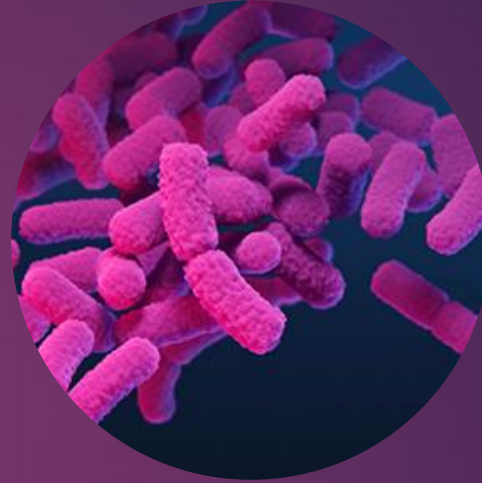
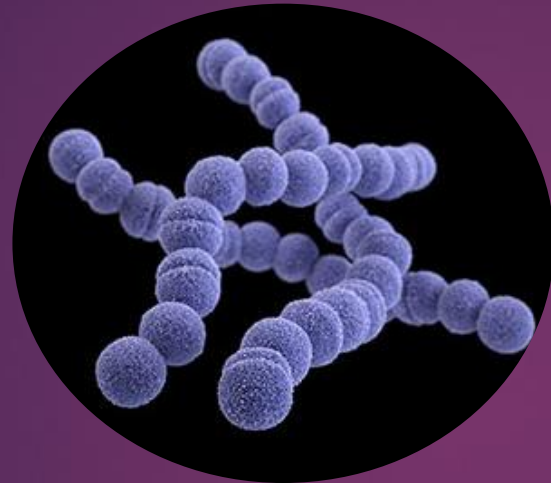
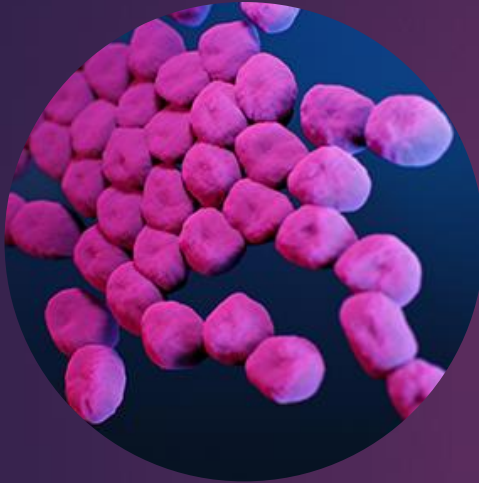


Understanding Enhanced Barrier Precautions



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DIVISION OF HEALTHCARE QUALITY PROMOTION
PREVENTION AND RESPONSE BRANCH
LONG-TERM CARE TEAM

Speaker Disclosures

- ▶ No conflicts to disclose
- ▶ The content of this presentation reflects my own opinion and does not necessarily reflect the official position of the CDC

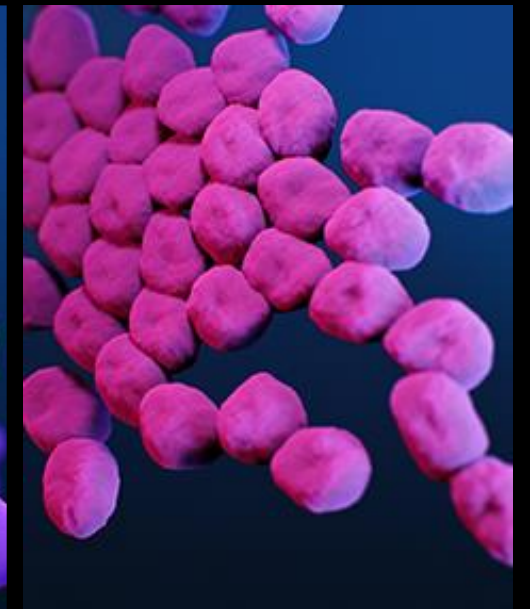




Enhanced Barrier Precautions

The Need For Enhanced Barrier Precautions

- ▶ High burden of MDRO colonization in nursing homes and with nursing home residents
- ▶ Focusing only on residents with active infection (such as with Contact Precautions) fails to address the continued risk of transmission





