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ENHANCED BARRIER PRECAUTIONS

(EBP) CMS Guidance for Nursing Homes

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MEMBER OF THE MCKESSON CLINICAL RESOURCE TEAM

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Level Up: Enhanced Barrier Precautions

By implementing these enhanced barrier precautions, nursing homes can protect healthcare workers, patients, and visitors from transmission of infectious disease, ensuring a safer environment for everyone.

- Describe Enhanced Barrier Precautions (EBP)
- Discuss why EBP are recommended to be used in Nursing Homes
- Explain Methods for successful implementation of EBP

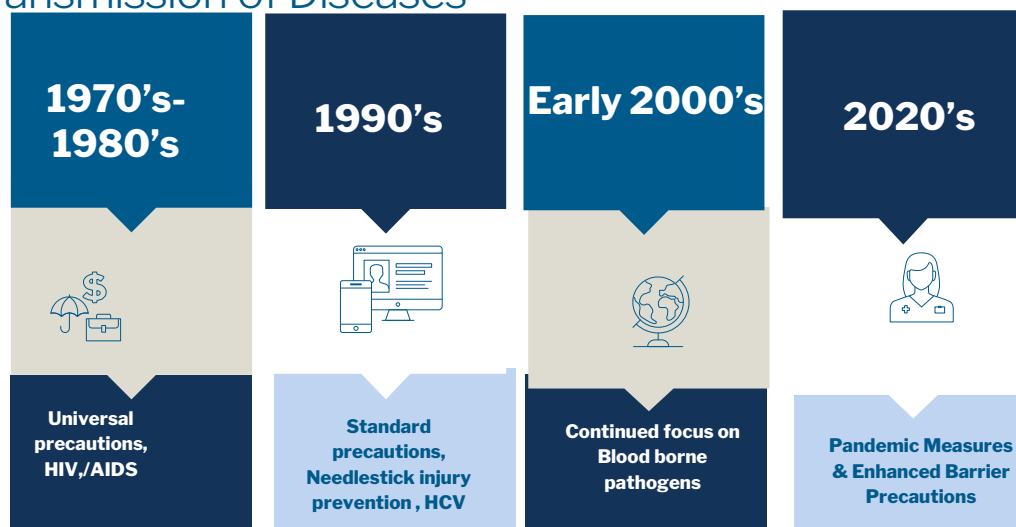


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As a refresher the History of Safety Measures to prevent transmission of Diseases

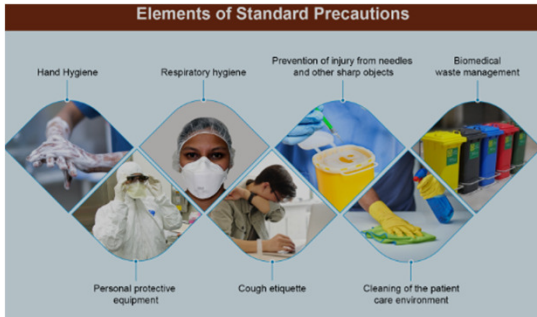


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Standard Precautions



Used with ALL RESIDENTS care based on an assessment of risk to protect healthcare providers and prevent the spread of infection

- Standard Precautions is a combination and expansion of Universal Precautions⁷⁸⁰ and Body Substance Isolation¹¹⁰².
- Standard Precautions is based on the principle that all blood, body fluids, secretions, excretions except sweat, nonintact skin, and mucous membranes may contain transmissible infectious agents.
- Standard Precautions includes hand hygiene, and depending on the anticipated exposure, use of gloves, gown, mask, eye protection, or face shield.

[Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) | LTCFs | CDC](#)

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Contact Precautions



- Contact Precautions require the use of gown and gloves on every entry into a resident's room. The resident is given dedicated equipment (e.g., stethoscope and blood pressure cuff) and is placed into a private room.
- Residents on Contact Precautions should be restricted to their rooms except for medically necessary care and restricted from participation in group activities.
- Because Contact Precautions require room restriction, they are generally intended to be time limited and, when implemented, should include a plan for discontinuation or de-escalation.

[Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) | LTCFs | CDC](#)

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And now.... Enhanced Barrier Precautions, expanded use of PPE:

- In 2019, the CDC released use of gown and gloves during high-contact resident care activities that provide opportunities for transfer of MDROs to staff hands and clothing and it did not involve resident room restriction.

