

## Jan 2012 APIC LTC Minutes

### Outbreaks-

Started after Thanksgiving time frame Nov 23-Jan 2 -Norovirus with and without Temp

Some facilities had more staff sick than residents.

Conduct Daily symptom survey of staff to catch staff coming in that are sick.

Send home if report symptoms-temp, vomiting, nausea, diarrhea

Contact precautions with or without Mask. If vomiting absolutely if not vomit could work without mask.

Facility reports-Difficult to control in Independent Apartments because of self report. 8 days later a staff member in dining services that worked in the apartments reported to be ill. Most staff that were reported to be ill had family exposure during holidays.

One facility reported a + Influenza A on 12/28 in a resident.

Influenza vaccine rates and compliance –Increase in vaccination rates only seen in mandated Influenza vaccine for staff. Use OSHA –Safe and Healthy Environment. Educate/ Educate/ Educate-Nurse practice as a nurse.

### Surveys-

Med Pass-5 Rights, dosing, drawing up (D level Sites)

Glucometer use and cleansing

“Antimicrobial stewardship” are key words with the State survey teams. Follow documentation of antibiotic use, McGreer’s criteria, and communications with Dr’s. Stand up to Dr’s stating I cannot take this order without documentation of symptoms or culture & sensitivity. Long term preventative antibiotics are not acceptable

### Resident hand washing-

Hand wipes containing at least 60% alcohol content and place away from food. Most facilities using Blue Sani-hands. Must have literature about food safe.

Commode and Bedpan cleaning without washing facilities-Commode liners with “Poo Powder”

Color Infection Mapping- Not mandatory, Useful in an outbreak

Use of a sort able Excel spread sheet is useful with a map.

Cohorting MDROs-Do you move someone if they develop an open area if they live with someone that is infected with MDRO? No, was the answer from most of the facilities. The roommate is potentially already contaminated.