Southern Nevada Health District HAI Program

Healthcare-Associated Infections (HAI) Program Newsletter

Clark County | 2026 Second Quarter Edition

Over the past six months, the Southern Nevada Health District (SNHD) Healthcare-Associated Infections (HAI) Program has strengthened infection prevention and control efforts across healthcare settings in Clark County. Program activities focused on partnering with healthcare facilities to improve patient safety through assessments, education, consultation and outbreak response.

The HAI Program conducted 36 Infection Control Assessment and Response (ICAR) visits to evaluate infection prevention practices, identify opportunities for improvement and provide tailored recommendations to participating facilities. In addition, the program responded to healthcare-associated infection outbreaks and unusual occurrences by providing timely infection prevention recommendations, epidemiologic support and technical assistance.

Education remained a key priority. HAI team members delivered two infection prevention and Environmental Services (EVS) training sessions and provided educational resources to healthcare partners, helping facilities stay informed on current best practices and emerging infection prevention challenges.

The HAI Program also continued to build relationships with healthcare facilities throughout Southern Nevada by conducting 33 introductory and engagement visits to strengthen awareness of the SNHD HAI program's services and ensure facilities know SNHD is available for support.

These efforts were conducted in collaboration with infection preventionists, public health partners and regulatory agencies to promote preparedness and strengthen infection prevention capacity across the region.

We appreciate the continued partnership and commitment of our healthcare community in advancing safe, high-quality patient care.

Healthcare Facility Spotlight (Cheers for Peers)

UMC

University Medical Center (UMC) recently invested in its infection prevention and control program by implementing an automated hand-hygiene auditing system called SwipeSense.

SwipeSense tracks and records when healthcare workers perform hand hygiene by using alcohol-based hand rub (ABHR) or soap and water. The system uses vibration patterns to identify whether an employee has performed hand hygiene upon entry to and/or exit from a patient's room.

This automated system allows for greater accountability for hand hygiene opportunities, both missed and completed. Cheers to UMC!

Royal Springs Healthcare and Rehabilitation

Royal Springs Healthcare and Rehabilitation recently began screening all patients for carbapenemase-producing organisms (CPOs) upon admission to the facility.

This practice has allowed the facility to quickly identify patients with CPO, immediately implement the necessary transmission-based precautions (TBP), and cohort patients appropriately.

This innovative strategy will help the facility and its infection prevention team reduce potential transmission of CPOs. Cheers to Royal Springs Healthcare and Rehabilitation!

EVS Corner

A Time to Kill: Chemical Contact Time

Gap: One of the common infection prevention challenges we have identified during EVS (Environmental Services) observations is failing to allow disinfectants to remain wet on surfaces for the required contact time, also referred to as the dwell time or kill time, according tothe manufacturer's instructions.

Impact: Disinfectants are only effective at killing the pathogen of concern if they are touching the surface for the time listed on the manufacturer's label. If they air-dry or are wiped off before the full contact time, pathogens can be left behind on surfaces, increasing the risk of disease transmission.

Quick Tips for Success

- Choose disinfectants with contact times that fit your workflow. Contact times vary widely and can be as long as 10 minutes.
- Check the contact times for all disinfectants in use.
- Observe how long surfaces stay wet when following your EVS procedures.
- Update EVS procedures as needed to align with required contact times.
- Train staff to ensure surfaces remain visibly wet for the full contact time. This may mean reapplying disinfectant, using more saturated wiping cloths or waiting longer after spraying before wiping surfaces.
- Perform routine audits that include observing contact time and providing timely feedback.
- Use visual reminders.

Consistently following manufacturer instructions is a simple but effective way to protect patients, residents, visitors and fellow healthcare personnel.

Schedule EVS Training at Your Facility

Did you know? SNHD offers free EVS training to help you meet your EVS goals. This on-site, interactive training consists of four one-hour sessions available in English and Spanish.

A special shout out to College Park Rehabilitation Center and Canyon Vista Post Acute for already partnering with SNHD to undergo this training!

To learn more or schedule training for your facility, contact us at hai@snhd.org.

Research Spotlight

CDC Study Finds Basic Infection Control Practices Save Newborns in Bangladesh from Antimicrobial-resistant Infections

A recent CDC study published in Antimicrobial Resistance & Infection Control demonstrated that strengthening basic infection prevention and control (IPC) practices in a neonatal intensive care unit (NICU) in Bangladesh resulted in an **86% reduction in antimicrobial-resistant infections** and an **85% reduction in deaths** among newborns. Read the full study to learn more.

The intervention focused on practical, low-cost strategies, including:

- Hand hygiene education and auditing
- Environmental cleaning improvements
- Staff training and job aids
- Ongoing monitoring of infection prevention practices

Why it matters

This study reinforces a key principle of infection prevention: consistent implementation of fundamental IPC practices can have a profound impact on patient safety, even in settings with limited resources. Regular hand hygiene, environmental cleaning, staff education and adherence to evidence-based infection prevention measures remain the foundation of preventing healthcare-associated infections and limiting the spread of antimicrobial-resistant organisms.

Upcoming Events

APIC Chapter 35 Monster Mash Educational Meeting

Friday, October 23, 2026
8:00 a.m.-4:00 p.m. (Doors open at 7:30am)

Rawson-Neal Hospital Conference Center
ADSD Training Building
1391 S. Jones Blvd. Las Vegas, NV 89146

Cost is $25 for APIC members,
and $50 for non-APIC members.

Day of Event Payments: Cost increases to $30 for APIC members / $55 non-APIC members.

Registration and Payment
Please register here: **APIC Southern Nevada 3rd Annual Microbe Monster Mash – Fill out form**

To pay the registration fee, participants can put in phone number 505-382-6011 on their Zelle app if they have it or through their banking app if available.
If they do not have Zelle, they can enroll in the service using the QR code.

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Resource Library

Please visit the HAI Resource Library at
snhd.info/healthcare-associated-infections-program/resource-library/

We Want Your Feedback

Facility Feedback Survey

SNHD has developed a brief HAI program survey to better understand the needs and priorities of healthcare facilities in Southern Nevada. Feedback from facilities will help guide program activities, resources and future support efforts.

Take the survey: https://survey.alchemer.com/s3/8963860/HAI-Facility-Feedback

We encourage infection prevention staff and facility leadership to participate.

Have a question about infection prevention? Interested in a future training topic? Is there a subject you'd like to see covered in a future newsletter?

We'd love to hear from you. Contact the SNHD HAI Program at HAI@snhd.org.