Infection Prevention Press

Indiana Department of Health

November 24, 2021

FLUVID

When influenza and COVID-19 meet

By Jennifer Spivey, Program Manager Infection Prevention with information from the CDC

Experts in infection control and epidemiology are preparing for a possible different influenza season than we had last year during the beginning of the COVID-19 pandemic. To date, Indiana has had one death related to flu. We had a milder flu outbreak season in 2020-21, most likely contributed to less mobilization of the public due to the pandemic and also having an increase of masking, social distancing and hand hygiene. Now is the time to be fully vaccinated for both the flu and COVID-19 to prevent infections with both of these virus's at the same time. Yes, people can be infected with both at the same time. You can check out the **FLUVIEW** weekly for updates in your area.

As healthcare providers, it is our duty to keep our residents safe, so getting vaccinated is one step closer to preventing outbreaks in your facilities. Please contact our office should you wish to discuss the vaccine hesitancy in your facility. Please feel free to use this quick 30 second message, "These vaccines can protect you and your family, and the residents from getting sick from the flu. By getting the vaccine today, you'll be protecting yourself and the people around you, like your children, parents and residents who may be more vulnerable to serious flu and COVID-19 illness."

Current Status

Influenza:

- Annual flu vaccination is recommended for everyone 6 months and older, with **few exceptions**.
- Laboratory-confirmed **flu activity** is low at this time.
- Elevated influenza-like illness is likely related to **COVID-19**.

COVID-19:

- **139.7 million doses** of vaccine have been distributed.
- CDC Recommends everyone 5 years of age and older **get a free COVID-19 vaccination**.
- CMS issued an **Emergency Regulation requiring COVID-19 vaccination** for health care workers
- **Mixed dosing** is authorized for COVID-19 boosters
- COVID-19 vaccines may be administered without regard to timing of other vaccines, including influenza. If multiple vaccines are administered at a single visit, administer each injection in a different injection site. See **CDC guidance** about co-administration of COVID-19 vaccines.

Image from CDC

What is the difference between Flu and COVID-19?

By Jennifer Spivey, Program Manager Infection Prevention, with information from the CDC

Flu and COVID-19 are both contagious respiratory illnesses, but they are caused by different viruses. COVID-19 is caused by infection with a coronavirus, called SARS-CoV-2, and seasonal flu is caused by infection with one of many influenza viruses that spread annually among people. Because some symptoms of flu and COVID-19 are similar, people may need to be **tested** to tell what virus is causing their illness. People can be infected with both a flu virus and the virus that causes COVID-19 at the same time.

In general, COVID-19 seems to spread more easily than flu and causes more serious illnesses in some people. Compared with people who have flu infections, people who have COVID-19 can take longer to show symptoms and be contagious for longer. **This FAQ page** from the CDC compares COVID-19 and flu in more depth and provides up-to-date information about both viruses.

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An Introduction to C. Cox & C. *Auris*

By Caleb Cox, Candida Auris Epidemiologist

My name is Caleb Cox and I am the Candida auris epidemiologist for the state. I grew up in a small town in central Indiana called Alexandria. I graduated from Ball State University with a degree in Medical Laboratory Science in 2010 and began work for IU Health as a medical technologist at Ball Memorial Hospital. In 2014, my wife, Morgan, and I relocated to Fishers where I began work at IU Health Saxony and began my MPH at IUPUI in the Fall of 2017. My wife and I welcomed our first child, Ezra, in April of 2019 and our second, Kezia, in April of 2021. I graduated from IUPUI with an MPH in May of 2021. I look forward to meeting and working with you in the future with your Candida auris needs. But "what is Candida auris?" you may be asking.

Candida auris is a yeast that was first discovered in Japan in 2009. Since then, four genetically dissimilar clades of *C. auris* have emerged throughout the world; all exhibiting varied modes of resistance to some common antifungals. All four have been found in the U.S., but cases in Indiana have been identified as clade 3 (originating in South Africa). *C. auris* is a public health concern for three main reasons: 1) it's multi-drug resistance, 2) it's contagiousness in the healthcare setting and 3) it's rapid appearance in many areas of the United States. Our best methods for combatting the spread of *C. auris* in the healthcare setting are the application of enhanced barrier precautions for all identified cases and the use of EPA list P cleaning products to disinfect the environment.

