

HAI/AR Monthly Digest

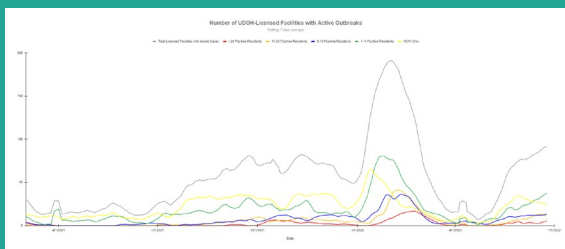
Utah Department of Health and Human Services Healthcare Associated Infections/Antimicrobial Resistance Program

Issue 12 | July 2022

Did you read this month's digest?

[Yes](#) [No](#)

Utah LTCF situational update



New DHHS COVID-19 guidance documents for LTCFs

Updated

- COVID-19 healthcare worker screening tool
- COVID-19 visitation guidance
- E&I staff resuming in person visits

New guidance documents can be found on the Long-Term Care Facilities webpage, under the [For Long-Term Care Facility Providers](#) section.

Mental health resources

Visit the [mental health resources site](#) for information on available mental health resources in Utah.

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Updates

[HAI/AR update](#)

Community transmission rates and PPE use

- Nursing facilities and long term care (LTC) communities should continue to monitor [community transmission rates](#) in their county and implement the appropriate [LTC infection prevention and control recommendations based on the transmission rate and vaccination status](#).

Immunization program

- We know it's a challenge to keep track of immunizations, especially COVID-19 doses and boosters. Staying [current on COVID-19 immunizations](#) is still one of the best ways to limit the spread of the virus and decrease hospitalizations and morbidity for high risk individuals. To help you track immunization records, we recommend you work with [Jeni Lynne Demeny](#), the new long term care (LTC) facility immunization coordinator.

Infection control assessment and response (ICAR)

- ICARs are a great resource to help facilities protect their residents and staff. This half-day collaborative assessment assists facilities to review infection prevention and control practices in their facility. ICARs are designed to highlight strengths as well as identify gaps and provide resources to support excellence in infection prevention.
- We have partnered with Comagine Health to make ICARs available to long-term care facilities. You are invited to

Questions?

For questions, visit our [Long-Term Care Facilities webpage](#) or email us at hai@utah.gov.



attend Comagine's kickoff event on July 12, 2022. Please see the attached flyer for times and more information.

- For questions or to schedule an ICAR appointment for assisted living facilities, please email HAI@utah.gov.

CDC update

- The CDC updated their [COVID-19 vaccine and booster recommendations](#) for people 50 years of age and older to include a second booster dose. People who are 50 years of age and older must receive a second COVID-19 booster dose when eligible to remain **up-to-date** with COVID-19 vaccination. For more information review [CDC's COVID-19 vaccine schedule at a glance](#).

July spotlight:

Please send us stories or pictures to highlight the amazing work you and your facility have accomplished during the pandemic. We want to spotlight your successes. Email your HAI/AR contact or hai@utah.gov to share your stories.

Education/resources

Mental health resources

- The Agency for Healthcare Research and Quality (AHRQ) created 5-minute [emotional health and resilience learning modules](#) for frontline staff.

LTC PAC Project ECHO sessions

- There will be no Project ECHO session this month. Stay tuned for information on future sessions.

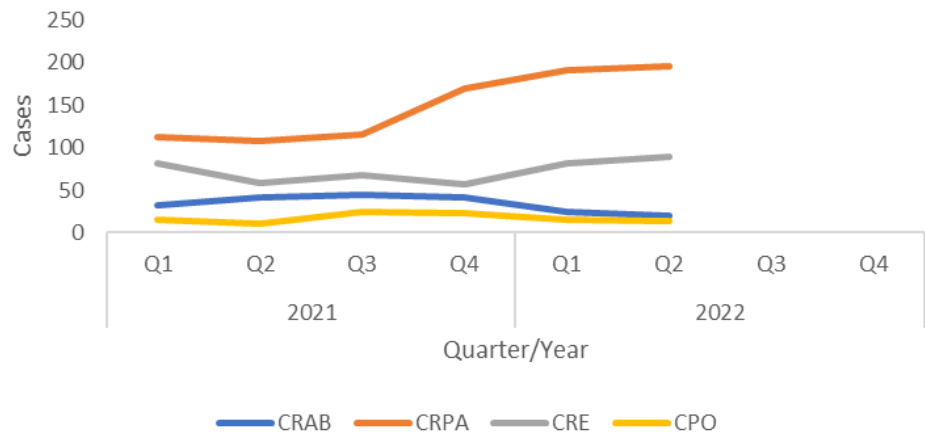
Antimicrobial resistance in Utah

As of June 30, 2022

Carbapenem-resistant organisms

The CROs shown in the graph below include: carbapenem-resistant *Acinetobacter baumannii* (CRAB), carbapenem-resistant *Pseudomonas aeruginosa* (CRPA), carbapenem-resistant Enterobacterales (CRE)*, and carbapenemase-producing organisms (CPO)** .

Carbapenem Resistant Organism Cases in Utah, 2021-2022



*The Enterobacterales order contains multiple bacteria species that are not required to be reported to Utah DHHS, but are of interest to the Centers for Disease Prevention and Control (CDC) and Utah DHHS. Therefore, the CRE count may not be a comprehensive count of all CRE cases in Utah.

**The CPO counts are also included in the CRAB, CRE, and CRPA counts because CPOs are also carbapenem-resistant organisms.

Candida auris outbreak in Nevada

Nevada is currently experiencing a *Candida auris* (*C. auris*) outbreak in multiple healthcare facilities. It appears this outbreak started August 1, 2021 and still continues. *C. auris* is an emerging multidrug-resistant fungus that is hard to detect and can be associated with high mortality rates. The CDC has recommended screening any resident who received care from a Nevada facility within the past 6 months. Please contact the Utah Public Health Lab (UPHL) at arlnutah@utah.gov to schedule a resident screening for *C. auris*.

If a case of *C. auris* is found at your facility follow these precaution recommendations:

- If your facility is a **hospital** or **long term acute care hospital**
 - Contact precautions
 - Perform hand hygiene before donning a gown and gloves.
 - Don gown and gloves before entering the affected patient/resident's room.
 - Remove the gown and gloves and perform hand hygiene before exiting the patient/resident's room.

- If your facility is a **long term care facility, skilled nursing facility, or rehabilitation facility**:
 - [Enhanced Barrier Precautions](#)
 - Staff should wear gown and gloves before they perform any high-contact resident care activities when the potential for exposure to body fluids or secretions exists, such as:
 - Bathing or providing hygiene to residents
 - Transferring residents
 - Assisting residents with toileting
 - Changing residents' briefs
 - Changing a wound dressing
 - Manipulating patient devices, (e.g., urinary catheter)
 - These precautions apply to the infected or colonized resident and all 'high-risk' residents on the same unit as the colonized or infected resident.
 - High-risk residents include those with:
 - Central venous catheters
 - Urinary catheters
 - Feeding tubes
 - Drains
 - Ventilators
 - Tracheostomy/wounds

Interfacility transfer form

- The Utah Department of Health and Human Services [Interfacility Transfer Form](#) should be used for patient transfer to other healthcare facilities to communicate infection control precautions to the next healthcare provider and prevent transmission of multidrug-resistant organisms (MDRO)s.

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Thank you.

