




Indiana
Department
of
Health

Welcome
to the
Healthcare Associated
Infections Antimicrobial
Resistance Webinar Series



Webinar Overview

- Schedule – bi-monthly
- Intended audience – hospital infection preventionists
- Upcoming topics:
 - The Three Rs – August 2021
 - *Candida auris* – October 2021
 - No webinar in December
 - MDROs – February 2022



[Please visit the HAI-AR Webinar Series webpage for Hospital Infection Preventionists by clicking here!](#)



Indiana
Department
of
Health

The HAI-AR
Team Presents
“The Three Rs”:
Reach-Out,
Reporting, &
Resources

Overview

- Meet the Indiana Department of Health HAI-AR team
- Review recent updates to Indiana's HAI reporting rule
- Review Indiana's communicable disease reporting rule focusing on reporting for multidrug resistant organisms (MDRO)
- Review reporting for *Candida auris*
- Discuss updated resources and helpful tools available on IDOH's [HAI-AR webpages](#)
- Review some additional resources available from other agencies
- Question and answer session



Meet the HAI-AR Team



Indiana
Department
of
Health



Tina Feaster
Healthcare Associated
Infections Director
cfeaster@isdh.in.gov
317-233-7825



Haley Beeman
Healthcare
Associated Infections
Epidemiologist
hbeeman@isdh.in.gov
317-234-2805



Antimicrobial
Resistance
Epidemiologist



Candida auris
Epidemiologist



Lauren Sprague
Occupational
Health Nurse
Lsprague@isdh.in.gov
317-234-2804



Jennifer Spivey
IP Program
Manager
jspivey1@isdh.in.gov
317-471-7844



Melissa Meador
NHSN Public Health
Investigator
mmeador1@isdh.in.gov
317-439-8772



Hannah Gallion
Antimicrobial
Resistance Public
Health Investigator
hgallion@isdh.in.gov
317-233-2886



Marcie Bryant
Candida auris
Public Health
Investigator
mbryant@isdh.in.gov
317-670-1820



11 District
Infection
Preventionists & 1
Infection Prevention
Epidemiologist



Indiana
Department
of
Health

Contacts by Subject Matter

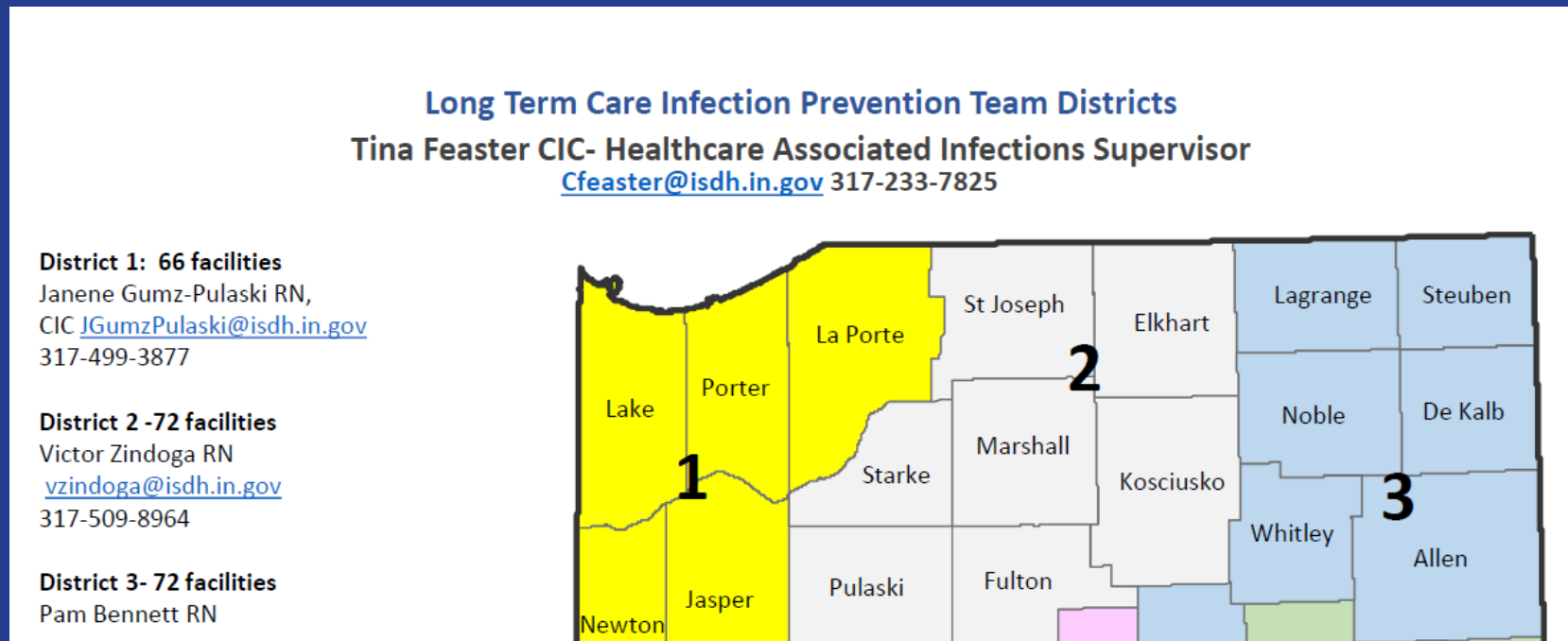
Questions About	Primary Contact	Secondary Contact
Healthcare associated infections (CLABSI, CAUTI, VAP & SSI) NHSN reporting and mapping CP-CRE IMPs Injection safety	HAI epidemiologist	LTC NHSN PHI
Long-term care facility COVID-19 reporting	LTC NHSN PHI	HAI epidemiologist
Antimicrobial resistance and susceptibility Antimicrobial stewardship CP-CRE reporting (all mechanisms except IMPs) MDRO containment MRSA and <i>C. diff.</i>	AR epidemiologist	AR PHI
<i>Candida auris</i> reporting <i>Candida auris</i> infection control practices	CA epidemiologist	CA PHI
Infection prevention concerns Infection Control Assessment and Response (ICAR)	IP program manager and infection preventionist for your district	
Fit testing Ebola Healthcare associated <i>Legionella</i> Bloodborne pathogens, tattoo, eyelash extension, sharps and infectious waste	occupational health nurse	HAI epidemiologist

Infection Preventionists

For infection control and prevention questions and concerns, please refer to the contact for your district IP or Jennifer Spivey, IP program manager.

IPs cover proactive and reactive Infection Control Assessment and Response (ICAR) in long term care (LTC) for COVID-19 and other outbreak types in LTC, acute care (hospitals), long term acute care hospitals (LTACHs), and dialysis facilities.

For the current district map, please go to the [HAI webpage](#).





