



Enhanced Barrier Precautions

Fall 2024

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Enhanced Barrier Precautions

Objectives:

Upon completion of this session, participants should be able to:

- Describe Enhanced Barrier Precautions (EBPs)
- List indications for EBPs
- Describe implementation strategies for EBPs

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QSO-24-08-NH

QSO memo released 03/20/2024

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.

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

Ref: QSO-24-08-NH

DATE: March 20, 2024
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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3 [QSO-24-08-NH \(cms.gov\)](https://www.cms.gov)

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What are Enhanced Barrier Precautions?

“Enhanced Barrier Precautions” (EBP) refer to an infection control intervention designed to reduce transmission of multidrug-resistant organisms (MDROs) that employs targeted gown and glove use during high contact resident care activities.

Examples of MDROs currently targeted by CDC include:

Pan-resistant organisms

Carbapenemase-producing carbapenem-resistant Enterobacterales

Carbapenemase-producing carbapenem-resistant *Pseudomona*

Carbapenemase-producing carbapenem-resistant *Acinetobacter baumannii*

Candida auris

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Who should be placed on EBPs?

During high contact resident care activities:

- infection or colonization with a CDC-targeted MDRO when Contact Precautions do not otherwise apply;
- wounds
- indwelling medical devices (e.g., central line, urinary catheter, feeding tube, tracheostomy, ventilator)

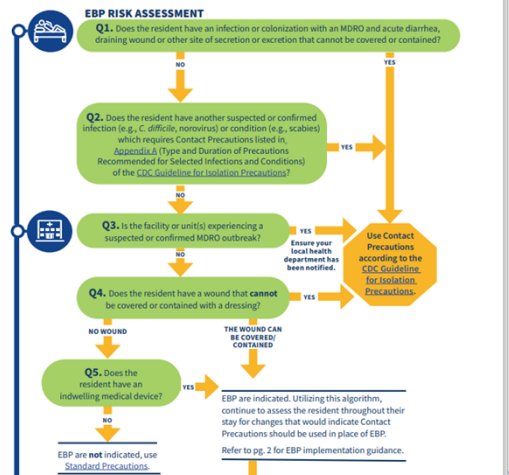
5 [EBP-Implementation-Algorithm.pdf \(virginia.gov\)](#)

Enhanced Barrier Precautions in Nursing Homes Algorithm

The purpose of this algorithm is to outline when to use and how to implement enhanced barrier precautions (EBP). EBP are indicated for the following residents who are:

- Known to be colonized or infected with a multidrug-resistant organism (MDRO) when Contact Precautions do not otherwise apply
- At increased risk of MDRO acquisition (e.g., resident has a wound or indwelling medical device)

Use the EBP risk assessment questions 1-5 to determine whether EBP may apply to an individual resident. If a resident meets criteria for EBP, refer to pg. 2 for the implementation steps.



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What are High Contact Resident Care Activities?

Wear gowns and gloves for these high contact resident care activities

- | | | | |
|-----------------|---|---|---|
| Dressing | Bathing/showering | Transferring | Providing hygiene |
| Changing linens | Changing briefs or assisting with toileting | Device care or use: central line, urinary catheter, feeding tube, tracheostomy/ventilator | Wound care: any skin opening requiring a dressing |

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EBP Implementation Strategies

In general, gowns and gloves not required outside of resident's room, UNLESS:

- performing transfers or assisting during bathing in a shared/common shower room
- when working with residents in the therapy gym, specifically when anticipating close physical contact while assisting with transfers and mobility.

1. Residents are NOT restricted to their rooms
2. Residents are NOT limited from participation in group activities
3. Residents do NOT require a private room

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EBP Pre-Implementation Tool

Use as a guide for developing a successful plan for the implementation of EBP

[Pre-Implementation Tool—Enhanced Barrier Precautions \(EBP\) \(cdc.gov\)](https://www.cdc.gov/ebp)

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Pre-Implementation Tool—Enhanced Barrier Precautions (EBP) (For use in Skilled Nursing Facilities/Nursing Homes only)

This NEW tool is designed to be used prior to implementation of EBP in your facility (either a unit, wing, or entire facility) as a guide for developing a successful plan for the implementation of EBP during high-contact resident care activities. It is intended for use in skilled nursing facilities/nursing homes.

This tool can be customized to meet facility-specific needs. EBP can be implemented in a manner that works best for your facility. While implementation of EBP for all residents who meet criteria is the goal, this may not initially be feasible for your facility. If, during the development of your implementation plan, challenges arise for facility-wide implementation, you may choose to implement EBP on a unit or wing first, preferably one where most residents would meet criteria for the use of EBP (e.g., residents with indwelling medical devices, wounds, or known MRSA infection or colonization).