Since the end of September 2021, I've facilitated four point-prevalence-surveys at LTC facilities across the state. This has resulted in 110 swabs being collected at facilities and six colonized cases being identified. Resulting in a prevalence rate of roughly 5.5%. I hope to increase the capacity of point prevalence swabs soon by encouraging the independent collection of these surveys by the facilities themselves. Hopefully we'll be facilitating the swabbing of upwards of 300 residents per month within the next six months. I can be reached at **calcox@isdh.IN.org**. Check out APIC's "5 Second Rule" **podcast episode on C. *auris*!**

Infection Prevention Word Search

ABHR	audits	CNA
disinfect	doctor	doff
don	EVS	gloves
goggles	gown	linens
mask	nurse	PPE
resident	respirator	rounding
soap	TBP	vaccine

W	I	C	G	E	V	S	K	W	H	R	D	O
R	N	G	L	L	R	E	P	P	H	E	O	T
A	T	L	O	V	G	N	P	B	M	Z	N	B
R	N	U	V	C	M	I	A	M	G	X	R	S
L	O	Q	E	J	H	C	O	Y	V	O	T	G
N	I	T	S	V	D	C	S	K	D	I	O	S
C	U	N	A	K	S	A	M	O	D	W	D	E
X	A	R	E	R	V	V	F	U	N	H	O	L
A	H	I	S	N	I	F	A	C	A	D	C	G
Z	R	B	O	E	S	P	T	B	P	T	T	G
L	T	C	E	F	N	I	S	I	D	T	O	O
G	N	I	D	N	U	O	R	E	U	V	R	G
R	E	S	I	D	E	N	T	U	R	Z	A	J

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Wound Care Audit Tool
1. All supplies gathered before dressing change Supplies were handled in a way to prevent contamination Supplies are dedicated to and labeled for one individual Multi-dose medications are used appropriately
2. Hand hygiene performed properly before preparing clean field
3. Clean field prepared Surface cleaned with antiseptic wipes following manufacturer guidelines Surface barrier applied (e.g. Chux pad) Supplies placed on surface barrier in aseptic manner
4. Hand hygiene performed properly before starting the procedure
5. Clean gloves and PPE donned according to standard or contact precautions Consider use of surgical mask for all wound care
6. Barrier positioned under wound
7. Old dressing removed and discarded immediately
8. Dirty gloves removed and discarded
9. Hand hygiene performed properly before accessing clean supplies
10. Clean gloves donned
11. Wound cleaned using aseptic non-touch technique
12. Wound treatment completed using aseptic non-touch technique
13. Dirty supplies discarded in trash receptacle
14. Gloves removed and hand hygiene performed properly after dressing change is complete
15. Reusable equipment cleaned and/or disinfected appropriately
16. Wound cart is clean and utilized appropriately

Let's Talk Wound Care

By Tanya Canales, District 6 IP

Wound care treatments provided in the long-term care setting can entail complex procedures utilizing a wide variety of products and/or equipment. The wound care infection prevention and control audit tool is designed to assist long-term care facilities with general principle.

- Ensure facility has current, evidence-based policies and procedures available regarding wound detection, assessment and management, which are reviewed and updated on an annual basis.
- Facilities should have resources about wound care available for staff (ex. nursing reference book with checklists).
- The facility has a competency-based program for training all personnel who provide wound care upon hire and annually thereafter. Education should be provided when new equipment or protocols are introduced.
- The facility audits (monitors and documents) adherence to wound care policies and procedures and provides feedback to personnel regarding their performance of wound care. Personnel should receive education focused on gaps identified during audits.
- The facility records all types of wound and skin infections identified in residents receiving wound care.
- When admitting a resident from an acute care facility or wound care center, remember to ask if the resident has any pending laboratory or culture results that may still be pending. This will assist you to identify the need for proper follow up and action if any infectious agent identified requiring transmission based precautions (TBP).

