/25/2023 & 3/8/2023

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Contact Hour Instructions

- **Ensure your full name identifies you on Zoom**
- **Enjoy the full presentation**
- **Complete the post-evaluation**



Mara Rauhauser
BSN, RN, PHN

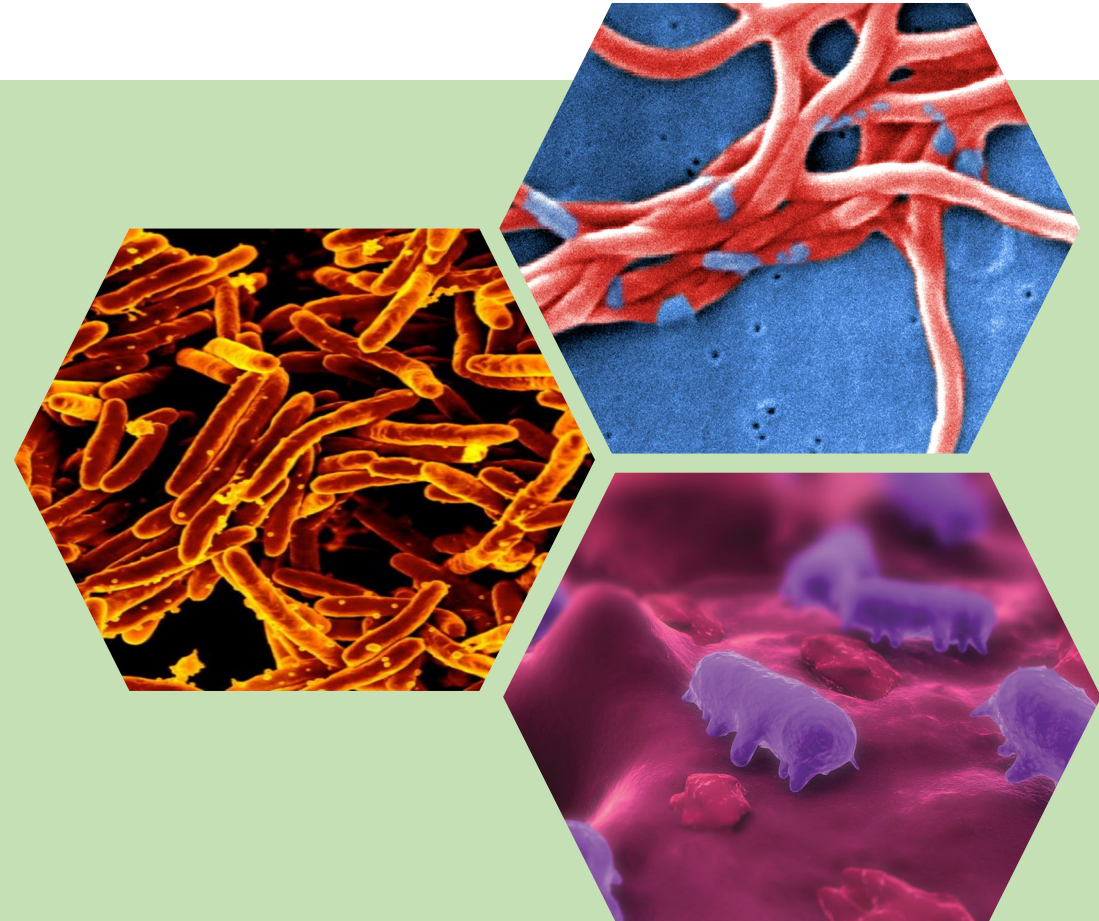
Speaker Introduction

Enhanced Standard Precautions



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Enhanced Standard Precautions



Objectives

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At the conclusion of this training, the Infection Preventionist will be able to:

1. Explain the rationale behind ESP.
2. Verbalize the main points of ESP implementation.
3. State 3 scenarios when staff would wear gown and gloves to provide care, according to ESP.
4. Provide 3 characteristics that are associated with high risk of MDRO colonization.



