Introduction to Infection Prevention & Control (IPC) Open Call Series

#3 Outbreaks – Identification and Management

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IPC Open calls – bi-weekly series

- Surveillance – What data should we collect?
- Data – What do we do with the data?
- Outbreaks – Identification and management
- Transmission Precautions – Least restrictive
- Common Citations – What are we missing?
- Training Opportunities – Where can I learn more?

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Disclaimer

***These calls are not meant to be a substitute for "completing specialized training in Infection Prevention and Control" (as required in Phase 3 of Final Rule).

They are meant to introduce the basic concepts of Infection Prevention & Control and discuss common issues found during the survey process.

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Reminder

- Questions can be asked in 'Chat' during call
- We will open call at the end for you to call in with questions
- Time permitting, we will cover any questions received and not answered from previous call
- All questions and answers will be compiled after completion of call series and made available on website

https://www.lsqin.org/initiatives/nursing-home-quality/

Objectives

- Recognize early indications of possible outbreak
- Initiate containment strategies
- Notify appropriate parties
- Conduct post-outbreak learning session

MetaStar represents Wisconsin in
Lake Superior Quality Innovation Network.

Policy for Outbreak Investigation

- Process should be spelled out in detail so anyone can follow (for example: agency staff on a weekend)
  - Outbreak measures that will be initiated whenever there is increase in illness above expected or baseline
  - "General definition" is the presence of three or more residents or staff experiencing symptoms within a 72 hour period on same wing/floor
  - Confirm staff is aware of process/policy

Outbreak Management

- Steps are done almost simultaneously
  - Recognize
  - Contain
  - Notify

Recognize early

- More illness than usual
  - Know "trigger" for action
- Definitions may vary by disease, state
- Surveillance mechanisms in place
  - Line list of ill residents and staff with specific disease symptoms
  - Review 24 hour logs for ill residents
    — Communication between shifts is important
  - Who monitors staff call ins? Must combine with resident illness to get complete picture

Containment

Containment strategies may depend on cause of outbreak and state requirements. Work with local health department (LHD) to determine best strategies.

Are transmission based precautions indicated?
- Contact, Droplet, Other, Combination

Center for Disease Control (CDC) Type and Duration of Precautions Appendix A

https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html

Containment

Contact Precautions:
- Prevent transmission from person to person or environment to person
- Gown and gloves for direct contact with resident or contaminated environment, don prior to entry

Droplet Precautions:
- Prevent transmission spread through respiratory secretions or mucous membrane contact
- Healthcare workers (HCW) should wear a mask for close contact, don prior to entering room

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Containment

- What personal protective equipment (PPE) is indicated?
    - Do you have adequate supplies?
    - Locate as near to point of use as possible
    - Outside of room entrance

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Gastrointestinal Illness – specific containment measures

- Soap and water indicated for hand hygiene
- Mask and goggles or face shield if vomitus is present
- Bleach based cleaners (premixed or mixed fresh every 24 hours)
- Clean most contaminated areas of room last
- Change mop heads when a new bucket of cleaning solution is prepared
- Steam clean carpet and upholstery if soiled, do not dry vacuum to prevent re-circulation of virus

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Containment

- Cleaning and disinfection
  - Are special products indicated?
  - Should frequency of cleaning be increased, especially in common areas and frequently touched objects?
    - Continue increased frequency for 72 hours after last case has recovered
  - Clean Medication carts and Vitals machines before and after use
  - Dedicate commonly used equipment

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Containment strategies to consider

- Restrict ill resident's activities until 48 hours after symptom resolution
- Minimize movement of residents from affected location to unaffected location
- Evaluate need to cancel group activities until 48 hours after well date of last case

*Non-ill residents should not be confined or restricted to their rooms during outbreak (Wisconsin guide)

Can be a difficult balance:

Containment ↔Restriction

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Containment strategies

- Consider limiting new admissions
  - Consider admitting new residents to unaffected area or area where all residents have been asymptomatic for 48 hours.
  - Inform prospective residents and health care providers about ongoing outbreak
- If transferring resident for another reason, be sure Emergency Medical Services (EMS) and receiving facility are aware of outbreak.

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Containment strategies to consider

- Families / Visitors
  - Notify resident's representative / family
  - Post signage alerting visitors of outbreak
  - Encourage non-essential visitors to reschedule visit
  - Visitors who decide to visit should be provided education and provided PPE as indicated

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Staff

- Are additional education or in-services needed?
- Can you maintain same staff assignments to residents, limiting staff moving from affected to unaffected units?
- Staff should exclude themselves from resident care at onset of symptoms – leave work
  - Difficult when short staffed but important
- Are your staff illness policies clear on time of exclusion from work? (generally - 48 hours after symptom resolution)

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Notify

- Unit staff notify person in charge / Infection Preventionist (IP) when available
  - What happens when IP is not there?
- Medical Director
- All care providers for resident to determine if any changes to medical management are needed.
- "Sister" or adjacent facilities that may share staff
- Contracted Ancillary services
- All staff including dietary, housekeeping, maintenance, laundry etc.

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Notify

- Local Health Department – notify of any suspected or confirmed outbreak
  - Will ask for information on your line list
  - Will advise regarding obtaining cultures / testing
  - Will advise regarding treatment and prophylaxis
  - Can also help to evaluate the need for possible containment and confinement strategies

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Review post - resolution of outbreak

- What worked well?
- What can be improved on for next time?
- What surprised you?

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Review

- Complete all line list entries
  - Dates start/stop, well dates etc.
- Complete narrative summary
  - Chronological timeline of what happened, what actions were taken, results of those actions etc. that an outside reviewer could follow
- Interdisciplinary team completes an evaluation of outbreak once all information is available

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Review

- Take team recommendations for preventative measures, and changes to policy to QAA/QAPI/Infection Prevention & Control Committee
- Put approved recommendations into policy
- Educate staff on any changes in policy
- Monitor for compliance to changes in policy

Resources

Infection Preventionists Guide to Long Term Care (LTC) Association for Professionals in Infection Control (APIC)

https://rise.apic.org/web/apic/Resources/Store/apic/EStore/MyStore.aspx?hkey=8351e67f-e04b-472e-a30d-37fcd8eac518&id=SLS6008

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https://www.lsqin.org/

Resources - Michigan

LTC Noro virus

http://www.michigan.gov/documents/mdch/NorovirusInvestLTCF_281015_7.pdf

Respiratory June 2017 update

http://www.michigan.gov/documents/mdch/Influenza_LTC_Outbreak_Guidelines_214268_7.pdf

Employee return to work

http://www.michigan.gov/documents/mdch/NorovirusFactsheet_281017_7.pdf

Resources - Minnesota

Norovirus toolkit
http://www.health.state.mn.us/divs/idepc/dtopics/foodborne/outbreak/facility/ltcfnorotoolkit.pdf

Resident illness log
http://www.health.state.mn.us/divs/idepc/dtopics/foodborne/outbreak/facility/ltcfresidentillnesslog.PDF

Staff illness log
http://www.health.state.mn.us/divs/idepc/dtopics/foodborne/outbreak/facility/ltcfstaffillnesslog.PDF

Employee illness screening form
http://www.health.state.mn.us/divs/idepc/dtopics/foodborne/outbreak/facility/ltcfemployeescreening.docx

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Resources - Wisconsin

Reporting, prevention and control of acute respiratory illness outbreaks in long-term care facilities
https://www.dhs.wisconsin.gov/dph/memos/communicable-diseases/bcd-2017-04.pdf

Recommendations for the prevention and control of acute gastroenteritis outbreaks in LTC facilities
https://www.dhs.wisconsin.gov/publications/p0/p00653.pdf

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Next Call

March 20, 2018 1:00 p.m. CT
Transmission Precautions – Isolate the organism and not the resident

Register:
http://bit.ly/iprev-4

Evaluation:
https://www.cvent.com/d/0tqvv4

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Questions?

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