

ENHANCED
BARRIER
PRECAUTIONS

UNDERSTANDING
THE WHY

WHAT ARE ENHANCED BARRIER PRECAUTIONS?? (EBP)

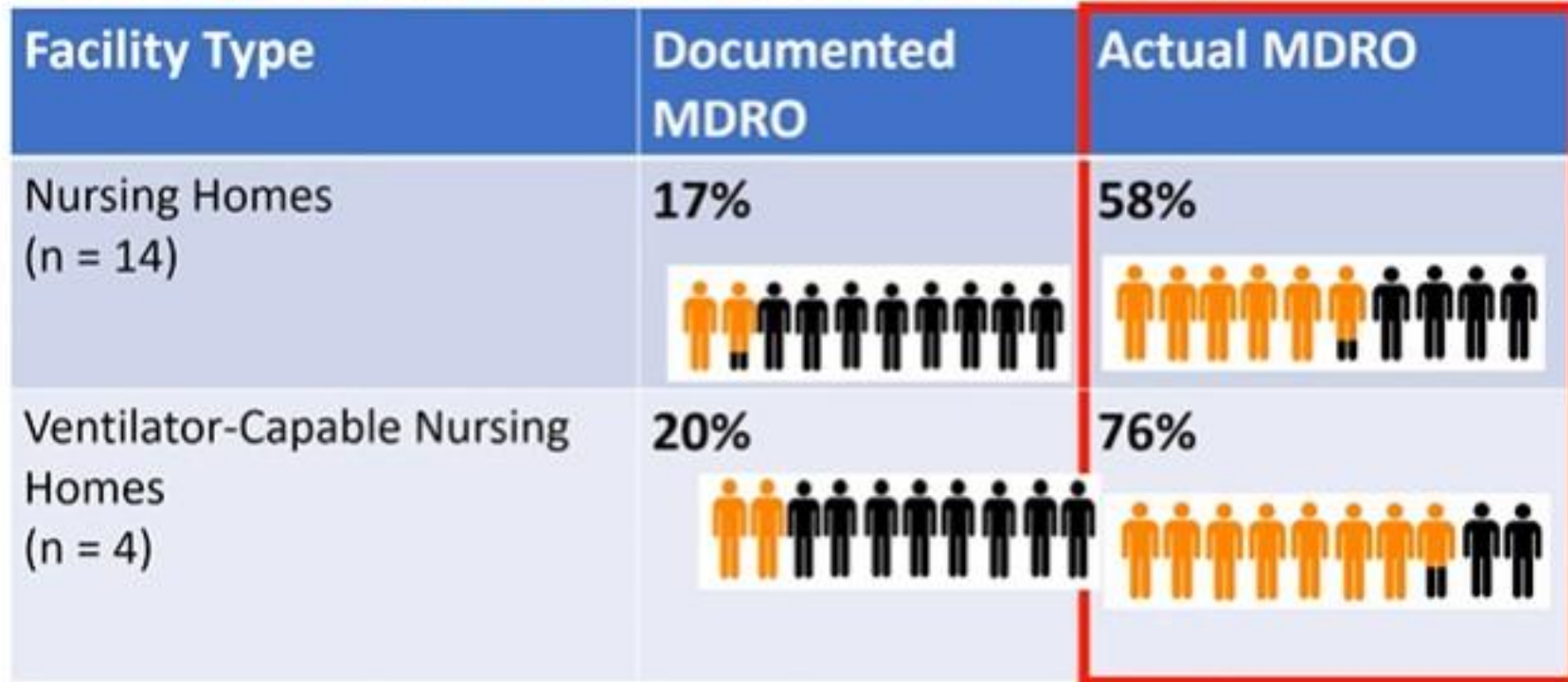
- Historically, interventions in nursing homes have focused on residents who are actively infected with an MDRO
- Need for a broader approach to reduce the spread of MDROs without isolating residents for long periods of time
- Recent studies have indicated the use of EBP can effectively reduce the spread of MDROs
- Not limited to outbreaks or specific MDROs
- Targeted gown and glove use during high contact resident care activities
 - Dressing, bathing/showering, transferring,
- May be applied in the following situations (when Contact precautions do not apply)
 - Wounds
 - Indwelling medical devices
 - Central line, urinary catheter, feeding tube, tracheostomy
 - Infection or colonization with an MDRO