Non-HAI-AR Team State Contacts



District Field and LHD Support Epidemiologists

**Indiana Department of Health
Epidemiology Resource Center**

Main: 317-233-7125
Fax: 317-234-2812

After Hours: 317-233-1325

District Field and LHD Support Epidemiologists

**District 1
Field Epidemiologist**

Cyndy Fohrman
(317) 473-2696
cfohrman@isdh.in.gov

LHD Support Epidemiologist

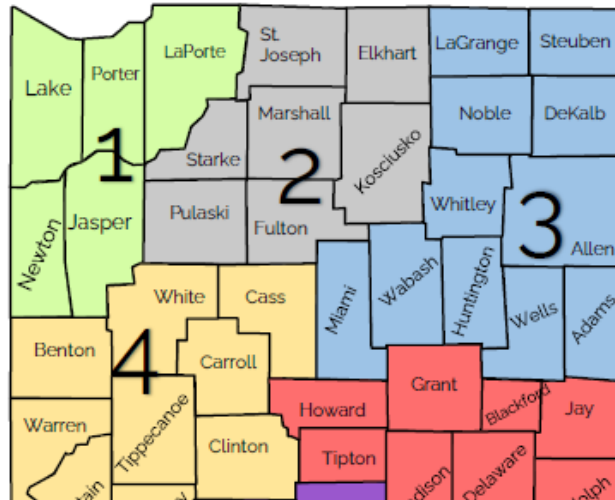
Madisen Mrotek
(317) 450-4643
mmrotek@isdh.in.gov

**District 2
Field Epidemiologist**

Christina Wheeler
(317) 690-9466
chwheeler@isdh.in.gov

LHD Support Epidemiologist

Taylor Gumms
(765) 860-6705
tgumms@isdh.in.gov



**District 5
Field Epidemiologist**

Ali Snively
(317) 430-3848
asnively@isdh.in.gov

LHD Support Epidemiologist

Jason Collins
(317) 452-0708
jacollins1@isdh.in.gov

LHD Support Epidemiologist

Kira Richardson
(317) 409-5602
kirrichardson@isdh.in.gov

**District 6
Field Epidemiologist**

Tracy Larcheveque
(317) 460-1208
tlarcheveque@isdh.in.gov

For additional epidemiologic support, please reach out to the field and LHD support epidemiologist in your district.

For the current district map, please [click here](#).

Emergency Epidemiologist On-Call

If you have a question, you can call the IDOH main phone line at 317-233-7125.

The emergency on-call epidemiologist is also available after hours and on weekends at 317-233-1325.



HAI-AR Reporting Overview



Indiana
Department
of
Health

HAI Reporting Rule

ARTICLE 15. HOSPITAL LICENSURE RULES

Rule 1. Hospital Operation, Management, Construction, Equipment Requirements *(Repealed)*

(Repealed by Indiana State Department of Health; filed Dec 21, 1994, 9:40 a.m.: 18 IR 1280; errata filed Jan 5, 1995, 4:20 p.m.: 18 IR 1290)

Rule 1.1. Definitions

410 IAC 15-1.1-1 Applicability

Authority: IC 16-21-1-7; IC 16-21-1-9

Affected: IC 16-19-3; IC 16-21-1

Sec. 1. The definitions in this rule apply throughout this article except as otherwise indicated. *(Indiana State Department of Health; 410 IAC 15-1.1-1; filed Dec 21, 1994, 9:40 a.m.: 18 IR 1261; readopted filed Jul 11, 2001, 2:23 p.m.: 24 IR 4234; filed Nov 16, 2006, 4:01 p.m.: 20061213-IR-410050193FRA; readopted filed May 22, 2007, 1:44 p.m.: 20070613-IR-410070141RFA; readopted filed Jul 14, 2011, 11:42 a.m.: 20110810-IR-410110253RFA; readopted filed Sep 13, 2017, 4:08 p.m.: 20171011-IR-410170339RFA)*

Find it [here](#)
on the HAI
webpage!

HAI Reporting Rule

Healthcare-Associated Infections (HAI)

A healthcare-associated infection (HAI) is an infection that a person can acquire while receiving treatment in a healthcare facility for another condition. There are various types of HAIs, which are often named after the site of the body in which they occur. Common types of infections are catheter-associated urinary tract infections (CAUTIs), central line-associated bloodstream infections (CLABSIs), surgical site infections (SSIs), and ventilator-associated events (VAEs). Some types of bacteria that are known to cause HAIs are methicillin-resistant *Staphylococcus aureus* (MRSA), *Clostridioides difficile* (CDI), *Acinetobacter*, *Pseudomonas*, Carbapenem-resistant *Enterobacterales* (CRE), and Vancomycin-resistant *Enterococci* (VRE).

[CAUTI](#) | [CLABSI](#) | [SSI](#) | [VAP](#)

Surveillance

[National Healthcare Safety Network \(NHSN\)](#)

[ISDH HAI Reporting Rule](#)

[HHS National Target Goals](#)

HAI Data

[CDC State-Based Prevention: Indiana](#)

[CDC Patient Safety Atlas](#)

Find it [here](#)
on the HAI
webpage!

Communicable Disease Rule

TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

Final Rule

LSA Document #15-39(F)

DIGEST

Adds 410 IAC 1-2.5 to add definitions, reporting requirements, dangerous communicable diseases, disease intervention measures, general and specific control measures, and documents incorporated by reference. Adds and modifies control measures for schools, daycare facilities, preschools, health care facilities, and food handlers. Adds reporting requirements for physicians, hospital administrators, and laboratories. Repeals 410 IAC 1-2.3. Effective 30 days after filing with the Publisher.

410 IAC 1-2.3; 410 IAC 1-2.5

SECTION 1. 410 IAC 1-2.5 IS ADDED TO READ AS FOLLOWS:

Rule 2.5. Disease Reporting and Control

[Access the communicable disease reporting resources here!](#)

Communicable Disease Rule

[EPIDEMIOLOGY RESOURCE CENTER](#) / [INFECTIOUS DISEASE EPIDEMIOLOGY](#) / [INFECTIOUS DISEASE EPIDEMIOLOGY](#) / [COMMUNICABLE DISEASE REPORTING](#)

Communicable Disease Reporting

Communicable Disease Reporting Rule

- [2015 Communicable Disease Reporting Rule](#)
- [Indiana State Health Commissioner Kris Box, MD, FACOG Reporting Rule for COVID-19 \(updated June 1, 2020\)](#)
- [COVID-19 Control Measures \(updated July 19, 2021\)](#)
- [Local Health Department Guidance on Communicable Disease Laws \(updated July 26, 2021\)](#)

To report a case of a reportable disease please complete [this form](#) and fax to 317-234-2812 **or** call the ISDH Epic 233-7125 (8:15 am- 4:45 pm) or 317-233-1325 (after hours, weekends, holidays).