Nursing Home residents are at high risk for serious infections

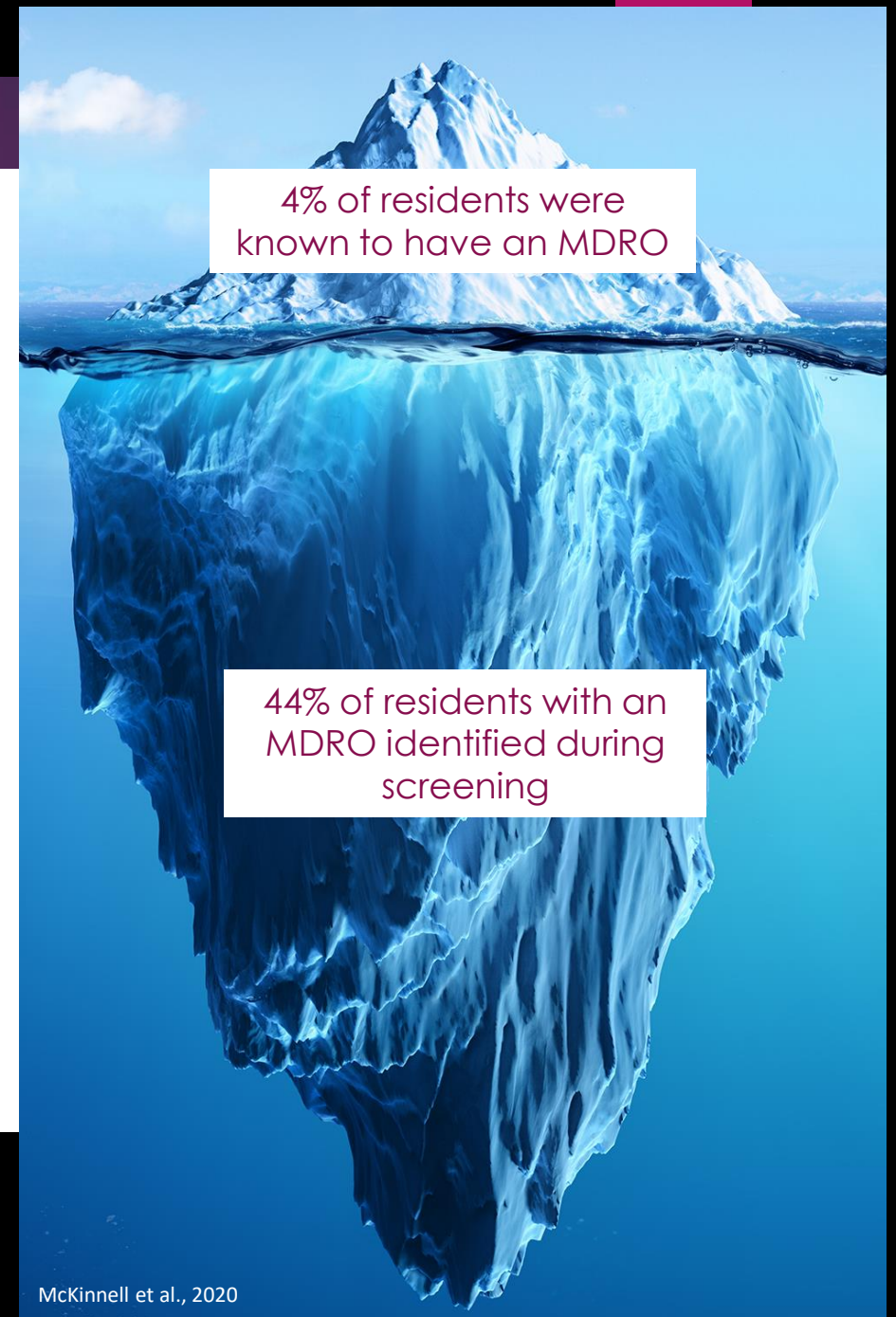
- ▶ Age-related decrease in immune response
- ▶ Complex comorbid conditions
- ▶ Functional and cognitive deficits requiring high level of dependence
- ▶ Frequent antibiotic use
- ▶ Indwelling medical devices

High Prevalence of Unknown MDROs in Nursing Homes

- 4% of residents had a known MDRO (shown in black)
- 44% had an MDRO identified during screening* (shown in blue)
- Factors associated with MDRO colonization:
 - ▶ Urinary catheters
 - ▶ Bed bound
 - ▶ Gastrointestinal devices

*Colonization screening is an infection prevention method using laboratory testing to identify patients who are colonized with resistant pathogens

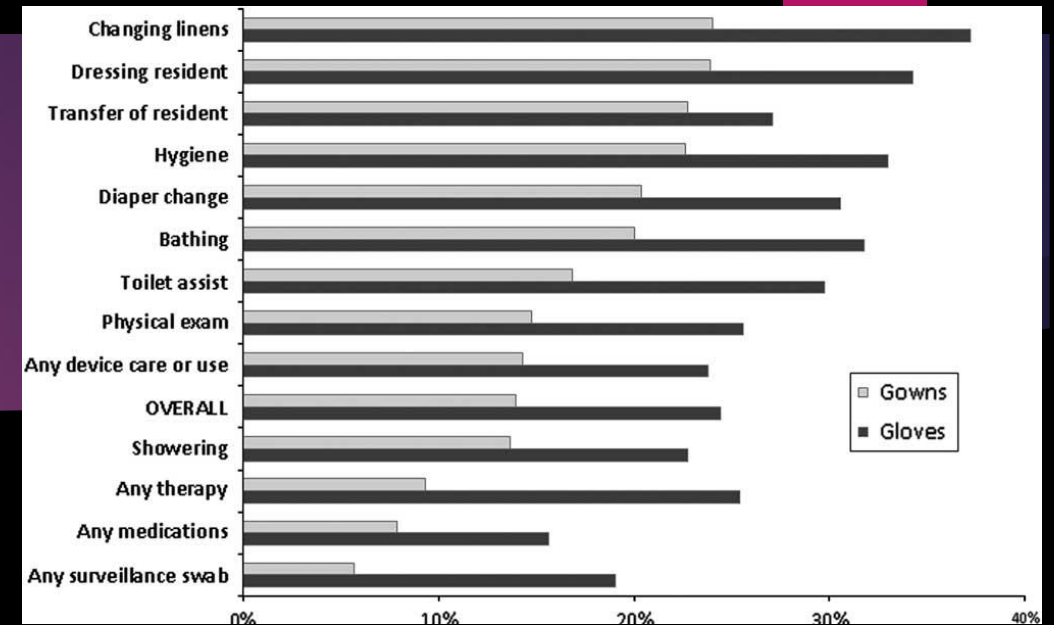
Proportion of Residents Colonized With MDRO



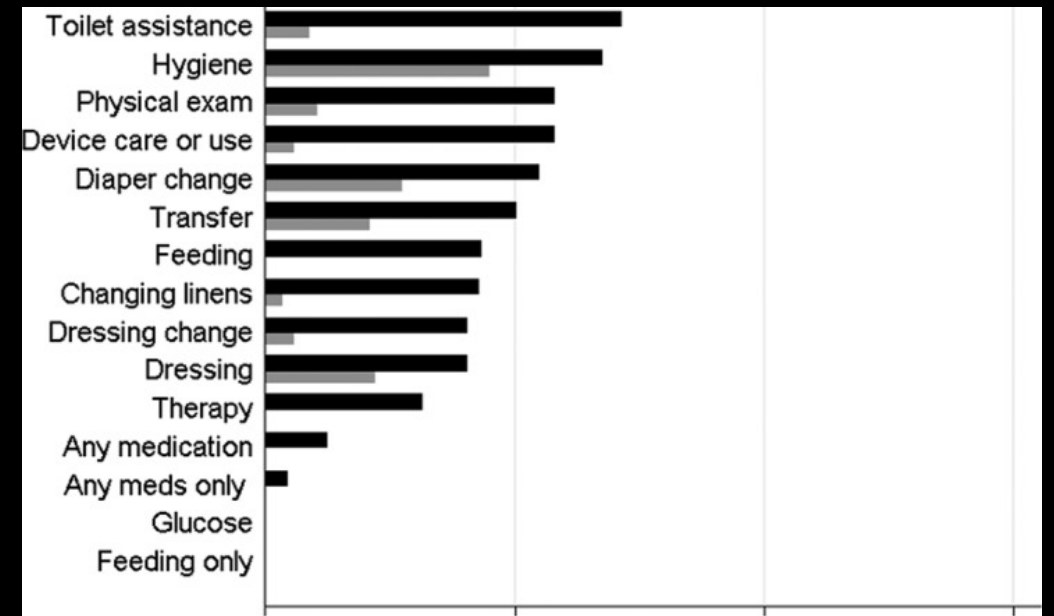
MDRO Transmission Occurs Often During High-Contact Resident Care Activities

Highest risk activities for MDRO transmission

- Dressing resident
- Bathing/showering
- Transferring
- Providing hygiene
- Changing linens
- Diaper change/toilet assist
- Device care or use