HCP can reduce personal protective equipment (PPE) consumption by bundling multiple high-contact resident care activities (e.g., changing sheets, assisting with toileting, bathing/blow-drying and providing hygiene) could be bundled with changing linens.

Facility Name: _____

Date of Assessment: _____

1. Does your facility currently have a developed timeline for implementation of EBP?
 - Yes
 - No
 - Unknown

If yes, when do you expect to begin implementation?

 - In 3–4 weeks
 - In 1–2 months
 - In >2 months
2. If question 1 is answered "Yes", have you developed a policy and procedure document for the use of EBP?
 - Yes
 - No
 - Unknown

If no, what challenges are you having with the development of a policy and procedure document?

 - Staffing shortages
 - Leadership input
 - Other, please specify: _____
3. Does your facility currently have an interdisciplinary team (IDT) that manages facility infection prevention and control practices?
 - Yes
 - No
 - Unknown

If yes, who currently serves on the facility's IDT? (Select all that apply)

 - Medical director
 - Director of Nursing
 - Nurse (RN, LPN, LVN)
 - Environmental services
 - Certified nursing assistant
 - Other, please specify: _____



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EBP Implementation-Observations Tool

This tool is designed to support the conducting of observations of healthcare personnel (HCP) using EPB during high-contact resident care activities as a part of auditing and feedback.

[Enhanced Barrier Precautions \(EBP\) Implementation—Observations Tool \(cdc.gov\)](https://www.cdc.gov/enhanced-barrier-precautions/)

Enhanced Barrier Precautions (EBP) Implementation—Observations Tool
(For use in Skilled Nursing Facilities/Nursing Homes only)

This NEW tool should be used only after you have established the use of Enhanced Barrier Precautions (EBP) in your facility (either in a unit, wing, or entire facility), and can be customized to meet the needs of the skilled nursing facility/nursing home. This tool is designed to support the conducting of observations of healthcare personnel (HCP) using EPB during high-contact resident care activities as a part of auditing and feedback. Responses should refer to current practices.


Facility Name: _____
Date of Assessment: _____


Observations

In general, these observations should be conducted covertly (i.e., HCP are not aware they are being observed), and the observer should collect information on as many EBP practices as feasible across a variety of HCP types and care units (if EBP has been implemented in more than one unit). While the observer should aim to assess as many of the listed elements as possible, only partial observations can be made, such as only observing a HCP don (put on) but not doff (take off) personal protective equipment (PPE). However, this can still provide valuable information on overall EBP practices in a facility.

- Title or role of person conducting observation**
 - Nurse (RN, LPN, LNA)
 - Nurse—Unit manager or above
 - Nurse Practitioner/Physician Assistant (NP/PA)
 - Wound care staff
 - Administrative staff
 - Student (nurse, physician, other)
 - Certified Nursing Assistant/Patient Care Associate/Patient Care Technician (CNA/PCA/PCT)
 - Physician
 - Infection Preventionist
 - Housekeeping/Environmental Services Staff
 - Other, please specify: _____
- Specify, as applicable, where the EBP observation occurred**
 - Unit: _____
 - Room: _____
 - Bed identification (in A, B, L, R, 1, 2) if multiple beds per room: _____
- Criteria for the use of EBP (Select all that apply)**
 - Wound
 - Indwelling medical device—Type:
 - Central line/Peripherally inserted central catheter (PICC)
 - Urinary catheter
 - Feeding tube
 - Tracheostomy tube
 - Ventilator
 - Multidrug resistant organism (MDRO) colonization or MDRO infection
 - Other, please specify: _____
 - Unknown: _____

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Centers for Disease Control and Prevention

 HEALTH QUALITY INNOVATORS

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EBP Environmental Considerations

- Location of PPE (outside of room) and ABHR (inside and outside of room)
- Signage on Door
- Trash can placement (inside room by exit)

[Enhanced barrier precautions final rev3 \(cdc.gov\)](https://www.cdc.gov/enhanced-barrier-precautions/)

STOP ENHANCED BARRIER PRECAUTIONS STOP

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
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 HEALTH QUALITY INNOVATORS

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How Long Should a Resident Remain on EBPs?