Enhanced Standard Precautions



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TOMÁS J. ARAGÓN, M.D., Dr.P.H.
State Public Health Officer & Director

State of California—Health and Human Services Agency **California Department of Public Health**



GAVIN NEWSOM
Governor

October 5, 2022

AFL 22-21

TO: Skilled Nursing Facilities (SNF), and General Acute Care Hospitals (GACH) with a SNF Distinct Part (DP)

SUBJECT: Enhanced Standard Precautions for Skilled Nursing Facilities, 2022
(This AFL Supersedes AFL 19-22)

Can you relate?

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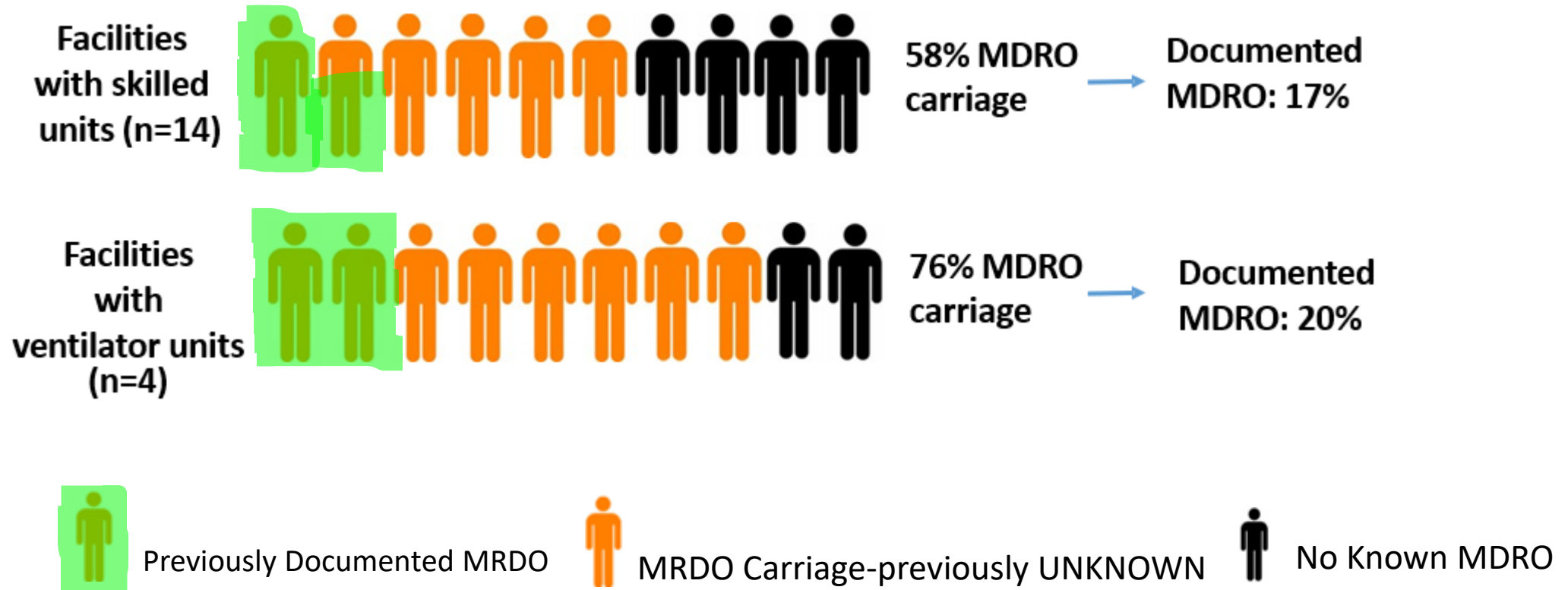
Driving to work today like



Background

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Unknown MDRO Carriage in Skilled Nursing Facility Residents