Hand hygiene: Alcohol hand rub should be readily accessible throughout the wound care process. Ways to ensure this include keeping an alcohol hand rub close to the bed (point of care) in the room when performing wound care in addition to placing alcohol hand rub dispensers in the hallway outside resident rooms. Personnel should not touch items in the resident care environment while performing wound care as this will contaminate gloves and/or the environment.

Wound care equipment and supplies: Any reusable equipment (ex: bandage scissor, flashlight or mirror) that comes in contact with non-intact skin, mucous membranes or any bodily fluids or drainage, including fluids on bedding or gloved health care workers hands, are considered semi-critical instruments that require proper cleaning with EPA approved disinfectant. **Guidelines for Disinfection and Sterilization in Healthcare Facilities** are available from the CDC.

- Assign all wound sprays to an individual resident and do not store used sprays with clean wound care supplies.
- If fresh bandages are cut for the resident, it should be done with clean scissors, not with scissors used to cut off soiled bandages.
- Wound care dressings can be disposed of in the regular trash unless they are dripping or saturated with blood or other regulated body fluids.

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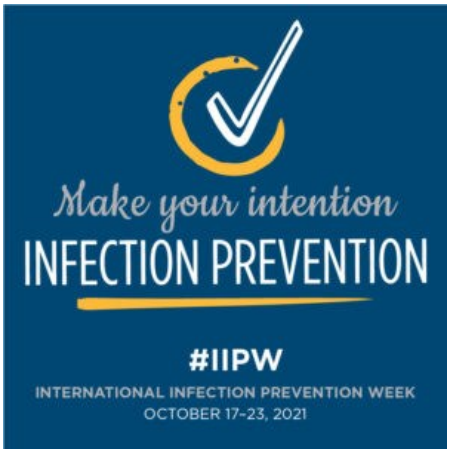
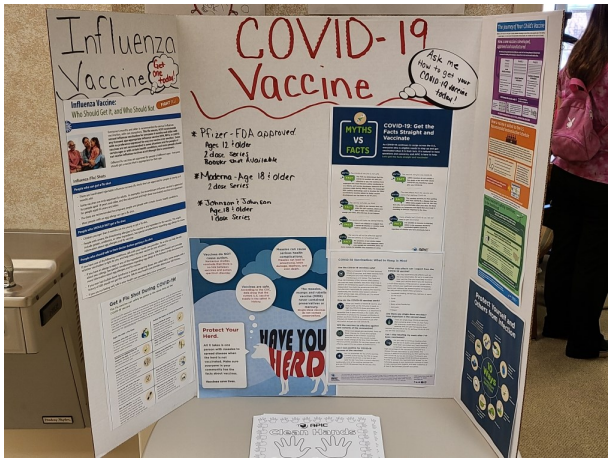
THANK YOU FOR CELEBRATING *INTERNATIONAL INFECTION PREVENTION WEEK* WITH US!

International Infection Prevention week is the 3rd full week in October every year. So if your facility missed out on the celebration, mark your calendars for October 16-22, 2022! Special thank you to Heritage of Huntington for sharing their amazing IIPW festivities with us and allowing us to share with the rest of the state!





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The Why Behind Temperature Logs

Part 1: Food Storage

By Deanna Paddack, District 5 IP

In recent months while conducting both outbreak response assessments and proactive infection control assessments, I have noticed an infection prevention gap that is trending across facilities. In order to help close the gap, I wanted to spend some time to explain the *why* of temperature logs. This will be a multi-part series covering food, medication and vaccine refrigerators— in this edition we are starting with food storage.

FOOD STORAGE REQUIREMENTS:

Let's look at what CMS standards require for all resident food storage:

Refrigerated storage - potentially hazardous foods (PHF)/ time & temperature control for safety (TCS) foods must be maintained at or below 41 degrees F, unless otherwise specified by law. Frozen foods must be maintained at a temperature to keep the food frozen solid. Refrigeration prevents food from becoming a hazard by significantly slowing the growth of most microorganisms. Inadequate temperature control during refrigeration can promote bacterial growth. Adequate circulation of air around refrigerated products is essential to maintain appropriate food temperatures. Foods in a walk-in unit should be stored off the floor. Practices to maintain safe refrigerated storage include:

- Monitoring food temperatures and functioning of the refrigeration equipment daily and at routine intervals during all hours of operation.
- Placing hot food in containers (e.g., shallow pans) that permit the food to cool rapidly.
- Separating raw animal foods (e.g., beef, fish, lamb, pork and poultry) from each other and storing raw meats on

Additional Resources:

FDA Rules and Regulations: 21 CFR: 110.80

Indiana Food Protection Division Regulations: 410 IAC 7-21-43

Foodborne Illnesses Info

Keeping refrigerators and freezers at adequate temperatures is crucial to keeping staff and residents free from viruses and bacteria. Temperature logs are your proof that a unit was keeping food at safe temperatures for surveyors or in case of an appliance failure. The documentation of temperatures in the hours and minutes before can save you from having to discard food, medications and vaccines. The cost of replacing these items can easily be in the thousands. It is recommended you log temperatures at least twice daily or once per shift.

Temperature logs are the easiest task to complete but one of the most overlooked. Take the initiative to be a Temperature Log Leader and ensure that your staff and residents are consuming bacteria free and virus free foods. For additional guidance, resources or questions please don't hesitate to reach out to your District IP.

November is *C. diff* Awareness Month

From the November 1, 2021 CDC email updates

Clostridioides difficile (C. diff) is a germ that causes diarrhea and inflammation of the colon. It is estimated to impact almost half a million people in the United States each year, and an estimated 29,300 deaths.

Together with our partners, the CDC is working year-round to protect patients and reduce *C. diff* infections. This *C. diff* Awareness Month, we encourage you to check out what CDC is doing to raise awareness about the importance of protecting yourself and your family and stopping the spread of this deadly infection:

- Download and share our updated resources, like **fact sheets and social media graphics**, to help educate yourself and others about *C. diff*.
- Read the personal experience of *C. diff* infection survivor Christina Fuhrman of the Peggy Lillis Foundation in a **CDC Safe Healthcare guest blog**.
- Visit our recently updated webpages.
- Find out **who is at risk for *C. diff* infection** and how you can protect yourself and your family.
- Learn how you can **prevent the spread of *C. diff*** in the hospital and at home.
- Learn more about **what CDC is doing** to reduce *C. diff* infections.
- Visit CDC's ***C. diff*** and **antibiotic prescribing and use** websites to learn more.

