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January 30, 2019 **MEMO**

To: WRHA Acute Care Infection Prevention & Control Manual Holders

From: Janice Briggs, WRHA Infection Prevention & Control Specialist

Subject: WRHA Acute Care Infection Prevention & Control Manual Revisions

Revisions to the WRHA Acute Care Infection Prevention & Control Manual in the table below are effective immediately and may be accessed by <u>clicking here</u>. Please ensure the appropriate staff at your site/program/department is notified and identified revisions are made. If your site/program/department uses only the electronic manual, it is not necessary to print these revisions. The entire WRHA Acute Care Infection Prevention & Control Manual is available at: http://www.wrha.mb.ca/extranet/ipc/manuals-acute.php Manual binders and tabs are available at no charge by contacting Kelly McKenna at http://www.wrha.mb.ca.

| | Instructions for WRHA Acute Care Infection Prevention & Control Manual Revisions | | | | | | | |
|---|---|---|--------------------------|--|--|--|--|--|
| | Document Name | Purpose of new document/major revisions and rationale of document revisions | Remove PagesInsert Pages | | | | | |
| 1 | Table of Contents | Revised to include new documents and page numbers. | 1.1.1 to 1.1.2 | 1.1.1 to 1.1.2 | | | | |
| 2 | <u>Document</u> <u>Development, Review</u> <u>& Stakeholders'</u> <u>Consultation Record</u> | Revised to reduce the Hospital Working Group document reviews to 1 instead of 2. The Hospital Working Group and Regional IP&C Committee now approve documents electronically instead of at meetings. This reduces the document stakeholder consultation and approval process by approximately 5 months. | 1.3.1 to 1.3.4 | 1.3.1 to 1.3.4 | | | | |
| 3 | Animals in Acute Care Facilities Operational Directive (formerly: Pet Therapy and Pet Visitation in Acute Care Facilities | Revised to provide updated IP&C direction regarding: • Service Animals (how to accommodate) • Acceptable pet residence (no shelter pets) • Minimum pets age and species(only dogs; no puppies, cats or other animals) • Direction for injuries caused by animals | 3.48 to 3.55 | 3.3.1 to 3.3.8 (after page 3.2.9) | | | | |
| 4 | Facility Approved Disinfectants | "Clostridium difficile" replaced by "Clostridioides difficile" per scientific name change. No practice or guidance changes. | 3.3.11 | 3.3.9 (after page 3.3.8) | | | | |
| 5 | Pediatric Gastric Aspirate Collection for Tuberculosis Diagnosis Operational | New document purpose: To provide IP&C guidance for Pediatric Gastric Aspiration Collection for Tuberculosis Diagnosis. The target audience is staff involved in Pediatric Gastric Aspiration Collection for Tuberculosis Diagnosis. Practice change: Evidence based Regional standards to replace various site | N/A | 3.20.1 to 3.20.4 (after page | | | | |
| | <u>Directive</u> | specific guidelines and historical practices. | | 3.9.4) | | | | |

