

**Standard Precautions
Transmission Based Precautions
Communicable Diseases**

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Paraprofessionals Training




Leader's Guide – Before You Begin






This training session includes videos that require internet access to access and play videos and access resources.


Leader's Guide – Opening The Session


Visuals	Outline & Script	Time
<div data-bbox="88 372 459 585" data-label="Image"> </div> <p data-bbox="88 633 442 937">In this slide deck, notes for the instructors are given in brackets []. These notes shouldn't be read aloud, but instead provide background information and context for the instructor's benefit.</p> <div data-bbox="88 981 459 1199" data-label="Image"> </div>	<ul data-bbox="496 372 921 556" style="list-style-type: none"> • Introduction • Welcome • Set expectations • Go through 6 month overview • Logistics/FAQ <p data-bbox="496 981 1142 1052">Let's take a look at what you can expect to get out of this training session.</p> <ul data-bbox="496 1097 1149 1626" style="list-style-type: none"> • Describe why it is appropriate to always follow standard precautions. • Describe opportunities when other pieces of standard precautions are important. • Demonstrate the appropriate way to follow standard precautions. • Describe why it is appropriate to follow transmission-based precautions. • Describe when it is appropriate to follow transmission-based precautions. • Demonstrate the appropriate way to follow transmission-based precautions. • Discuss the impact of communicable diseases in long term care. 	<p data-bbox="1210 372 1299 401">15 min</p> <p data-bbox="1210 446 1310 504">11:00 - 11:15 AM</p>


Visuals & Notes	Script & Notes	Time Estimate
<p data-bbox="105 401 277 446">Standard Precautions- WHY?</p>  <p data-bbox="94 658 451 730">This slide's script continues to next page.</p> 	<p data-bbox="491 392 1172 726">Standard precautions are basic steps that every health care worker should take to prevent the spread of germs. Standard precautions include keeping hands clean, not touching the face, covering coughs in sleeves, and using safety needles and sharps. In addition, add gloves, masks, eye protection from splashes, and masks at the RIGHT time. Every Resident, Every Day...Practice Standard Precautions.</p> <p data-bbox="491 774 1168 993">To break the chain of infection and prevent transmission of pathogens in the environment and the resident's room, everyone must practice standard precautions. Implementing and adhering to best practices is a proactive way to ensure we are doing all we can to prevent infection.</p> <p data-bbox="491 1045 1132 1224">Here is an extensive list of best practices you can put into place in your facility. You may already be applying many of these best practices. But, with a list this long you're sure to find a couple of new ones you can add to your daily routine.</p> 	



Visuals & Notes	Script & Notes	Time Estimate
<div data-bbox="92 388 462 596" data-label="Image"> </div> <p data-bbox="97 707 439 1078">Ask the trainees to describe how they clean up a resident who is bed bound and incontinent overnight- Walk through the scenario as a group and discuss how glove changes and hand hygiene can break the chain of infection.</p>	<ul data-bbox="496 388 1163 1145" style="list-style-type: none"> • Practice good hand hygiene. • Keep PPE supplies close to resident care locations. • Practice the motto “one needle/syringe, one resident, one time”. • Always cough into sleeves, and wear a mask when recovering from a cough or cold. • Remind coworkers to keep their hands clean and cover their coughs. • Remind residents not to feel offended or afraid if staff use gloves, gowns, or eye protection when providing care. • When practicing respiratory etiquette, explain that the mask is worn to prevent the spread of germs. • Help residents practice hand hygiene. Offer residents time for hand hygiene after they use the toilet and before and after meals. • Change gloves between rooms and when moving from a contaminated surface area to a clean one. 	



Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="85 736 446 807">This slide's script continues to next page.</p> 	<p data-bbox="491 388 836 455">Standard Precautions..... Key Messages</p> <p data-bbox="491 500 1165 836">Practice standard precautions for the care of ALL residents all the time!!! No, this does not mean you must gown, and glove 100% when delivering care to the resident, however it does mean that after touching the resident, you sanitize your hands for “healing hands” and throughout your day use critical thinking to add layers of protection, of personal protective equipment (PPE) as needed or indicated by the resident’s daily needs.</p> <p data-bbox="491 919 1160 987">[Ask the participants to give examples of standard precautions- the list below is a conversation starter.</p> <p data-bbox="491 1035 1165 1180">Observe the standard precautions of not touching blood, body fluids, mucous membranes, cuts, wounds, or rashes with bare hands—and not letting these touch your skin, face, or clothes.</p> <p data-bbox="491 1228 1150 1335">Use personal protective equipment (PPE) when contact is possible with blood, body fluids, mucous membranes, or non intact skin.</p> <p data-bbox="491 1383 1150 1450">Practice hand hygiene according to the 5 Moments and after removing gloves.]</p> 	


Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="125 568 414 591">Standard Precautions- WHEN?</p>	<p data-bbox="492 388 889 417">Use safety needles and sharps.</p> <p data-bbox="492 465 1158 604">Practice respiratory etiquette by covering coughs in sleeves and wearing masks when recovering from coughs or colds. Encourage residents to do the same.</p> <p data-bbox="492 653 1115 797">Wear gown and gloves when changing bed linen that has been soiled with human waste. This protects your uniform and breaks the chain of infection when disposing of linen safely.</p> <p data-bbox="492 846 1108 952">Sanitize hands when picking up any item off the floor or assisting resident with their shoes or wheelchair plates that shoes rest upon.</p> <p data-bbox="492 1000 1089 1068">Remember, standard precautions protects the resident and you, the caregiver!!</p>	

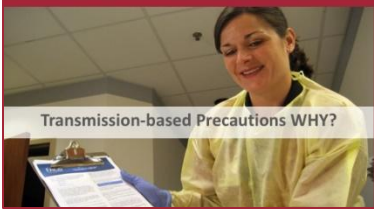
Visuals & Notes	Script & Notes	Time Estimate
	<p>[Trainer should have samples of PPE used in your facility and locations of where to find PPE. Ask the participants if PPE is readily available and if not, make adjustments to meet the needs of the caregivers.]</p>	


Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="219 397 418 421">Donning (Putting On) PPE</p> <ul data-bbox="219 440 439 575" style="list-style-type: none">• Correct order to put on PPE:<ul style="list-style-type: none">○ Hand hygiene○ Gown○ Mask○ Goggles○ Gloves	<p data-bbox="525 407 1115 629">add CDC handouts for Donning and demonstrate or practice with the participants</p>	


Visuals & Notes	Script & Notes	Time Estimate
<p data-bbox="234 397 418 421">Doffing (Taking Off) PPE</p>  <ul data-bbox="222 446 454 556" style="list-style-type: none">• Correct order to remove PPE:<ul style="list-style-type: none">○ Gloves○ Face shield○ Gown○ Mask or respirator 	<p data-bbox="508 417 1168 581">add CDC handouts for Doffing and demonstrate or practice with the participants</p>	

Visuals & Notes	Script & Notes	Time Estimate
<div data-bbox="92 388 462 598"> <p>In What Order?</p> <p>Think Critically (especially when leaving isolation)</p> <ol style="list-style-type: none"> 1. Gloves are last on and first off 2. If airborne precautions, mask stays on until out of the room 3. Consider your gloves, outside of your goggles, front of your mask, sleeves and front of your gown all to be contaminated  </div> <div data-bbox="87 658 456 869"> <p>In What Order?</p> <p>Remember to wash your hands once all PPE is removed.</p>  </div>	<p>How do I remember so much?</p> <p>Using your thinking cap, you can keep both you and the resident safe in delivery of care for standard precautions and transmission based precautions.</p> <p>[Discuss additional precautions based on conditions.]</p>	

Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="115 566 439 600">Glove Hygiene means NOT wearing gloves everywhere when they are contaminated!</p>	<p data-bbox="508 401 1150 624">Some facilities may have implemented extra precautions such as wearing gloves at all times when delivering resident care. That does not mean using the same gloves from resident to resident. There should not be a need for gloves in the hallway when you are not assisting a resident.</p> <p data-bbox="508 668 1143 890">Healthcare workers must be aware that although gloves protect the caregiver, proper hand hygiene after glove removal, and <i>proper glove use</i>, not wearing gloves that are <i>potentially contaminated and touching the environment in the resident's room and hallways, is critical.</i></p> <p data-bbox="508 935 1125 1045">Remember to always remove gloves immediately before exiting the residents room and perform hand hygiene.</p> <p data-bbox="508 1089 1146 1161">USE ABHR- FOAM OR GEL IN, and remove gloves and FOAM OR GEL OUT!</p>	