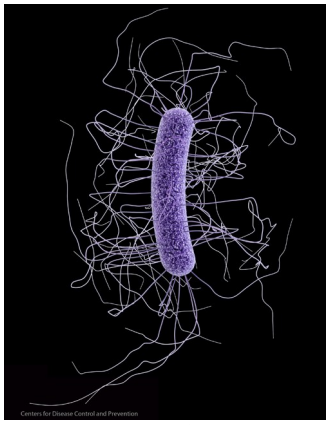
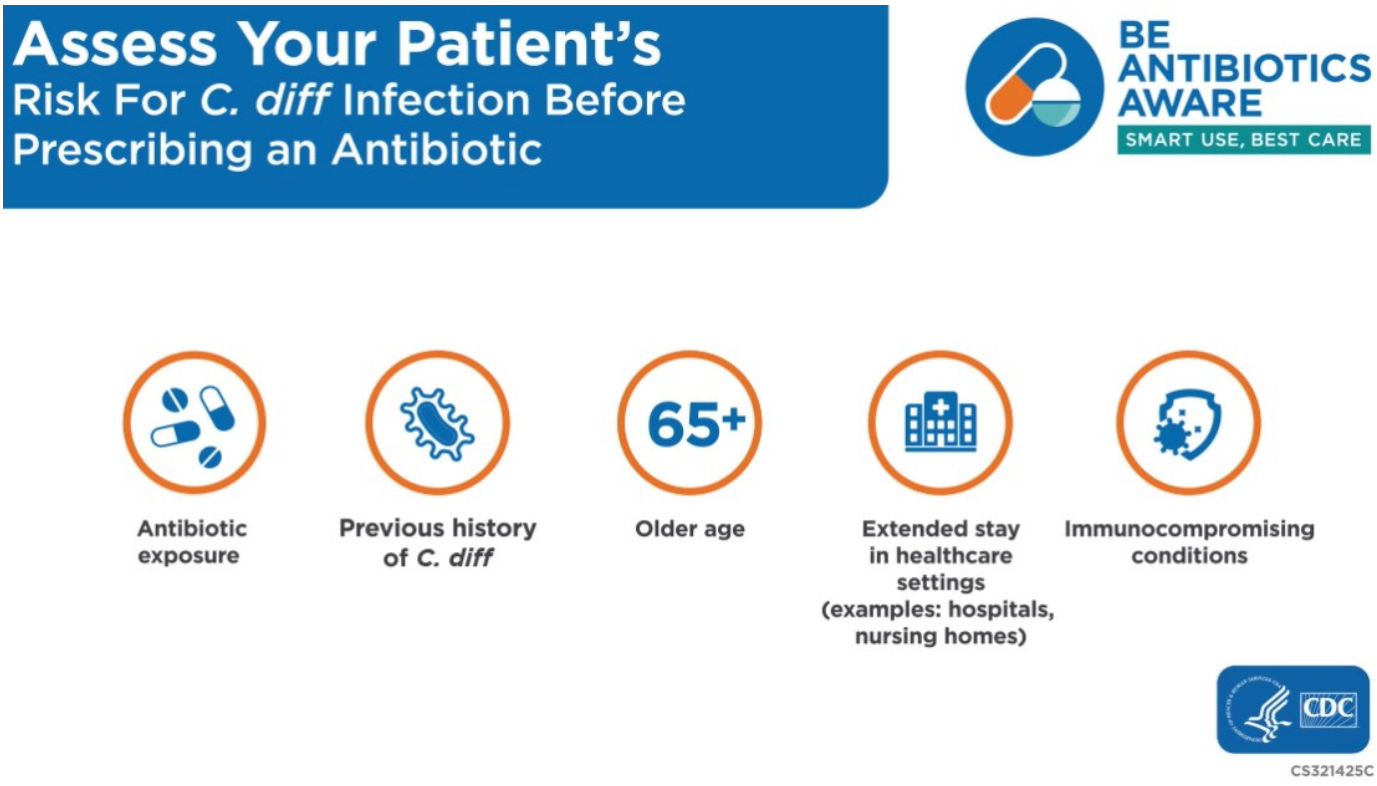


Image from the CDC



You can sign up to receive **CDC email updates at their website**; it is a great way to learn about infection topics.

Attitude of Gratitude

By Pam Bennett, District 3 IP

It goes without saying that our careers in healthcare are both rewarding and stressful, and this past year has brought more challenges than ever before. Unfortunately, ignoring our mental health and self-care is all too common for many of us. As we look towards celebrating Thanksgiving, Christmas, Hannukah and other winter holidays, may I suggest trying a few exercises in gratitude. Practicing gratitude has amazing effects: improves both psychological and physical health, enhances sleep and empathy, and reduces aches and pains, anxiety, depression, and aggression. It increases our mental health strength, making us more resilient after stress or trauma. So how do we practice gratitude? Two of the easiest, yet powerful tools are gratitude journaling and ending each day with thoughts of thankfulness just before falling asleep.

Gratitude journal. Writing down a few things you are thankful for is one of the easiest and most popular exercises available. The purpose of the exercise is to reflect on the past day, few days, or week, and remember 3-5 things for which you are especially grateful. In this way, you are focusing on all the good things that happened to you. You can do this each day, every couple of days or each week, whatever works well for you.

Ending the day with gratitude is as easy as thinking of at least three things that you appreciate in your life. Another great way is by asking yourself questions. Knowing you will be asking yourself these questions will help you look for the good things in your day. At the end of each day, ask yourself:

What touched me today?
Who or what inspired me today?
What made me smile today?
What's the best thing that happened today?
What were three good things in my life today? Maybe a person, a place, an event/a comment

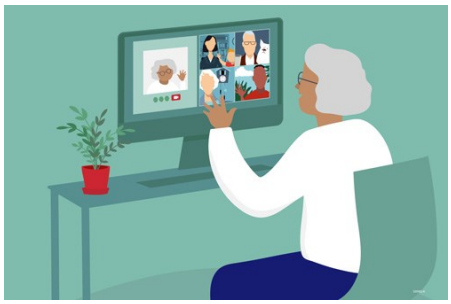
So, this holiday season seize a few moments to take care of yourself, so that you can continue to take amazing care of those around you. We are so thankful for each one of you and all that you do for Indiana's long term care residents and staff.

