

# Transforming Nursing Home Care Together (TNT) Program

## Week # 4 (Unit 3)

### Questions and Answers

<b>Question:</b>	<b>If a resident had multi-drug resistant organisms (MDROs) and the transport team did not wear correct personal protective equipment (PPE), how can we handle this situation?</b>
<b>Answer:</b>	<p>This is a great opportunity for a performance improvement project (PIP) and conduct a root cause analysis (RCA). You may find the following as barriers: lack of clear communication upon entry to the facility, frontline staff is not aware that outside transport personnel must also wear PPE required for transmission-based precautions, too many or confusing precaution signage outside of resident doors, insufficient appropriate PPE supplies in the donning areas, etc. After figuring out the root cause(s), then implement solutions and assess the outcomes, i.e., whether there has been any change in practice. For example, if the RCA finds that one of the root causes is a lack of awareness among frontline staff that outside transport personnel must wear appropriate PPE required for transmission-based precautions, then one solution could be to educate frontline staff on the actions they should take.</p> <p>Please feel free to contact our long-term care facilities (LTCF) team at Los Angeles County Department of Public Health (LAC DPH) if you have further questions/issues: <a href="mailto:LACSNF@ph.lacounty.gov">LACSNF@ph.lacounty.gov</a></p> <p>Please note that PPE, other than universal precautions like face masks for source control, should not be worn in common areas like hallways.</p>

<b>Question:</b>	<b>Can we cohort an MDRO with a different organism if room placement is limited?</b>
<b>Answer:</b>	<p>In general, the recommendation is to prioritize cohorting “like with like” whenever possible. Cohorting “like with like” should be based on both the organisms and mechanism of resistance (e.g., MRSA with MRSA, KPC*-<i>E. coli</i> with KPC-<i>E. coli</i>), but if room availability is limited, then it is also possible to cohort MDROs with the same resistance mechanism (e.g., KPC-<i>E. coli</i> and KPC <i>K. pneumoniae</i>). If this is done, facilities must ensure that each bed is treated as a separate room – staff should perform hand hygiene and change PPE in between residents, and beds should be at least 3 feet apart with privacy curtains in place, if possible.</p> <p>When in doubt, please contact our healthcare associated infections (HAI) team at LAC DPH for consultation and recommendations: <a href="mailto:HAI@ph.lacounty.gov">HAI@ph.lacounty.gov</a></p> <p>*KPC = <i>Klebsiella pneumoniae</i> carbapenemase</p>

<b>Question:</b>	<b>Where can we find the pathogen specific guidelines?</b>
<b>Answer:</b>	<p>CDC Appendix A is a great starting point for this: <a href="https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html">https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html</a></p>

<b>Question:</b>	<b>Are we putting novel respiratory precautions throughout the facility due to the pandemic?</b>
<b>Answer:</b>	<p>No, this was never the recommendation. Only residents who are either suspect or confirmed with a transmissible infection should be placed on an appropriate <a href="#">transmission based precaution</a>, and that is no different for COVID 19.</p>

<b>Question:</b>	<b>When a facility reports a reportable disease, does that always result in a visit from the health department?</b>
<b>Answer:</b>	<p>No, not always. After a report is made to the health department (LAC DPH), we determine what are the necessary steps to mitigate transmission, morbidity, and mortality. This depends on the organism and the setting. Typically, the health department may visit when there is an outbreak or an emerging pathogen. Please remember reporting to LAC DPH in a timely way (usually within 24 hours or within 1 working day) is enforced by Title 17, California Code of Regulations § 2500, and failure to comply may result in disciplinary action. All SNF IPs should bookmark and post the Reportable Diseases and Conditions list in a readily accessible place: <a href="http://publichealth.lacounty.gov/acd/docs/ReportableDiseaseList.pdf">http://publichealth.lacounty.gov/acd/docs/ReportableDiseaseList.pdf</a></p> <p>In addition, please refer to the updated CDPH AFL 23-08 “Requirements to Report Outbreaks and Unusual Infectious Disease Occurrences” to determine what should be reported to the CDPH Licensing and Certification (L&amp;C) District Office: <a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-23-08.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-23-08.aspx</a></p> <p><i>Note that LAC HCFs do not need to report single cases of C. auris to HFID.</i></p>