BARRIER

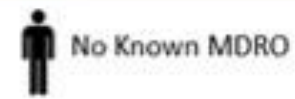


Are MDROs really a big deal in LTC??

The Large Burden of MDROs in Nursing Homes



McKinnell JA et al, Clin Infect Dis. 2019; 69(9):1566-1573



STOP **ENHANCED BARRIER PRECAUTIONS** **STOP**

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

ENHANCED BARRIER PRECAUTIONS

- Staff must be trained on proper PPE use
- PPE and hand hygiene must be available at point of use
- Environmental cleaning and disinfection are a must to decrease environmental burden
- Staff must be audited on EBP to ensure appropriate use and compliance
- Communication between facilities is key!!

ENHANCED BARRIER PRECAUTIONS IN NURSING HOMES

- Which patients and residents require EBP?
- What activities and/or locations would require donning the PPE for individuals on EBP?
- Do patients ever come off EBP?



Who Needs EBP

1. All Individuals who are Infection or Colonization with a novel or targeted MDRO
(Who are not already on Contact Precautions)

2. Wounds that
require a Dressing

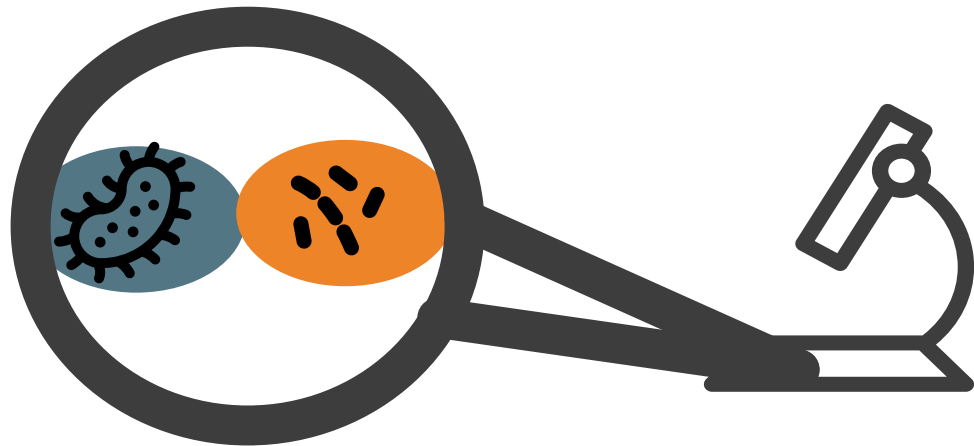
3. Indwelling
Medical Device

Regardless of whether there is infection or colonization



Novel or Targeted MDROs

- Pan-resistant organisms
- Carbapenemase-producing Enterobacteriaceae
- Carbapenemase-producing *Pseudomonas spp.*
- Carbapenemase-producing *Acinetobacter baumannii*
- *Candida auris*



OTHER EPIDEMIOLOGICALLY IMPORTANT ORGANISMS

EBP may be used for these also:

- MRSA
- ESBL Producing Enterobacteriales
- VRE
- MDR *Pseudomonas aeruginosa*
- Drug Resistant *Streptococcus pneumoniae*

Wounds

What Precautions are Required?

MRSA oozing leg wound

EBP, Contact, or _____?

Skin Tear

EBP, Contact, or _____?

Decubital Ulcer

EBP, Contact, or _____?

New tracheostomy

EBP, Contact, or _____?