Enhanced Barrier Precautions How We Keep Our Residents Safe

What's New
We are using Enhanced Barrier Precautions to help protect our residents from infection. You may notice:

- New signs throughout the facility
- Staff wearing gowns and gloves for high-contact care activities

Why We're Making These Changes
We are taking action to protect our residents from dangerous germs. These germs can cause infections that are hard to treat. Enhanced Barrier Precautions allow us to provide safe, high quality care and help stop the spread of germs within our facility.

How to Help When You Visit
You can help stop the spread of germs by cleaning your hands with alcohol-based hand sanitizer or soap and water.

Learn more about Enhanced Barrier Precautions: bit.ly/PPE-NursingHomes

More than **50%** of nursing home residents carry a multidrug-resistant organism.

CDC

- In July 22, CDC release updated EBP recommendations for "Implementation of PPE use in nursing homes to prevent spread of MDRO's.
- The use of gown and gloves for high-contact resident care activities is indicated, when Contact Precautions do not otherwise apply, for nursing home residents with wounds and/or indwelling medical devices regardless of MDRO colonization as well as for residents with MDRO infection or colonization.

[Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) | LTCFs | CDC](#)

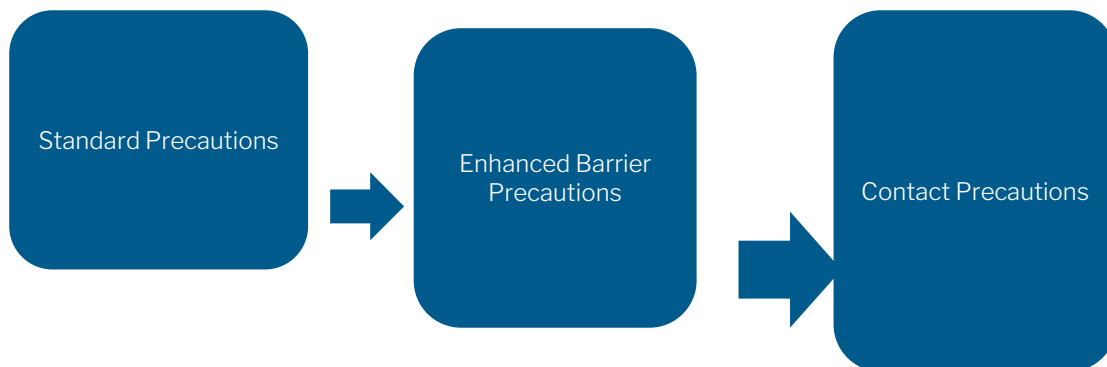
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Thinking About Enhanced Barrier Precautions



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What are targeted Multi-Drug Resistant Organisms (MDRO's)

Microorganisms, mainly bacteria, that are resistant to one or more classes of antimicrobial agents.

Common types of MDRO's are MRSA, VRSA, CRE, VRE, *Candida auris* and more

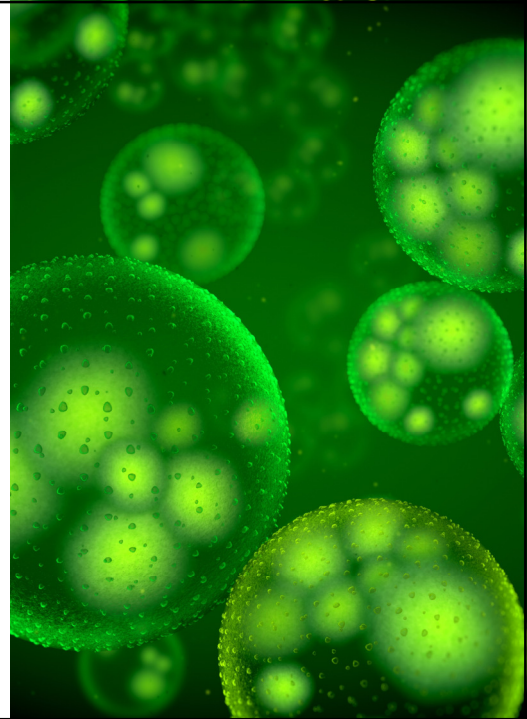
World Health Organization (WHO) now recognizes that MDROs are a growing threat in every geographic region of the world

Particularly concerning for medically-vulnerable patients

Prevalent and a problem in skilled and long-term care facilities.