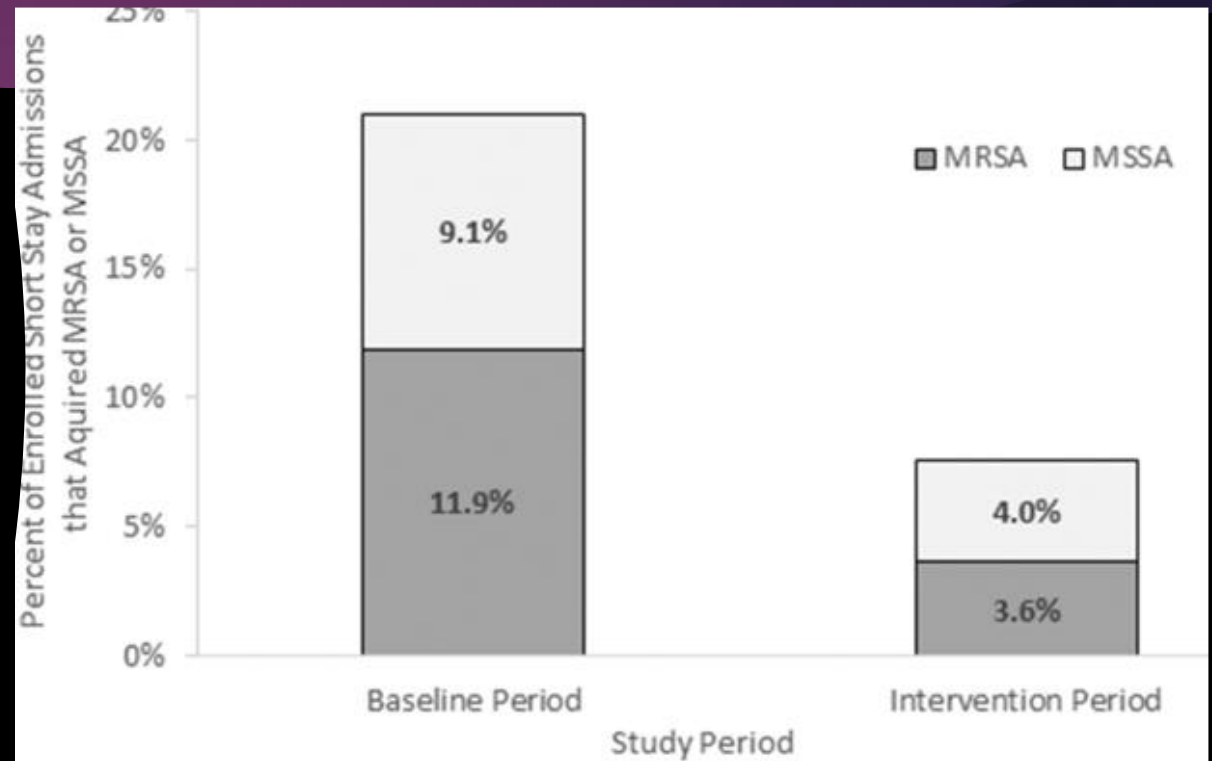
Roghmann et al., 2015



Blanco et al., 2017

Targeted Gown and Gloves Use to Reduce MDRO Transmission

- ▶ Adherence to gown and gloves use by nursing home staff was excellent
- ▶ Results support EBP as an evidence-based approach to preventing transmission of MDROs with targeted gown and gloves use
- ▶ MDRO transmission decreased



Lydecker et al., 2021



**Standard
Precautions**

**Enhanced
Barrier
Precautions**

**Contact
Precautions**



What are Enhanced Barrier Precautions (EBP)?


Risk-Based Approach

Expands use beyond anticipated exposure


Specific use of Gown and Gloves during High-Contact Care

Used in coordination with good infection prevention and control practices

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

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

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

What are High-Contact Resident Care Activities?

Dressing

Bathing/Showering

Transferring

Providing Hygiene

Changing Linens

Changing Briefs or
Assisting with
Toileting

Device Care or Use

- Indwelling catheter
- Trach/vent
- Central line
- Feeding tube

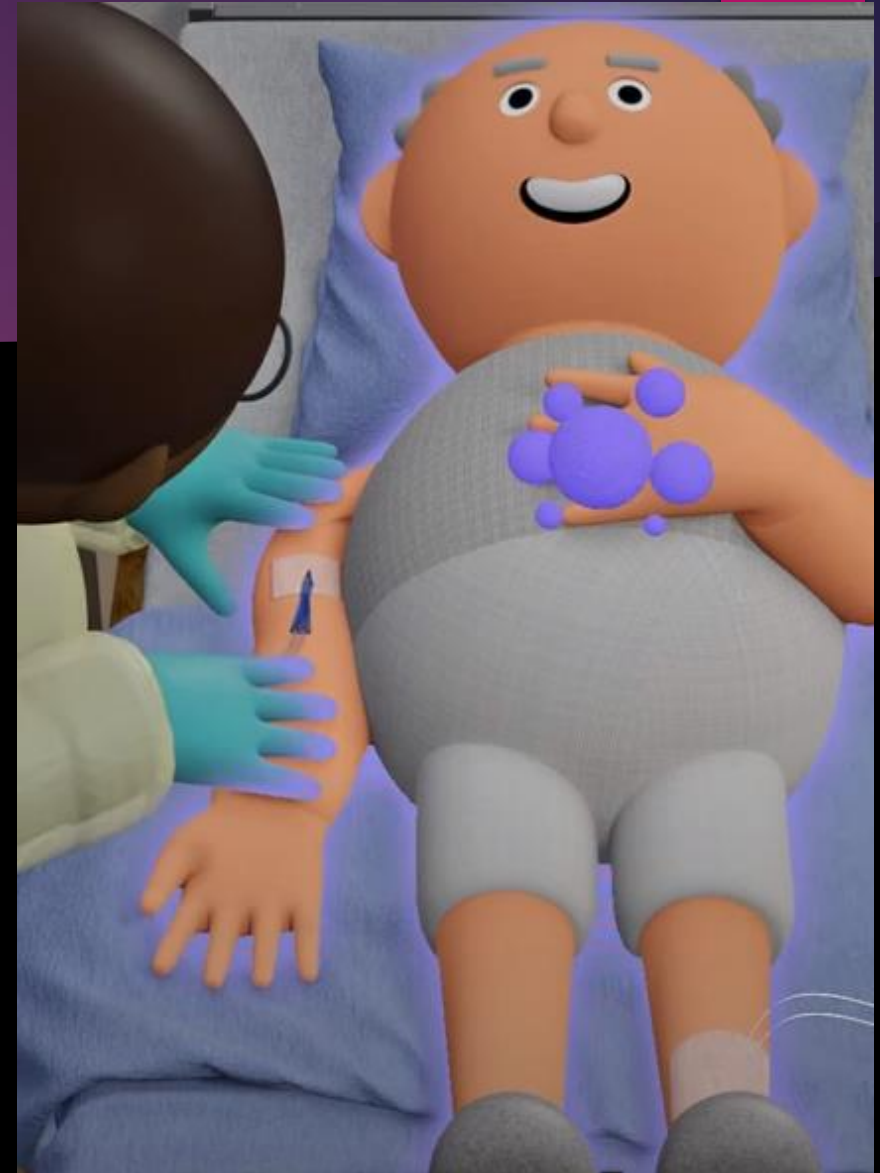
Wound Care

- Generally defined as the care of any skin opening requiring a dressing

When Should EBP Be Used?

Residents who live in a nursing home with any of the following:

- Infection or colonization with a MDRO **when Contact Precautions do not apply** (See [Appendix A](#))
- Wounds
- Indwelling medical devices (e.g., central line, urinary catheter, feeding tube, tracheostomy, ventilator)



What Does
“When
Contact
Precautions
Do Not Apply”
Mean?

**Use Contact
Precautions
instead of
Enhanced Barrier
Precautions**

When to Use Contact Precautions Instead of Enhanced Barrier Precautions

- ▶ If a resident meets the recommendation for Contact Precautions, such as:
 - ▶ Presence of acute diarrhea
 - ▶ Draining wound or other site(s) of secretions or excretions that are unable to be contained or covered
 - ▶ During a limited time period when there is an investigation for a suspected or confirmed MDRO outbreak
 - ▶ Any infection or condition that Contact Precautions is recommended:
 - ▶ C. diff
 - ▶ Norovirus
 - ▶ Scabies



68 y/o female with CHF,
COPD, an indwelling foley
catheter, and acute
diarrhea

She is being provided care
(specifically a bed bath)
by a staff member



68 y/o female with CHF, COPD, and an indwelling foley catheter.

She is being provided care (specifically a bed bath) by a staff member.



72-year-old with a tracheostomy who can contain his own secretions

Staff member is changing the bed linens



72-year-old with a tracheostomy who cannot contain his own secretions

Staff member is changing the bed linens

Coordination of Good Infection Prevention and Control Practices



Hand Hygiene



Promote healthy hands, skin, and fingernails

Refer to: [Compendium of Strategies 2022 Updates \(idsociety.org\)](https://idsociety.org) for more information and guidance



ABHS is preferred in most situations

Use soap and water when:

- Hands are visibly dirty
- Before eating
- After using the restroom
- After caring for people with infectious diarrhea

Clean Hands with:

Alcohol-Based Hand Sanitizer (ABHS) or Soap and Water

0



Select appropriate products and ensure accessibility

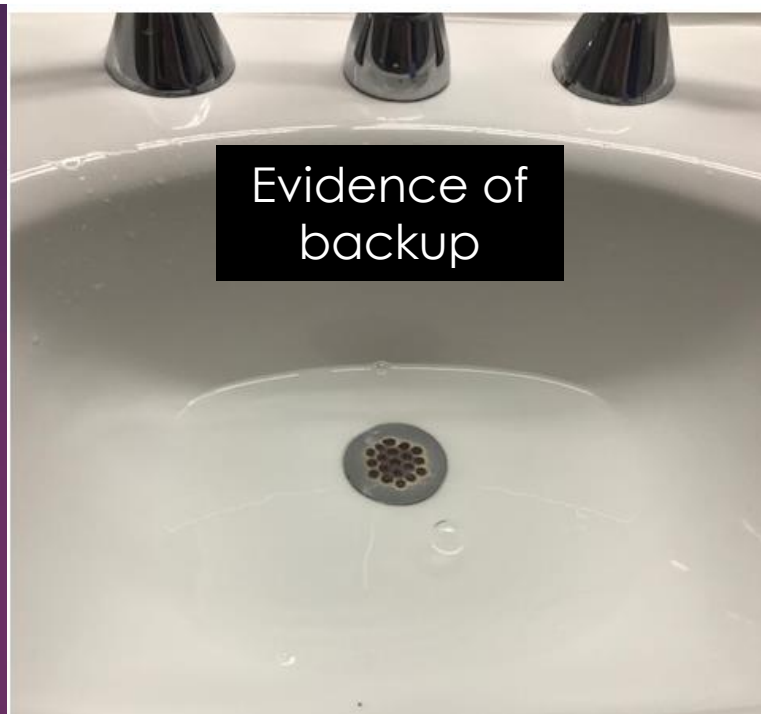


Point-of-Care Access



Sink Hygiene

[Reduce Risk from Water | HAI | CDC](#)
[Water | Background | Environmental Guidelines |](#)
[Guidelines Library | Infection Control | CDC](#)



Sink Hygiene

- ▶ Water Infection Control Risk Assessment (WICRA)
- ▶ Water management program



Splash Zone

- ▶ Splashes can occur up to three feet from sink
- ▶ Water can contain MDROs in droplets



Room Environment

Opportunities for Transmission of MDROs

- ▶ Multi-resident rooms
- ▶ Difficult to clean areas





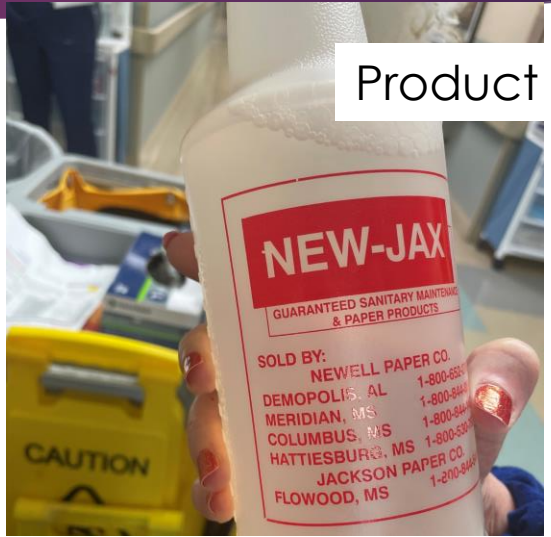
Environmental Cleaning and Disinfection



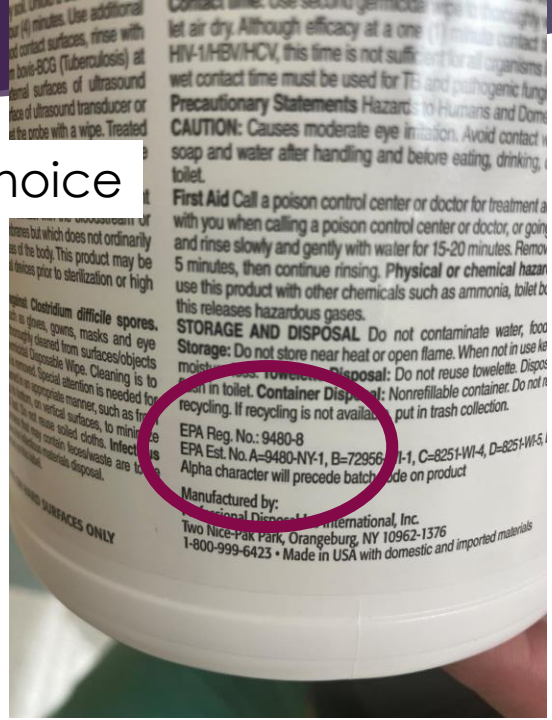
Contact Time



Dilution



Product Choice



...let air dry. Although efficacy at a one (1) minute contact time for HIV-1/HSV-1/HCV, this time is not sufficient for all organisms. A wet contact time must be used for TB and pathogenic fungi.

Precautionary Statements Hazards to Humans and Domestic Animals: CAUTION: Causes moderate eye irritation. Avoid contact with soap and water after handling and before eating, drinking, or using a toilet.

First Aid Call a poison control center or doctor for treatment advice. If you are having a breathing problem or are choking, stop using the product immediately. If you are having a skin reaction, wash the affected area with water. If you are having an eye reaction, flush the eyes with water for 15-20 minutes. Remove clothing if contaminated. If you are having a skin reaction, wash the affected area with water. If you are having an eye reaction, flush the eyes with water for 15-20 minutes. Remove clothing if contaminated.

Storage AND DISPOSAL Do not contaminate water, food, or feed. Storage: Do not store near heat or open flame. When not in use, keep the container tightly closed. **Container Disposal:** Do not reuse towelette. Dispose of in toilet. Recycling: If recycling is not available, put in trash collection.

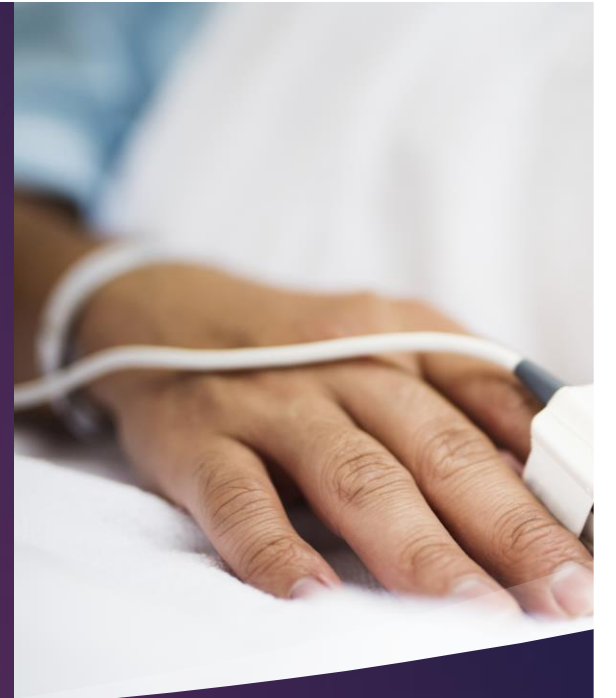
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 EPA Est. No. A-9480-NY-1, B-72956-NY-1, C-8251-WI-4, D-8251-WI-5
 Alpha character will precede batch code on product

Manufactured by:
 Professional Disinfectant International, Inc.
 Two Nice-Pak Park, Orangeburg, NY 10962-1376
 1-800-999-6423 • Made in USA with domestic and imported materials



Cleaning and Disinfecting the Environment

High touch surfaces



Shared Equipment

- ▶ Who cleans what
- ▶ Clean vs. dirty



Frequently Asked Questions

Are single person rooms needed for a resident on EBP?

No. Single-person rooms should be prioritized for residents who have acute diarrhea or for residents placed on Contact Precautions

Are gowns and gloves recommended for EBP when transferring a resident from a wheelchair to chair in the dayroom or dining room?

In general, gowns and gloves would not be recommended when performing transfers in common areas, where contact is anticipated to be shorter in duration

Can PPE used for EBP be thrown away in regular trash or does it need to go in the red bagged waste?

Based on the, most PPE used during resident care, including with EBP, would not fall into the category of regulated medical waste requiring disposal in a biohazard (red) bag and could be discarded as routine non-infectious waste. However, local or state regulations may be more restrictive than this federal standard

What is the definition of a “wound” in relation to EBP guidance?

This generally includes residents with chronic wounds, and not those with only shorter-lasting wounds, such as skin breaks or skin tears covered with a Band-aid or similar dressing. Examples of chronic wounds include, but are not limited to, pressure ulcers, diabetic foot ulcers, unhealed surgical wounds, and chronic venous stasis ulcers.

Is Physical or Occupational Therapy considered a “high-contact” resident care activity?

Yes. Therapists should use gowns and gloves when working with residents on Enhanced Barrier Precautions in the therapy gym or in the resident’s room if they anticipate close physical contact while assisting with transfers, mobility, or any high contact activity.



Finish all steps before moving on to another resident.

1. Gather all needed supplies & materials
2. Clean hands
3. Correctly put on a gown and gloves
4. After care, throw away gown and gloves
5. Clean hands again

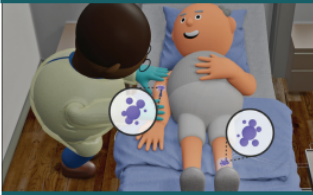
Key Steps:

Before entering a resident's room with an EBP sign:

- Use EBP for residents with**
- Indwelling medical devices, wounds, or those who are colonized by or infected with a multidrug-resistant organism (MDRO).
- Use EBP when:**
- Dressing or bathing
 - Transferring
 - Changing linens
 - Assisting with toileting
 - Accessing indwelling medical devices
 - Providing wound care
 - Other high-contact resident care activities

Use of Enhanced Barrier Precautions (EBP)

Enhanced Barrier Precautions (EBP) Pocket Guide



Scan to view an EBP video.



Learn more at bit.ly/PPE-NursingHomes

Enhanced Barrier Precautions How We Keep Our Residents Safe



What's New

We are using Enhanced Barrier Precautions to help protect our residents from infection. You may notice:

- New signs throughout the facility
- Staff wearing gowns and gloves for high-contact care activities

Why We're Making These Changes

We are taking action to protect our residents from dangerous germs. These germs can cause infections that are hard to treat.

Enhanced Barrier Precautions allow us to provide safe, high quality care and help stop the spread of germs within our facility.

How to Help When You Visit

You can help stop the spread of germs by cleaning your hands with alcohol-based hand sanitizer or soap and water.

Learn more about Enhanced Barrier Precautions: bit.ly/PPE-NursingHomes



More than **50%** of nursing home residents carry a multidrug-resistant organism.

Multidrug-resistant organisms (MDROs) are a threat to our residents.

Enhanced Barrier Precautions (EBP) Steps



Perform Hand Hygiene



Wear Gown



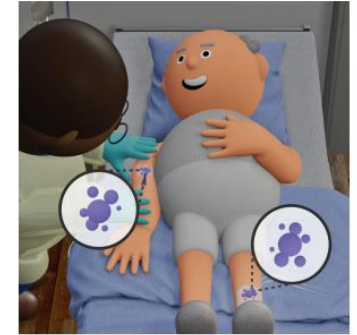
Wear Gloves



Dispose of Gown & Gloves in Room

Use EBP during high-contact care activities for residents with:

- 1 Indwelling Medical Devices (e.g., central line, urinary catheter, feeding tube, tracheostomy/ventilator)
- 2 Wounds
- 3 Colonization or Infection with a MDRO



Protect residents and stop the spread of germs.

bit.ly/PPE-NursingHomes

Scan to watch an EBP video.

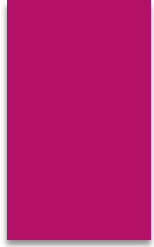


Enhanced Barrier Precautions

In Nursing Homes



[Enhanced Barrier Precautions in Nursing Homes - YouTube](#)



Resources

Enhanced Barrier Precautions

▶ Implementation of Personal Protective Equipment (PPE) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms (MDROs)

▶ <https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html>

▶ Frequently Asked Questions (FAQs) about Enhanced Barrier Precautions in Nursing Homes

<https://www.cdc.gov/hai/containment/faqs.html>

▶ Considerations for Use of Enhanced Barrier Precautions in Skilled Nursing Facilities

▶ <https://www.cdc.gov/hicpac/workgroup/EnhancedBarrierPrecautions.html?msclkid=39038417aed311ec8c868e1e03c50297>

▶ Enhanced Barrier Precautions Sign

▶ <https://www.cdc.gov/hai/pdfs/containment/enhanced-barrier-precautions-sign-P.pdf>
(English)

▶ <https://www.cdc.gov/hai/pdfs/containment/spanish-enhanced-barrier-precautions-sign-P.pdf> (Spanish)

Resources

Hand Hygiene

▶ SHEA/IDSA/APIC Practice Recommendation: Strategies to prevent healthcare-associated infections through hand hygiene: 2022 Update | Infection Control & Hospital Epidemiology | Cambridge Core

▶ <https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/sheaidaapic-practice-recommendation-strategies-to-prevent-healthcareassociated-infections-through-hand-hygiene-2022-update/FCD05235C79DC57F0E7F54D7EC314C2C>

▶ Clean Hands Count for Healthcare Providers

▶ <https://www.cdc.gov/handhygiene/providers/index.html>

Resources

Sink Hygiene

- ▶ Water Infection Control Risk Assessment (WICRA) for Healthcare Settings (CDC.gov)
- ▶ <https://www.cdc.gov/hai/pdfs/prevent/water-assessment-tool-508.pdf>

- ▶ Updates – Environmental Guidelines – Guidelines Library – Infection Control - CDC
- ▶ <https://www.cdc.gov/infectioncontrol/guidelines/environmental/updates.html>



▶ Resources

Environmental Cleaning and Disinfection

▶ CDC Environmental Cleaning Checklist

▶ <https://www.cdc.gov/hai/pdfs/toolkits/Environmental-Cleaning-Checklist10-28-2010.doc>

▶ CDC Environmental Checklist for Monitoring Terminal Cleaning

▶ <https://www.cdc.gov/hai/pdfs/toolkits/Environmental-Cleaning-Checklist-10-6-2010.pdf>

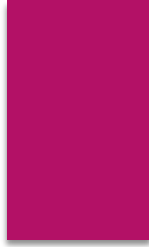
▶ CDC Environmental Cleaning Evaluation Worksheet (Excel)

▶ <https://www.cdc.gov/hai/pdfs/toolkits/Environmental-Cleaning-Eval-Worksheet-10-6-2010.xls>

▶ Disinfection & Sterilization Guidelines – Guidelines Library – Infection Control - CDC

▶ <https://www.cdc.gov/infectioncontrol/guidelines/disinfection/index.html>





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Thank you
Any questions?

▶ For more information,
contact CDC

▶ 1-800-CDC-INFO
(232-4636)

▶ TTY: 1-888-232-6348
www.cdc.gov