Devices

EBP or More Needed, Regardless of MDRO Status

EBP May Not be Needed (in the absence of an MDRO)

Central Lines
Urinary Catheters
Feeding Tubes
Tracheostomy
Ventilator
Dialyzer

REGARDLESS of the MDRO
status

Temporary IV for
Hydration
TENS units
Braces
Oxygen
CPAP



PPE & Precautions

Standard
Precautions

Everyone, all the time

EBP

Infection or colonization with a novel or targeted MDRO when Contact Precautions do not apply. • Wounds and/or indwelling medical devices (e.g., central line, urinary catheter, feeding tube, tracheostomy/ventilator) regardless of MDRO colonization status

Contact
Precautions

Infected or colonized with a novel or targeted MDRO & acute diarrhea, draining wounds or excretions that are unable to be covered or For infections (e.g., C. difficile, norovirus, scabies) and See Appendix A

High Contact Care Activities

Consensus at your facility is critical to implementing effective EBP

	In Resident Room	Outside Room
EBP Required	<p>All Hygiene Activities</p> <ul style="list-style-type: none">• Brushing Teeth• Toileting• Showers• Changing linens• Hair and face care• In room therapy• Dressing changes• Device Care	<p>Therapy, Gym, Certain activities</p> <ul style="list-style-type: none">• High contact therapy• Shared shower room• Responding to an emergency situation• Device and Wound care
EBP likely not needed	<p>Not touching patient and environment</p> <ul style="list-style-type: none">• Mopping Floor• Delivering Mail• Safety Check	<p>Low Risk or minimal contact (clean and intact)</p> <ul style="list-style-type: none">• Transfer to dining chair or into vehicle

Level of Contact

Consider the task, where and how it is performed at your facility.

- **Highest Risks of Transmission**

Shower, Dressing Change, Hygiene

- **High to Med Risk**

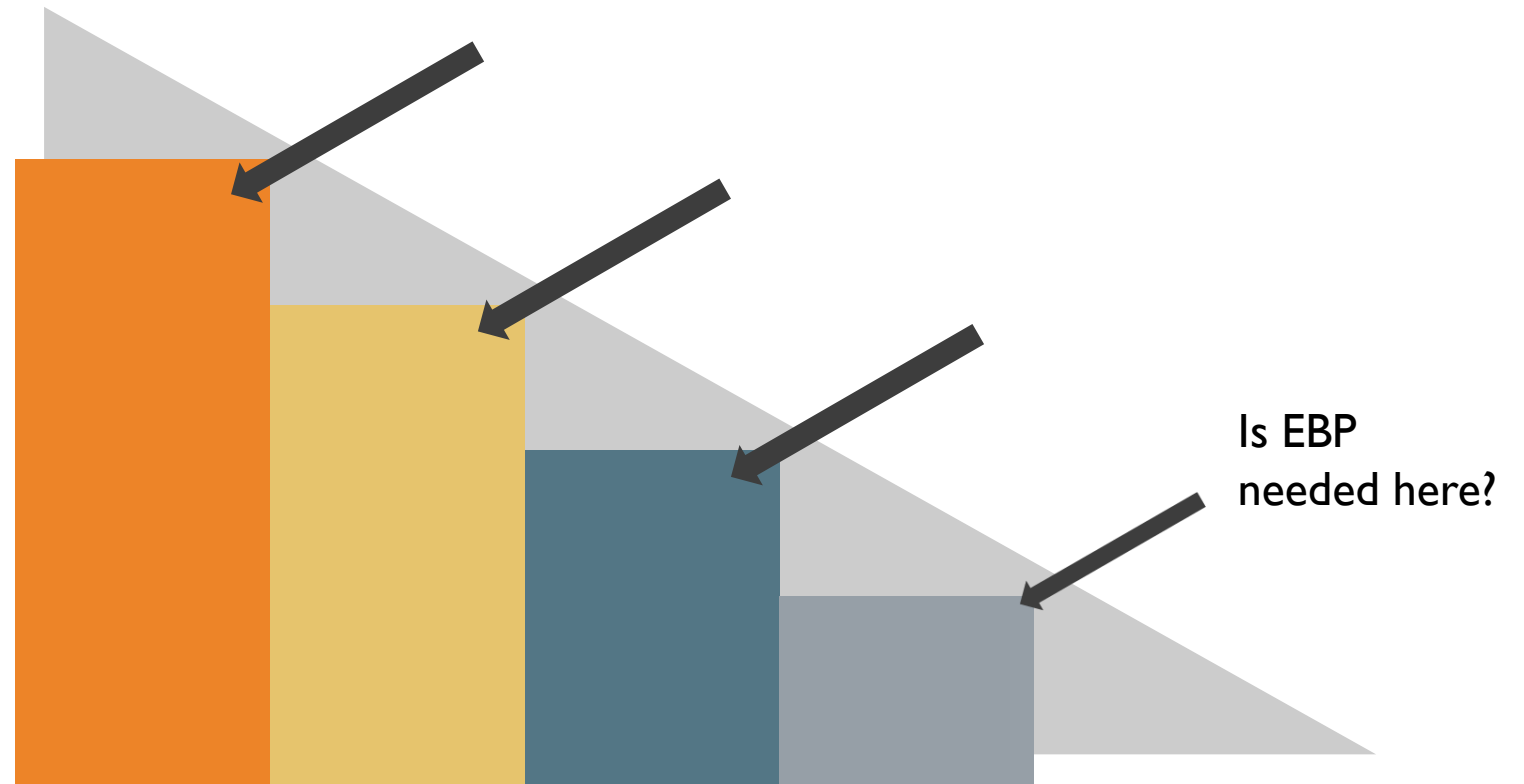
Device Care, Transfers, Dressing Patient