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Current CDC Targeted MDROs


- Pan-resistant organisms
- Carbapenemase-producing carbapenem-resistant Enterobacterales
- Carbapenemase-producing carbapenem-resistant *Psuedomonas spp.*
- Carbapenemase-producing carbapenem-resistant *Acinetobacter baumannii* (CRAB)
- *Candida auris*

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Definitions




Multidrug – resistant Organism (MDRO) is a bacteria or fungi resistant to multiple antimicrobials



Colonization is when a germ is found on the body but is not causing an active infection.



Infection is when a germ found in or on the body is causing illness.







Enhanced Barrier Precautions (EPB) is an approach of targeted gown and glove use during high contact resident care activities, designed to reduce the transmission of MDRO's.

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The Large Burden of MDROs in Nursing Homes

Facility Type	Documented MDRO	Actual MDRO
Nursing Homes (n = 14)	17% 	58% 
Ventilator-Capable Nursing Homes (n = 4)	20% 	76% 

■ Known MDRO ■ No Known MDRO

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McKinnell JA et al, Clin Infect Dis. 2019; 69(9):1566-1573


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The iceberg Effect-The Tip

Infection
Presence of a MDRO
that is causing
symptoms

The tip of the iceberg

- What we see already know



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This slide features a large iceberg floating in the ocean. The small, jagged tip of the iceberg is visible above the water line, while the vast, smooth, and much larger portion of the iceberg is submerged below the surface. A blue arrow points from the text 'Infection Presence of a MDRO that is causing symptoms' to the tip of the iceberg.


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The Iceberg Effect –Unseen

Larger unseen part

- What we don't see or what is not known

Colonization
Presence of a MDRO
that is not causing
symptoms



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This slide features the same iceberg as slide 13. A blue arrow points from the text 'Colonization Presence of a MDRO that is not causing symptoms' to the large submerged portion of the iceberg.

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MDRO's Have a Significant Impact on nursing Homes

- Many nursing home residents are unknowingly colonized with an MDRO, especially residents with risk factors like indwelling medical devices or wounds.
- Residents who have an MDRO can develop serious infections, remain colonized for long time periods, and spread MDRO's to others.
- Healthcare personnel can spread MDRO's through contaminated hands and clothing

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Regulatory Guidance



Survey Procedures: will evaluate use of EBP when reviewing sampled residents for whom EBP are indicated and focus evaluation of EBP use as it relates to CDC-targeted MDRO's

CMS has updated the LTC Survey Pathways. These can be found at: <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/nursing-homes>

They are under "Downloads" and in the "Survey Resources" zip file.

DATE: March 20, 2024
 TO: State Survey Agency Directors
 FROM: Director, Quality, Safety & Oversight Group (QSOG)
 SUBJECT: Enhanced Barrier Precautions in Nursing Homes

Ref: (80-348-NH)

- <https://www.cms.gov/files/document/gso-24-08-nh.pdf>

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Let's Walk Through Current Guidance



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Survey Procedures

- Surveyors will evaluate the use of EHB when reviewing sampled residents for whom EBP are indicated and focus their evaluation of EHB use as it relates to CDC-targeted MDRO's.
- CMS will update associated survey documents which will be found under the "Survey Resources" link in the downloads [Nursing Homes | CMS](#)
- Information regarding CDC-targeted MDRO's and current recommendations on EPB are available on [Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) \(cdc.gov\)](#)

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CMS QSO-24-08-NH- Enhanced Barrier Precautions (EBP) in Nursing Homes

- <https://www.cms.gov/files/document/qs>

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C2-21-16
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

DATE: March 20, 2024 Ref: QSO-24-08-NH
TO: State Survey Agency Directors
FROM: Director, Quality, Safety & Oversight Group (QSOG)
SUBJECT: Enhanced Barrier Precautions in Nursing Homes

Memorandum Summary

- CMS is issuing new guidance for State Survey Agencies and long term care (LTC) facilities on the use of enhanced barrier precautions (EBP) to align with nationally accepted standards.
- EBP recommendations now include use of EBP for residents with chronic wounds or indwelling medical devices during high-contact resident care activities regardless of their multidrug-resistant organism status.
- The new guidance related to EBP is being incorporated into F880 Infection Prevention and Control.