[Access the
communicable
disease reporting
resources here!](#)

Communicable Disease List

[Access the communicable disease reporting resources here!](#)

Report incidences of the following infections, diseases, or conditions to the
Local Health Department — Phone Number: _____

**Reportable Communicable Diseases and Conditions for
Health Care Providers, Hospitals, and Medical Laboratories
Effective December 25, 2015
410 IAC 1-2.5-75 & 76**

Report immediately on suspicion (!). Report within 24 hours (*). All others report within 72 hours or as noted.

Acquired Immunodeficiency Syndrome (AIDS)
*Animal Bites
Anaplasmosis (*Anaplasma* species)
! Anthrax (*Bacillus anthracis*)
! Arboviral (Eastern Equine, St. Louis, La Crosse, West Nile, California, Western Equine, Powassan, Japanese)
Babesiosis (*Babesia* species)
! Botulism (*Clostridium botulinum*)
! Brucellosis (*Brucella* species)
Campylobacteriosis (*Campylobacter* species)
Carbapenemase-producing Carbapenem-resistant Enterobacteriaceae (CP-CRE)
Chancroid (*Haemophilus ducreyi*)
! Chikungunya virus

! Hantavirus pulmonary syndrome
! Hemolytic uremic syndrome, postdiarrheal
! Hepatitis, viral, Type A
Hepatitis, viral, Type B
! Hepatitis, viral, Type B, pregnant woman (acute and chronic) or perinatally exposed infant
Hepatitis, viral, Type C (acute), within five (5) business days
Hepatitis, viral, Type Delta
! Hepatitis, viral, Type E
Hepatitis, viral, unspecified
Histoplasmosis (*Histoplasma capsulatum*)
HIV infection/disease (The following conditions related to HIV are laboratory reportable)
Cryptococcus neoformans
Kaposi's sarcoma (biopsies)
Pneumocystis carinii

Rabies, postexposure treatment
Rocky Mountain spotted fever (*Rickettsia* species)
! Rubella (German Measles)
! Rubella congenital syndrome
Salmonellosis, non-typhoidal (*Salmonella* species)
! Shigellosis (*Shigella* species)
! Smallpox (Variola infection)
Adverse events or complications due to smallpox vaccination (vaccinia virus infection) or secondary transmission to others after vaccination.
! St. Louis encephalitis (SLE)
Staphylococcus aureus, vancomycin resistance level of MIC \geq 8 μ g/mL or severe *Staphylococcus aureus* in a previously healthy person
Streptococcus pneumoniae, invasive

Communicable Disease List

Effective immediately (2/6/2018) cases of chlamydia, gonorrhea, and syphilis should be reported using [this form](#). Phone and fax numbers for your county can be found on the ISDH STD Prevention [webpage](#) under the “STD Morbidity Reporting in Indiana” heading.

Resources

- [Rule Change Notification Letter](#)
- [Changes to Communicable Disease Rule](#)
- [Confidential Report of Communicable Diseases Form](#) (Updated 2/2/2018; please review the listed conditions carefully, as some have been removed)
- [Indiana Confidential Sexually Transmitted Disease \(STD\) Reporting Form](#) (Updated 2/6/2018)
- [Lab](#)
- [2015 Reportable Disease List](#) (Edited 9/11/2020)
- [Communicable Disease Reporting Presentation Slides](#)
- [HIPAA and Public Health Letter](#)

Page last updated: September 21, 2020

Page last reviewed: August 1, 2016

[Access the
communicable
disease reporting
resources here!](#)

CP-CRE, VRSA, and *S. aureus* Reporting

How to report:

- Option 1: create morbidity report in NBS
 - attach all documents to morbidity report
- Option 2: fax all documents to AR epidemiologist or AR public health investigator
 - secure fax number: 317-234-2812

Documents to include when reporting:

- history and physical
- all relevant lab reports
- antimicrobial susceptibility testing (AST) report

CP-CRE Reporting Form

This form can be downloaded from the [Antimicrobial Resistance webpage](#) on the IDOH website.



CP-CRE Reporting Form

Please submit one report per patient per admission within 72 hours. Attach all laboratory results including antibiotic susceptibility test results. Fax form to Indiana Department of Health (317)-234-2812 or upload to NBS Morbidity Report.

Reporting facility: _____

Reporter name: _____

Address: _____

Phone number: _____

Patient information

Patient name:	NBS ID:
DOB:	Phone:
Address:	County:
Did the patient die from the infection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of death:

When reporting suspected cases of CP-CRE, please fill out this form in NBS and attach to a morbidity report.

Include an H&P for the patient as well as all available labs and antimicrobial susceptibility testing (AST) results.




Candida auris Reporting

How to report:

- Option 1: create morbidity report in NBS
 - attach all documents to morbidity report
- Option 2: fax all documents to CA epidemiologist
 - secure fax number: 317-234-2812

Documents to include when reporting:

- history and physical
- all relevant lab reports
- antimicrobial susceptibility testing (AST) report



Reporting algorithm available [here!](#)

Candida auris Reporting Algorithm

A *Candida auris* case is received through lab identification.



Healthcare facility reports *Candida auris* case to Indiana Department of Health. Suspected cases should be reported within 72 hours with attached copies of any available lab results, antimicrobial susceptibility testing (AST) results and H&P.



Reporting suspected *C. auris* cases.



Create morbidity report in NBS and attach supporting documents (preferred method).




Fax documents to IDOH's secure line at (317) 234-2812.

IDOH recommendations
Patient should be placed in enhanced barrier contact precautions (without confirmed IDOH lab result). Use [EPA List P](#) products to disinfect environment and patient rooms. Flag patient's chart for quick identification in case of re-admission. Ensure an [interfacility transfer form](#) is utilized when a patient is transferred. Screen roommates for *C. auris* colonization, if applicable.

Candida auris Reporting Form

This form can be downloaded from the [Candida auris webpage](#) on the IDOH website.



**Indiana
Department
of
Health**

Candida auris Reporting Form

Please submit one report per patient per admission within 72 hours. Attach all laboratory results including antibiotic susceptibility test results. Fax form to Indiana Department of Health (317)-234-2812 or upload to NBS Morbidity Report.

Reporting Facility: _____ Reporter Name: _____

Address: _____ Phone Number: _____

Patient information

Patient name:	NBS ID:
DOB:	Phone:
Address:	County:
Did the patient die? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of death:

When reporting suspected cases of CA, fill out this form in NBS and attach to a morbidity report.

Include an H&P for the patient as well as all available labs and antimicrobial susceptibility testing (AST) results.

Candida auris Webpage

Resources
available
[here!](#)

Candida auris

What is *Candida auris* and why is it important?

Candida auris (*C. auris*) is an emerging fungus that presents a serious global health threat. *C. auris* is resistant to many of the antifungal drugs commonly used to treat infections. *C. auris* can cause many different types of infection, such as bloodstream, wound, urinary tract, and ear. Invasive *C. auris* infections have been associated with 30-60% mortality rates among hospitalized patients. Most deaths have occurred in persons with other serious illnesses that increased the risk of death. *C. auris* is a public health concern due to its potential for multi-drug resistance, ability to spread in healthcare settings, and rapid appearance in many parts of the United States. Click [here](#) to see the latest national information from the Centers for Disease Control and Prevention (CDC). *C. auris* infections have also been reported in dozens of other countries. Outbreaks of this organism have occurred in healthcare settings, so early identification and communication about cases are essential to awareness and prevention.

Severe *Staph* in a Previously Healthy Person

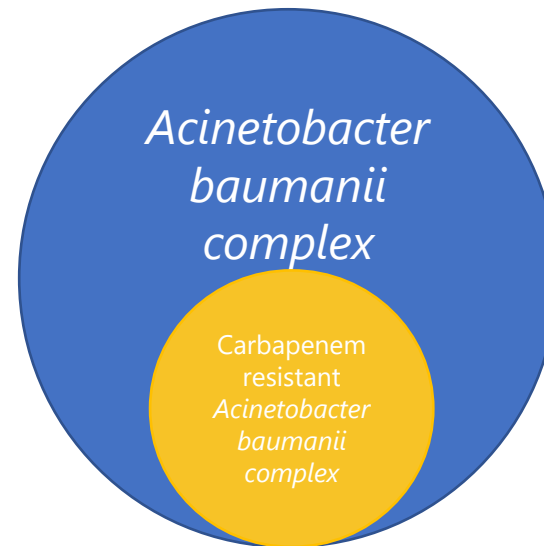
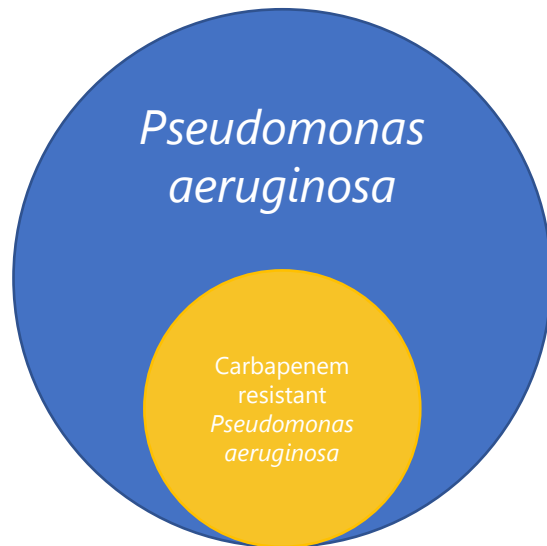
Criteria:

- *Staphylococcus aureus* isolated
- Infection results in death or ICU admission
- Case must not have been hospitalized, had surgery, or been a resident of a long-term care facility within the past year
- Case must not have had hemo- or peritoneal dialysis, percutaneous device, or indwelling catheter at time of culture

Organisms on “Watch”

Carbapenem-resistant *Pseudomonas aeruginosa* (CRPA)

Carbapenem-resistant *Acinetobacter baumannii* complex (CRAB)



*Do not start a case or submit a morbidity report for these organisms in NBS. Please include any antimicrobial susceptibility testing (AST) if possible.

D

E



Resources



HAI-AR Website

Directions:

1. Go to [in.gov/health](https://www.in.gov/health)
2. Click on "Epidemiology Resource Center" (ERC)
3. Under "Infectious Disease Epidemiology" click "Healthcare-Associated Infections and Antimicrobial Resistance Epidemiology," or click [here](#).

Inter-Facility Infection Control Transfer Form

[Download the form here!](#)



Eric J. Holcomb
Governor

Kristina M. Box, MD, FACOG
State Health Commissioner

Inter-Facility
Infection Control
Transfer Form

Inter-Facility Infection Control Transfer Form

[Download the form here!](#)



Inter-Facility Infection Control Transfer Form

This form must be filled out for transfer to accepting facility with information communicated prior to or with transfer. Please attach copies of latest culture reports with if available.

Sending Healthcare Facility:

Patient/Resident Last Name	First Name	Date of Birth	Medical Record Number

Name/Address of Sending Facility	Sending Unit	Sending Facility Phone

Inter-Facility Infection Control Transfer Form

[Download the form here!](#)



Inter-Facility Infection Control Transfer Form • Updated December 2020
Page 2

Does the person* currently have any of the following? Check here if none apply)

- | | |
|--|--|
| <input type="checkbox"/> Cough or requires suctioning | <input type="checkbox"/> Hemodialysis catheter |
| <input type="checkbox"/> Diarrhea | <input type="checkbox"/> Urinary catheter (Approx. date inserted |
| <input type="checkbox"/> Vomiting | <input type="checkbox"/> Suprapubic catheter |
| <input type="checkbox"/> Incontinent of urine or stool | <input type="checkbox"/> Percutaneous gastrostomy tube |
| <input type="checkbox"/> Open wounds or wounds requiring dressing change | <input type="checkbox"/> Tracheostomy |
| <input type="checkbox"/> Central line/PICC Approx. date inserted: <input type="text"/> | |
| <input type="checkbox"/> Drainage (source): <input type="text"/> | |