- **Med to Low Risk**

Any Medication, Changing Linens

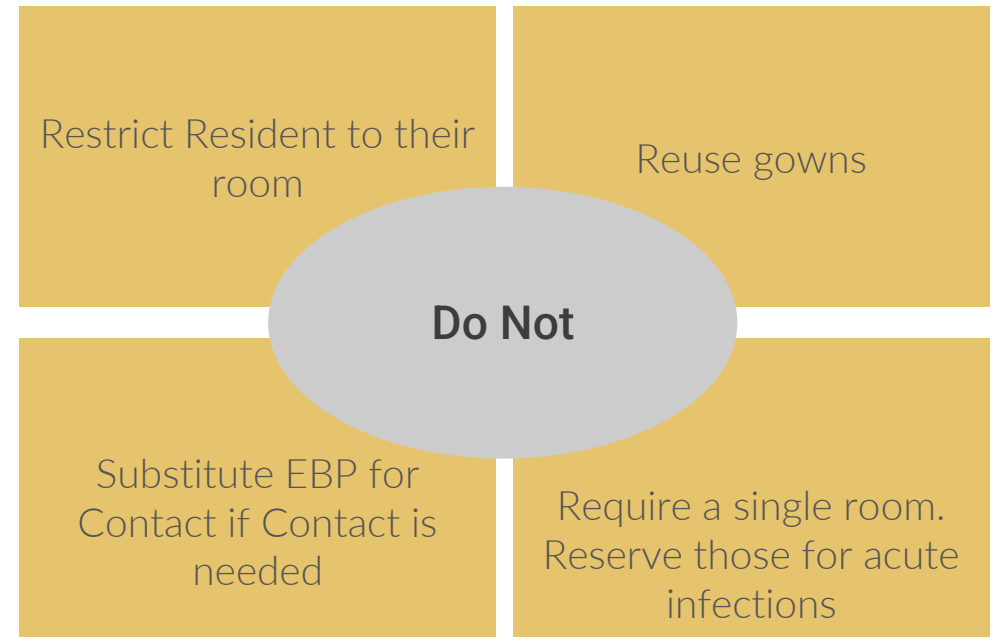
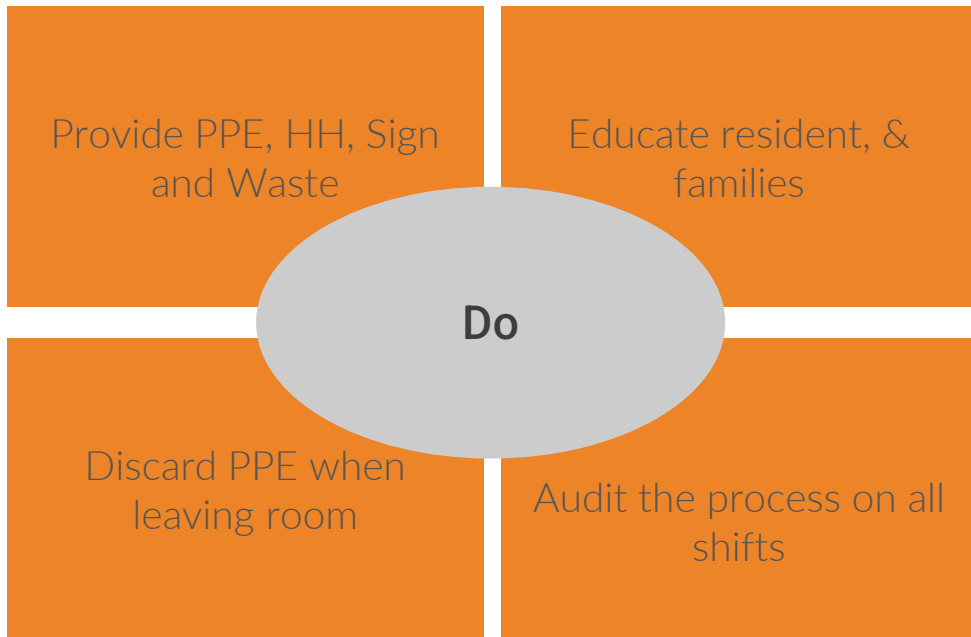
- **Lower Risk**

Blood Glucose, Med pass





DOS AND DON'TS



No MDRO Known?

- The wound has healed, and closed or
- The Device has been removed

MDRO?

