

Wisconsin HAI Long-Term Care Education Series

May 25, 2023

Today's Agenda

- Summer Care of Dialysis Access
 - Rebecca LeMay, dialysis infection preventionist,
 HAI Prevention Program
- Updated COVID-19 Infection Prevention and Control Guidance for Health Care Settings
 - Ashlie Dowdell, director, HAI Prevention Program

Summer Care of Dialysis Access



Rebecca LeMay, MSN, RN
Dialysis Infection Preventionist
Healthcare-Associated Infections (HAI) Prevention Program
May 2023

Objectives

- Types of dialysis
- Types of dialysis access
- Care of dialysis access
- Infection risks
- Infection prevention practices

Background

- Diabetes and uncontrolled hypertension are the main causes of kidney failure.
- Approximately 84,000 people in Wisconsin have chronic kidney disease.
- Over 7,000 people in Wisconsin are on dialysis.
- There are over 120 dialysis facilities in Wisconsin.

Dialysis Care Settings

Dialysis care can be performed in:

- Hospitals.
- Specialized long-term acute care hospitals.
- Chronic outpatient facilities.
- Patients' homes.

Dialysis Care Considerations

If choosing to offer dialysis in your facility, you must consider:

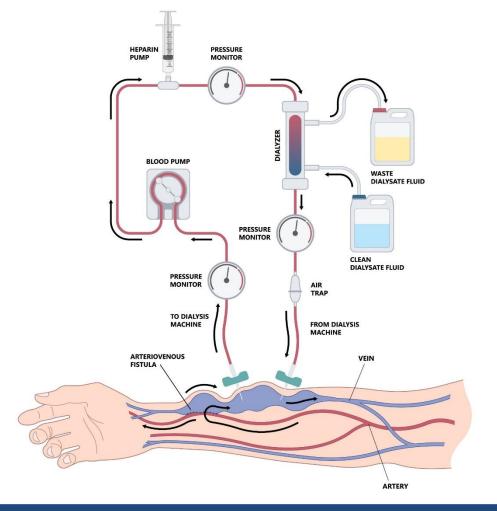
- Benefits to patients.
- CMS (Centers for Medicare and Medicaid Services) regulations.
- Staff and training.
- Logistics.

Dialysis - Quality, Safety, and Oversight Guidance

Dialysis Types and Care

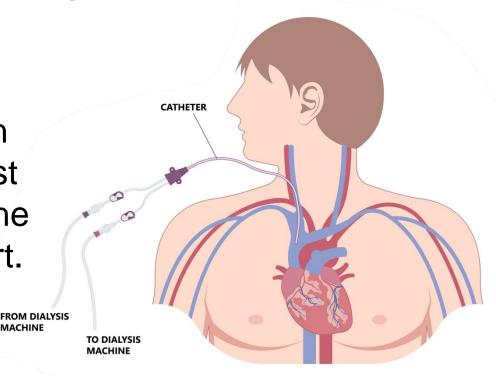
Hemodialysis

- Hemodialysis is the most common form of dialysis.
- This type of dialysis removes blood from the body by a machine through a dialysis access.
- There are three main vascular access types:
 - Central venous catheter (CVC).
 - Arterial venous graft (AVG).
 - Arterial venous fistula (AVF).



Hemodialysis: CVC

A CVC is a line placed into the blood vessel in the neck or upper chest with the tip ending in the right atrium of the heart.



MACHINE

CVC Care: Dos



- Ensure dressing is clean and dry daily.
- Change dressing if soiled or sweaty.
- Secure the catheter.
- Verify clamps are always closed.
- Utilize "scrub the hub" protocol.
- Limit catheter access to dialysis staff only.
- Clean exit site with each dialysis treatment.
- Cover site with waterproof dressing.