Visuals & Notes	Script & Notes	Time Estimate
	<p>Transmission-based precautions are special safeguards, such as isolating residents, that should be used when residents have infections caused by germs that are resistant to antibiotics or may cause outbreaks at the LTC facility.</p> <p>The Centers for Disease Control and Prevention has specific directions about what types of isolation are to be used for specific germs.</p> <p>[Pull your specific policies to review.]</p> <p>Because of the emergence of multi-drug resistant organisms (MDROs), long-term care facilities (LTCFs) increasingly need to care for residents with MDROs while preventing transmission and maintaining residents' privacy and dignity, ability to socialize, and home-like environment. This training provides guidance for LTCFs on the implementation of Transmission-Based Precautions, with specific emphasis on Contact Precautions for residents with MDROs and certain other infectious diseases.</p>	

Visuals & Notes	Script & Notes	Time Estimate
 <p>Transmission-based Precautions WHY?</p>	<p>Further, as stated in the CMS guidance, “it is essential both to communicate transmission-based precautions to all health care personnel, and for personnel to comply with requirements. Pertinent signage (i.e., isolation precautions) and verbal reporting between staff can enhance compliance with transmission-based precautions to help minimize the transmission of infections within the facility.”</p> <p>While a particular type or format of signage is not required, it is important to have a system in place whereby “facility staff clearly identify the type of precautions and the appropriate PPE (personal protective equipment) to be used in the care of the resident.”</p> <p>[Review now your signage for your facility and provide the learner examples of common infections and precautions you see in your building.]</p>	

Visuals & Notes	Script & Notes	Time Estimate
	<p>Practice Tips</p> <ul style="list-style-type: none"> • Use transmission-based precautions if unsure what is causing an infection, until the germ is identified. • Use transmission-based precautions, and discontinue when no longer needed, based on evidence-based best practices and facility policy. • Do not over-isolate residents. • Consider transmission-based precautions on a case-by-case basis as an indicator to "gown and glove up" when providing direct personal care. For example— <ul style="list-style-type: none"> If the resident cannot maintain clean hands, clean clothes, and clean equipment. If the resident is colonized with a germ that is highly resistant. If the resident is new to the LTC facility. • Consider the type of germ and other factors (for example, if there are no longer signs or symptoms of an infection, antibiotic therapy is completed, and wound is healed) before shifting to standard precautions. <p>Use transmission-based precautions for all Multidrug Resistant Organisms (MDROs) infections per policy of your facility, C difficile, influenza and other seasonal communicable diseases.</p> <p>Communication Tips</p> <p>Provide the resident and family with information about the organism causing the infection. Explain to the resident and family why the resident is being put into isolation.</p>	

Visuals & Notes

Break it down!- WHAT to use?

PPE	Standard/ Universal Precaution	Transmission-Based Precautions		
		Contact	Droplet	Airborne
		Handwashing & Skin Integrity		
Gloves	Yes	Yes if direct	Yes	Yes
Gown	Yes	Yes if direct	Yes	Yes
Mask	Yes	Yes	Yes if direct, DR	Yes if direct, DR
Goggles	Yes	Yes	Yes	Yes
Cohort	Yes	Yes	Yes	No
Misc.	Goggles, Mask, & Antinecrobials			

Script & Notes

Time Estimate

[Activity Suggestion- Discuss your facilities policies and PPE]

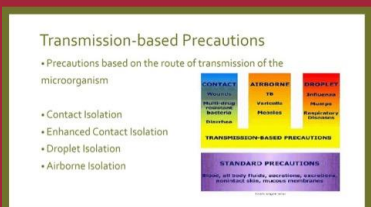
- Use this slide to promote discussion about PPE to be used in these situations
- Use the slide that follows to guide the debrief and clarify understanding


In some instances, healthcare personnel are required to wear PPE in addition to that recommended for Standard Precautions.


Categories.



Transmission-Based Precautions are Contact, Droplet, and Airborne


<https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html>


Visuals & Notes	Script & Notes	Time Estimate
 <p>Transmission-based Precautions</p> <ul style="list-style-type: none"> • Precautions based on the route of transmission of the microorganism • Contact Isolation • Enhanced Contact Isolation • Droplet Isolation • Airborne Isolation 	<p>There are three mechanisms of infection transmission:</p> <p>Contact</p> <p>Transmission: Indirect (i. e. from environment) Direct (from susceptible host)</p> <p>Prevention: Wear gown, gloves and <u>sometimes face mask</u></p> <p>Enhanced Contact: <u>Add sign for "Washing hands with soap and water if resident has C. Diff"</u></p> <p>Droplet</p> <p>Transmission: Large respiratory particles that travel short distances (up to 6 feet).</p> <p>Prevention: Wear regular mask that covers mouth and nose- assure it is well fitted and discard after one time use!</p> <p>Airborne-</p> <p>Transmission: Small respiratory particles that stay suspended in the air.</p> <p>Prevention: Wear N 95 fit tested mask or PAPR. If not available, shut resident's door and wear regular masks until resident is transferred to a higher level of acute care.</p>	


Visuals & Notes	Script & Notes	Time Estimate
	<p>Key Messages</p> <p>Use contact precautions to prevent the spread of germs by direct or indirect contact with residents or their environments. ALL who enter must put on a gown and gloves and follow standard precautions regardless of the amount of time in the room.</p> <p>Contact precautions are special safeguards that must be put in place when dealing with residents who are infected with certain germs. Adopt a person-centered approach: "Only when necessary for only as long as necessary."</p> <p>Contact precautions, such as wearing gloves and a gown, are special safeguards that staff must put in place when dealing with residents who are infected with germs that are easy to transmit through equipment or by touching other residents or staff. These germs include—</p> <ul style="list-style-type: none"> • MRSA (methicillin-resistant <i>Staphylococcus aureus</i>) • VRE (vancomycin-resistant <i>Enterococcus</i>) • <i>C. difficile</i> (<i>Clostridium difficile</i>) • ESBL (extended spectrum beta lactamase) bacteria • CRE (carbapenem-resistant <i>Enterobacteriaceae</i>) • Candidia Auris (C. Auris Fungus) <p>(Review in your building other conditions that warrant contact precautions- shingles weeping, wounds draining...etc.)</p>	


Visuals & Notes	Script & Notes	Time Estimate
	<p>Practice Tips</p> <p>Remove the gloves and gown and sanitize hands Before leaving the room.</p> <p>Always clean hands before entering residents' rooms and after leaving the rooms.</p> <p>Wear gloves and a gown when entering residents' rooms and remove them when leaving the rooms.</p> <p>Make sure any shared equipment is cleaned and disinfected before and after use.</p> <p>Make sure that wounds are covered.</p> <p>Contain any urine, stool, or wound drainage.</p> <p>For residents who are on contact precautions, consider their taking part in social activities as long as they do not have open wounds or diarrhea, have contained drainage, and are able to keep their hands, clothes, and equipment clean. Some facilities use gowns on the resident. Check your policies.</p> <p>At a minimum you must have the resident perform hand hygiene when leaving the room for this activity.</p>	


Visuals & Notes	Script & Notes	Time Estimate
<div data-bbox="92 388 462 598" data-label="Image"> </div> <p data-bbox="92 653 451 730">This slide's script continues to next page.</p> 	<p data-bbox="482 382 1163 492"><i>Clostridioides difficile</i> (also known as <i>C. diff</i>) is a bacterium that causes diarrhea and colitis (an inflammation of the colon).</p> <p data-bbox="482 537 1149 795">It's estimated to cause almost half a million illnesses in the United States each year. About 1 in 5 patients who get <i>C. diff</i> will get it again. Within a month of diagnosis, 1 in 11 people over age 65 died of a healthcare-associated <i>C. diff</i> infection.</p> <p data-bbox="482 840 1125 911">Most cases of <i>C. diff</i> occur when you've been taking antibiotics. There are other risk factors:</p> <ul data-bbox="488 917 1063 1105" style="list-style-type: none"> • Being 65 or older • Recent hospitalizations • A weakened immune system • Previous infection with <i>C. diff</i> or known exposure to the germs <p data-bbox="482 1149 1135 1414">Because of the risk of <i>C. diff</i> spores that can live in the environment for months, CDC has recognized "Enhanced" or some call it Enteric Contact Precautions. This is the same contact PPE of gown and gloves but adding "soap and water" hand washing only, as to use friction to remove the spores on the hands.</p> 	




Visuals & Notes	Script & Notes	Time Estimate
<div data-bbox="92 388 464 598" style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">Contact Enhanced Transmission Precautions for C. Difficile</p> <p>Caregivers and visitors – Gown/gloves</p> <p>Resident – Soap/water hand wash after toileting, before and after eating – Only allowed outside of room if they perform soap/water hand wash and put on freshly clean clothes</p> <p>Everyone – Washes hands (soap/water) before exiting room</p> <p style="font-size: small; text-align: center;">Change gloves using the "5 Moments" and wash hands with soap/water between changes</p>  </div>	<p>Change gloves using the "5 Moments" and wash hands with soap/water between changes.</p> <ul style="list-style-type: none"> • Caregivers - gown/gloves • Visitors - gown/gloves • Patient - soap/water hand wash after toileting, before and after eating • Patient should be allowed outside of room if they perform soap/water hand wash and put on freshly clean clothes • Everyone washes hands with soap/water prior to leaving room 	


Visuals & Notes	Script & Notes	Time Estimate
	<p>All who enter the room must put on a surgical facemask and use standard precautions.</p> <p>Droplet precautions are special safeguards put in place when germs are spread by sneezing, coughing, or sometimes even talking. Examples of diseases that spread via large droplets include—</p> <ul style="list-style-type: none"> • Some bacterial infections (such as <i>Streptococcus</i> infection) • Some viral infections (such as influenza) <p>It is important to use droplet precautions to stop the spread of these diseases to other residents and staff.</p> <p>Key Messages</p> <ul style="list-style-type: none"> • Droplet precautions are used against influenza (also known as the flu). • Wear a mask in addition to using standard precautions. • Residents on droplet precautions should stay in their rooms. <p>If a resident on droplet precautions has to leave his or her room, the resident must wear a mask.</p> <p>Consider using both droplet and contact precautions if the respiratory virus causing the illness is unknown or if the resident has nausea, vomiting, or diarrhea.</p>	


Visuals & Notes	Script & Notes	Time Estimate
<p data-bbox="107 396 449 425">Practice Tips for Droplet Precautions</p> 	<p data-bbox="492 396 1163 511">Wash hands for at least 20 seconds with either soap and water or use an alcohol-based hand rub before entering and after leaving residents' rooms.</p> <ul data-bbox="492 550 1163 1130" style="list-style-type: none"> • Simply adding a mask to standard precautions for you inside the resident's room can prevent the spread of flu in the building. • Assure your mask is well fitting and remember to remove and DISCARD it after leaving the resident's room. • Masks hanging around the neck should never be reused and are likely contaminated with aerosolized pathogens. • When removing a mask, always touch the strings or elastic, never the front of the mask. Perform hand hygiene after discarding the mask. 	


Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="115 537 435 556">Airborne Transmission Based Precautions</p>	<p data-bbox="491 388 1148 529">Airborne precautions are safeguards, including special isolation rooms and fit-test respirators that help protect residents and staff from airborne germs.</p> <p data-bbox="491 575 1126 720">If an airborne infection isolation room is not available at the LTC facility, the patient should be promptly placed in a private room and asked to wear a mask while awaiting transfer.</p> <p data-bbox="491 767 1093 875">Airborne precautions are put in place when an infectious organism floats in the air and can be spread through the air.</p> <p data-bbox="491 921 1113 1029">Diseases that are spread through the air and are highly contagious due to these small droplets include—</p> <ul data-bbox="491 1035 779 1180" style="list-style-type: none"> Tuberculosis Measles Chicken pox Disseminated shingles <p data-bbox="491 1226 676 1257">Key Messages</p> <p data-bbox="491 1263 1145 1333">Airborne precautions are used for diseases such as tuberculosis and chicken pox.</p> <p data-bbox="491 1338 1051 1408">Airborne precautions are rarely used in LTC facilities.</p> <p data-bbox="491 1414 1152 1522">An LTC facility must have negative pressure rooms and a respiratory fit-test program in order to safely maintain airborne precautions.</p>	