Is the person* currently in Transmission-Based Precautions? NO YES

CRE vs CP-CRE vs CPO

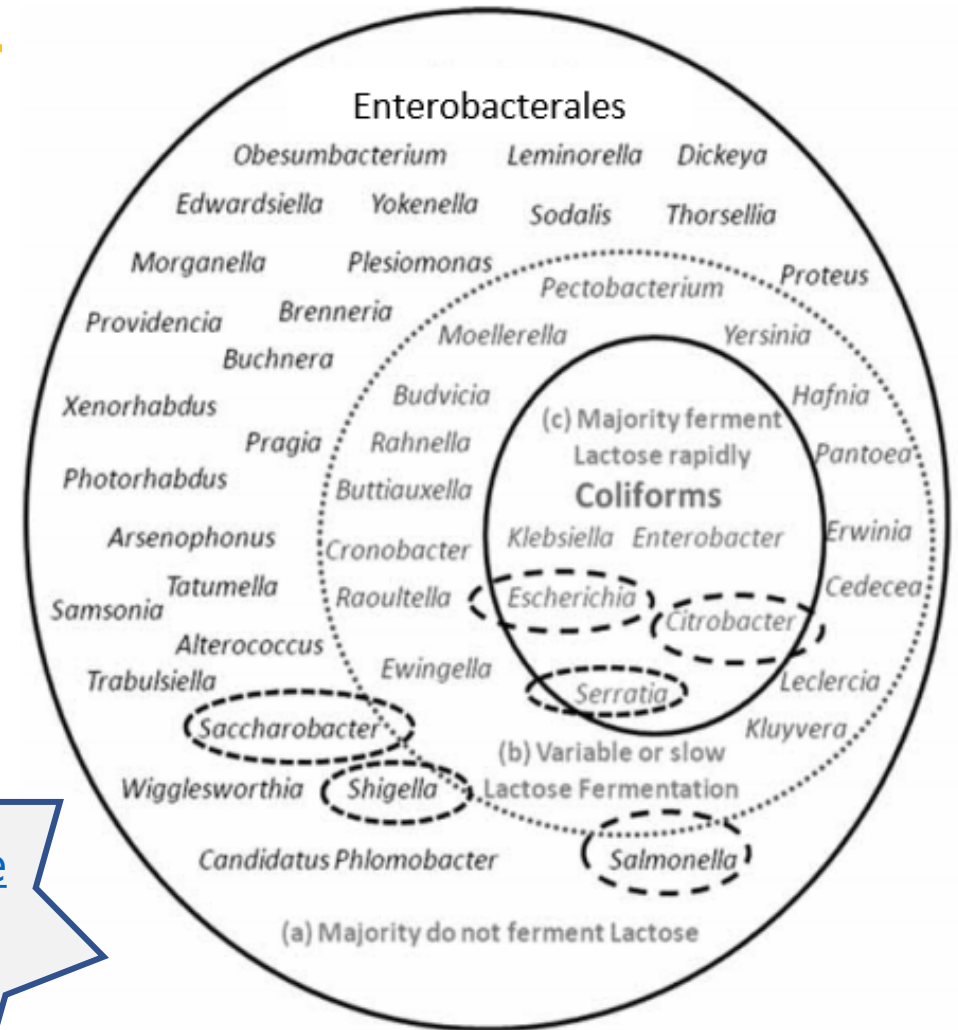
		CRE	CP-CRE	CPO
MDRO		Yes	Yes	Yes
Case definition requirements	Enterobacterales?	Yes	Yes	Not necessarily
	Resistant to Carbapenem?	Yes	Yes	Not necessarily
	Geno/pheno positive?	No	Yes	Yes

CP-CRE Identification

Enterobacterales (Enteric Organisms)

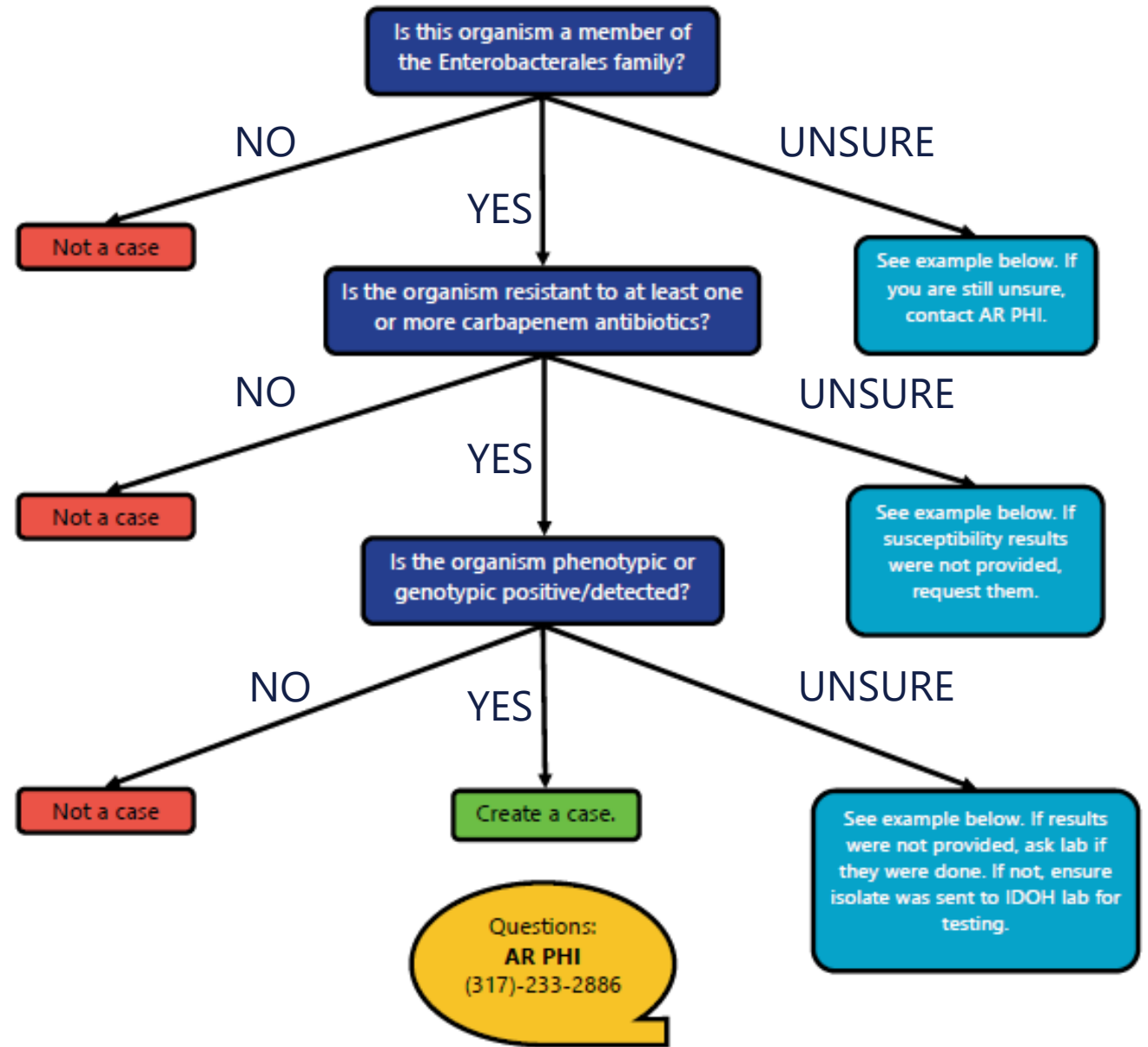
- *Escherichia* sp. (*E.coli*)
- *Klebsiella* sp. (*K. pneumoniae*, *K. variicola*, *K. oxytoca*, *K. ozaenae*, *K. ornitholytica*, etc.)
- *Enterobacter* sp. (*E. aerogenes*, *E. cloacae*, etc.)
- *Citrobacter* sp. (*C. freundii*, *C. koserii*, etc.)
- *Providencia* sp. (*P. rettgeri*, *P. stuartii* etc.)
- *Morganella* sp. (*M. morganii*, etc.)
- *Serratia* sp. (*S. marcescens*, etc.)
- *Proteus* sp. (*P. mirabilis*, *P. vulgaris*, *P. penneri*, etc.)
- Note: there are many more genera included within the family, but these are the most common CP-CRE that you will see

Find it [here](#)
on the AR
Webpage!