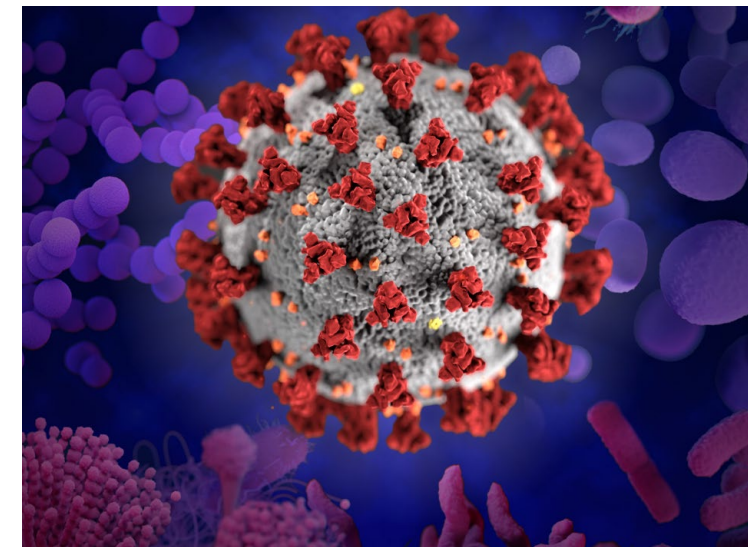
The COVID Effect

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Available data show an alarming increase in resistant infections starting during hospitalization, growing at least 15% from 2019 to 2020.

- Carbapenem-resistant *Acinetobacter* (↑78%)
- Antifungal-resistant *Candida auris* (↑60%)*
- Carbapenem-resistant Enterobacterales (↑35%)
- Antifungal-resistant *Candida* (↑26%)
- ESBL-producing Enterobacterales (↑32%)
- Vancomycin-resistant Enterococcus (↑14%)
- Multidrug-resistant *P. aeruginosa* (↑32%)
- Methicillin-resistant *Staphylococcus aureus* (↑13%)



Poll #1



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Do you currently have residents in your facility on contact precautions due to an MDRO?

1. Yes
2. No

Have you noticed an increase in the number of MDRO cases within your facility?

1. Yes, there has been a large increase
2. Yes, there has been a small increase
3. No, I have not noticed an increase

What is the most challenging aspect of dealing with an MDRO case?

1. Cohorting difficulties
2. Loss of 1 or more bed spaces
3. Lack of staff adherence to contact isolation protocol
4. Accommodating resident needs with these restrictions in place. (e.g., rehab activities, desire of resident to join activities or go outside)

Additional Challenges

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- Prevalence of MDROs in this population is increasing and often unknown.
- In the past, interventions in SNFs have been targeted only for residents with active MDRO infections
- Single bed rooms are not typically available in SNFs.
- MDRO colonization is often for a long duration.
- Some SNFs are reluctant to accept residents with known MDROs (whether colonization or active infection).

Additional Challenges

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- HCWs hands, uniforms and equipment can become contaminated during high contact activities.
- A broader approach is needed to reduce the spread of MDROs without isolating residents for long periods.
- Recent studies have supported the use of Enhanced Standard Precautions to reduce MDRO transmission.



