

Management of ARO Positive Residents in Continuing Care

Management strategies in addition to [Routine Practices](#)

ARO status (infection or colonization) SHALL NOT prevent admission, a return to, or continued residence in a continuing care setting.

ROUTINE admission testing and/or ROUTINE clearance testing for AROs is NOT recommended for Residents in Continuing Care.



Accommodation

- Single room and bathroom recommended whenever possible for residents who are infected or colonized with an ARO.
- If a single room is not available, residents infected or colonized with the same organism may share a room with consideration to an [Infection Prevention and Control Risk Assessment \(IPC RA\)](#).
- If the resident must share a bathroom, the space is to be cleaned between resident use.
- Residents who are colonized or infected with 2 or more AROs should not be placed with a resident known to be colonized or infected with any ARO.
- If placement with a roommate with the same organism is not possible, assess ARO positive resident and potential roommate(s) for appropriate placement. Place ARO positive resident with a lower risk roommate(s) whenever possible.
- Lower risk residents include those:
 - with intact skin (no open wounds or pressure ulcers)
 - with excretions or secretions that are contained
 - whose personal or hand hygiene is managed by themselves or with staff assistance
 - without urinary catheters, feeding tubes, or other invasive devices
 - without chronic respiratory illnesses
 - without risk factors that make them more vulnerable to infection ([Infection Prevention and Control Considerations for Immunocompromised Patients](#))
- Consult site or AHS Zone Infection Control Professional (ICP) or their designate for assistance with challenging ARO positive resident placement. Placement of new residents may require reassignment of spaces to reduce the risk of transmission.
- When a resident has been assessed as requiring **Additional Precautions**:
 - **Additional Precautions** must be communicated to all persons entering the room or bed space (e.g., precaution signage, etc.).
 - Room door may remain open unless resident is on Contact and Droplet Precautions and requires an [Aerosol-generating medical procedure \(AGMP\)](#).
 - If room-sharing (while on **Additional Precautions**):
 - maintain a minimum separation based on the type of precautions
 - provide a dedicated bathroom or commode for each resident
 - close privacy curtains between residents

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Resident Activity and Ambulation Outside Room, Bed Space

- ARO positive residents managed with [Routine Practices](#) and [Infection Prevention and Control Risk Assessment \(IPC RA\)](#) may attend all activities, including the dining room, with clean hands, clean clothes and contained drainage/body fluids.
- Residents requiring additional precautions for an extended period due to an ARO infection or colonization may have restrictions based on an assessment of their: Risk of Transmission: Table 1.
- Refer to May Resident Participate in Group Activities: Table 2.

Determining the need for Additional Precautions for ARO Positive Residents

- Use [Routine Practices](#) and the [Infection Prevention and Control Risk Assessment \(IPCRA\)](#) for all ARO positive residents including those with ARO colonization or infection of any body site or system when:
 - Wound drainage and body fluids (e.g., sputum, feces, urine, blood, etc.) are contained.
 - The resident is cooperative (either independently or with assistance) with practicing good personal hygiene and hand hygiene, unless there is an assessed higher risk of transmission of the microorganism.
- **Additional Precautions** are recommended only when the Risk of Transmission: Table 1 is assessed to be higher.
 - Factors to consider in deciding when Additional Precautions are needed:
 - resident's mental status, ability to cooperate, level of self-care and personal hygiene
 - ability to contain secretions, drainage or excretions to prevent soiling of the environment
 - When a resident has been assessed as requiring Additional Precautions, follow the recommendations for the specific Additional Precaution in the specific information sheet. This includes when additional precautions can be discontinued.
- A risk assessment and documentation is to be completed upon admission or upon significant change of the resident's status. Any intervention that may be needed will be included in the Care Plan, which is reviewed routinely and is accessible to the resident/legal representative. Screening, swabbing or testing is not required to complete this assessment.
- Assessment of the ARO positive resident to determine the need for Additional Precautions will be performed by the person(s) designated by the site/facility. The continuing care facility is the resident's home and precautions must be balanced with maintaining quality of life. Each resident must be assessed individually, balancing the risk of transmission of the AROs and the potential harm additional precautions may have on residents.
 - Additional precautions that are used in acute care may not be appropriate in continuing care.
 - Risks can change over time and individuals must be assessed regularly, and as conditions, behaviors and situations change.