- EBP Remains for the duration
- Colonized or Infection

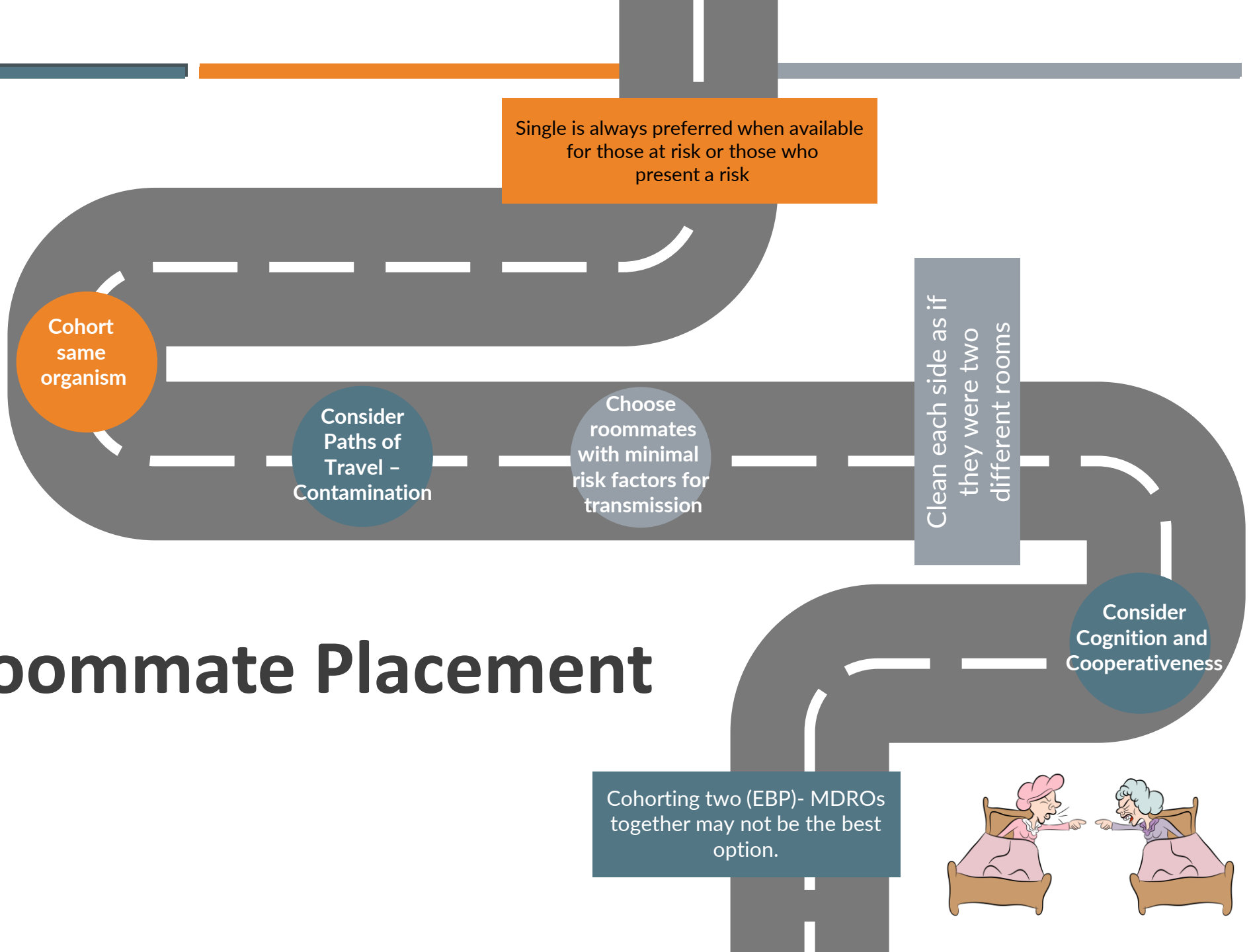
Testing for the clearance of an MDRO is not recommended due to false negatives.

Needs increased Precautions?

The person needs contact, droplet and/or airborne

When to D/C EBP?

Room & Roommate Placement





QUESTIONS?



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A resident is being treated for a UTI caused by VRE?



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A resident who has a PICC line?



CAN YOU COHORT THESE RESIDENTS?

- A resident with a recently diagnosed CR *E. coli* infection and a resident with a history of CR *Ps. aeruginosa* infection?



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A new admission who was on contact precautions in the hospital for an infection with a CRO and has completed antibiotic treatment.



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A resident who has a pacemaker?



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A resident who had a CRO/CRE UTI six months ago, but is no longer being treated?



CAN YOU COHORT THESE RESIDENTS?

- A resident with a Foley catheter and a resident with a history of CROs?



WOULD YOU USE CONTACT PRECAUTIONS OR EBP?

- A resident with an unhealed wound?

SO, WHY ARE WE TALKING ABOUT THIS AGAIN???

- July 17th, 2024
- CDC: Resistant hospital infections increased 20% during COVID-19 pandemic.
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Antimicrobial-resistant organisms typically found in health care settings with increased rates or number of infections since 2019, according to the CDC:

- 1** Carbapenem-resistant Enterobacterales
- 2** Carbapenem-resistant *Acinetobacter*
- 3** Clinical cases of *Candida auris*
- 4** Vancomycin-resistant Enterococcus
- 5** ESBL-producing Enterobacterales
- 6** Multidrug-resistant *Pseudomonas aeruginosa*

THANK YOU

Let us know how we can help.

Send your questions for the next meeting to

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