EBPs should not be discontinued UNLESS:

1. Wound heals
2. Indwelling medical device is removed

The CDC does NOT recommend routine retesting of residents with a history of colonization or infection with a MDRO

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EBP Care Considerations

- Plan ahead and bundle multiple care activities
- PPE should be well-stocked and easy to access prior to room entry
- Maintain an up-to-date list of residents meeting criteria for precautions/documentation/Careplan

Considerations:

- Re-stocking of PPE
- Number of carts needed
- Concerns about egress
- Clutter in hallways
- Always use carts on wheels
- Best practice: 1 cart per 2-4 rooms

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Staff Education

- Utilize the Letter to Staff to provide initial outreach education
- EBP policy and procedure
- Develop MDRO-EBP care plan
- Incorporate education into general orientation
- May require increased trash pick up

[Help Keep Our Residents Safe - Enhanced Barrier Precautions in Nursing Homes \(cdc.gov\)](#)

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Help Keep Our Residents Safe – Enhanced Barrier Precautions in Nursing Homes

A message from:

Dear Valued Staff:

You will soon see an increase in the circumstances when we are asking you to wear a gown and gloves while caring for residents. This is based on new recommendations from the Centers for Disease Control and Prevention to protect our residents and staff from multidrug-resistant organisms (MDROs) which can cause serious infections and are hard to treat. These new recommendations are called Enhanced Barrier Precautions, or EBP.

WHY are we implementing Enhanced Barrier Precautions at this facility?

Studies have shown that more than 50% of nursing home residents have MDROs on or in their body, especially in wounds or medical devices like urinary catheters. Most of the time people never know they are carrying these germs, but under certain conditions they can cause serious infections.

These germs can be transferred from one resident to another on staff hands, if they aren't cleaned between caring for residents, and on staff clothing during activities involving a lot of physical contact with the resident. A gown and gloves can keep these germs from getting on staff clothing and, in combination with cleaning hands with alcohol-based hand sanitizer, can prevent transfer to other residents.

This approach focuses our efforts on the residents and activities that pose highest risk for spread of MDROs.

WHAT are Enhanced Barrier Precautions?

Enhanced Barrier Precautions require staff to wear a gown and gloves while performing high-contact care activities with all residents who are at higher risk of acquiring or spreading an MDRO.

These include the following residents:

- Residents known to be infected or colonized with an MDRO;
- Residents with an indwelling medical device including central venous catheter, urinary catheter, feeding tube (PEG tube, G-tube), tracheostomy/ventilator regardless of their MDRO status;
- Residents with a wound, regardless of their MDRO status

High-contact resident care activities where a gown and gloves should be used, which are often bundled together as part of morning or evening care, include:

- Bathing/showering,
- Transferring residents from one position to another (for example, from the bed to wheelchair),
- Providing hygiene,
- Changing bed linens,
- Changing briefs or assisting with toileting,
- Caring for or using an indwelling medical device (for example, central venous catheter, urinary catheter, feeding tube care, tracheostomy/ventilator care),
- Performing wound care (for example, any skin opening requiring a dressing)

Unlike the residents who are on Contact Precautions, such as for acute diarrhea, residents on Enhanced Barrier Precautions do not require placement in a private room, they can continue to participate in group activities, and they will remain on Enhanced Barrier Precautions for the duration of their stay in the facility.

Please NOTE: The gown and gloves used for each resident during high-contact resident care activities should be removed and discarded after each resident care encounter. Hand hygiene should be performed and new gown and gloves should be donned before caring for a different resident.



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Staff Education

[Enhanced Barrier Precautions Pocket Card \(hqin.org\)](#)

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CLEAN HANDS

- Before entering the room
- Before donning gloves
- Between tasks as appropriate
- When leaving the room

WEAR GLOVES/GOWN FOR HIGH-CONTACT RESIDENT CARE INCLUDING:

- Dressing
- Bathing/showering
- Transferring
- Providing hygiene
- Changing linens
- Changing briefs or assisting with toileting
- Device care or use: central line, urinary catheter, feeding tube, tracheostomy/ventilator
- Wound care: any skin opening requiring a dressing

ENHANCED BARRIER PRECAUTIONS

This material was prepared by Health Quality Innovators (HQI), a Quality Improvement Network (QIN) Quality Improvement Organization (QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific medical or service herein does not constitute endorsement of that product or entity by CMS or HHS. US20MHCQIN-QIO-0354-11/08/21

ENHANCED BARRIER PRECAUTIONS INCLUDE:

- All indwelling medical devices
- Wound care
- Persons colonized with a multi-drug resistant organism (even when contact precautions do not apply)

ENHANCED BARRIER PRECAUTIONS APPLY TO, BUT ARE NOT LIMITED TO:

- Pan-resistant organisms
- Carbapenemase-producing carbapenem-resistant Enterobacteriaceae, Pseudomonas spp.
- Acinetobacter baumannii
- Candida auris

OTHER IMPORTANT ORGANISMS TO CONSIDER:

- Methicillin-resistant Staphylococcus aureus (MRSA)
- ESBL-producing Enterobacteriaceae
- Vancomycin-resistant Enterococci (VRE)
- Multi-drug resistant Pseudomonas aeruginosa
- Drug-resistant Streptococcus pneumoniae



Frequently Asked Questions (FAQs) about Enhanced Barrier Precautions in Nursing Homes | CDC



ENHANCED BARRIER PRECAUTIONS

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Staff Education

[Enhanced Barrier Precautions \(EBP\) – Pocket Guide \(cdc.gov\)](https://www.cdc.gov/enhanced-barrier-precautions-ebp-pocket-guide)

Learn more at
<https://www.cdc.gov/enhanced-barrier-precautions-ebp-pocket-guide>

Scan to view
 an EBP video

Use of Enhanced Barrier Precautions (EBP)

Use EBP for residents with indwelling medical devices, wounds, or those who are colonized by or infected with a multidrug-resistant organism (MDRO).

Use EBP when:

- Dressing or bathing
- Transferring
- Changing linens
- Assisting with toileting
- Accessing indwelling medical devices
- Providing wound care
- Other high-contact resident care activities

Key Steps:

Before entering a resident's room with an EBP sign:

1. Gather all needed supplies & materials
2. Clean hands
3. Correctly put on a gown and gloves
4. After care, throw away gown and gloves
5. Clean hands again

Finish all steps before moving on to another resident.

To assemble pocket guide:

1. Print landscape on 8.5x11 paper.
2. Cut along the dashed line.
3. Fold in half vertically (top to bottom).
4. Fold in half horizontally (left to right).

Education-Residents, Families, Friends, and Volunteers

[Keeping Residents Safe – Use of Enhanced Barrier Precautions \(cdc.gov\)](https://www.cdc.gov/keeping-residents-safe-use-of-enhanced-barrier-precautions)

Keeping Residents Safe – Use of Enhanced Barrier Precautions

A message from: [Redacted]

Dear Residents, Families, Friends, and Volunteers:

You may have noticed new signs on some doors that say "Enhanced Barrier Precautions" and staff wearing gowns and gloves more often. We're doing this based on new recommendations from the Centers for Disease Control and Prevention to protect our residents and staff from germs that can cause serious infections and are hard to treat. You may have heard these germs called multidrug-resistant organisms or MDROs in the news.

Studies have shown that more than 50% of nursing home residents have these germs on or in their body, especially in places where the skin is broken, such as wounds or insertion sites of medical devices like feeding tubes. Most of the time people never know they are carrying these germs but under certain conditions they can enter the body and cause serious infections.

Fortunately, there are many things we can do to keep these germs from spreading, but we need your help! Two important practices are:

1. **Cleaning our hands.** Alcohol-based hand sanitizer can kill these germs and keep us from spreading them with our hands. This is why we remind you and your visitors to frequently clean your hands.
2. **Using gowns and gloves.** Since we can't wash our clothes between caring for residents, gowns and gloves help keep these germs from getting on our clothes and spreading to others when we are having close contact with residents. This is why you might see us wearing a gown and gloves when we are performing transfers or other activities involving a lot of contact with a resident. Just because we are wearing a gown and gloves doesn't mean that a resident is carrying one of these germs. We also wear them to protect residents who might be more vulnerable to developing a serious infection if exposed to these germs. We will also wear them if we expect a care activity to be messy, like if we are changing a dressing on a wound.

To support these practices, you will see more alcohol-based hand sanitizer dispensers, carts to hold clean gowns and gloves, and trash cans so we can change gowns and gloves between residents. You will also see more signs to help remind staff when they should be wearing gowns and gloves.

We are always happy to answer any questions you might have about actions we are taking to protect our residents and staff and appreciate your support!

Please contact us with additional questions at: [Redacted]

Sincerely,
 [Redacted]

To learn more about Enhanced Barrier Precautions, please visit **Implementation of Personal Protective Equipment (PPE) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms (MDROs)** at <https://www.cdc.gov/healthcareinfectionprevention/PPE-Nursing-Homes.html>



CDC EBP Educational Posters

Multidrug-resistant organisms (MDROs) are a threat to our residents.

Enhanced Barrier Precautions (EBP) Steps

Perform Hand Hygiene Wear Gown Wear Gloves Dispose of Gown & Gloves in Room

Use EBP during high-contact care activities for residents with:

- 1 Indwelling Medical Devices (e.g., central line, urinary catheter, feeding tube, tracheostomy/ventilator)
- 2 Wounds
- 3 Colonization or infection with a MDRO

Protect residents and stop the spread of germs.

bit.ly/PPE-LTCFs

Scan to watch an EBP video.