Background:

Multidrug-resistant organism (MDRO) transmission is common in long term care (LTC) facilities (i.e., nursing homes), contributing to substantial resident morbidity and mortality and increased healthcare costs. Many residents in nursing homes are at increased risk of becoming colonized and developing infections with MDROs.

In 2019, CDC introduced a new approach to the use of personal protective equipment (PPE) called Enhanced Barrier Precautions (EBP) as a strategy in nursing homes to decrease transmission of CDC-targeted and epidemiologically important MDROs when contact precautions do not apply. The approach recommended gown and glove use for certain residents during specific high-contact resident care activities associated with MDRO transmission and did not involve resident room restriction.

As described in the Healthcare Infection Control Practices Advisory Committee (HICPAC) white paper, "Consideration for the Use of Enhanced Barrier Precautions in Skilled Nursing Facilities," dated June 2021, more than 50% of nursing home residents may be colonized with an MDRO. This report noted that the use of contact precautions to prevent MDRO transmission involves restricting residents to their rooms, which may negatively impact a resident's quality of life and psychosocial well-being. As a result, many nursing homes only implemented contact precautions when residents are infected with an MDRO.

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Need for Enhanced Barrier Precautions

- Historically, interventions in nursing homes have focused only on residents who are actively infected with MDRO.
- Need for a broader approach to reduce the spread of MDRO's without isolating residents for long periods of time.
- Recent studies have indicated the use of EBP can effectively reduce the spread of MDRO's.



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Started April 1, 2024

The specific **Enhanced Barrier Precautions (EBP)** recommended by the **Centers for Medicare & Medicaid Services (CMS)** for Nursing Homes to Prevent Spread of Multidrug-resistant Organisms (MDROs) is Incorporated with F880 Infection Prevention and Control

1. Chronic Wounds:

- EBP should be implemented for residents with chronic wounds during high-contact resident care activities.

2. Indwelling Medical Devices:

- Residents with indwelling medical devices such as urinary catheters or central venous catheters, GT tubes, Trash's, should also receive EBP during high-contact care

3. Balancing Infection Control and Quality of Life:

- Facilities have some discretion in implementing EBP.

Remember that these precautions aim to protect vulnerable residents while maintaining their dignity and quality of life within the nursing home setting.

Survey Procedures

- Surveyors will evaluate the use of EBP when reviewing sampled residents for whom EBP are indicated.
- Associated survey documents can be found under the "Survey Resources" link in the downloads section of the CMS Nursing Homes webpage below:
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes>

ENHANCED BARRIER PRECAUTIONS

EVERYONE MUST:

Clean their hands, including before entering and when leaving the room.

PROVIDERS AND STAFF MUST ALSO:

Wear gloves and a gown for the following High-Contact Resident Care Activities.

- Dressing
- Bathing/Showering
- Transferring
- Changing Linens
- Providing Hygiene
- Changing briefs or assisting with toileting

Device care or use:

- central line, urinary catheter, feeding tube, tracheostomy
- Wound Care: any skin opening requiring a dressing

Do not wear the same gown and gloves for the care of more than one person.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

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Precauciones de barrera mejoradas

Cómo protegemos a nuestros residentes

Novedades

Estamos utilizando precauciones de barrera mejoradas para ayudar a proteger a nuestros residentes contra las infecciones. Es posible que note:

- Nuevas señales en las instalaciones
- Miembros del personal con batas y guantes para las actividades asistenciales de alto contacto

El motivo de estos cambios

Estamos tomando medidas para proteger a nuestros residentes de gérmenes peligrosos. Estos gérmenes pueden causar infecciones difíciles de tratar.

Las precauciones de barrera mejoradas nos permiten ofrecer una atención segura y de alta calidad y ayudan a detener la propagación de gérmenes dentro de nuestras instalaciones.

Cómo ayudar cuando nos visita

Puede ayudar a detener la propagación de gérmenes limpiándose las manos con un desinfectante de manos a base de alcohol o con agua y jabón.