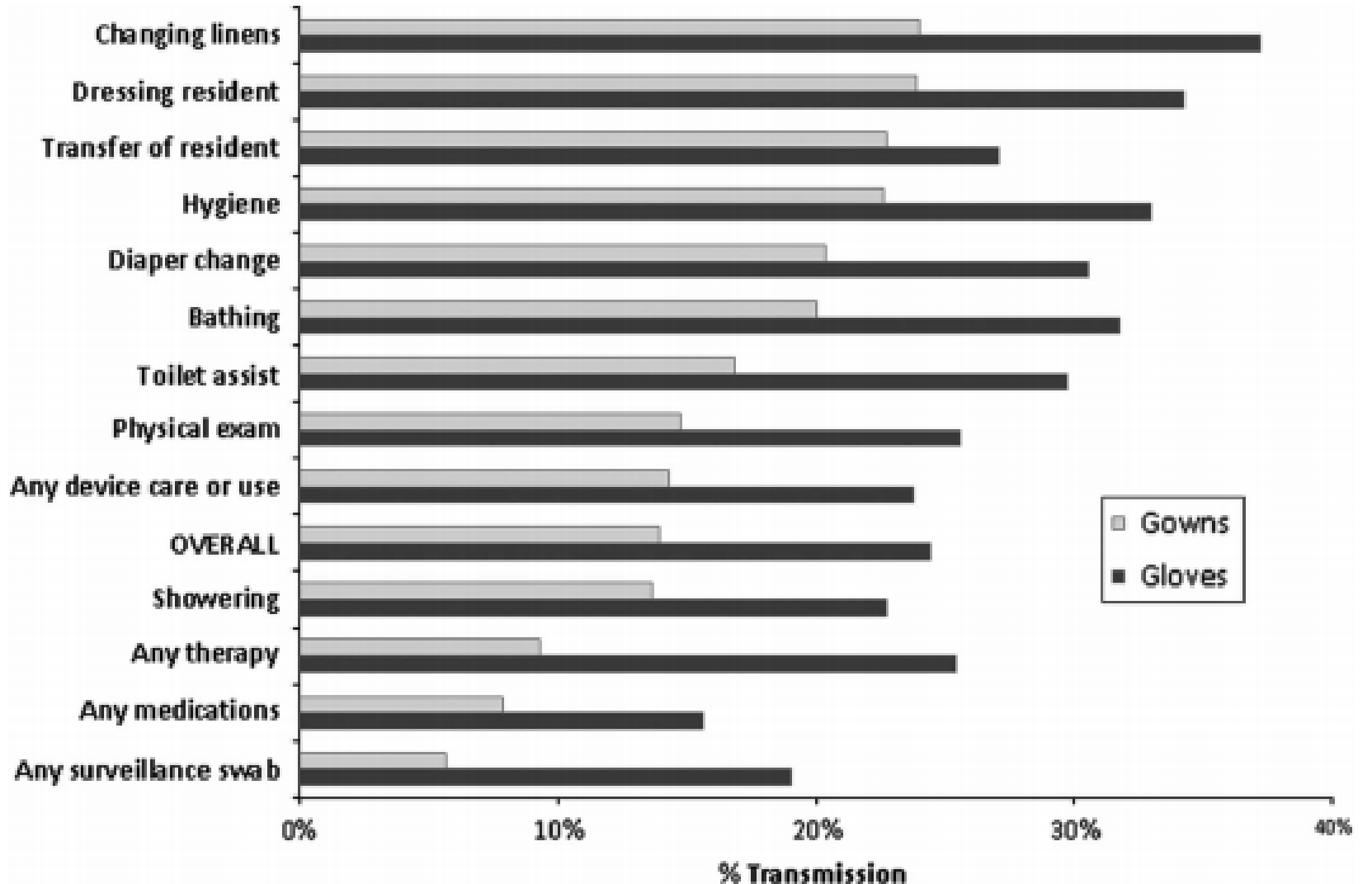
MRSA Transmission

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MRSA Transmission from Colonized Resident to gloves or gown of HCS

High Risk of Transmission:

- Dressing
- Transfer of resident
- Hygiene
- Changing linens
- Toilet assist



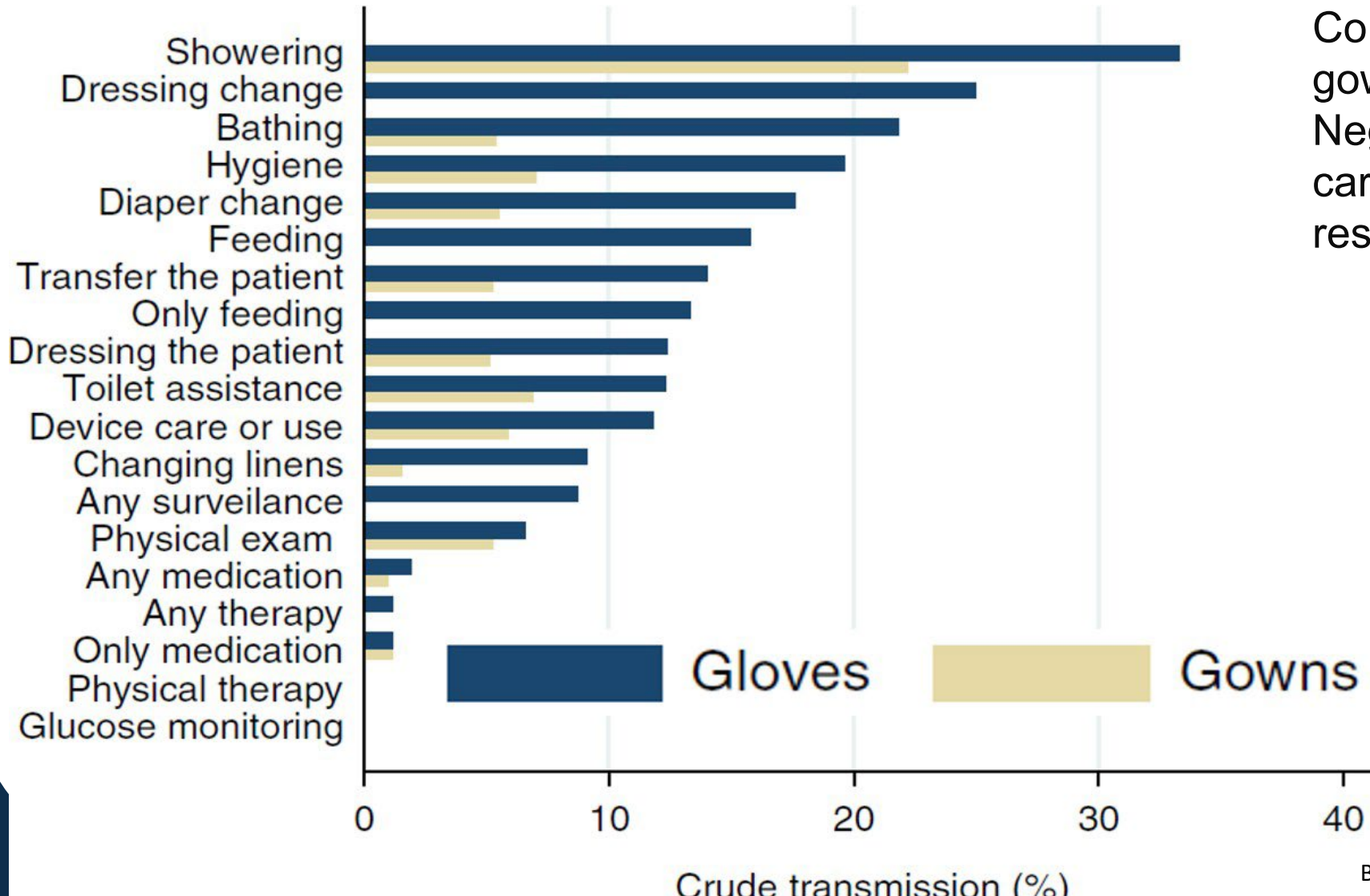
Gram Negative Bacteria

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Contamination of HCWs gloves and gowns with Resistant Gram-Negative Bacteria(RGNB) during care activities with colonized residents

High risk of transmission:

- Showering
- Bathing
- Briefs change
- Transfer of resident
- Hygiene
- Toilet assistance
- Wound dressing changes



Now what do we do?