HAPPY HOLIDAYS TO YOU AND YOURS

From the IDOH IP Team

Simple But Powerful Ways to Take Care of Yourself

Take time to take breaks



Connect with friends & family

Move your body

Eat foods that fuel you

Images from the CDC

Long Term Care Infection Prevention Team Districts

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District 7: 60 facilities
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District 8: 72 facilities
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District 10: 63 facilities
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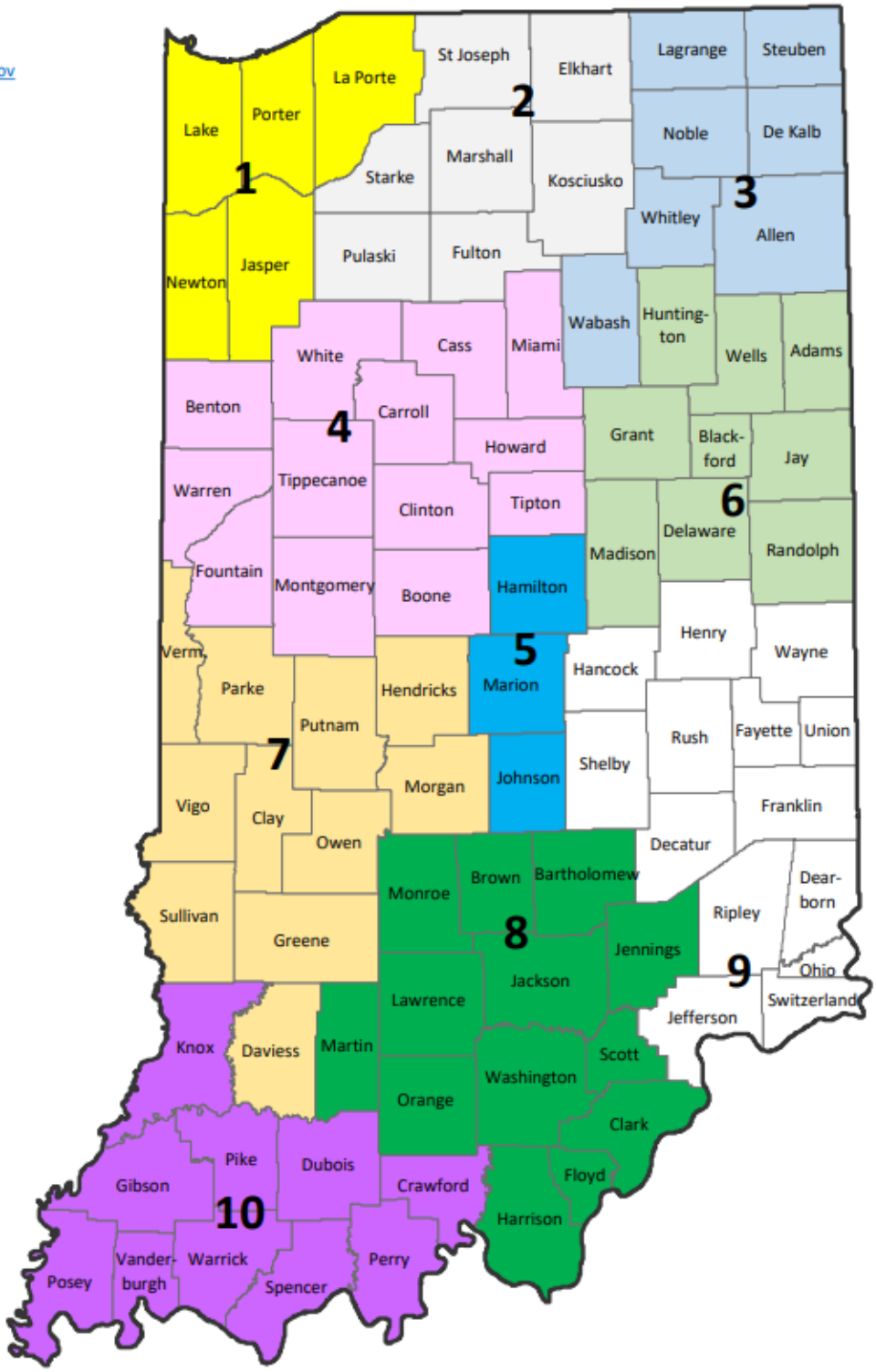
Total 737 Facilities