CP-CRE Identification Algorithm

Find the CP-CRE identification algorithm on the [AR webpage!](#)



CP-CRE Identification Algorithm

Enterobacterales

Escherichia sp.
Klebsiella sp
Enterobacter sp.
Citrobacter sp.
Providencia sp.
Morganella sp.
Serratia sp.
Proteus sp.
and others...

Genotypic Testing

Carba-R
PCR

*Will detect: KPC, IMP, NDM,
OXA-48, VIM

Phenotypic Testing

mCIM
CarbaNP
MHT

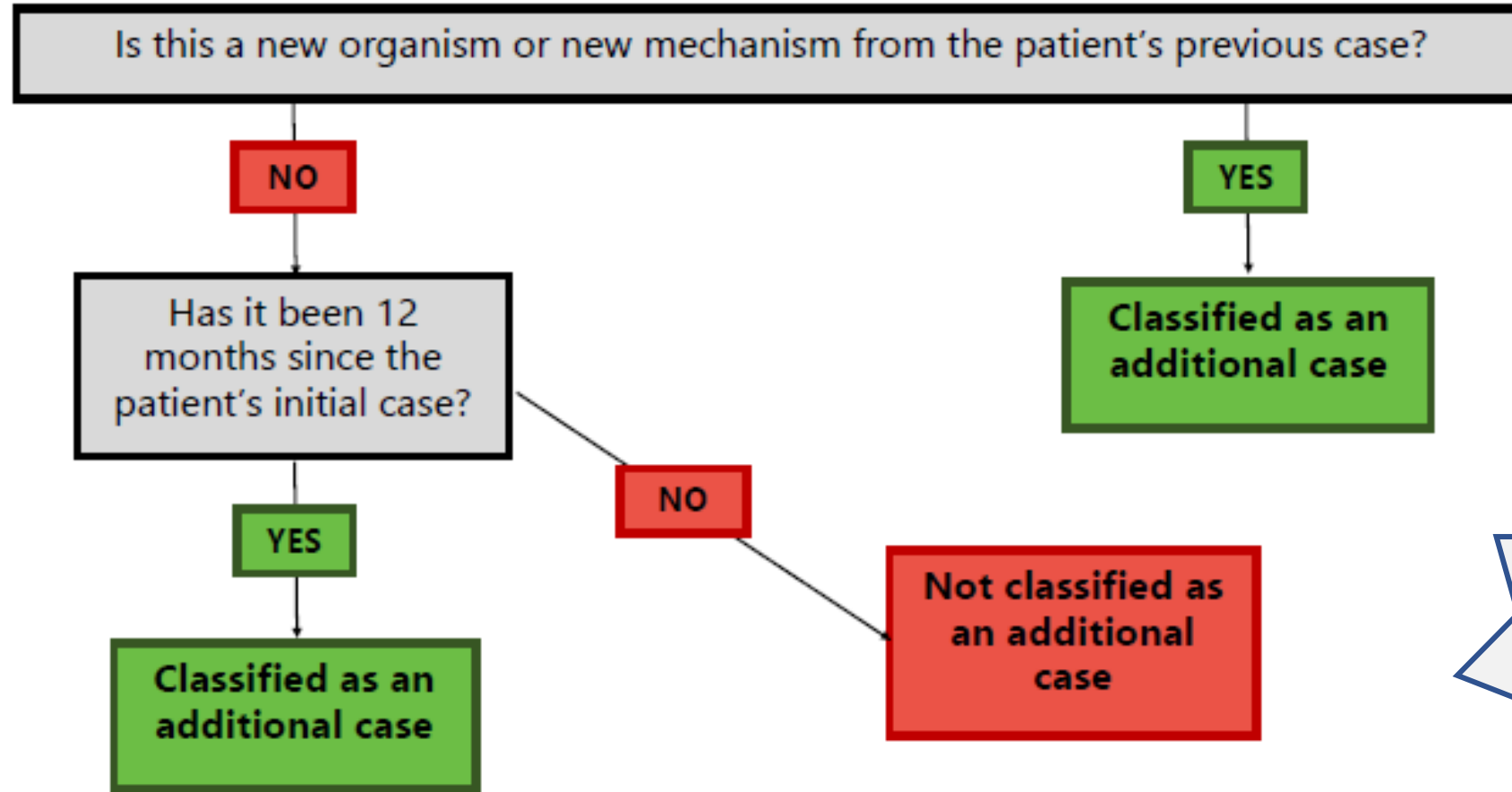
*Will result positive or negative

Carbapenems

Meropenem
Imipenem
Doripenem
Ertapenem

Find it [here](#)
on the AR
Webpage!

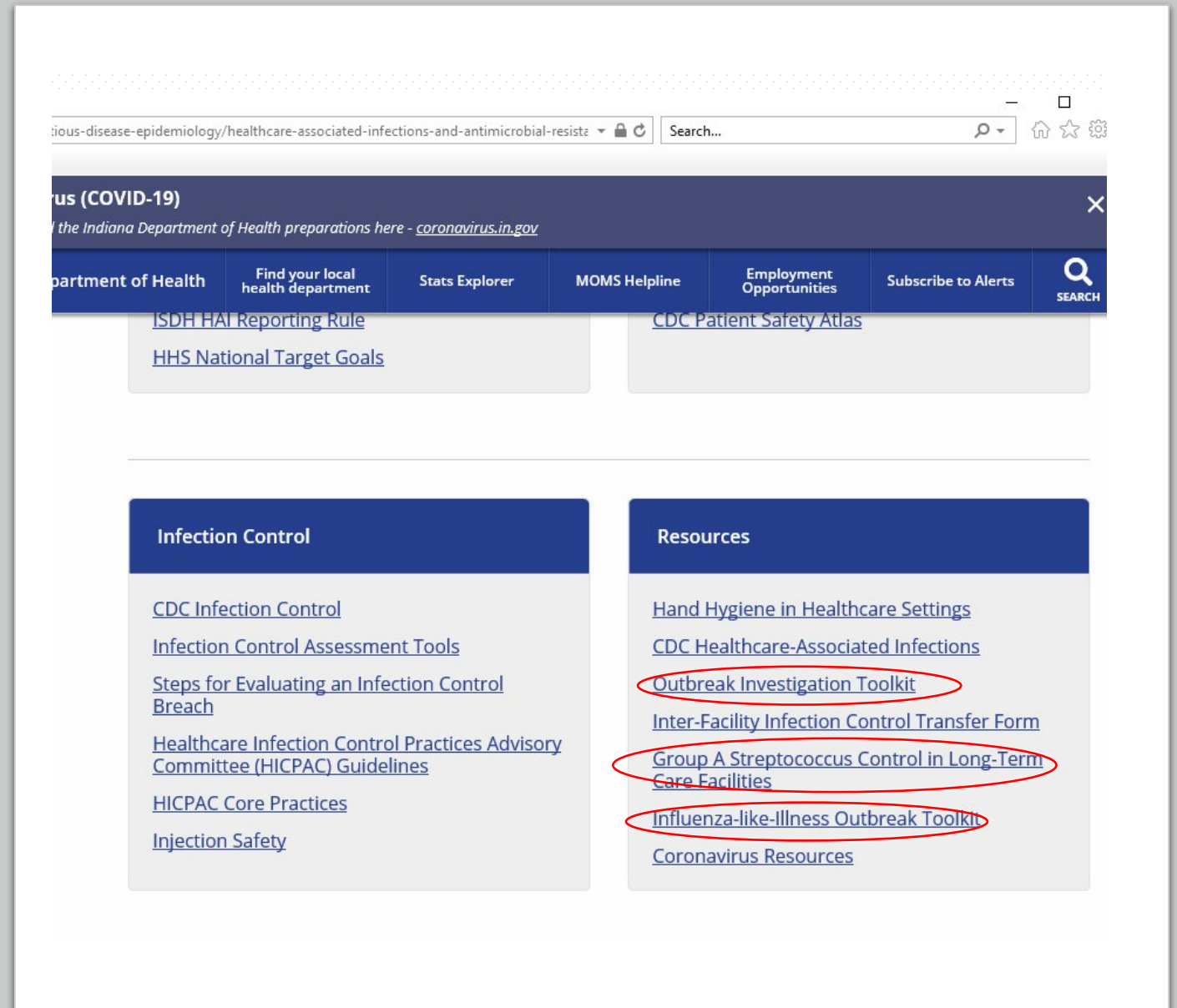
CP-CRE Recurrent Case



Find it [here](#) on the AR webpage!

Toolkits and Documents

- CDC's HAI outbreak investigation toolkit
- Influenza-like illness outbreak toolkit
- Group A *Streptococcus* control in long-term care facilities



The screenshot shows a web browser window with the URL <https://www.in.gov/healthcare-associated-infections-and-antimicrobial-resistance/>. The page features a dark blue header with navigation links: "Department of Health", "Find your local health department", "Stats Explorer", "MOMS Helpline", "Employment Opportunities", and "Subscribe to Alerts". Below the header, there are two main content areas. The left area is titled "Infection Control" and lists several links: "CDC Infection Control", "Infection Control Assessment Tools", "Steps for Evaluating an Infection Control Breach", "Healthcare Infection Control Practices Advisory Committee (HICPAC) Guidelines", "HICPAC Core Practices", and "Injection Safety". The right area is titled "Resources" and lists: "Hand Hygiene in Healthcare Settings", "CDC Healthcare-Associated Infections", "Outbreak Investigation Toolkit", "Inter-Facility Infection Control Transfer Form", "Group A Streptococcus Control in Long-Term Care Facilities", "Influenza-like-Illness Outbreak Toolkit", and "Coronavirus Resources". The links "Outbreak Investigation Toolkit", "Group A Streptococcus Control in Long-Term Care Facilities", and "Influenza-like-Illness Outbreak Toolkit" are circled in red in the original image.

HAI/AR/AS Prevention Resource Page

The HAI/AR/AS webpage serves to distribute resources to both providers and patients.

This webpage is the product of collaboration among multiple Indiana agencies.

Topics covered include:

- Healthcare associated infections
- Antimicrobial resistance
- Antimicrobial stewardship
- Sepsis

[Find the HAI/AR/AS webpage here!](#)



Partner Organization	Initiatives and Programs	Audience
Indiana Hospital Association (IHA)	<ul style="list-style-type: none"> • Antimicrobial Stewardship • Healthcare Associated Infections • Sepsis • MRSA • C. diff Infections 	<ul style="list-style-type: none"> • Acute Care
QSource/atom Alliance	<ul style="list-style-type: none"> • Antimicrobial Stewardship • Healthcare Associated Infection • C. diff Infections 	<ul style="list-style-type: none"> • ER Departments • Physicians offices • Pharmacists • Dentists • Outpatient Departments • Long-term Care
Indiana State Department of Health (ISDH)	<ul style="list-style-type: none"> • Antimicrobial Stewardship • Antimicrobial Resistance • Healthcare Associated Infections 	<ul style="list-style-type: none"> • Indiana healthcare facilities • The public

Prevention Resources for Acute Care Providers

Antimicrobial Resistance

Overview

[Antimicrobial Resistance | ISDH](#)

[CDC Antibiotic Resistance Investments](#)

[Antibiotic Resistance Threats Report, 2019 | CDC](#)

[National Action Plan for Combating Antibiotic-Resistant Bacteria](#)

Toolkits and Resources

[MDRO Background and Toolkit | IHA](#)

[CRE Control and Prevention Toolkit | AHRQ](#)

[CDC Interim Guidance for a Health Response to Contain Novel or Targeted MDROs](#)

Sepsis

Overview and Campaigns

[Sepsis Initiative | IHA](#)

[Survive Sepsis | IHA](#)

Toolkits

[2017 Sepsis Awareness toolkit | IHA](#)

[2016 Sepsis Awareness Campaign case study | IHA](#)

CDC Resources

[Sepsis Information Homepage | CDC](#)

[Sepsis Infographic for Hospitals](#)

CDC's Project Firstline

The Project Firstline collaborative was launched in 2020.

The collaborative is designed to provide infection control training to healthcare workers.

[Access Project Firstline here!](#)



The infographic is a vertical layout with a dark grey header. At the top left is the CDC logo and the text 'U.S. Department of Health and Human Services Centers for Disease Control and Prevention'. At the top right is the 'PROJECT FIRSTLINE' logo. Below the header is a grid of four portraits of diverse healthcare workers. To the right of the portraits is a section titled 'EMPOWERMENT' with two columns: 'Core Training' (describing critical infection control information delivery) and 'Practical Tools' (describing tools for implementing protocols). Below this is a section titled 'COLLABORATION' with two columns: 'Partner Engagement' (describing leveraging trusted partners) and 'Mentorship' (describing connecting experts with local communities). Below that is a section titled 'LASTING RESULTS' with two columns: 'Public Health Capacity' (describing tools for stronger relationships) and 'Science to Practice' (describing cutting-edge research). The bottom of the infographic features a central text block with the title 'PROJECT FIRSTLINE' and subtitle 'CDC's National Training Collaborative for Healthcare Infection Control', followed by three paragraphs of text. The bottom of the infographic has a yellow bar.

**U.S. Department of Health and Human Services
Centers for Disease Control and Prevention**

PROJECT FIRSTLINE

EMPOWERMENT

Core Training
Delivers critical infection control information to address immediate training needs via products, methods, and platforms the healthcare workforce uses and prefers.

Practical Tools
Provides tools to help everyone working in a healthcare facility implement infection control protocols and procedures throughout their work day.