Visuals & Notes	Script & Notes	Time Estimate
	<p>Practice Tips</p> <ul style="list-style-type: none"> • Enter the room only when absolutely necessary. • Wash hands for at least 20 seconds with soap and water or use an alcohol-based hand rub before entering and after leaving the room. • Wear respiratory protection (such as an N95 respirator), or if not available, a surgical mask, according to facility policy. <p>Transfer:</p> <p>Keep the resident in the room, with the door closed, when waiting to transfer the resident from the LTC facility to a hospital or other facility that can maintain airborne precautions. Instruct the resident to cover his or her mouth and nose with a tissue when coughing, and to place the soiled tissues into the regular trash can.</p> <p>Make sure the resident wears a surgical mask while awaiting transfer and during transfer.</p> <p>It is important for all healthcare givers to keep up to date on vaccine preventable illnesses and many of these are airborne. Check your facility's policies to assure you are compliant!</p>	


Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="92 653 451 730">This slide's script continues to next page.</p> 	<p data-bbox="482 388 1158 836">Standard and Transmission-Based Precautions are measures used to prevent and control the spread of infectious organisms within healthcare settings. Contact Precautions are one type of Transmission-Based Precaution that involves specific measures (e.g. use of gloves and gowns) when providing care for residents infected or colonized with organisms transmitted through direct or indirect physical contact (Siegel et al, 2007). NYSDOH recognizes that long term use of Contact Precautions for residents of LTCFs may impact quality of life.</p> <p data-bbox="482 919 1162 1141">Therefore, consistent with current guidelines, facilities may assess on a case-by-case basis whether it is beneficial to modify Contact Precautions in situations where residents remain colonized with MDROs or similar organisms for extended periods of time (Siegel et al, 2007; Smith et al, 2008).</p> <p data-bbox="482 1224 1162 1561">Modifying Contact Precautions is not appropriate when a resident has an active infection during which secretions, excretions, or wound drainage are not able to be contained. In situations where Contact Precautions are modified, residents (with assistance from facility healthcare providers, as needed) should perform hand hygiene before leaving their rooms, after toileting, before and after meals, and whenever hands are visibly soiled.</p> 	


Visuals & Notes	Script & Notes	Time Estimate
 <p>Modification of Contact Precautions (case-by-case per policy)</p>	<p>Clothing should be clean, and wounds should be dressed such that drainage is contained. These measures are expected to minimize transmission risk while the resident is outside the room. Activities likely to have a higher transmission risk typically occur within the resident’s room (e.g., wound care, toileting, bathing, changing clothes or linen). Therefore, when in the room of a resident for whom Contact Precautions are modified, all facility healthcare providers should maintain Contact Precautions, including the use of gowns, gloves, and other relevant PPE, as well as perform appropriate hand hygiene.</p> <p>Facility infection control policies should reflect criteria used to determine whether modification of Contact Precautions is appropriate and should include considerations of quality of life and resident safety by preventing transmission of MDRO’s.</p>	


Visuals & Notes	Script & Notes	Time Estimate
 <p>Good Standard Precautions Can lead to this!</p>	<p>Contact, droplet, and airborne precautions are used in addition to standard precautions when necessary to keep residents safe and healthy. However, keeping them social and active is important to their health.</p> <p>Remember to keep a balance.</p> <p>[Review your facility's policy on MDROs and when Contact Precautions are critical.]</p> <p>Adopt a person-centered approach to practicing transmission-based precautions: "Only when necessary for only as long as necessary."</p>	

Visuals & Notes	Script & Notes	Time Estimate
	<p>As part of Standard Precautions, residents, family members and visitors should be educated as to the importance of good hand hygiene in preventing the transmission of healthcare associated infections.</p> <p>While implementing Transmission-Based Precautions is necessary and important to prevent transmission, it can be confusing or alarming for residents and visitors.</p> <p>Facility healthcare providers should be prepared to address residents' and visitors' concerns without violating resident privacy.</p> <p>Education of residents and visitors should be done at the time Transmission-Based Precautions are initiated and address the rationale, risks to household members, and explanation about health care worker use of PPE. Directions for use of PPE by family members and visitors will depend on whether facility policy requires or encourages PPE use by visitors.</p> <p>For further information about educating residents and visitors about Transmission-Based Precautions and modification of Contact Precautions while ensuring patient privacy, facilities should seek the advice of facility administration or the infection preventionist.</p>	

