

## Infection Prevention and Control Audit: Routine Practices in Long Term Care

To be completed by the unit/area Clinical Resource Nurse, Charge Nurse, Care Manager, or other appropriate delegate, with site Infection Control Associate

This audit tool is intended to assist with unit level self-assessment for quality improvement purposes.

- ✓ Point of Care Risk Assessment (PCRA)
- ✓ Hand Hygiene (including point of care ABHR)
- ✓ Source Control (triage, early diagnosis and treatment, respiratory hygiene, spatial separation).
- ✓ Resident Accommodation, Placement and Flow
- ✓ Aseptic Technique
- ✓ Use of Personal Protective Equipment
- ✓ Sharps Safety and Prevention of Exposure to Bloodborne Pathogens
- ✓ Cleaning and Disinfection of Non-Critical Resident Care Environment
- ✓ Environmental Cleaning
- ✓ Handling of Deceased Bodies
- ✓ Handling of Linen, Waste, Dishes and Cutlery
- ✓ Education of Residents, Families and Visitors
- ✓ Visitor Management

Manitoba Health, Routine Practices resource: <https://www.gov.mb.ca/health/publichealth/cdc/docs/ipc/rpap.pdf>

## Infection Prevention and Control Audit: Routine Practices in Long Term Care

<b>Site:</b>	<b>Unit:</b>	<b>Audit Date (dd/mm/yyyy):</b>
<b>Audit Completed by:</b>	<b>Report Date (dd/mm/yyyy):</b>	<b>Report Completed by:</b>

Recommendation:	Met	Partial Met	Not Met	N/A	Comment	Scoring
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Routine Practices						
<b>Point of Care Risk Assessment (PCRA):</b>						
Personal protective equipment (PPE) is chosen based on risk assessment. Observations to consider: observe 4 staff-resident interactions. What PPE is used based on a risk assessment? 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
<b>Hand Hygiene:</b>						
Hand hygiene audit rates posted on unit						
Training and education on Routine Practices and Additional Precautions (including hand hygiene [HH], personal protective equipment [PPE], point of care risk assessment [PCRA]) Ask 4 staff members if they have had training in the last 12 months on HH, PPE & PCRA. 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
<b>Source Control:</b>						
Triage: signs posted to direct residents with symptoms of acute infection (e.g., cough, fever, vomiting, diarrhea, coryza, rash or conjunctivitis) to specific areas						
Triage: wipeable, non-porous physical barrier is located between infectious sources (i.e., residents with symptoms of a respiratory infection) and others						
Respiratory hygiene; Cover your Cough posters on unit						
Are residents on appropriate precautions? Observation to consider: ask 4 staff what precautions a resident is on and why those precautions? 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						

Recommendation:	Met	Partial Met	Not Met	N/A	Comment	Scoring
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<b>Resident Accommodation, Placement and Flow:</b>						
Resident accommodation determined based on risk assessment. <b>Measure:</b> Review of 4 cohorted residents in multiple bedroom(s) for appropriate placement according to Routine Practices. 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Clear, documented protocol for determining options for resident placement and room sharing based on a risk assessment if single rooms are limited						
<b>Aseptic Technique:</b>						
IV bags are hung and primed as close to time of use as possible; staff confirm what usual practice is						
Multi-dose vials labeled with date of first opening						
Single-resident use glucometer finger stick capillary blood sampling devices						
<b>Use of Personal Protective Equipment:</b>						
Gloves are not worn for health care activities where contact is limited to intact skin Observations to consider: 4 glove use observations 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Gloves are removed immediately after task completions, before touching cleaning surfaces and before leaving the room Observations to consider: 4 glove use observations 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Disposable gloves are not reused or washed Observations to consider: 4 glove use observations 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Gowns are worn during care activities where splashes/sprays of blood, body fluids, secretions, or excretions are anticipated Observations to consider: approach 4 staff members and ask why they are wearing a gown 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						

Recommendation:	Met	Partial Met	Not Met	N/A	Comment	Scoring
<p>Mask and eye protection are worn during care activities where splashes/sprays of blood, body fluids, secretions, or excretions are anticipated            Observations to consider: approach 4 staff members and ask to indicate indications for mask and eye protection use</p> <p>4 = compliant      2-3 = partial compliant      1-0 = non-compliant</p>						
<b>Sharps Safety and Prevention of Exposure to Bloodborne Pathogens:</b>						
Only safety engineered sharp devices are available for use						
<b>Cleaning and Disinfection of Non-Critical Resident Care Environment:</b>						
Non-critical equipment is cleaned and disinfected						
Equipment cleaning audit completed within the last 12 months						
Equipment is dedicated to residents on Additional Precautions. If not possible, it is cleaned and disinfected after resident use. Staff to confirm current practice						
<b>Environmental Cleaning:</b>						
Environmental cleaning audits completed on unit by Housekeeping/Environmental Services staff, and results posted for staff awareness						
<b>Handling of Deceased Bodies:</b>						
There are written policies and procedures for action to be taken on the death of a resident that include procedures for residents with transmissible agents and include legislated requirements for handling the deceased						
There is policy and procedure in place that is readily available to staff regarding blood and body fluid exposure						
There is a policy and procedure for cleaning blood and body fluid spills						
PPE is worn based on the risk assessment and according to precautions that were in place prior to death						

Recommendation:	Met	Partial	Not Met	N/A	Comment	Scoring
<b>Handling of Linen, Waste, Dishes and Cutlery:</b>						
Soiled linen placed in an appropriate receptacle at the point-of-use Measure: 4 observation of handling soiled linen 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Perform hand hygiene after handling soiled line Measure: 4 observations of handling soiled linen 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
Biomedical waste container on unit						
Dirty dishes are placed in an area that prevents exposure of environment/resident						
Staff are not eating or drinking or leaving open food or drinks in resident care areas, including common areas such as the nursing desk.						
<b>Education of Residents, Families and Visitors:</b>						
PPE education available for visitors for visiting/providing care to a resident on Additional Precautions. Observations to consider: ask resident and/or family and visitors of a resident on Additional Precautions if they have received information on PPE						
<b>Visitor Management</b>						
Instructional resources available for visitors before they visit a resident, to encourage compliance with established practices. Observations to consider: ask 4 staff to locate visitor handouts; Cover your Cough posters, Hand Hygiene posters, respiratory hygiene posters displayed, Outbreak Measures posters (as applicable) 4 = compliant      2-3 = partial compliant      1-0 = non-compliant						
<b>Totals:</b>						

**Final Scoring:** 0 = Non-Compliant      1 = Partial compliant      2 = Compliant

**Total Score:** \_\_\_\_\_

**Percentage:** \_\_\_\_\_