COLLABORATION

Partner Engagement
Leverages trusted partners and channels across healthcare settings to ensure training content and tools meet the needs of and are delivered to the healthcare workers who need them.

Mentorship
Connects infection control experts with their local healthcare community so that they may become an ongoing resource.

LASTING RESULTS

Public Health Capacity
Provides tools and resources to the public health workforce to foster stronger relationships between the public health and the healthcare community to support more effective training on infection control.

Science to Practice
Cutting-edge research to inform infection control recommendations and practices, and development of more effective and evidence-based platforms and approaches to infection control training and education that meet the needs of diverse learners across the healthcare community.

PROJECT FIRSTLINE
CDC's National Training Collaborative for Healthcare Infection Control

The COVID-19 pandemic highlighted gaps in infection control knowledge and practice in healthcare settings nationwide.

In FY 2020, CDC launched Project Firstline, a collaborative of diverse healthcare, public health and academic partners committed to providing infection control training designed especially for healthcare workers.

Healthcare workers need and deserve clear and trustworthy information not only on CDC's infection control recommendations, but also on the science behind them.

Project Firstline delivers comprehensive, transparent, and responsive training and education to the millions of frontline healthcare workers in the United States.

Project Firstline is funded through COVID-19 supplemental appropriations at \$90M per year FY20 and FY21.

The need for infection control training, education and innovation is ongoing.

CDC's Project Firstline

Project Firstline's Inside Infection Control Series videos:

- "How do I test the seal on my N95?"
- "Do we really have to talk about hand hygiene? Again? Yes!"
- "Why does contact time matter for disinfection?"
- "Cleaning? Disinfection? What is the difference?"

Project Firstline's educational videos:

- "Safety tips for giving vaccine from a multi-dose vial"
- "Respiratory droplet basics"

APIC's Materials for Healthcare Facilities

[Visit APIC's webpage by clicking here!](#)

The screenshot shows the APIC website interface. At the top left is the APIC logo with the tagline "Spreading knowledge. Preventing infection." and the full name "Association for Professionals in Infection Control and Epidemiology". To the right of the logo is a "Sign In - My Account" link and a "Keyword Search" box. Below the logo are navigation links for "Membership", "My Courses", "MyAPIC", and "Store". A secondary navigation bar contains "Consumers", "Professional Practice", "Education & Certification", "Resources", "Public Policy", and "About". The main content area shows a breadcrumb trail: "Home > Consumers > Materials For Healthcare Facilities". The page title is "Materials for healthcare facilities" with a share icon and the number "3". Below the title is the text: "Download and share these materials to augment education programs in your facility." A light blue box contains a "Copyright disclosure" section with the following text: "The resources on the following pages are free to download and share. We encourage the use of our consumer resources for infection prevention education, provided that the information is not modified. Please attribute these resources to the Association for Professionals in Infection Control and Epidemiology (APIC) and include the links to additional resources (if applicable). If you have questions, please contact info@apic.org."

APIC's Materials for Healthcare Facilities

Some available materials include:

The Do's and Don'ts for wearing procedure masks in non-surgical healthcare settings

- [Flyer for healthcare professionals \[PDF\]](#)

The Do's and Don'ts for wearing N95 respirators in non-surgical healthcare settings

- [Flyer for healthcare professionals \[PDF\]](#)

The ABC's of Antibiotics

- [Flyer for patients \[PDF\]](#)
- [Flyer for patients – Español \[PDF\]](#)

What are healthcare-associated infections?

- [Flyer for patients \[PDF\]](#)

Infection Prevention and You at the Hospital

- [Hospital poster](#) [large file, PDF]
(11"x17", high-resolution for professional printing)
([PDF en Español](#))**
- [Hospital flyer](#) [PDF]
(8.5" x11", for professional printing, also desktop printer-friendly)
([PDF en Español](#))
- [Hospital brochure](#) [PDF]
(8.5" x 11", two pages, desktop printer-friendly)
([PDF en Español](#))
- [Hospital tri-fold brochure](#) [PDF]
(high-resolution for professional printing)
- [Hospital PowerPoint presentation](#) for closed circuit TV [large file, PPT]
([PPT en Español](#))

COVID-19-Related Trainings from the CDC

[Visit CDC's COVID-19: Training for healthcare professionals by clicking here!](#)



COVID-19

[Home](#) [Your Health](#) [Vaccines](#) [Cases & Data](#) [Work & School](#) **[Healthcare Workers](#)** [Health Depts](#) [Science](#) [More](#)

- [Home](#) Healthcare Workers
- Testing +
- Clinical Care +
- Infection Control +
- First Responders
- Exposure in Healthcare Settings +

Training for Healthcare Professionals

Updated May 26, 2021 [Print](#)

Cross-Cutting Topics

Search COVID-19 Trainings on TRAIN

Find COVID-19 trainings on vaccination, infection control, self-care, and other topics via TRAIN. Note: Links to non-CDC courses do not constitute an endorsement by CDC. Only courses offered by CDC course providers have been verified and approved by CDC.

Varied formats: [COVID-19 Trainings on TRAIN](#) [↗](#)



COVID-19-Related Trainings from the CDC

Some available trainings include:

Nurses on Shift Work and Long Hours

Learn ways to reduce workplace fatigue and stay healthy. Free CE.

Self-paced online course: [Nurses on Shift Work and Long Hours](#)

Workplace Violence Prevention for Nurses

Learn about the scope and nature of violence in the healthcare setting. Free CE.

Self-paced online course: [Workplace Violence Prevention for Nurses](#)

The Science of Social Distancing: Part 1

Learn about the science on social distancing, strategies to support it, and how findings from past pandemics — as well as the current one — can shape responses today.

Webinar: [The Science of Social Distancing: Part 1](#)

The Science of Social Distancing: Part 2

Learn more about social distancing. Topics include benefit-risk analysis of social/physical distancing strategies, including for vulnerable populations; strategies for mitigating mental health impacts; and what science is available to guide eventual relaxation of measures.

Webinar: [The Science of Social Distancing: Part 2](#)

Pfizer-BioNTech COVID-19 Vaccine: What Healthcare Professionals Need to Know

Learn about the COVID-19 vaccine manufactured by Pfizer Pharmaceuticals, based on the recommendations of the Advisory Committee on Immunization Practices and guidance from the manufacturer. Free CE.

Self-paced online course: [Pfizer-BioNTech COVID-19 Vaccine](#)

Moderna COVID-19 Vaccine: What Healthcare Professionals Need to Know

Learn about the COVID-19 vaccine manufactured by Moderna, Inc., based on the recommendations of the Advisory Committee on Immunization Practices and guidance from the manufacturer. Free CE.

Self-paced online course: [Moderna COVID-19 Vaccine](#)

Question and Answer

If you need someone added to the distribution list, please contact Hannah Gallion, AR PHI, at hgallion@isdh.in.gov.