Visuals & Notes	Script & Notes	Time Estimate
	<p>An outbreak occurs when there are more cases of an infectious disease in a designated population than usually occur at a given time. LTC facilities are especially vulnerable to outbreaks because residents are generally older and many are in frail health. Living in close proximity to each other and sharing the same caregivers is an infection risk, and therefore standard precautions and good hand hygiene practices are essential.</p> <p>The two most common types of outbreaks in LTC facilities are—respiratory and gastrointestinal, but they are not the only risks. (Ask the learner what they have seen in their facility.)</p> <p>Examples are:</p> <ul style="list-style-type: none"> • Respiratory infections: influenza, legionella, strep pneumonia, RSV • Gastrointestinal diseases: Norovirus, C. Difficile, Salmonella • Other pathogens: Conjunctivitis (pink eye), skin infestations (scabies or lice) <p>A single case of influenza or an illness that causes nausea, vomiting, and diarrhea (such as norovirus) can quickly escalate into an outbreak. Contaminated hands, gloves, and medical equipment can spread disease across surfaces. Residents, such as those with dementia who wander and may have unhygienic hands or clothes, can also spread disease.</p>	

Visuals & Notes	Script & Notes	Time Estimate
 <p>Outbreak Management</p>	<p>Practice Tips</p> <p>Consider implementing both droplet and contact precautions if the facility does not know the cause of a cluster of similar illnesses.</p> <p>Report any new respiratory or gastrointestinal symptoms, especially if a fever develops.</p> <p>Work with the clinical supervisor to identify similar symptoms among those who are sick.</p> <p>Staff should stay home, or go home, if they have a respiratory illness or nausea, vomiting, or diarrhea.</p>	

Visuals & Notes	Script & Notes	Time Estimate
 <p>Communicable Diseases</p>	<p>Influenza in the elderly that also can lead to pneumonia and other respiratory complications is the highest risk for communicable disease exposure in long term care.</p> <p>The elderly have a suboptimal immunologic response to the flu vaccine and require a higher dose vaccine for their age group.</p> <p>The Flu Shot is about.....</p> <ul style="list-style-type: none">• 80% effective in preventing death• 27% to 70% effective in preventing hospitalizations and pneumonia• 30-50% effective in preventing flu <p>Despite high vaccination rates among residents, influenza outbreaks still occur in LTCFs, triggered by the unvaccinated caregivers or those coming to work ill with the flu.</p>	

Visuals & Notes	Script & Notes	Time Estimate
 <p data-bbox="94 552 462 595">Making Infection Prevention part of your daily practice....What you do matters most!</p>	<p data-bbox="508 401 1150 813">So by now you have learned that germs can be found on the hands or gloves of health care workers, on surfaces in the facility, and on medical equipment. If these are not properly cleaned and disinfected, the germs may spread to other people and the environment. In healthy individuals, the immune system fights off germs and prevents infection. Older people, due to the declining ability of their immune systems to resist germs, are more susceptible to infection and can become infected more easily.</p> <p data-bbox="508 861 1150 967">Germs can also move from person to person. Residents, family members, visitors, and staff may unknowingly spread germs to others by—</p> <ul data-bbox="508 977 1150 1161" style="list-style-type: none"> • Coughing and sneezing germs into the air. • Touching other people or surfaces with hands that may be carrying germs. • Touching body fluids and secretions that may contain germs. <p data-bbox="508 1209 1150 1306">What can I do as an important infection prevention caregiver for the residents? Practice Tips</p> <ul data-bbox="508 1315 1150 1576" style="list-style-type: none"> • Look for signs and symptoms of infection. • Ask the resident how he or she is feeling. • As you work with a resident, you will become more familiar with what is and isn't normal for that resident. • Promptly report any signs of an infection to the clinical supervisor. 	

Visuals & Notes	Script & Notes	Time Estimate
	Any questions?	