CDC (Centers for Disease Control and Prevention) Core Interventions: Dialysis Safety

CVC Care: Don'ts

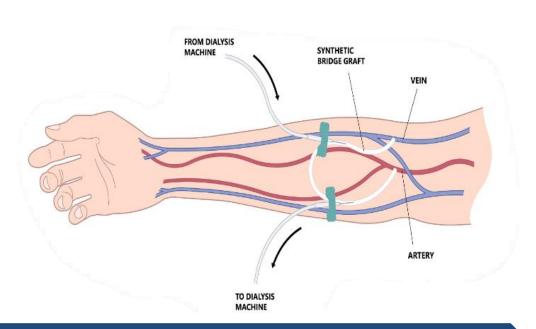


Avoid:

- Using lotions.
- Drawing blood or giving medications through the CVC.
- Using sharp objects near the catheter.
- Getting the catheter wet (through showering or swimming).
- Showering unless permitted by a doctor.

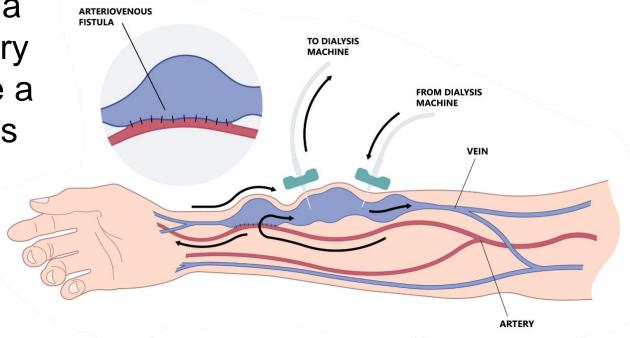
Hemodialysis: AVG

An AVG is a synthetic implanted tube placed to connect a patient's artery and vein to create a permanent dialysis access site.



Hemodialysis: AVF

An AVF connects a patient's own artery and vein to create a permanent dialysis access site.



AVF and AVG Care: Dos



- Wash with antibacterial soap daily (more often if sweaty or dirty).
- Only bathe, shower, and swim once healed.
- Apply sunscreen carefully around cannulation site.
- Listen for thrill or bruit daily.
- Remove bandages two-to-four hours post-dialysis.
- Be aware of any signs or symptoms of infection (such as redness, drainage, swelling, warmth, or temperature).

AVF and AVG Care: Don'ts

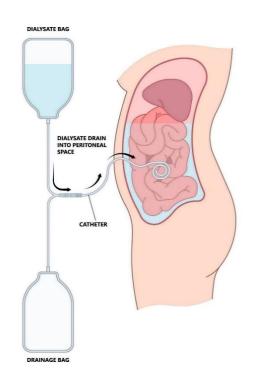


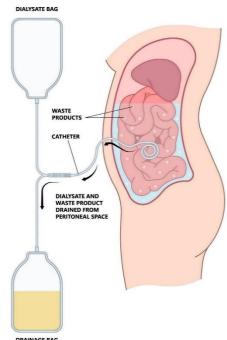
Avoid:

- Wearing tight clothing and watches on access arm.
- Lifting heavy items.
- Coughing or sneezing into access arm.
- Being in excessive heat (including saunas).
- Checking blood pressure and drawing blood on access arm.
- Sleeping on access arm.
- Scratching the area, particularly the access sites.
- Doing activities that could damage the access site.

Peritoneal Dialysis

- Blood vessels in the peritoneum filter blood through a pre-made dextrose-based dialysis solution.
- The solution flows into the peritoneum through a peritoneal catheter.
- This type of dialysis requires daily treatments.





Peritoneal Dialysis Catheter

- A thin tube surgically placed into the peritoneum that allows fluid to go in and out
- Can have one or two Dacron Cuffs
- Tip of catheter can be straight or coiled



Peritoneal Dialysis Catheter Care: Do's



- Utilize methods to prevent constipation.
- Secure tubing.
- Ensure clothes and bedding are clean.
- Ensure dressing is in place over exit site if area will get dirty.
- Clean daily and apply antimicrobial creams per a doctor's instruction.