<b>Question:</b>	<b>Can isolation be discontinued even if the clinical provider decided to continue antibiotic therapy?</b>
<b>Answer:</b>	<p>It depends on the transmission method and infectious period for that specific pathogen as well as host factors (e.g., immunocompromise status). The isolation status should be determined in consultation with the treating physician and/or an infectious disease specialist for complicated cases. Please reference Appendix A from CDC as a starting point, which lists by pathogen the type of transmission-based precaution and the recommended duration of precautions: <a href="https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html">https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html</a></p> <p>Please note that some MDROs, such as CRE, can colonize individuals for many months to years even after their initial infection has resolved. This means they may continue to shed the organism and thus pose a transmission risk to other residents if some level of infection control measures do not remain in place. In general, most MDROs can be managed using ESP – except for <a href="#">novel MDROs</a> (such as NDM-CRE or NDM-CRAB). Those must be on Contact Precautions.</p> <p>You should also refer to the CDPH Enhanced Standard Precautions guidance to determine the type of precautions that is needed based on each resident’s individual level of risk for MDROs: <a href="https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx">https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx</a></p> <p>After reviewing the above resources, if you still have questions, please do not hesitate to contact our healthcare associated infections (HAI) team at LAC DPH for consultation and recommendations: <a href="mailto:HAI@ph.lacounty.gov">HAI@ph.lacounty.gov</a>.</p>

<b>Question:</b>	<b>Is there a website where we can obtain the transmission-based precaution posters?</b>
<b>Answer:</b>	<p>You can access the transmission-based precaution posters on the following webpage: <a href="http://publichealth.lacounty.gov/acd/TransmissionBasedPrecautions.htm">http://publichealth.lacounty.gov/acd/TransmissionBasedPrecautions.htm</a></p>

<b>Question:</b>	<b>For enhanced standard precautions, do we need to place an isolation cart outside of the resident room?</b>
<b>Answer:</b>	Yes, isolation carts are needed any time staff may need access to PPE for any type of precautions.

<b>Question:</b>	<b>Can we cohort a resident who do not have any invasive openings with a resident who is on contact isolation?</b>
<b>Answer:</b>	No. If a resident does not have the same type of isolation precautions and same organism, they should not be cohorted in the same room. Remember “like with like”.  We recommend you review the CDPH Enhanced Standard Precautions guidance to determine the type of precautions needed based on the patient’s individual level of risk: <a href="https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx">https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx</a>

<b>Question:</b>	<b>For donning and doffing of PPE, do we still need to post signage of the proper sequence outside of resident rooms?</b>
<b>Answer:</b>	This is in reference to the mini-performance improvement project (PIP) that was presented this week for improving communication on transmission-based precautions by reducing “wallpapering” of too much signage outside resident rooms. Posting signage on the proper donning and doffing of PPE sequence is not always required. Posting the appropriate <a href="#">transmission based precaution</a> alerting all staff what PPE is required prior to room entry is always required. Upon auditing PPE adherence, if your facility finds that the correct sequence is not being followed, then putting up the donning and doffing PPE sequence signages may be one solution to try among others. An example of a donning/doffing PPE sequence poster is provided by the CDC: <a href="https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf">https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf</a>

<b>Question:</b>	<b>We have a CRE case in sub-acute unit who has completed antibiotic treatment. Patient has remained asymptomatic for months. Can we change contact isolation to ESP?</b>
<b>Answer:</b>	Note that some MDROs, such as CRE or other CROs (carbapenem-resistant organisms) /CPOs ( <a href="#">carbapenemase-producing organisms</a> ), can colonize individuals for many months to years even after their infection has resolved (with or without antibiotic treatment). This means they may continue to shed the organism and thus pose a transmission risk to other residents if some level of infection control measures do not remain in place. We thus recommend you review the CDPH Enhanced Standard Precautions guidance to determine the type of precautions needed based on the patient’s individual level of risk: <a href="https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx">https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx</a>  In general, most MDRO-positive patients can be managed using ESP – unless they have diarrhea suspected to be associated with the MDRO, there is active transmission (outbreak) of the MDRO in question, or they are positive for a <a href="#">novel MDRO</a> (such as NDM-CRE or NDM-CRAB). Those residents should be on Contact Precautions.

<b>Question:</b>	<b>In an outbreak, do all staff still need to wear N95 masks?</b>
<b>Answer:</b>	This depends on what kind of outbreak it is. If you are specifically asking about COVID-19 guidance, please look at the SNF guidance here for different situations: <a href="http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/">http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/</a> .

<b>Question:</b>	<b>If we have multi occupancy rooms, how do you suggest we identify which resident is on enhanced barrier precautions specifically when we cannot provide a private room?</b>
<b>Answer:</b>	<p>If a resident is on ESP, we recommend a single room, preferably. If you have no single rooms available, you want to make sure that you treat each resident's space, as a separate "room" with beds at least 3 feet apart.</p> <p>There should be some way for staff to know that a resident is on ESP without having to put their name on the door and indicate it there, where everyone can see. You can have huddles in the morning going over which resident has which precaution in place, or you can have every staff member with their own sheet of names with symbols, or you can have something on the inside of the room indicating the need for a certain precaution in addition to the general signage you place outside the room.</p> <p>All staff must change PPE and perform hand hygiene between each resident. And we want to dedicate equipment and supplies and disinfect shared equipment after each use.</p>