Obtenga más información sobre las precauciones de barrera mejoradas: bit.ly/PPE-LTCFs

Más del **50%** de los residentes de hogares de ancianos son portadores de algún organismo multirresistente.

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FRAMEWORK FOR EBP IMPLEMENTATION

- Initial and on-going training on facility’s expectations about hand hygiene, gown and glove use.
- Proof of competency regarding PPE appropriate use and donning/doffing technique.
- Develop method to identify residents with wounds or indwelling medical devices.
- Post clear signage outside of resident rooms indicating type of PPE required and defining high risk resident care activities.
- Gowns and gloves - Available outside of each resident room.
- Alcohol-based hand rub (ABHS) - available for every resident room (ideally both inside and outside of the room).
- Trash can (or laundry bin, if applicable) large enough to dispose of multiple gowns - available for each room.

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Gloves

- Purpose – **patient care**, environmental services, other
- Glove material – **vinyl, latex, nitrile**, other
- Sterile or **non-sterile**
- **One** or two pair
- **Single use** or reusable

	BARRIER PROTECTION	ALLERGEN CONTENT	STRENGTH & DURABILITY	ELASTICITY	FIT & COMFORT	CHEMICAL RESISTANCE
Nitrile	Good Choice - Provides good barrier protection	Good Choice - Contains no latex proteins - Can contain a low level of chemical allergens and curing agents	Good Choice - Performs well with a modest tensile strength per the ASTM requirements	Good Choice - Adequate flexibility - Does exhibit some memory and moldability	Good Choice - Provides good comfort and fit due to increased memory and elasticity	Best Choice - Provides good resistance to many chemicals - See chemical resistance chart
Latex	Best Choice - Provides good barrier protection	Not Recommended - Contains protein and chemical allergens; check with specific manufacturer for allergen content	Best Choice - Performs well with a modest tensile strength per the ASTM requirements	Best Choice - High flexibility and memory	Best Choice - Provides excellent comfort and fit due to its high elasticity - Retains its shape and fit during rigorous manipulation	Good Choice - Provides good resistance to many chemicals - See chemical resistance chart
Vinyl (Polyvinyl Chloride)	Not Recommended - May tear when put under significant stress, so protection is limited	Good Choice - Contains no latex proteins - Can contain some curing agents and other chemical ingredients	Not Recommended - Can break or puncture when put under tensile strain	Good Choice - Exhibits some stretchability and memory	Not Recommended - Limited elasticity - Fit and comfort can be limited - Wrist diameter can be large, making gloves baggy around the cuff after extended use	Not Recommended - Easily permeated by organic solvents

• Picture Courtesy of McKessonGlove Catalog 2022
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Glove Demonstration







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PPE Gowns or Isolation Gowns

Minimal barrier protection	AAMI level 1		Minimal risk: used during basic care, provides slight barrier to small amounts of fluid	Home Health and Hospice
Low level barrier protection	AAMI level 2		Low Level Protection	Used in LTC for Patient Isolation and can be used in HH & Hospice
Moderate level barrier protection	AAMI level 3		Moderate protection	ER and Trauma Care
High level barrier protection	AAMI level 4		High barrier to fluids and bloodborne pathogens	Surgery

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Gown Demonstration



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Infected or Colonized Resident Tests Negative

- You decide to screen a colonized MDRO resident currently on EBP. The test result is negative for the novel or targeted MDRO. What should you do?



- Residents colonized with a novel or targeted MDRO are intended to remain on EBP for the duration of stay in a facility. Because MDRO colonization is typically prolonged and follow-up testing to determine clearance may yield false negatives.
- CDC does not recommend routine retesting of residents with a history of colonization or infection with a MDRO or discontinuation of EBPs after a subsequent negative test.

