

Being thoughtful and smart about the use of antibiotics is called **Antibiotic Stewardship**. If you are not prescribed an antibiotic, ask what you can do to feel better and get relief from your symptoms. Serious diarrheal infections from bacteria, called C.diff., have also been associated with antibiotic overuse. Doctors and nurses are aware of this. However, as an advocate, don't be afraid to ask, "Why are you ordering this antibiotic? Is it necessary?" **Antibiotic Stewardship** is focused on using the correct antibiotic therapy to achieve the maximum benefit while reducing the subsequent adverse complications and the development of antibiotic resistance in our residents and our care center.

## SPOTLIGHT ON URINARY TRACT INFECTIONS

One of the most frequent reasons residents are inappropriately given antibiotics is for urinary tract infection (UTI) or "bladder infection." It is common for nursing home residents to have some bacteria colonized in their urine and not have symptoms of an infection. This is called **asymptomatic bacteriuria** and **does not** require treatment. Residents should only be treated for UTI if they have symptoms and meet the appropriate medical criteria for antibiotic use. Improving antibiotic use will ensure these life saving medications are effective and available when we need them.

For more information, please talk to the infection prevention and control officer (IPCO) nurse in your healthcare facility.

Resources and other information may be found at:

<https://www.cdc.gov/getsmart/healthcare/>

<https://www.cdc.gov/longtermcare/staff/index.html>

<http://www.health.state.mn.us/divs/idepc/dtopics/infectioncontrol/>

<http://sfhs.org/antibiotic-stewardship/>

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<https://nhqualitycampaign.org/>



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## WORKING TOGETHER TO PREVENT INFECTION

In our care settings, we promote **Community Immunity\*** (CI) meaning it takes everyone to prevent infections and promote good health for all. CI is a commitment to protect not only ourselves, but each other from illnesses that are caused by germs.

The evening news is often filled with stories about the spread of infections. Anytime you have a large group of people living or gathering in one setting, there is an increased risk of spreading germs. These germs may cause colds, flu, and other illnesses, which can pass from one person to another. Norovirus illnesses (stomach distress, diarrhea, vomiting) can spread quickly. Think about cruise ships, day care settings, and schools for children. These places, like health care settings, need to take special care to prevent the spread of illness.

St. Francis Health Services aims to expand their infection prevention and control program in their long term care centers through the implementation of the project **Controlling Infection Challenges Creatively (CICC)**.

# INFECTION CONTROL BASICS

**Germs are transmitted by sick persons (who may or may not show symptoms of being ill) in several ways:**

- through droplets produced by coughs and sneezes
- on their hands and faces when touching you
- on surfaces touched by someone carrying the germ
- through fluids like saliva, spit, blood, urine, feces, and mucous that go out of the body

**Germs enter healthy people and make them sick through:**

- exposure to droplets from germ-containing particles
- breaks in the skin
- touching your hands, mouth, eyes after you have touched someone who is ill, or have touched the body fluids of the sick person
- touching hard surfaces that have body fluids on them

The spread of germs is called the chain of infection and the goal is to break the chain to prevent the spread of germs. The germs we are particularly concerned about in care settings and with elders are: Clostridium difficile (C. diff), Methicillin Resistant Staphylococcus Aureus (MRSA), Influenza (flu), and Norovirus.

## QUESTIONS?

We want to encourage comfortable, safe stays and visits in an atmosphere of relaxation and healing. Please ask the infection prevention and control officer (IPCO) nurse if you have any questions about how to prevent infections and how to be an active part of our **Community Immunity\***.

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## WHAT ABOUT GLOVES & MASKS?

Gloves are worn only when the person, usually a caregiver, may come in contact with body fluids, such as saliva, blood, urine, and feces. This includes activities such as brushing teeth, cleaning or bandaging wounds, helping with toileting, and washing up. If you see a caregiver doing these tasks without these precautions, ask them why. A **Community of Immunity\*** calls for all of us to work together.



Masks are worn for 2 reasons:

1. To protect the other person from catching something from you that could be spread through the air and
2. To protect you from inhaling germs from the other person who is sick.

If there is a reason for you to wear a mask to protect yourself from getting sick, there will be a sign on the door listing the infection control precautions to follow.



## RESPONSIBLE USE OF ANTIBIOTICS

Avoiding infections in the first place reduces the amount of antibiotics that have to be used and reduces the likelihood that resistance will develop during therapy. There are many ways that drug-resistant infections can be prevented: immunization, safe food preparation, handwashing, and using antibiotics as directed and only when necessary.