<b>Question:</b>	<b>When do we discontinue a <i>C. auris</i> isolation?</b>
<b>Answer:</b>	<p>We cannot discontinue <i>C. auris</i> isolation, and we do NOT recommend re-testing for clearance. Patients who are positive for <i>C. auris</i> must remain on appropriate precautions for the duration of their admission. Refer to our Infection Control guidance on page 14 of the Mitigating the Spread of <i>C. auris</i> in LA County document: <a href="http://publichealth.lacounty.gov/acd/docs/MitigatingSpreadofC.aurisLAC.pdf">http://publichealth.lacounty.gov/acd/docs/MitigatingSpreadofC.aurisLAC.pdf</a></p>

<b>Question:</b>	<b>If we have a resident with foley catheter due to urinary retention, how long should the resident be kept on ESP?</b>
<b>Answer:</b>	<p>This is dependent on a variety of factors. We encourage you to consult with the physician treating the resident, as well as the ESP Guidance from CDPH, which is quite extensive and can be found on the following link: <a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/Enhanced-Standard-Precautions.pdf">https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/Enhanced-Standard-Precautions.pdf</a></p> <p>Generally speaking, CDPH recommends the use of ESP, primarily the use of gowns and gloves for specific high contact care activities, based on the resident's characteristics that are associated with a high risk of MDRO colonization and transmission:</p> <ul style="list-style-type: none"> <li>• Presence of indwelling devices (e.g., urinary catheter, feeding tube, endotracheal or tracheostomy tube, vascular catheters)</li> <li>• Wounds or presence of pressure ulcer (unhealed)</li> </ul> <p>Functional disability and total dependence on others for assistance with activities of daily living (ADL) is also recognized as a risk factor for MDRO transmission and may be considered for residents who do not have an indwelling device or wounds, for example, during transition from Contact Precautions to ESP for residents identified with MDRO colonization during an outbreak.</p>

<b>Question:</b>	<b>With changes to the new SNF guidance, do we still need to wear a face shield or goggles when providing personal patient care, or is wearing a surgical mask sufficient?</b>
<b>Answer:</b>	Please refer to Standard Precaution guidance. If the situation warrants additional PPE such as face shield or goggles, then yes you would wear them. If the patient care task does not, then it is not needed and surgical mask is sufficient.  Please see the SNF COVID-19 guidance for required PPE: <a href="http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/">http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/snf/prevention/</a>

<b>Question:</b>	<b>Is it okay for a resident who is on contact precaution to go outside with visitors if both the resident and the visitor are wearing proper PPE?</b>
<b>Answer:</b>	If a resident who is on contact precautions is outside with visitors, facilities should ensure that the visitors are wearing appropriate PPE for contact precautions and are practicing great hand hygiene as well. Additional resources can be found at the link below along with other transmission based precautions details and signage: <a href="http://publichealth.lacounty.gov/acd/TransmissionBasedPrecautions.htm">http://publichealth.lacounty.gov/acd/TransmissionBasedPrecautions.htm</a>

<b>Question:</b>	<b>To protect resident dignity, if we have gloves in each room and all we need is the gown, can we put gowns in the linen cart and put a sign by their names to identify that they are on ESP?</b>
<b>Answer:</b>	In an effort to reduce risk of cross contamination or risk of transmission, we want to ensure that PPE is available for staff to easily access. It is okay to keep an isolation cart outside, especially if the PPE needed is in that cart along with the ESP signage to guide staff. <a href="http://publichealth.lacounty.gov/acd/docs/IPEnhancedStandardPrecautions.pdf">http://publichealth.lacounty.gov/acd/docs/IPEnhancedStandardPrecautions.pdf</a>

<b>Question:</b>	<b>Can someone with CRE on contact precautions but is “asymptomatic” be cohorted with someone else?</b>
<b>Answer:</b>	Short answer, no. When we think of cohorting we can cohort “like with like” same organisms only. If that is not the case, then we use single rooms. This is especially the case when patients have multiple MDROs. Please review the CDPH Enhanced Standard Precautions guidance to determine the type of precautions needed based on the patient’s individual level of risk: <a href="https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx">https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ESP.aspx</a>

#### Funding opportunities:

<b>Question:</b>	<b>If we didn't have a COVID-19 outbreak during the winter surge and would like to get a portable HEPA filter in all offices, activity rooms, rehab, hallways, can we apply for the grant?</b>
<b>Answer:</b>	This is the link to the grant application: <a href="https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/CitationPenaltyAccountsReports.aspx">https://www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/CitationPenaltyAccountsReports.aspx</a> For guidance on ventilation: <a href="https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx">https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Interim-Guidance-for-Ventilation-Filtration-and-Air-Quality-in-Indoor-Environments.aspx</a>