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Resident Status	Contact Precautions	Use EBP
Infected or colonized with any MDRO and has secretions or excretions that are unable to be covered or contained.	Yes	No
Infected or colonized with a CDC-targeted MDRO without a wound, indwelling medical device or secretions or excretions that are unable to be covered or contained.	No	Yes
Infected or colonized with a non CDC targeted MDRO without a wound, indwelling medical device, or secretions or excretions that are unable to be covered or contained.	No	At the discretion of the facility
Has a wound or indwelling medical device, and secretions or excretions that are unable to be covered or contained and are not known to be infected or colonized with any MDRO.	Yes, until/unless a specific organism is identified	Yes, if they do not meet the criteria for contact precautions
Has a wound or indwelling medical device, without secretions or excretions that are unable to be covered or contained and are not known to be infected or colonized with any MDRO. (Table credit to CDC)	No	Yes

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Who needs Contact Precautions Instead of Enhanced Barrier Precautions

- The resident has
 - Acute Diarrhea
 - Draining Wounds that cannot be covered or contained
 - A condition that recommends **Contact Precautions** to be used (i.e., *Clostridioides difficile* [*C. diff*], *scabies*)
 - Secretions or excretions that cannot be covered or contained*



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Are Enhanced Barrier Precautions to be used for a person with a history MDRO

- Yes, enhanced barrier precautions are often recommended for individuals with a history of MDRO (Multidrug-Resistant Organism) colonization or infection. MDROs are bacteria that have developed resistance to multiple types of antibiotics, making them difficult to treat.
- It is important to note that the specific precautions may vary based on the MDRO involved and the healthcare facility's policies and guidelines. Healthcare providers should follow the recommended protocols and consult the infection control team for guidance in implementing appropriate measures.
- When caring for a person with a history of MDRO, healthcare providers may implement enhanced barrier precautions to reduce the risk of transmission to others and prevent the spread of the bacteria.

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Enhanced Barrier Precautions: High-Contact Resident Care Activities

- PPE for enhanced barrier precautions is only necessary *when performing high-contact care activities* and may not need to be donned prior to entering the resident's room.
- For example, staff entering the resident's room to answer a call light, converse with a resident, or provide medications **who do not engage in a high-contact resident care activity** would likely not need to employ EBP while interacting with the resident.

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Enhanced Barrier Precautions: High-Contact Resident Care Activities

- In general, gowns and gloves **would not be recommended** when performing transfers in common areas such as dining or activity rooms, where contact is anticipated to be shorter in duration.
- Outside the resident's room, EBP should be followed when performing transfers or assisting during bathing in a shared/common shower room (if your facility has one) and when working with residents in the therapy gym, specifically when anticipating close physical contact while assisting with transfers and mobility.

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Environmental measures Hotel Clean and Health Care Setting Clean



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Environmental Services: Things to Consider

Effective environmental service practices go hand in hand with PPE and hand hygiene



Environmental Service staff should be educated and audited on cleaning EBP rooms, including PPE use

- In the case of a two-person room, clean the EBP side last

- After room cleaning is completed, change mop heads and water.

Review cleaning/disinfecting products to ensure they are appropriate for common organisms



Know the disinfectant contact/wet time - the time needed to stay wet on a surface to ensure efficacy.

Contact times for disinfectants range from 15 seconds to ten minutes, the maximum time allowed by the US Environmental Protections Agency (EPA)

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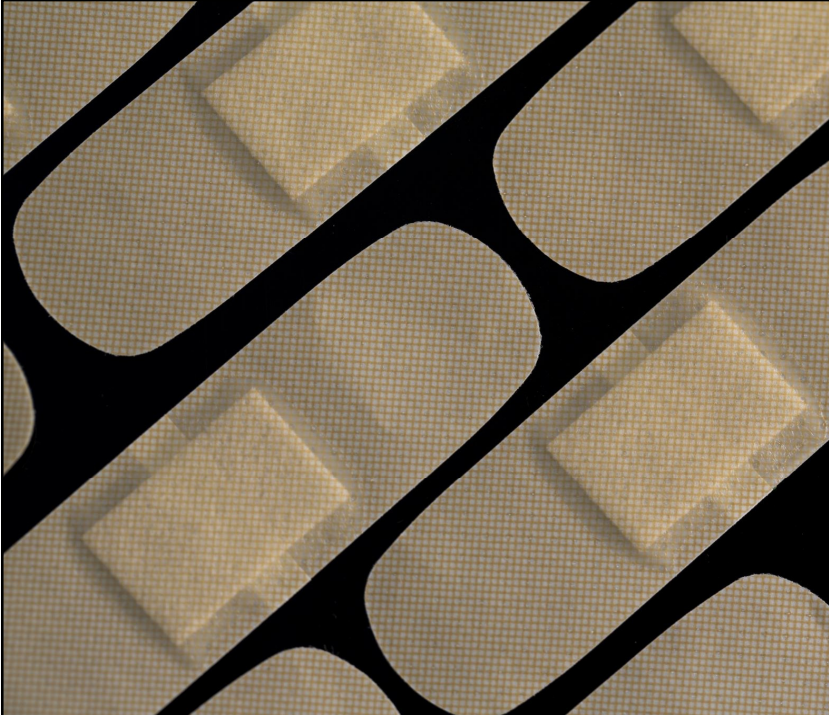
Cleaning an Occupied Room



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Gaps in infection prevention practices in nursing homes


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Preventing MDRO's at the Bedside

- The most common gaps in infection prevention practices:
 - Hand Hygiene practices during care at the bedside
 - Use of PPE and precautions
 - Cleaning and disinfection
 - Shared equipment



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Common Mis-conceptions



ABHR is not as effective as soap and water



ABHR dispensers will reduce the “home-like environment” of the nursing home and have the potential of being cited during the survey process.

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		<p>Scan to view an EBP video.</p>
<p>Enhanced Barrier Precautions (EBP) Pocket Guide</p>	<p>Key Steps:</p> <p>Before entering a resident's room with an EBP sign:</p> <ol style="list-style-type: none"> 1. Gather all needed supplies & materials 2. Clean hands 3. Correctly put on a gown and gloves 4. After care, throw away 	<p>https://www.cdc.gov/hai/pdfs/containment/EBP-PocketGuide-508.pdf</p>
<p>Use of Enhanced Barrier Precautions (EBP)</p> <p>Use EBP for residents with indwelling medical devices, wounds, or those who are colonized by or infected with a multidrug-resistant organism (MDRO).</p> <p>Use EBP when:</p> <ul style="list-style-type: none"> • Dressing or bathing • Transferring 	<p>8/19/2024</p>	<p>MCKESSON</p>

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RESOURCES

- [Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) | HAI | CDC](#)
- [Frequently Asked Questions \(FAQs\) about Enhanced Barrier Precautions in Nursing Homes | HAI | CDC](#)
- **November 15th, 2022, Continuing Education Webinar: Implementation and Use of Enhanced Barrier Precautions in Nursing Homes**
 - Webpage: <https://www.cdc.gov/infectioncontrol/training/safe-healthcare-webinars.html#Webinar-EBPinNH>
 - Video: <https://www.youtube.com/watch?v=WD87c4PP6pE&list=PLvvp9iOILTQayOi5Jgk08QDgv3GHROtCf&index=24>
 - Slides: <https://www.cdc.gov/infectioncontrol/pdf/webinarslides/Webinar-EBPinNH-Nov2022-Slides-508.pdf>
- **Observations Tool - Enhanced Barrier Precautions Implementation:** <https://www.cdc.gov/hai/pdfs/containment/Pre-Implementation-Tool-for-Enhanced-Barrier-Precautions-508.pdf>
- **Observations Tool Summary Spreadsheet:** <https://www.cdc.gov/hai/excel/containment/Spreadsheet-to-Capture-and-Summarize-EBP-Observations.xlsx>
- **Enhanced Barrier Precautions Letter to Nursing Home Leadership:** <https://www.cdc.gov/hai/pdfs/containment/Enhanced-Barrier-Precautions-Letter-for-Nursing-Home-Leadership-508.pdf>

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Resources

- [Implementation of Personal Protective Equipment \(PPE\) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms \(MDROs\) | LTCFs | CDC](#)
- Mckinnell JA et al, Clin Infect Dis. 2019, 69(9):1566-1573
- [enhancedbarrierprecautions-508.pdf \(cdc.gov\)](#)
- https://www.cdc.gov/long-term-care-facilities/hcp/prevent-mdro/ppe.html?CDC_AAref_Val=https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html
- <https://www.cdc.gov/hai/pdfs/containment/Letter-Nursing-Home-Residents-Families-Friends-508.pdf>

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QUESTIONS



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Thank You!

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To reach any member of our Clinical Resource Team, call us at
Clinical Connections
1-877-611-0081

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