CRE Collaborative
Wheel of Prevention
Environmental Services

Hand Hygiene

The “Bug”

Contact Precautions

Reporting
• High-touch surfaces in a patient’s room should be disinfected at least _______.

a. Hourly
b. Daily
c. Weekly
d. Monthly
• High-touch surfaces in a patient’s room should be disinfected at least _______.
  a. Hourly
  b. Daily
  c. Weekly
  d. Monthly

Be sure to follow your facilities policies and procedures for environmental cleaning.
• Which of the following are **NOT** best practices for efficiently cleaning a patient care room?

a. Work from clean-to-dirty  
b. Work from low-to-high areas  
c. Change cleaning cloths when going from one area to another  
d. Physically clean surfaces before disinfecting
• Which of the following are **NOT** best practices for efficiently cleaning a patient care room?

a. Work from clean-to-dirty

**b. Work from low-to-high areas**

c. Change cleaning cloths when going from one area to another

d. Physically clean surfaces before disinfecting
• If a patient/resident is on Contact Precautions, EVS staff must also don proper PPE when entering the room.

a. True  
b. False
• If a patient/resident is on Contact Precautions, EVS staff must also don proper PPE when entering the room.

a. True
b. False
• Cotton is more effective than microfiber for cleaning cloths

a. True
b. False
• Cotton is more effective than microfiber for cleaning cloths
  – True
  – False

UC Davis Case Study. Nov 2002; Trajtman. AJIC. 2015
• Which label should you read when using or a choosing a disinfectant if you want to know what the product can kill and what is the required wet contact time?

a. CDC Label
b. CDPH Label
c. EPA Label
d. EOP Label
• Which label should you read when using or choosing a disinfectant if you want to know what the product can kill and what is the required wet contact time?

a. CDC Label
b. CDPH Label
c. EPA Label
d. EOP Label
• Which of the following is **not** a moment for hand hygiene?
  a. Before touching patient
  b. After touching patient surroundings
  c. Before clean/aseptic procedures
  d. After touching patient
  e. After body fluid exposure risk
  f. After coming back from a break
  g. None, they are all important moments for hand hygiene
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a. Before touching patient
b. After touching patient surroundings
c. Before clean/aseptic procedures
d. After touching patient
e. After body fluid exposure risk
f. After coming back from a break
g. None, they are all important moments for hand hygiene
Applying hand sanitizer to hands is effective in killing most pathogens germs except...

a. C. difficile
b. CRE Klebsiella pneumonia
c. Klebsiella pneumonia
d. Acinetobacter complex
• Applying hand sanitizer to hands is effective in killing most pathogens germs except...

  a. *C. difficile*
  b. CRE Klebsiella pneumonia
  c. Klebsiella pneumonia
  d. Acinetobacter complex
• When washing hands, the water should be ______(choose all that apply)

a. Cold
b. Hot
c. As hot as you can stand
d. Warm
• When washing hands, the water should be _______(choose all that apply)

a. Cold
b. Hot
c. As hot as you can stand
d. Warm
• When washing your hands with soap and water, you should scrub for at least ____

a. 10 seconds  
b. 15 seconds  
c. Until they are clean  
d. It doesn’t matter as long as you use soap
• When washing your hands with soap and water, you should scrub for at least _____

a. 10 seconds
b. 15 seconds

c. Until they are clean
d. It doesn’t matter as long as you use soap

www.cdc.gov/handhygiene
Which areas are most often missed by healthcare providers when using alcohol-based hand sanitizer:

a. Back of the hands
b. Thumbs
c. Fingertips
d. Between fingers
e. Wrists

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e. Wrists

You have a new patient with CRE who needs to be on contact precautions, but you don’t have a private room available. Which of the following is an example of someone who should **NOT** be paired with your patient?

a. A patient with the same type of CRE as your new patient
b. A patient without CRE who has two central lines and an open, draining wound
c. A patient with no indwelling devices who is not very dependent on staff
d. All of the above
You have a new patient with CRE who needs to be on contact precautions, but you don’t have a private room available. Which of the following is an example of someone who should **NOT** be paired with your patient?

a. A patient with the same type of CRE as your new patient
b. A patient without CRE who has two central lines and an open, draining wound
c. A patient with no indwelling devices who is not very dependent on staff
d. All of the above
If there are multiple patients with CRE at your facility, staff caring for patients with CRE should not care for residents who do not have CRE on the same shift when possible.

a. True
b. False
If there are multiple patients with CRE at your facility, staff caring for patients with CRE should not care for residents who do not have CRE on the same shift when possible.

a. True
b. False
• When exiting a room on Contact Precautions, you should remove the gown and gloves after exiting the patient’s room.

a. True
b. False
When exiting a room on Contact Precautions, you should remove the gown and gloves after exiting the patient’s room.

a. True

b. False

Remove PPE in the room at doorway or in anteroom – then perform hand hygiene.

