

HAI/AR Monthly Digest

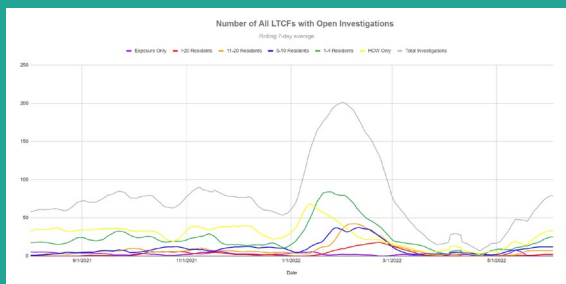
Utah Department of Health and Human Services Healthcare Associated Infections/Antimicrobial Resistance Program

Issue 11 | June 2022

Did you read this month's digest?

Yes No

Utah LTCF situational update



New DHHS COVID-19 guidance documents for LTCFs

Updated

- Assessment form for patient transfers from hospitals to LTCF or HHA
- Recommendations based on vaccination status and community transmission level chart

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

Updates

HAI/AR update

NHSN COVID-19 vaccine reporting module changes

- Facilities reporting into the NHSN COVID-19 Vaccine Module (nursing facilities) will see a new form effective May 30, 2022. The new form removed and consolidated several fields and added a new question about those who are "up-to-date." Please be aware of these changes as you report vaccine information to NHSN.

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.

HAI social media account

- The DHHS HAI/AR and Disease Response, Evaluation, Analysis, and Monitoring (DREAM) programs teamed up to create a joint social media account. You can follow us on Facebook at Utah DREAM & HAI or on Instagram @Utah.DREAM.HAI.

Mental health resources

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

Questions?

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



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

CDC update

- The CDC updated their [recommendations for travel](#). Please review updated recommendations for healthcare facilities.
- Second COVID-19 boosters are available for those 50 and older. Contact us if you are interested in a booster clinic.

June Spotlight:

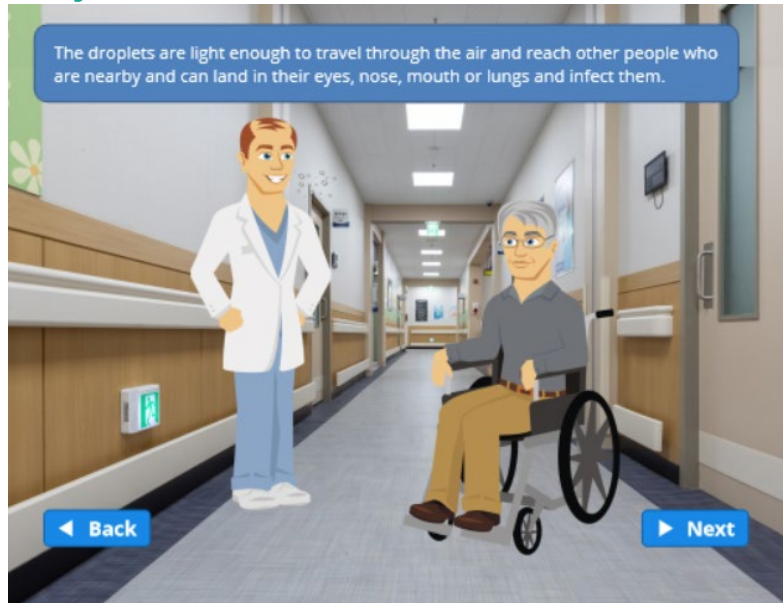
Truewood by Merrill, Taylorsville

Truewood by Merrill, Taylorsville offers assisted living for nearly 75 residents. In late May, 100% of residents received their second booster shot and 100% of the staff is fully vaccinated and the majority is up to date on vaccination. The resident care coordinator attributes their vaccination success to a culture of care throughout the community.

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

Project Firstline beta test



- The Project Firstline Utah team is nearly ready to beta test Module 1: Infection Prevention Basics. The target audience of this module is frontline staff (CNAs, environmental and dietary staff, receptionists, etc.). If you would like your facility to participate in the beta test, email janellekammerman@utah.gov.

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

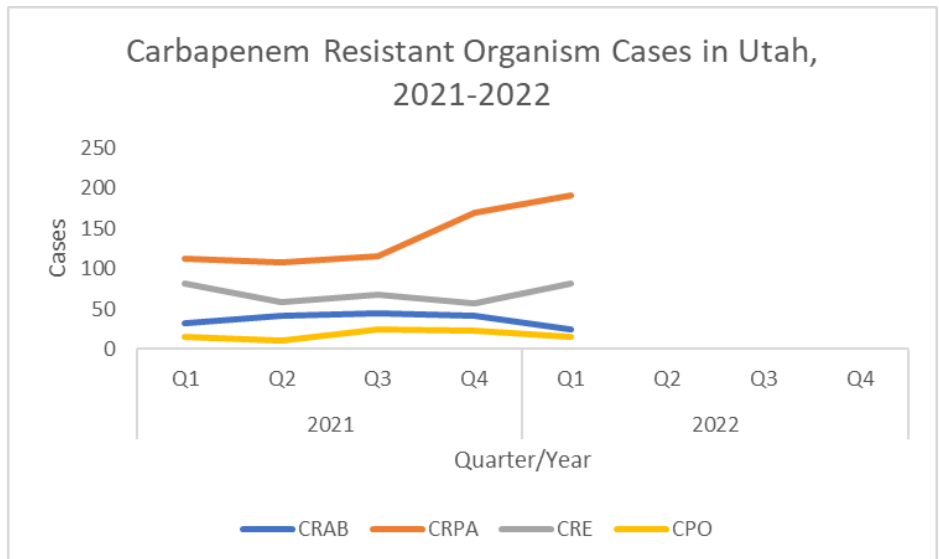
- Join us for the next Long-Term and Post-Acute Care Project ECHO presentation on **Wednesday, June 8, 2022** from **11 am to 12 pm**.
 - Title: **Navigating the Post-Pandemic World with the LTC Ombudsman Program**
 - Register [here](#).
- We would love to have your input for future sessions. Please take [3 minutes to answer our survey!](#)

Antimicrobial resistance in Utah

Since May 1, 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)**.



*The Enterobacteriales 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 continues to this day. *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.
 - 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.

Did you read this month's digest?

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

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