ENHANCED BARRIER PRECAUTIONS (EBP)

Purpose: Enhanced Barrier Precautions are an infection control intervention designed to reduce the transmission/spread of multidrug-resistant organisms. The precautions are used in conjunction with standard precautions and expand the use of PPE, with the donning of a gown and gloves during high contact resident care activities.

Indications for enhanced barrier precautions
EBP are indicated for residents with any of the following:

- Infection or Colonization with a CDC-targeted MDRO when Contact Precautions are not otherwise ordered/indicated

CDC Targeted MDROs include:

- Pan-resistant organisms
- CRE Carbapenum-resistant Enterobacterales
- CRPA Carbapenum-resistant Pseudomonus Aeruginosa
- CRAB Carbapenum-resistant Acinetobacter Baumannii
- Candida Auris

OR

Indwelling medical devices and/or wounds even if the resident is not known to be infected or colonized with a targeted MDRO.

Indwelling medical Devices include: Central line IV accesses, urinary catheters, feeding tubes, tracheostomies

Wounds: Chronic wounds such as pressure ulcers, diabetic foot ulcers, Venous statis ulcers, arterial ulcers, unhealed surgical wounds

The EBP are intended to be in place for the duration of the residents stay at the facility or until resolution of the wound/discontinuation of the indwelling medical device.

Note: Facilities have the discretion through review by the Infection Control and Prevention committee in using EBP for residents that do not have a chronic wound or indwelling medical device and are currently infected or colonized with a MDRO that is not currently targeted by CDC. (the facility will continue to follow policies for isolation for an active infection with any MDRO).

High Contact Care Activities for which EBP are indicated include:
Dressing, Bathing/Showering, transferring in the resident room or bathroom with care, Hygiene, Linens changes, Incontinence care, changing briefs

Device care/use: Central line IV administration/site care, Urinary catheter care, tube feeding, Trach care (includes care of a dialysis access device)

Wounds care/treatments

3/2024 NP/IC
(Reviewed 11/2024)

Communication of the need for EBP:
Communication to staff for the use of EBP is through EBP signage developed by the CDC

Note: Residents in need of EBP per policy/CDC guidelines are not restricted to their rooms or limited from participation in group activities

Note: PPE for EBP is only necessary when performing high-contact care activities. PPE would not need to be donned if entering the resident's room to talk with the resident, answer a call light or provide medications if the staff do not engage in high-contact resident care. Disposal of PPE used for care using EBP will be disposed of in the regular trash/waste disposal in the resident room unless the PPE is contaminated with Blood or Body Fluids that would be disposed of under the BBP policy.