Mask/goggles not required for Contact Precautions, unless splashing is likely.
• Place the Contact Precaution steps for PPE in the right order (entering then leaving the room):
  a. Remove gown and gloves
  b. Perform hand hygiene
  c. Enter the patient’s room
  d. Perform hand hygiene (#2)
  e. Don gown and gloves
b,e,c,a,d

a. Remove gown and gloves
b. Hand hygiene
c. Enter the patient’s room
d. Hand hygiene(#2)
e. Don gown and gloves
• If a SNF resident with CRE is on contact precautions and his roommate does **not** have CRE, HCWs don’t need to don PPE if they are just coming in the room to care for the roommate only

  a. True
  b. False
• If a patient with CRE is on contact precautions and his roommate does **not** have CRE, HCWs do not need to don PPE if they are just coming in the room to care for the roommate

a. True
b. False
• Carbapenemase-producing CRE is more of a priority for infection control than non-carbapenemase producing CRE.

a. True
b. False
• Carbapenemase-producing CRE is more of a priority for infection control than non-carbapenemase producing CRE.

a. True

b. False

CP-CRE is believed to be much more transmissible from organism to organism, and patient to patient, than non-CP-CRE
• How may CRE be transmitted from patient to patient?

a. Hands of HCW
b. Clothes of HCW
c. Contaminated equipment (e.g. endoscopes),
d. Environmental source (e.g., sinks, bed railings)
e. All of the above
• How may CRE be transmitted from patient to patient.

   a. Hands of HCW
   b. Clothes of HCW
   c. Contaminated equipment (e.g. endoscopes),
   d. Environmental source (e.g., sinks, bed railings)
   e. All of the above
• Facilities need to use a bleach-based disinfectant when cleaning the environment of patient with CP-CRE.

a. True
b. False
• Facilities need to use a bleach-based disinfectant when cleaning the environment of patient with CP-CRE.
  a. True
  b. False

• **FALSE**, unless otherwise indicated, such as the patient also has a *C. difficile* infection.

• Facilities can use quaternary ammonia or another hospital grade disinfectant. When a patient with CRE is present, facilities should perform daily cleaning that include areas in close proximity to the patient (e.g., bed rails, patient tray) to decrease the burden of organisms.
• Name two factors that increase a patient/resident’s risk for becoming infected or colonized with CP-CRE.
• Name two factors that increase a patient’s/resident’s risk for becoming infected or colonized with CP-CRE.

– Recent history of extensive antimicrobial use
– Recent history of extensive healthcare exposure, in particular at a LTAC hospital
– Healthcare exposures outside the US
– Ventilator-dependent
– Presence of indwelling medical devices (e.g., catheters)
What is the estimated mortality rate of carbapenemase-producing CRE?

a. 10-15%
b. 20-30%
c. 30-50%
d. 70%
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c. 30-50%

d. 70%

Most literature suggests that patients with infections caused by carbapenemase-producing CRE die between 30-50% of the time.
• To find the Long Beach CRE Report form online, the correct website is:

a. www.crereporting.com
b. www.longbeach.carbapenemresistant
c. www.cre.longbeach.com
d. www.longbeach.com/cre
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d. www.longbeach.com/cre
• Who is responsible for reporting CRE in Long Beach if the facility has an off-site laboratory?

a. The facility  
b. The off-site laboratory  
c. No one, since they don’t have a laboratory on-site  
d. Both the facility and the lab should report
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a. The facility
b. The off-site laboratory
c. No one, since they don’t have a laboratory on-site
d. Both the facility and the lab should report

The facility that obtained the culture is responsible for reporting. In some situations the lab report may be received by the Health Department, but this does not absolve a facility from completing the reporting requirements listed above.
• If a facility uses NHSN to report MDROs, and reports a case of CRE on NHSN for the month of September, they also must fill out a CRE form and fax to the Long Beach Health Department.

a. True
b. False
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a. True
b. False

All Long Beach ACHs are required to use NHSN to submit CRE-positive results. All SNFs that are enrolled in NHSN are also required to submit CRE results via NHSN. If a SNF is not currently enrolled in NHSN, they may fax reports to the Long Beach Health Department at 562.570.4374 and include the laboratory report with susceptibility results and the CRE Case Report Form.
• If a patient is discharged before a facility receives a positive CRE report, the facility is still responsible for reporting the patient to the Long Beach Health Department.

  – True
  – False
If a patient is discharged before a facility receives a positive CRE report, the facility is still responsible for reporting the patient to the Long Beach Health Department.

- True
- False

The facility that orders and obtains the specimen is responsible for reporting the CRE case, regardless of when susceptibility reports arrive.
• Which is NOT a reason that CRE was made reportable in Long Beach?

a. Understand the prevalence of CRE in Long Beach
b. Assist facilities in controlling outbreaks of CRE
c. Penalize facilities who report CRE cases
d. Monitor for emerging types of CRE and carbapenemases
• Which is NOT a reason that CRE was made reportable in Long Beach?

a. Understand the prevalence of CRE in Long Beach  
b. Assist facilities in controlling outbreaks of CRE  
c. Penalize facilities who report CRE cases  
d. Monitor for emerging types of CRE and carbapenemases

Information regarding CRE has not been readily available in Long Beach until it was made reportable. The goals are to track and respond to CRE in order to prevent its spread by monitoring trends, developing guidance and interventions, and identify and respond to outbreaks.
Spell CRE Correctly.
(the full words)
Carbapenem-resistant enterobacteriaceae
Thank You
For playing
Wheel Of Prevention!
Now don’t forget to
Wash Your Hands!