Antibiotics treat infections caused by a type of germ called bacteria. Antibiotics are not effective against other germs, such as viruses that cause influenza (flu), viral pneumonia, or the common cold. It is important that you only use an antibiotic when it is needed to treat your illness and only when medically necessary. The overuse of antibiotics has created new problems, such as Multi-Drug Resistant Organisms (MRDO's). How can you help? When you have a cough, sore throat, or other illness, tell your doctor or attending practitioner that you only want an antibiotic if it is really necessary.

## MORE ABOUT HAND CLEANING AND BEYOND

Good hand cleaning (also called performing hand hygiene) is considered the basis of infection prevention. All caregivers need to clean their hands before and after they provide direct care. Visitors also need to clean their hands carefully before they enter and touch the person they are visiting and after they leave the room. If a sink is not handy, hand sanitizer is another good option. Many care settings have these available now and many people carry a personal container of hand sanitizer with them. Alcohol-based hand sanitizers are as effective as hand washing, except when the hands are visibly dirty, after using the toilet, or when certain germs are present, such as C. diff or Norovirus. With those germs, hand washing with soap and water is required.

It is kind and caring to offer a soapy, wet wash cloth or hand wipe when visiting a person in the care setting. They may need reminding and encouragement to clean their hands and face.

## CLEANING SURFACES

How many times a day do you wipe off your kitchen counter? When cooking or eating, it often is visibly dirty, so we do this routinely. What about hard surfaces in the care environment? They may look clean, yet still be a source of germs. Although housekeeping routinely cleans surfaces, it can be helpful to encourage residents, staff, and others to do this with a disinfectant wipe or spray in between the housekeepers' actions. This is part of our [Community Immunity\\*](#) action plan.

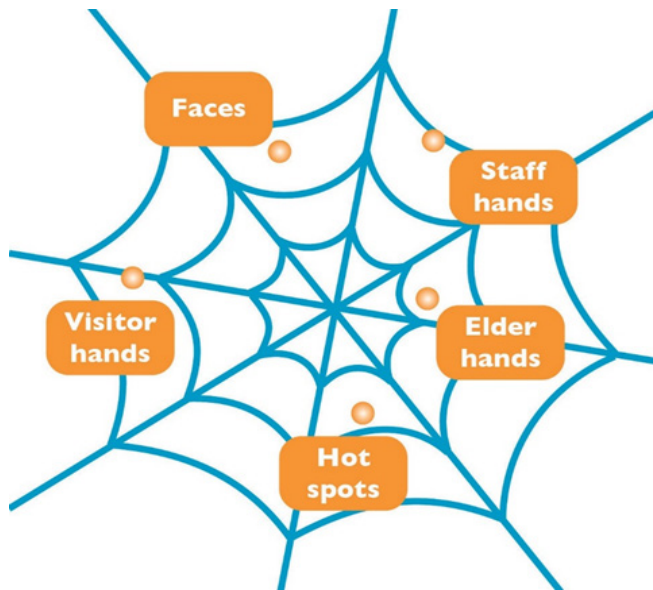
## THE CHAIN OF INFECTION



Studies show that you touch your face around 18 times an hour and may touch close to 4,000 surfaces during a day. This may contribute to the spread of infection. When caring for each other, if we increase the number of times we clean our hands, faces, and surfaces, we can break the chain of infection and break the web of transmission.

# THE WEB OF TRANSMISSION

In addition to being a chain, the paths of infection are interwoven with the person, environment, and caregivers. Think of it as a spider web with connections. What happens in one part of the web affects the whole web.



The hands and faces of all who live, visit, or work in care settings are all part of the web. Objects that are touched or taken into and out of rooms are also potential “hot spots” for germs - such as light switches, hand rails, remote controls, cell phones, tabletops, faucets, toilets, handle-arms of chairs, and wheelchairs. The web is shredded when we practice good hygiene and properly clean and disinfect these areas.

How do you prevent the spread of contagious diseases when a lot of people are gathered together? There are many actions you can take to keep yourself and others healthy:

**Clean your hands** with either soap and water or an alcohol-based hand sanitizer for **15-20 seconds**. With both methods, pay attention to between the fingers and the fingernails, getting all the surfaces of the hands.

Clean your hands **before visiting others, eating, and after you touch another person.**

Wash your hands with soap and water **after you use the bathroom or when visibly soiled.**

**Encourage elders and others** to clean their hands, using soap and water, a sanitizer or disinfectant wipe, particularly if you observe them touching their face, mouth, or a dirty surface.

**Cover your mouth** with your elbow when you sneeze and cough.

**Throw away used tissues** and clean your hands.

Don't visit others or go to work **when you are ill.**

**Clean hard surfaces** with a disinfectant regularly.

Get a **yearly flu shot** to protect yourself and others.