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| 6. Tuberculin Skin Test (TST) Operational Directive | New document purpose: To promote consistency and competency in administering and measuring the Mantoux tuberculin skin test (TST). • Practice change: Evidence based Regional standards to replace various site specific guidelines and historical practices. | N/A | 3.24.1 to 3.24.6 (after page 3.20.4) | | | |
| 7. Waste Management Operational Directive | New document purpose: To specify requirements for waste collection, segregation, packaging, movement, storage, disposal and on-site treatment. • Practice change: Evidence based Regional standards to replace various site specific guidelines and historical practices. | N/A | 3.26.1 to 3.26.14 (after page 3.24.6) | | | |
| 8. Contact Precautions Protocol - pg. 5 3 8 | Revised to include links to new and updated patient and visitor educational material. | 5.3 8 | 5.3 8 | | | |
| 9. Containment Precautions Protocol | New document purpose: To manage patients with specific, highly contagious or virulent organisms transmitted via the contact route with increased caution as these organisms have more potential to negatively impact patients. • Practice change: For CPE cases (except on Mental Health units) and for all (MDR) Candida auris cases: Staff and visitors glove and gown to enter room/bed space, regardless of anticipated contact or activity. Only allow the patient out of his or her room after considering all possible options for in room care. Cohort only with IP&C or Infectious Disease consult. | N/A | 5.4.5 to 5.4.12 (after page. 5.3.8) | | | |
| 10. Clinical Presentation & Empiric Precautions Table | No practice or guidance changes. "Clostridium difficile" replaced by "Clostridioides difficile" per scientific name change. Typos corrected. | 6.1.1 to 6.1.8 | 6.1.1 to 6.1.8 | | | |
| 11. Microorganism Infectious Disease Table | Practice change: for CPE (except on Mental Health units) and for multidrug resistant (MDR) Candida auris (in any/all units, including Mental Health units): Implement Containment Precautions instead of Contact Precautions Notify site ICP; after hours, leave a message & notify ID as indicated in manual Use Droplet/Contact Precautions instead of Routine Practices for children with meningitis due to Streptococcus pneumoniae. Evidence based Regional standards regarding Syphilis and neonates added to replace various physician specific guidance. Revisions not requiring practice changes: Typos corrected. "Clostridium difficile" replaced by "Clostridioides difficile" per scientific name change. Wording to discontinue Additional Precautions for seasonal influenza cases clarified. Herpes zoster virus entry: Misplaced asterisks corrected for clarity. | 6.2.1 to 6.2.26 | 6.2.1 to 6.2.26 | | | |

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|---|---|----------------------|---|--|--|--|
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| 12. Candida auris (Multi Drug Resistant) Protocol | Practice change: Implement Containment Precautions instead of Contact Precautions (in any/all units, including Mental Health units): Evidence based Regional standards to replace various site specific direction for patient management and precautions discontinuation. Notify site ICP; after hours, leave a message & notify ID as indicated in manual. | N/A | 7.3.1 to 7.3.8 (after page 7.2.6) | | | |
| 13. Carbapenemase- Producing Enterobacteriaceae (CPE) (ARO) Protocol | Practice change: Implement Containments Precautions instead of Contact Precautions for CPE. Deleting Antibiotic Resistant Organisms (ARO) Table of Contents because each organism will be in a separate protocol instead of grouped with other AROs. | 7.1.1 to 7.1.11 | 7.4.1 to 7.4.10 (after page 7.3.8) | | | |
| 14. <u>Creutzfeldt Jakob</u> <u>Disease (CJD)</u> <u>Protocol</u> | Practice change: Bleach contact time standardized to 1 hour instead of various bleach contact times. | 7.8.1 to 7.8.16 | 7.5.1 to 7.5.16 (after page 7.4.10) | | | |
| 15. (Seasonal) Influenza Protocol – pg. 7.12.4 | Revised discontinuation of Additional Precautions wording for clarity. No practice or guidance changes. | 7.12.4 | 7.12.4 | | | |
| 16. Meningitis Protocol | Meningococcal meningitis (Neisseria meningitidis) Period of communicability: 7 days before symptom onset to 24 hours after appropriate antibiotic therapy started. (previously unspecified) Pneumococcal meningitis (Streptococcus pneumoniae) Contacts do not need prophylaxis. (previously unspecified) Hib meningitis (Haemophilus influenzae type B) Nonimmune close contacts less than 48 months old may require chemoprophylaxis. (previously unspecified) | 7.13.1 to 7.13.13 | 7.17.1 to 7.17.8 (after page 7.15.2) | | | |
| | Practice changes: Adults with <i>H. influenzae</i> type B meningitis: Routine Practices instead of Droplet Precautions. Children with Streptococcus pneumoniae meningitis: Droplet/Contact Precautions instead of Routine Practices. Symptomatic or exposed staff referred directly to OESH. Notify site ICP as specified in protocol. | | | | | |
| 17. Portable Fans-Cleaning and Use Restrictions Communication Form – pg. 8.5.1 | "Clostridium difficile" replaced by "Clostridioides difficile" per scientific name change. No practice or guidance changes. | 8.5.1 | 8.5.1 | | | |