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Enhanced Barrier Precautions Enhanced Standard Precautions

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**ENHANCED
BARRIER
PRECAUTIONS**

EVERYONE MUST:



Clean their hands, including before entering and when leaving the room.

PROVIDERS AND STAFF MUST ALSO:



Wear gloves and a gown for the following High-Contact Resident Care Activities.

- Dressing
- Bathing/Showering
- Transferring
- Changing Linens
- Providing Hygiene
- Changing briefs or assisting with toileting



Device care or use:
central line, urinary catheter, feeding tube, tracheostomy

Wound Care: any skin opening requiring a dressing

Do not wear the same gown and gloves for the care of more than one person.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



What is ESP

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Instead of a pathogen-based approach...



A resident centered approach

What is ESP

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Enhanced Standard Precautions is:

- ✓ A resident-centered, risk factor-based approach to prevent MDRO transmission in SNFs.
- ✓ For residents at **high risk of MDRO colonization** and transmission:
 - ✓ **Gloves and gowns** are used during specific care activities with greatest risk for MDRO contamination of HCW hands, clothes and environment
- ✓ Does not rely on knowledge of resident MDRO colonization status
- ✓ Allows residents with adequate hygiene and containment of body fluids to **leave their room** and **participate** in facility activities.



Who is included?

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Enhanced Standard Precautions are indicated for residents with any of the following :

- **Infection or colonization** with an MDRO *when Contact Precautions do not otherwise apply*
- **Wounds** (including unhealed surgical wounds, decubitus ulcers or other breaks in skin integrity)
- **Indwelling medical devices** (e.g. urinary catheters, feeding tube, tracheostomy, colostomy, IV line)

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When to Use Contact Prec.

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Contact Precautions should be used for
All residents infected or colonized with
an MDRO who also have:

- Presence of acute diarrhea
- Draining wounds or other sites of secretions or excretions that are unable to be covered or contained
- For a limited time period on units or in facilities during an investigation of a suspected or confirmed MDRO outbreak

Residents who have another infection or condition for which Contact Precautions is recommended on Appendix A

What Does
*“when Contact
Precautions do
not apply”*
Mean?



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When to use ESP

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The Six Moments of Enhanced Standard Precautions

For these six groups of care activities, use hand hygiene, gloves, and gowns.



Use hand hygiene, gown and glove during:

- ✓ **Morning and evening care**
 - ✓ Dressing, grooming, bathing, oral care, changing bed linens.
- ✓ **Toileting**, changing incontinence briefs and peri-care
- ✓ **Care of indwelling devices**
 - ✓ Urinary catheters, IV catheters, tracheostomy tubes, feeding tubes
- ✓ **Medical treatments** that require close contact with the resident and his/her environment
 - ✓ Respiratory treatments, tube feedings, changing an ostomy bag.
- ✓ **Wound care**
- ✓ Mobility assistance and preparation to leave the resident's room
- ✓ **Environmental cleaning** in the resident's room

Additional Components of ESP

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- ✓ All residents should be **bathed regularly** (at least twice per week)
- ✓ Residents should wear **clean clothes**
- ✓ Residents should perform **hand hygiene** frequently throughout the day, especially before leaving his/her room
- ✓ Residents should have **contained** urine/fecal excretions or wound drainage contained when visiting common areas
- ✓ **Dedicate equipment** to each resident when possible-don't forget hoyer slings
- ✓ **Visitors** do not need to don PPE in the resident's room **unless providing high contact care.**

Where does ESP fit?

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Standard
Precautions

Enhanced Standard
Precautions

Contact Precautions

Where does ESP fit?

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Standard Precautions

Overview	Implementation
<ul style="list-style-type: none">✓ Used with all resident care✓ Based on an assessment of risk to protect HCWs and prevent spread of infection	<ul style="list-style-type: none">✓ Perform Hand Hygiene✓ Use PPE whenever there is an expectation of possible exposure to infectious material✓ Follow respiratory hygiene/cough etiquette✓ Ensure appropriate patient placement✓ Properly handle equipment and disinfect between residents✓ Clean and disinfect environment appropriately✓ Handle textiles and laundry carefully✓ Follow safe injection practices✓ Handle needles and sharps safely

Where does ESP fit?

