Excellent health and care, for everyone, everywhere, every time.



## **MEMORANDUM**

**Date:** January 19, 2015

To: All Residential Care Facilities

From: Dr. Pamela Kibsey, Medical Director, Infection Prevention and Control

Dr. Dee Hoyano, Medical Health Officer

Re: Recent Changes to Managing Antibiotic Resistant Organisms in Residential Care Settings

The following explains the recent changes to managing Antibiotic Resistant Organisms (ARO) in Residential settings:

- Carbapenemase Producing Organism (CPO)
- Extended Spectrum Beta Lactamase (ESBL)

Management of Patients that are known CPO or ESBL in a residential setting

- Do not require a private room
- Will not need to be screened
- Will not need additional precautions unless they have an infection
  - Residents historically known to be colonized with Carbapenemase Producing Organism (CPO) or Extended Spectrum Beta Lactamase (ESBL)
- No need to use separate procedures for laundry/ housekeeping other than usual practices for soiled/contaminated areas or materials
- No need to separate dining spaces/utensils unless and on precautions
- If colonized:
  - Encourage good hand hygiene with the resident
  - Staff to use Routine Practice

## If Infected with CPO or ESBL

- Place the resident on the appropriate precaution during personal care with own commode
  - Contact for draining wounds, diarrhea, if CPO is in a UTI etc.
  - Droplet for diarrhea with vomiting, new or worsening productive cough
- For CPO infections only:
  - Most importantly the resident will require a specific regime for their antibiotic treatment

The Provincial CPO surveillance protocol will be reviewed after one year of implementation to ensure that it reflects any new knowledge gained and advances in evidence informed practice.