



Work change

VCH has a new approach to patient isolation for VRE

VCH has a new risk-managed approach for the identification and isolation of VRE patients. A risk-managed approach will result in improved patient care, bed flow, direction of isolation efforts to those that are at highest risk of transmitting or acquiring infections, and ability to return time to nursing care.

How will this affect my work?

- A risk managed approach means that routine screening of patients for VRE on admission will stop.
- Patients with pre-existing flags for VRE will have their flags removed from the system.
- Patients who are at higher risk for development of infections (our bone marrow and solid organ transplant and our burn and ICU patients) will be screened upon admission to those units. These units will continue to isolate VRE patients on Contact Precautions as well as their usual weekly point prevalence screening.
- All other patients will be managed based upon their risk of having a transmissible infection.

Examples

Example 1: if a patient has diarrhea thought to be infectious, staff will use Contact (GI) Precautions

Example 2: patients who present with cough, fever and/or rash thought to be infectious would be managed as per the Respiratory Algorithm.

If you have any questions about the changes, please contact your local Infection Control Practitioner.