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Enhanced Standard Precautions

Overview

A resident-centered, risk factor-based approach to prevent MDRO transmission in SNFs.

Implementation

✓ **Standard Precautions**

In addition, **Use hand hygiene, gown and glove** during the following moments, even if there is no expectation of exposure to blood or body fluids :

✓ **Morning** and **evening** care

✓ Dressing, grooming, bathing, oral care, changing bed linens.

✓ **Toileting**, changing incontinence briefs and peri-care

✓ Care of **indwelling devices**

✓ Urinary catheters, IV catheters, tracheostomy tubes, feeding tubes

✓ Medical treatments that require **close contact** with the resident and his/her environment

✓ Respiratory treatments, tube feedings, changing an ostomy bag.

✓ **Wound care**

✓ **Mobility assistance** and **preparation** to leave the resident's room

✓ **Environmental cleaning** in the resident's room

Where does ESP fit?

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Contact Precautions

Overview	Implementation
Used to prevent spread of germs via contact from an individual with known or suspected infection	<ul style="list-style-type: none">✓ Standard Precautions✓ In addition, Gown and gloves must be used for all room entries and care activities✓ Room placement:<ul style="list-style-type: none">✓ Single person room is ideal✓ Cohorting with like organisms is permissible✓ Room restriction except for medically necessary care✓ Visitors must wear PPE upon entrance to the resident's room

Let's Practice: Poll #2

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The Six Moments of
Enhanced Standard Precautions
For these six groups of care activities, use hand hygiene, gloves, and gowns.



Scenario #1

- One of these **signs** is present at the resident door.
- You are a **CNA** preparing to assist the resident with **morning care**. (select one)
 - You need to do **hand hygiene**
 - You need to wear a **gown**
 - You need to wear **gloves**
 - All of the above

Poll Question #3

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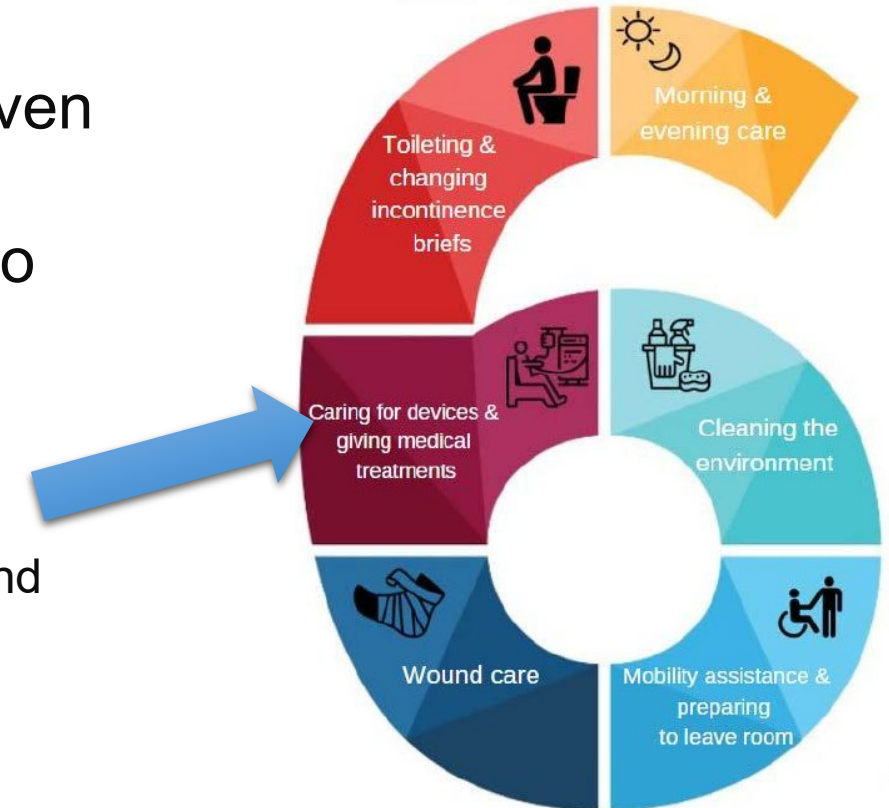
Scenario #2