Infection Control for peritoneal dialysis patients, CDC Setyapranata, S., & Holt, S. G., The gut in older patients on peritoneal dialysis

Peritoneal Dialysis Catheter Care: Do's



- Follow weight restriction once healed.
- Wear gloves and secure tubing when gardening.
- Cut fingernails short, no more than a quarter inch beyond fingertips.
- Wear mask when the catheter is accessed (this applies to everyone in the room).

Peritoneal Dialysis Catheter Care: Don'ts



Avoid:

- Changing new surgical dressing.
- Showering (until healed and a doctor approves).
- Using tub baths, hot tubs, or saunas (use approved swimming pools only).
- Using scissors and sharp objects near tubing and tape.
- Wearing artificial nails.
- Accessing site for anything other than dialysis.

Dialysis Infection Prevention

Infection Risks

- Infections are the second leading cause of death in dialysis patients.
- Dialysis patients are at increased risk for:
 - Vascular access site infections (VAIs).
 - Exit site infection.
 - Access-related bloodstream infection (ARB).
 - o HAIs.
 - Hepatitis B and C.

Hepatitis and dialysis: What patients can do to prevent infection, APIC

Infection Risks

- Frequent access
 - CVC or needle cannulation used to access bloodstream three-to-five times per week.
 - Peritoneal catheter accessed 14 or more times each week.
- Lower serum albumin levels
- Weakened immune systems
- Hospitalizations or surgery
- Water management

Staphylococcus aureus

- Staph aureus is the most common infectious agent seen in dialysis patients.
- Dialysis patients are at a higher risk of methicillin-resistant Staph aureus (MRSA) infections.



Infection Prevention

Staff and patients should practice proper infection prevention and control practices including:

- Performing hand hygiene.
- Using proper personal protective equipment (PPE).
- Cleaning and disinfection.
- Performing proper vascular access care.



Immunizations

CDC (Centers for Disease Control and Prevention) recommends that dialysis patients have the following vaccinations:

- Influenza.
- Pneumococcal.
- Pneumonia.
- Hepatitis B.
- COVID-19.



What Can You Do?

- Perform audits
- Post signage for helpful reminders
- Make PPE easily accessible
- Request an educational on-site visit from the Wisconsin HAI Prevention Program

Audit Tools and Checklists, CDC

Making Dialysis Safer for Patients Resource Center, CDC

Resources

- Dialysis Safety
- Bacteremia in Hemodialysis Patients
- Medical Management of the Dialysis Patient:
 Infectious Complications
- Preventing Infections, Midwest Kidney Network
- National Kidney Foundation Annual Report–2019
- Hemodialysis

Questions?

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Updated COVID-19 Infection Prevention and Control Guidance for Health Care Settings



Ashlie Dowdell
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May 2023

End of the Public Health Emergency Declaration

- Two key metrics used for CDC health care settings' guidance become unavailable:
 - Community transmission level
 - Community level
- COVID-19 remains a reportable communicable disease in Wisconsin.

Two Main Recommendations Affected

Source control



Nursing home admission testing



CDC Infection Prevention and Control Recommendations for Health Care Personnel

Source Control

- Now at a facility's discretion
- Follow the CDC infection prevention and control core practices
- Consider:
 - Outbreaks
 - Facility, resident, and visitor characteristics and risks
 - Local data sources
 - Public health recommendations for particular situations

CDC Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings

Next Steps

- Review updated guidance.
- Evaluate current policy and any needed changes.
- Educate staff, residents, and visitors on updated policies for source control.
- Audit for compliance and provide just-in-time education to reinforce desired practices.
- Remain open to adjustments.

Appendix

Considerations for Implementing Broader Use of Masking in Healthcare Settings

Introduction:

Use of well-fitting masks in healthcare settings are an important strategy to prevent the spread of respiratory viruses. Well-fitting masks can help block virus particles from reaching the nose and mouth of the wearer (wearer protection) and, if someone is ill, help block virus particles coming out of their nose and mouth from reaching others (source control). Masking by healthcare personnel as part of Standard and Transmission-Based Precautions and by ill individuals as part of respiratory hygiene and cough etiquette (i.e., for people with symptoms) are already well-described. This appendix describes considerations for implementing broader use of masking in healthcare settings. However, even when masking is not required by the facility, individuals should continue using a mask or respirator based on personal preference, informed by their perceived level of risk for infection based on their recent activities (e.g., attending crowded indoor gatherings with poor ventilation) and their potential for developing severe disease if they are exposed.

