

Agenda

UHIP-GC Multiple-Drug Resistant Organism (MDRO) Control and Education

08/24/2023 @ 1:00-2:00

Mission:

Protect the residents of Utah from multiple-drug resistant (MDRO) infections through prompt identification and response to MDRO outbreaks in coordination with education for various healthcare facility settings (LTACH, LTCF, Dialysis, Outpatient, Acute Care Hospitals).

Vision:

The State of Utah will lead the national efforts to eliminate multidrug-resistant organism infections. Utah strives to reduce the amount of multidrug-resistant organisms in healthcare settings while also improving our detection and response.

Goal:

Improve detection, response, and education of multidrug-resistant organisms (MDRO) through collaboration with healthcare facilities to create additional educational opportunities, enhance awareness, address gaps and implement standardized MDRO focused infection prevention and control practices throughout the state of Utah.

***This meeting will be recorded for note taking purposes. Meeting minutes are publicly available, confidential information will be de-identified and is not to be shared outside this meeting.**

Time	Topic	Lead/Notes
Introductions		
1:00-1:05	Introductions <ul style="list-style-type: none"> • Subcommittee Chair: Elena Snelten • Additional representation • Approve minutes 	Giulia
Action Steps/Plan		
1:05-1:40	<ul style="list-style-type: none"> • Review action plan and outcomes • Action plan updates 	Elena

	<ul style="list-style-type: none"> • Which routes/pathways to take to disseminate information within this subcommittee • IPC resource list (IPC program education and guidance) 	
Situational awareness		
1:40-1:50	<p>Current State of MDROs</p> <ul style="list-style-type: none"> • C. auris <ul style="list-style-type: none"> ○ We have not identified any in-state transmission. • CRAB <ul style="list-style-type: none"> ○ We have seen increasing numbers and continue to recommend admission screening, especially in vent/trach units. • VIM CRPA <ul style="list-style-type: none"> ○ We have seen increasing numbers - several are linked to the contaminated artificial tears. We recommend making sure that recalled items have been discarded. • Surveillance efforts • State consent forms and information sheets 	Giulia Jeff Elena Angela
Additional Questions/Discussion Topics		
1:50-2:00	<ul style="list-style-type: none"> • Ways to increase attendance <ul style="list-style-type: none"> ○ Reach out to 1 individual (nurse admins, IPs, clinic managers, wound care specialists, etc.) to attend the next meeting 	Giulia/Elena
Convene		

Next Meeting	Every eight weeks <ul style="list-style-type: none"> • 10/19/2023 Minutes will be posted to the HAI website <ul style="list-style-type: none"> • https://epi.health.utah.gov/uhip-governance-minutes/ 	Giulia De Vettori
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Meeting comments:

Jeanmarie Mayer

12:07 PM

With the meeting invite today, reminded me to try to connect with our case management to give me their feedback...

Elena S. (VA)

12:07 PM

That would be great. Thank you!

Jeanmarie Mayer

12:07 PM

is the CRAB pretty widespread?

And with VIM CRPA - question about products

Angela Weil (DHHS)

12:08 PM

We have seen some widespread pockets of CRAB spread, especially in ventilator units

Jeanmarie Mayer

12:10 PM

there is some delay with Case management reports, as they need to assess patient

Linda Rider (DHHS)

12:16 PM

It would seem reasonable to start with review of the CDC Containment documents for facility specific practices.

Jeanmarie Mayer

12:16 PM

and CMS doesn't provide additional funding to be proactive....

Jeanmarie Mayer

12:20 PM

that's great info jeff, than you

Linda Rider (DHHS)

12:21 PM

Just to clarify, there has been a sporadic VIM-CRPA associated with stays in out of country facilities

Jeanmarie Mayer

12:22 PM

while we don't require consent, we do provide patients (and staff) info on why the test is being done, and what the results mean

Jeanmarie Mayer

12:24 PM

what is your consent acceptance rate?

Jeanmarie Mayer

12:26 PM

we use an opt out rather than a consent in...

Linda Rider (DHHS)

12:26 PM

Rectal swabs are the most problematic!

Jeanmarie Mayer

12:27 PM

we do peri-anal - yes, less sensitive but more acceptable to nurses collecting

Linda Rider (DHHS)

12:29 PM

I would guess about 80% for outbreaks

Bea Jensen (DHHS)

12:30 PM

I am hopeful that these new information sheets will help educate the patients and put them at ease about it whereas historically, the person getting consent isn't always able to answer the necessary questions that help individuals make their decision to consent.

Jeanmarie Mayer

12:34 PM

i just remembered today, will have someone from case management on the next call

Chrissy Radloff (DHHS)

12:34 PM

We can also promote this group at the Utah APIC chapter conference in September.

You

12:34 PM

if there is anyone you would like to invite to this meeting, please send their email my way: gde@utah.gov

Rebekah Ess

12:38 PM

I approve

Linda Rider (DHHS)

12:38 PM

It may not be a bad idea to consider dialysis center involvement. For those not familiar, a number of LTC facilities now have dialysis dens for resident treatment!

Linda Rider (DHHS)

12:49 PM

Universal????

Elena S. (VA)

12:50 PM

VA got the Email notification of the HICPAC updates this AM. We will be watching the info shortly.

Linda Rider (DHHS)

12:50 PM

And, the changes will not be out until next year anyway!

Jeanmarie Mayer

12:52 PM

it is looking good!

Action Items:

1. Bring MDRO awareness to all healthcare settings
 - a. CPO, CRO, C auris
2. Updating the interfacility transfer form
 - a. Encourage use of any transfer form through training programs (e.g., nursing schools)
 - b. Promote interfacility communication
3. Build networking and professional relationships between ACHs, LTC, DHHS, medical training programs, and professional organizations
4. Transmission based precautions
 - a. Provide education on TBP for training programs (e.g., nursing schools, CNA programs)
5. Colonization considerations and Enhanced Barrier Precautions in long-term care facilities.
6. Understanding admission practices
 - a. Admission screening
 - b. Surveillance
7. Disseminate [MDRO guide](#) to long term care settings
 - a. EPA disinfectants

Action Plan:

1. Increased compliance with transfer forms
2. Build a survey to assess admission, transfer, and discharge processes
3. Increase participation and engagement in this meeting
 - A. Outpatient groups (dialysis, SDS, dental practices)
 - B. Recruiting from private sector
4. Promote Infection Control Assessment and Response (ICAR) in healthcare settings

Action Plan for Education

1. Create needs assessment from UHIP subcommittee to identify MDRO education priorities
2. Create train-the-trainer in-services
3. MDRO guide
4. Certificates for Quality Assurance and Performance Improvement (QAPI)