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Table 1: Risk of Transmission of Microorganisms including Antibiotic Resistant Organisms

Risk of Transmission	Assessment of Resident	Placement and Precautions
LOWER	<ul style="list-style-type: none"> • Cooperative (cognitively intact or impaired) but may need prompting/assistance with hand hygiene, toileting practices, changing soiled clothes, identifying when dressings or incontinence products are leaking <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> • Contained drainage/body fluids 	<ul style="list-style-type: none"> • <u>Routine Practices</u> with prompting/assistance as needed, no signs required. • Private room preferred. <ul style="list-style-type: none"> ◦ If private room not available, place with resident with same organism or lower risk roommate. ◦ Lower risk roommate: consistent good hand hygiene and good personal hygiene; intact skin; no invasive devices or open wounds; not dependent on staff for care; and no significant co-morbidities that make them vulnerable to infection. ◦ Refer to: Infection Prevention and Control Considerations for Immunocompromised Patients • No restrictions in activities and dining room with clean clothing
HIGHER	<ul style="list-style-type: none"> • Uncooperative (cognitively intact or impaired) with prompting/assistance – e.g., unable or unwilling to perform hand hygiene, change soiled clothes or leaking dressings or incontinence products <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> • Uncontained drainage or uncontained body fluids that regularly soil the environment 	<ul style="list-style-type: none"> • Additional Precautions may be needed, in addition to Routine Practices • Additional Precaution sign required • Private room <ul style="list-style-type: none"> ◦ If private room not available, place with resident with same organism or lower risk roommate. ◦ Lower risk roommate(s): consistent good hand hygiene and good personal hygiene; intact skin; no invasive devices or open wounds; not dependent on staff for care; and no significant co-morbidities that make them vulnerable to infection. • Attend group activities Table 2 and dining room ONLY with clean clothing, clean hands and contained drainage/body fluids.

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Table 2: May Resident Participate in group activities

Activity	Resident Condition and Behavior		
ARO positive resident (colonized or infected at any body site)			
	AND cooperative with performing hand hygiene and wearing clean clothes and body fluids or wound drainage are contained with clean dry incontinence products or clean dry dressings	AND uncooperative or unable to perform hand hygiene or change soiled clothes and body fluids or wound drainage are not contained and regularly soil the environment	AND with symptoms of an acute infection (e.g., infectious rashes, diarrhea, vomiting, coughing, runny nose, fever, etc.)
Dining room	Yes	Consult ICP or designate <i>(Criteria for participation includes: ONLY with supervision and if cooperative with clean clothing, clean hands, and drainage/body fluids are contained)</i>	No
Group recreational, physiotherapy or occupational therapy activities	Yes		No
Ambulate outside of room	Yes		No
Food handling Activities	Yes	No	No
Comments	All residents to perform hand hygiene (with assistance as needed) before leaving their room, before entering the dining room and before participation in each activity.		Restrictions should be discontinued when symptoms of acute infection have stopped.

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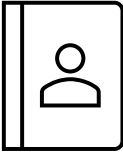


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Management of ARO Positive Patients in Continuing Care

	<h3>Handling Resident Care Items and Equipment</h3> <ul style="list-style-type: none"> • Use disposable care equipment when possible. • If reusable equipment cannot be dedicated to a single resident, clean and disinfect it between residents. • Clean and disinfect shared tubs and showers immediately after use as per facility procedures. • Do not share items (e.g., puzzles, books, electronics, etc.) that cannot be cleaned and disinfected. • Refer to: Equipment and environmental cleaning - Routine practices
	<h3>Laundry, Waste Handling, Sharps and Dishes</h3> <ul style="list-style-type: none"> • Follow routine practices for handling laundry, waste, sharps and dishes. • Double bag laundry and garbage only if leaking. • Disposable dishes and utensils are not required.
	<h3>Transfer Outside Facility</h3> <ul style="list-style-type: none"> • Notify the receiving area, before departure, that the resident is ARO positive. • Before residents leave their room, assist them with performing hand hygiene, putting on clean clothing, and ensuring dressings and incontinence products are able to contain any drainage.
	<h3>Environmental Cleaning</h3> <ul style="list-style-type: none"> • Refer to facility Environmental Services cleaning schedules and practices. • All high touch surfaces in the resident’s room, including bathrooms and commodes, must be cleaned and disinfected at least daily. • Use AHS or facility approved products and procedures.
	<h3>Visitors</h3> <ul style="list-style-type: none"> • Encourage visitors to perform hand hygiene. • Instruct family or visitors how to put on and take off PPE correctly if they are assisting with care (e.g. feeding, turning) and the resident requires Additional Precautions. • Refer to: A Guide to Clean Hands • Refer to: Infection Prevention and Control (alberta.ca)
	<h3>Additional Resources</h3> <ul style="list-style-type: none"> • Additional Precautions without Walls in Shared Patient Care Space • IPC RA Overview • IPC RA Practice Support Tool • IPC RA Action Worksheet • Continuing Care Infection Prevention and Control Risk Assessment (IPC RA) and Choosing Personal Protective Equipment (PPE) for Resident Interactions