Jennifer Spivey MSN, RN, CNOR, CIC, FAPIC – Program Manager, Infection Prevention

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Full Links and References

If you are viewing this newsletter online, you can open the links by the clicking on the bolded, navy-colored links in the articles. If you are viewing this newsletter in printed form and would like to view a link or resource, the full URL is below:

Flu-vid

1. Fluview/flu activity- https://www.cdc.gov/flu/weekly/index.htm
2. Few exceptions- https://www.cdc.gov/flu/prevent/whoshouldvax.htm
3. COVID-19- https://www.cdc.gov/coronavirus/2019-nCoV/index.html
4. 139.7 million doses- https://www.cdc.gov/flu/prevent/vaccine-supply-distribution.htm
5. Free COVID-19 vaccine- https://www.cdc.gov/coronavirus/2019-ncov/vaccines/How-Do-I-Get-a-COVID-19-Vaccine.html
6. Emergency Regulation- https://www.cms.gov/newsroom/press-releases/biden-harris-administration-issues-emergency-regulation-requiring-covid-19-vaccination-health-care
7. Mixed dosing- https://www.coronavirus.in.gov/files/21_Booster-mix-match.pdf
8. CDC Guidance- https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#Coadministration

Difference between Flu and Covid-19

1. Tested- https://www.cdc.gov/flu/symptoms/testing.htm
2. This FAQ page- https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm

Introduction to C. Auris

1. 5 Second Rule podcast episode- https://5secondruleshow.org/episode/26-the-fungus-among-us-candida-auris/
2. CDC's *C. auris* page- https://www.cdc.gov/fungal/candida-auris/index.html

Let's Talk Wound Care

1. Guidelines for disinfection and sterilization in healthcare facilities- https://www.cdc.gov/infectioncontrol/guidelines/disinfection/index.html

IIPW

1. International Infection Prevention Week- https://infectionpreventionandyou.org/iipw/

The WHY Behind Temperature Logs

1. FDA Rules and Regulations: 21 CFR: 110.80- https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/cfrsearch.cfm?fr=110.80
2. Indiana Food Protection Division Regulations: 410 IAC 7-21-43- https://www.in.gov/health/food-protection/laws-rules-and-regulations/410-iac-7-21-section-43-equipment-and-utensils/
3. Foodborne Illnesses- https://www.cdc.gov/foodsafety/foodborne-germs.html

November is *C. diff* Awareness Month

1. Fact sheets and social media graphics- https://www.cdc.gov/cdiff/materials.html?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
2. CDC Safe Healthcare guest blog- https://blogs.cdc.gov/safehealthcare/finding-my-voice-as-a-cdiff-patient/?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
3. Who is at risk for C.*diff*- https://www.cdc.gov/cdiff/risk.html?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
4. Prevent the spread- https://www.cdc.gov/cdiff/prevent.html?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
5. What the CDC is doing- https://www.cdc.gov/cdiff/reducing.html?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
6. C.*diff*- https://www.cdc.gov/cdiff/?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
7. Antibiotic Prescribing and Use- https://www.cdc.gov/antibiotic-use/index.html?ACSTrackingID=USCDC_426-DM69158&ACSTrackingLabel=November%20is%20C.%20diff%20Awareness%20Month&deliveryName=USCDC_426-DM69158
8. CDC Email Updates-https://www.cdc.gov/other/emailupdates/index.html

Attitude of Gratitude

1. Self Care Tips from CDC- https://www.cdc.gov/mentalhealth/stress-coping/care-for-yourself/index.html