A **LVN** is doing a **med pass**. She stands outside the doorway and preps the medication for the resident in bed A at her cart. This resident is on **enhanced standard precautions**. The medications will be given via **g tube**.

- After doing hand hygiene, does the nurse need to gown and glove up?
 - Lets look at the 6 moments sign to help us decide.
- ✓ Care of indwelling devices
 - ✓ Urinary catheters, IV catheters, tracheostomy tubes, feeding tubes
- ✓ Medical treatments that require close contact with the resident and his/her environment
 - ✓ Respiratory treatments, tube feedings, changing an ostomy bag
- **When** should she don her PPE?

The Six Moments of Enhanced Standard Precautions

For these six groups of care activities, use hand hygiene, gloves, and gowns.



A few more examples....

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For a room that is on **Enhanced Standard Precautions**, what should you do in the following situations?

- **Passing meal trays** (just dropping off the tray)
- Passing out materials from **Activities**
- **Turning off** a call light
- Stepping into the room to speak with the resident



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How to Be Successful



Hand Hygiene



Environmental
Cleaning and
Disinfection



Enhanced
Barrier
Precautions



Auditing



Communication

How to Get Started

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Contact HAI Team for assistance and support

Assess

- ✓ Facility situation: adequate staffing, stable leadership, trained Infection Preventionist

Educate

- ✓ Make a **plan**
- ✓ Consider using CDC Enhanced Barrier Precautions **tools**
- ✓ **Leadership:** Administrator, DON, Managers
- ✓ Staff: **all** departments
- ✓ **Residents** and **Families**

Implement

Reassess



We want to be a part of your team



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**Alone we can do so little
Together
We can do so much

Helen Keller**



Resources



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[High Prevalence of Multidrug-Resistant Organism Colonization in 28 Nursing Homes: An “Iceberg Effect” \(nih.gov\)](#)

McKinnell JA, et al The SHIELD Orange County Project: Multidrug-resistant Organism Prevalence in 21 Nursing Homes and Long-term Acute Care Facilities in Southern California. Clin Infect Dis. 2019 Oct 15;69(9):1566-1573. doi: 10.1093/cid/ciz119. PMID: 30753383; PMCID: PMC7320073.

[2022 SPECIAL REPORT: COVID-19 U.S. Impact on Antimicrobial Resistance \(cdc.gov\)](#)

Roghmann M. Infect Control Hosp Epidemiol 2015; 36(9): 1050-1057

Blanco et al. Infect Control Hosp Epidemiol 2018; 39:1425-1430

<https://www.cdc.gov/infectioncontrol/pdf/webinarslides/webinar-ebpinnh-nov2022-slides-508.pdf>

<https://www.cdc.gov/hicpac/pdf/EnhancedBarrierPrecautions-H.pdf>

<https://www.cdc.gov/hai/pdfs/containment/PPE-Nursing-Homes-H.pdf>

[ESP \(ca.gov\)](#)

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Questions???

Next Collaborative



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**March 22, 2023
11:00AM – 12:00PM
ZOOM**

Featured Topic:

“What an Infection Preventionist (IP) needs to know about ventilation!”

1 Contact Hour Offered

Registration Link

**Submit questions about
or**

Feedback about today’s collaborative meeting to:

PHS.HAI.HHSA@sdcounty.ca.gov

—”
**THANK
YOU**
”—

Contact us at:

PHS.HAI.HHSA@sdcounty.ca.gov



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