

# Facilitated Discussion Guide

## Enhanced Barrier Precautions

Use the talking points below to engage your colleagues and others within your jurisdiction in a short, focused, and educational discussion. Facilitator notes included throughout this resource will provide tips for facilitating your discussion.

### 1. Share the objectives

**Facilitator notes:** Explain that today's infection prevention and control (IPC) educational session will be covering enhanced barrier precautions (EBPs), a type of infection prevention precaution for nursing homes. Share the objectives with the group so they know what information will be covered and what they can hope to gain from the session.

- **Introduce** the concept of EBPs in health care settings.
- **Learn** which circumstances warrant implementation of EBPs.
- **Share** resources for implementing EBPs.

### 2. Introduce the topics

**Facilitator notes:** Open the discussion by asking the group what they know about multidrug-resistant organisms (MDROs) and why they are a public health concern. After some discussion with the group, share the key points below to explore the topic further. When sharing, it may be helpful to connect these points to ideas the group just shared, relevant experiences, or happenings going on within your jurisdiction.

- There are a variety of different MDROs and some are more serious than others.
- Residents in nursing homes are at an increased risk of developing an MDRO due to many being immunocompromised, having complex medical conditions, and being in close proximity with other residents and health care personnel.  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5382184/>
- Enhanced-barrier precautions are an infection control intervention designed to reduce transmission of MDROs in the home-like, long-term stay-based nursing home setting.  
<https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html>
- EBPs were originally introduced by the CDC (Centers for Disease Control and Prevention) in 2019. Guidance was updated in 2022.
- EBPs are intended to be used in only nursing homes at this time.
  - Implementing EBPs in nursing homes can be challenging.

### 3. Expand on the topics

**Facilitator notes:** Now that you've introduced the topic, share more detailed information with the group using the key points below. It may be helpful to bring up the resources that are linked and walk through them together. You can use these resources to further deepen the conversation and add more points of discussion. For example, visit each of the organism webpages for more information on prevention, signs and symptoms, and treatment.

- EBPs include the use of gown and gloves during high-contact care activities where MDROs have the greatest potential to be transferred.  
[https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html#anchor\\_1656011933403](https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html#anchor_1656011933403)
- High-contact care activities include but not limited to:
  - Dressing.
  - Bathing and showering.
  - Changing linens.
  - Device and wound care.
- **Facilitator notes:** It may be helpful to provide further context regarding MDRO transmission. MDROs may be indirectly transferred from health care personnel hands and clothes during high-contact care activities. This is why gown and glove use is recommended.
- Unlike other transmission-based precautions, when a resident is placed on EBPs, they are not restricted to their room and may participate in group activities and communal dining.
- EBPs are recommended for all nursing home residents who:
  - Are infected or colonized with certain types of MDROs. **Facilitator notes:** If needed, share the difference between infection and colonization. A person who is infected has the organism in or on their body and it is causing symptoms or illness. A person who is colonized is carrying the organism in or on their body, but it is not causing symptoms or making the person ill. People who are colonized with an MDRO can still spread the organism to surfaces in their environment and to other people.
  - Have a wound or indwelling medical device, regardless of their MDRO colonization status.
- At minimum, EBPs should apply to MDROs targeted by the CDC, including:
  - Pan-resistant organisms. **Facilitator notes:** A pan-resistant organism is an organism that is not susceptible to any of the antimicrobial drugs designed to kill it.
  - Carbapenemase-producing carbapenem-resistant Enterobacterales  
<https://www.dhs.wisconsin.gov/disease/cre.htm>
  - Carbapenemase-producing carbapenem-resistant *Pseudomonas aeruginosa*  
<https://www.dhs.wisconsin.gov/disease/carbapenem-resistant-pseudomonas-aeruginosa.htm>
  - Carbapenemase-producing carbapenem-resistant *Acinetobacter baumannii*  
<https://www.dhs.wisconsin.gov/disease/carbapenem-resistant-acinetobacter-baumannii.htm>
  - *Candida auris*  
<https://www.dhs.wisconsin.gov/disease/candida-auris.htm>
    - **Facilitator notes:** Carbapenemase-producing organisms (CPOs) and *Candida auris* are reportable MDROs in Wisconsin.  
<https://www.dhs.wisconsin.gov/hai/reportable-mdro.htm>

- Other MDROs for which EBPs may apply are based on local risk assessments conducted by the nursing home.

<https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html>

This risk assessment may include:

- A specific MDRO's prevalence, transmission, or outbreak within a facility, both past and present.
- An MDRO's prevalence within the geographic region and among health care transfer networks.
- **Facilitator notes:** Examples of other MDROs may include methicillin-resistant *Staphylococcus aureus* (MRSA), vancomycin-resistant Enterococci (VRE), and extended-spectrum beta-lactamase (ESBL) Enterobacterales
- Some nursing homes find it difficult to implement EBPs due to:
  - PPE supply.
  - Misunderstanding the EBP recommendations.
  - Staffing challenges.
  - Resident and family perception.

#### 4. Discuss with your colleagues

**Facilitator notes:** Now that you've introduced and reviewed the topic in more detail, this is a great time to pause, answer questions, and discuss as a group. It's encouraged that you use this discussion to brainstorm ways your LTHD can help improve practices within your jurisdiction and health care facilities. Below are some example questions you may discuss; you may also wish to discuss topics specific to your jurisdiction.

- How can we encourage health care partners in nursing homes to implement EBPs at their facilities? How can our department help them overcome potential barriers?
- How might we help facilities conduct a local risk assessment to determine other MDROs for which EBPs should apply?

#### 5. Wrap up and reinforce

**Facilitator notes:** Following the discussion, you may wish to reiterate the ideas and next steps that the group suggested. Invite the group to ask any remaining questions about the topic. Share the key takeaways below to wrap up the session.

- EBPs only apply within nursing homes at this time.
- It is recommended that gown and gloves be worn by health care personnel when caring for residents who:
  - Are infected or colonized with a targeted MDRO or other MDRO as determined by the nursing home's local risk assessment.
  - Have a wound or indwelling device, regardless of MDRO colonization status.
- Residents on EBPs are not restricted to their rooms.
- EBPs are an important strategy to prevent the spread of MDROs in nursing homes and can reduce morbidity and mortality among residents.