CDC Infection Prevention and Control Recommendations for Health Care Personnel

Don't forget about standard and transmission-based precautions!









Admission Testing

- The choice to test on admission is now at a facility's discretion.
- Facilities should weigh the pros and cons of screening and consider any times when this may be valuable.
- It is not a requirement that hospitals perform testing at discharge.

Next Steps

- Review updated guidance.
- Evaluate current policy and any needed changes.
- Educate staff on updated admission practices.
- Remain open to adjustments.

Listserv Message

Updated Infection
Prevention and Control
Recommendations for
Health Care Settings



Healthcare-Associated Infections (HAI) Prevention Program

Updated Infection Prevention and Control Recommendations for Health Care Settings

This message is being sent to local public health officers; Tribal health directors; local public health department nurses and staff; Wisconsin National Healthcare Safety Network (NHSN) Users: Long-Term Care list; NHSN Dialysis list; infection preventionists; and the Division of Quality Assurance Notifications and Assisted Living Forum lists.

In response to the COVID-19 public health emergency ending on May 11, 2023, the CDC (Centers for Disease Control and Prevention) released updated infection prevention and control (IPC) recommendations for health care settings on May 8, 2023. The updated recommendations provide health care settings a framework to implement IPC practices based on their individual facility needs and risks. These recommendations continue to apply to all settings where health care is delivered, including nursing homes and home health.

Due to data variability following the end of the public health emergency, CDC will no longer publish community transmission level data. Previously, community transmission levels informed the use of source control in health care settings, as well as admission testing in nursing homes. Without the availability of this metric, CDC now makes the following recommendations.

Questions?

HAI Prevention Program Contact Information

HAI Prevention Program

dhswihaipreventionprogram@dhs.wisconsin.gov

608-267-7711

For additional visit our contact information webpage.

HAI Infection Prevention Education

HAI: Home

For Health Professionals

Basic Information

Antimicrobial Stewardship

Infection Prevention Education

Laboratories

Personal Protective Equipment

Precautions

Reportable Exposures

Reportable Multidrug-Resistant Organisms

Surgical Site Infection Prevention

Surveillance

HAI Infection Prevention Education

The resources below are intended to connect health care facility infection preventionists (IP) with education materials to support their role in preventing, detecting, and responding to healthcare-associated infections.

IPs play an essential role in facility infection prevention policy development, surveillance, and risk assessment.

IPs serve as a resource to other staff and programs within their facilities.

In addition to the state in-person trainings and online references below, there are a number of links to trusted education resources, including the CDC (Centers for Disease Prevention and Control), the Centers for Medicare and Medicaid Services (CMS), and the Association for Professionals in Infection Control and Epidemiology (APIC).



The <u>IP Starter Kit</u> provides Infection Preventionists a brief background and resources for some of the many infection prevention-related responsibilities within health care facilities

Resources for infection preventionists Long-Term Care Education series

The long-term care (LTC) education series provides education presentations on topics that include infection prevention, HAIs, antibiotic stewardship, disease surveillance, and outbreak response for staff at skilled nursing facilities, assisted living facilities, local health departments, and other LTC stakeholders. Each session features a new, timely topic presented by the Department of Health Services (DHS) program staff, HAI Infection Preventionists, partner organizations, or other external subject matter experts.

View the <u>full library</u> of education sessions. **Note:** All 2021 and 2022 education sessions can be found by visiting the full library

Have a topic request?

Send topic ideas or requests that you have for the long-term care education series or the IP lunch and learn series to

<u>DHSWIHAIPreventionProgram@dhs.</u> <u>wi.gov.</u>™

Upcoming LTC Education Session

June 22, 2023

Topic: Non-COVID Respiratory Outbreaks in Long-Term Care Facilities