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| 18. Topping Up Bottles, Reusing trigger spray Nozzles and Elephant Ear Wash™ System | Practice change : Elephant Ear Wash System's™ trigger spray nozzle can no longer to be reused. Now managed consistently with other trigger spray nozzles. | 8.11 to 8.14 | 8.17.1 to 8.17.4 (after page 8.8.1) | | | | |
| 19. Upper Extremity Supportive Devices for Healthcare Workers Communication Form | Revised to limit guidance to: 1. HCWs wearing Upper Extremity Support Devices (UESDs) 2. Upper Extremity Support Devices (UESDs) cleaning 3. Hand hygiene while wearing Upper Extremity Support Devices (UESDs) Practice change: Staff referred to OESH for UESD use at work. | 3.42 to 3.47 | 8.19.1 to 8.19.4 (after page 8.17.4) | | | | |
| 20. Adult and Pediatric Point of Entry Respiratory Infection Screening Algorithm | "Clostridium difficile" replaced by "Clostridioides difficile" per scientific name change. Formatting, spacing and clerical revisions to simplify look and improve appearance. No practice or guidance changes. | 12.12.1 | 12.12.1 | | | | |
| 21. Regional Health Authorities Infection Prevention & Control Policies | Move Regional IP&C Policies and/or Regional IP&C Policy Index to the end of the Manual; after Appendices section. Some sites have opted to use electronic Policies and may only have a Policy Index. Some sites may have hard copies of some or all of the Policies in their Manual. Do not print new copies. | Move 2.1.1 – 2.5.5 &/or Policy index | Move Policies/ Policyindex to end | | | | |
| Tool Name | New tools that support the IP&C Manual but are not part of the Manual | FYI only. No need to print | | | | | |
| 1. Cover Your Cough Sign - English & Cover Your Cough Sign - Bilingual | Revised: cough or sneeze into sleeve or shoulder, cover mouth & nose with tissue, put tissue in garbage & ask visitors & staff to stay home when sick instead of "report to the desk." For visitors, staff & patients on arrival to facility / unit; primarily in triage areas but also for other clinical areas, particularly during outbreaks or flu season. Have same #s as the signs they replace; will be substituted if old signs ordered. | No need to print. Posted at Cover Your Cough Sign - English & Cover Your Cough Sign - Bilingual | | | | | |
| 2. Containment Precautions Fact Sheet | Highlights from the Containment Precautions Protocol. Intended audience: Patients & visitors but may be used by staff for a review or teaching tool. No new information. | Containment Precautions Fact Sheet | | | | | |
| 3. Containment Precautions Sign - English | Containment Precautions Sign for posting at entrance to patient room or bedspace. | Posted at Containment Precautions-English (RED) | | | | | |
| 4. Containment Precautions Sign - Bilingual | Bilingual Containment Precautions Sign for posting at entrance to patient room or bedspace. | Posted at Containment Precautions - Bilingual (RED) | | | | | |
| 5. Containment Precautions Visitor Instruction Pamphlet | Highlights from the Containment Precautions Protocol. Intended audience: Visitors. English and French versions available. No new information. | @ Containment Precautions Visitor Instruction Pamphlet & Contact Precautions Visitor Instructions Pamphlet (French) | | | | | |
| 6. Cystic Fibrosis IP&C Highlights | Highlights from the Cystic Fibrosis Protocol and the Contact Precautions Protocol. No new information. | Posted at Cystic Fibrosis IPC Highlights | | | | | |
| 7. EPR Infection Control Code QRS | Highlights of Electronic Patient Record Infection Control Codes. Intended audience: staff using EPR flags. No new information. | Posted at EPR Control Code C | | | | | |