[Download](#)

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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.

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

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

[Download](#)



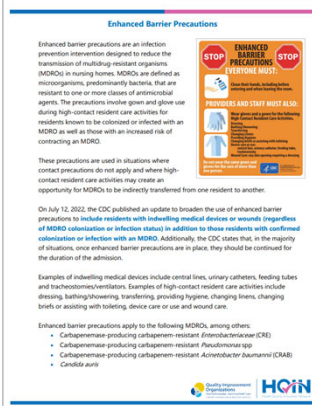
Enhanced Barrier Precautions

In Nursing Homes



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Resources



Enhanced Barrier Precautions

Enhanced barrier precautions are an infection prevention intervention designed to reduce the transmission of multidrug-resistant organisms (MDROs) in nursing homes. MDROs are defined as microorganisms, predominantly bacteria, that are resistant to one or more classes of antimicrobial agents. The precautions involve gown and glove use during high-contact resident care activities for residents known to be colonized or infected with an MDRO as well as those with an increased risk of contracting an MDRO.


These precautions are used in situations where contact precautions do not apply and where high-contact resident care activities may create an opportunity for MDROs to be indirectly transferred from one resident to another.

On July 12, 2022, the CDC published an update to broaden the use of enhanced barrier precautions to include residents with indwelling medical devices or wounds (regardless of MDRO colonization or infection status) in addition to those residents with confirmed colonization or infection with an MDRO. Additionally, the CDC states that, in the majority of situations, once enhanced barrier precautions are in place, they should be continued for the duration of the admission.

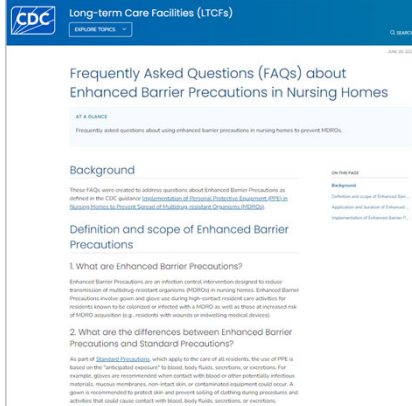
Examples of indwelling medical devices include central lines, urinary catheters, feeding tubes and tracheostomy ventilators. Examples of high-contact resident care activities include dressing, bathing/showering, transferring, providing hygiene, changing linens, changing briefs or assisting with toileting, device care or use and wound care.

Enhanced barrier precautions apply to the following MDROs, among others:

- Carbapenemase-producing carbapenem-resistant *Klebsiella pneumoniae* (CRK)
- Carbapenemase-producing carbapenem-resistant *Pseudomonas* spp
- Carbapenemase-producing carbapenem-resistant *Acinetobacter baumannii* (CRAB)
- *Candida auris*

Quality Improvement


[Enhanced Barrier Precautions Flyer](#)



Long-term Care Facilities (LTCFs)

Frequently Asked Questions (FAQs) about Enhanced Barrier Precautions in Nursing Homes

BY A GLANCE

Frequently asked questions about using enhanced barrier precautions in nursing homes to prevent MDROs.

Background

These FAQs were created to address questions about Enhanced Barrier Precautions as defined in the CDC guidance [Implementation of Enhanced Barrier Precautions \(EBP\)](#) (Basic Principles, Direct Model of Infection Control Practices, MDROs).

Definition and scope of Enhanced Barrier Precautions

1. What are Enhanced Barrier Precautions?

Enhanced Barrier Precautions are an infection control intervention designed to reduce transmission of multidrug-resistant organisms (MDROs) in nursing homes. Enhanced Barrier Precautions involve gown and glove use during high-contact resident care activities for residents known to be colonized or infected with an MDRO as well as those at increased risk of MDRO acquisition (e.g., residents with wounds or indwelling medical devices).

2. What are the differences between Enhanced Barrier Precautions and Standard Precautions?

As part of [Standard Precautions](#), which apply to the care of all residents, the use of PPE is based on the "anticipated exposure" to blood, body fluids, secretions, or excretions. For example, gloves are recommended when contact with blood or other potentially infectious materials, mucous membranes, non-intact skin, or contaminated equipment could occur. A gown is recommended to protect skin and prevent soiling of clothing during procedures and activities that could cause contact with blood, body fluids, secretions, or excretions.

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Background

Definition and scope of Enhanced Barrier Precautions and Standard Precautions

[CDC's Frequently Asked Questions \(FAQs\) about Enhanced Barrier Precautions in Nursing Homes](#)



[Donning & Doffing Training Video](#)





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Contact Information

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