

INFECTION PREVENTION AND CONTROL AUDIT: CONTACT PRECAUTIONS (CP) - MONITORING TOOL IN LONG TERM CARE

This Audit tool is for the use of staff to audit the practice of infection control procedures in Long Term Care, to reduce risk of Healthcare Associated Infection transmission, thereby ensuring residents are cared for in a safe environment.

Facility:	Unit Bed Space/ Number:	Date (dd/mm/yyyy):
Start time:	End time:	Auditor (Print):

Healthcare Worker Category (Circle #):			
1 = Physician	6 = IV Team/Lab	11 = Radiology / DI Technician	16 = Pharmacy
2 = Nurse	7 = Physiotherapy	12 = Respiratory Therapy	17 = Volunteer
3 = Healthcare Aide	8 = Occupational Therapy	13 = Dietary	18 = Other
4 = Social Worker	9 = Environmental Services	14 = Speech Language / Audiology	
5 = Spiritual Care	10 = Patient Transport	15 = Rec Therapy	

Instructions: Select **"Yes"** if activity was observed and completed appropriately.
 Select **"No"** if activity was observed and not completed appropriately; please also comment.
 Select **"N/S"** if you were not able to observe the activity.
 Select **"N/A"** if not applicable and add comment. If more space required for comments, please use back of Tool or new paper.

Set Up		COMPLIANCE				COMMENTS
		YES	NO	N/S	N/A	
1.	Precautions signage visible before entering room or bedspace					
2.	Precautions signage adheres to PHIA requirements (i.e., does not breach confidentiality by specifying a specific disease/resident name)					
3.	Are PPE supplies located on an isolation cart immediately outside room/bedspace? If no, are they made available (indicate in comment)?					
4.	Available PPE supplies are in a variety of sizes					
Donning PPE						
5.	Alcohol based Hand Rub (ABHR) or hand hygiene (HH) sink with soap is located immediately outside the room/bedspace					
6.	HH performed immediately prior to putting on PPE					
7.	New single use PPE applied prior to entering room/bedspace					
8.	When applied, PPE is donned in appropriate sequence					
9.	Gown worn/not worn as indicated by CP					
10.	Gown(s) is/are worn appropriately (e.g., tied neck and waist)?					
11.	Gloves worn as indicated by CP					
Use of PPE						
12.	PPE is only worn inside the isolation room/bedspace					
Doffing PPE						
13.	PPE is doffed within the isolation room/bedspace					
14.	PPE is doffed in a manner to prevent contamination					
15.	PPE removed in appropriate sequence: <ul style="list-style-type: none"> a. Gloves removed b. Hand hygiene performed c. Gown (if worn) removed d. HH performed immediately after removal of PPE 					
16.	PPE is disposed of appropriately within isolation space <ul style="list-style-type: none"> a. Gown in soiled laundry bin/garbage (if disposable) b. Gloves in garbage bin 					

Contact Precautions Monitoring Tool Instructions

The purpose of this Audit tool is to determine health care worker (HCW) compliance with PPE and Contact Precautions in Long Term Care.

Contact Precautions includes hand hygiene plus the use of PPE as per the Manitoba Health, Routine Practices and Additional Precautions guidelines. Observers must first review Contact Precautions as well as review correct PPE donning and doffing procedures prior to beginning auditing for the first time. The observer records the occasions they observe where a staff member dons/doffs PPE:

1. Write the name of observed Unit/Department on the form, record the day, month and year, and write your name on the line indicated.
2. Refer to the key on the tool for HCW type and other abbreviations used on the monitoring form.
3. For each item, the observer records the following:
 - Date – Include month, day, and year
 - Health Care Worker (HCW) type – use number that corresponds with the title of the person you are observing

***NOTE:** Please refer to the Contact Precautions Protocol in your site for clarification re: use of PPE by HCW.

Contact Precautions information available here:

<https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>

Gloves

- Wear gloves to enter the room, cubicle or the resident's designated bed space within a shared room
- Remove gloves and perform hand hygiene on exit from the room, cubicle or resident bed space
- Change gloves between care activities and procedures with the same resident, e.g., after handling an indwelling urinary catheter, or suctioning an endotracheal tube. This prevents contamination of clean body sites or the resident's environment
- Perform hand hygiene after glove removal

Gowns

- Wear a long-sleeved gown if it is anticipated clothing or forearms will be in direct contact with the resident or with environmental surfaces or objects in the resident care environment. If a gown is to be worn, put it on before entry into the room, cubicle or resident's designated bedspace in shared rooms
- If a healthcare worker enters a Contact Precautions room without a gown and is then required to perform an activity requiring a gown, he/she must remove and discard gloves, clean hands, put on a new, clean gown, and apply fresh gloves before returning to provide care
- Don gown immediately prior to entering the isolation room/bedspace
- Remove gown before leaving the resident's environment; place it into a hands-free receptacle in the resident room/cubicle/bedspace
- Perform hand hygiene after gown removal
- Do not wear the same gown for more than one resident
- Do not wear the same gown on repeated occasions (i.e., don't remove then reapply the same gown)
- Remove and replace the gown if it becomes wet or visibly contaminated

***NOTE:** Individuals may wear cultural or faith-related head coverings in a Contact Precautions room. Cultural or faith-related head coverings shall be considered equivalent to/treated as the individual's hair.

Additional Comments:
