Routine Practices
and Additional Precautions

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Objectives

• Explain Routine Practices

• Describe what risk assessment is

• Identify practices that prevent the spread of infection

• Identify microorganisms that require additional precautions
What are Routine Practices?

- Routine practices refers to infection control measures used to reduce the risk of exposure to infectious germs.
- Based on the principle that anyone can carry a communicable disease without you knowing it.
- Routine practices assumes that all body fluids, excretions and secretions that are not your own are potentially infectious.
What Does Routine Practices Include?

- Risk assessment is a 2 step process: What am I walking into? : How can I protect myself?
- Hand hygiene
- Personal protective equipment
- Environmental controls
- Administrative controls
Risk Assessment

• Prior to each interaction with the resident/client/patient you must perform a risk assessment.

• What does that mean?
Risk Assessment

• Evaluate the likelihood of exposure (asking a series of questions)
  • Is there a risk of splash/spray?
  • Will I be exposed to blood or body fluids?
  • Will I come into contact with non intact skin?
  • Do I need protection because of the patients symptoms? (coughing, vomiting, diarrhea)

If yes, choose appropriate infection prevention and control actions to minimize exposure
Risk Assessment

• Will I get dirty?
• Will I get wet?
• Will I get sprayed?
• Will I breathe something in?
• Will I be injured?
Risk Assessment

Consider

• The client’s infection status (ARO)
• The characteristics of the client (continent or incontinent)
• The type of care you are providing (will I be exposed?)
• Resources available
• Your immune status (immunization up to date)
Risk Assessment

- Fever
- Cough
- Rash
- Skin & soft tissue infections
- Vomiting
- Diarrhea
- Antibiotic Resistant Organisms
Summary Of Risk Assessment

Perform a risk assessment before entering each client/patient/residents room

STOP

THINK

PROTECT YOURSELF
Personal Protective Equipment (PPE)

• PPE includes gloves, gowns, facial protection, eye wear
• Choose the proper PPE to protect yourself
• Wear your PPE properly to protect you from harmful substances
• Know how to put on and remove your PPE safely
• Put on just prior to entering the room and removed immediately prior to leaving the room
**Donning**

1. Perform Hand Hygiene
2. Put on Gown
3. Put on Mask or N95 Respirator
4. Put on Eye Protection
5. Put on Gloves

**Doffing**

1. Remove Gloves
2. Remove Gown
3. Perform Hand Hygiene
4. Remove Eye Protection
5. Remove Mask or N95 Respirator
6. Perform Hand Hygiene
Gloves

- Should be used when hands will be in contact with:
  - Mucous membranes
  - Non intact skin
  - Body fluids, secretions, excretions
  - Equipment or surfaces that maybe contaminated

- Not be a substitute for hand hygiene

- Clean hands before and after glove removal
Gowns

• Should be worn when it is anticipated that the procedure or care activity will generate splashes or sprays of blood, body fluids secretions or excretions

• Ensure that the fit is correct.

• Wear gown properly

• Put on before task

• Remove after task
Masks/Respirators

• When slashes or sprays of blood, body fluids, secretions or excretions maybe generated

• When within a 2 metres of a coughing patient or resident

• Masks are used in addition to eye protection
Eye Protection

• When slashes or sprays of blood, body fluids, secretions or excretions may be generated
• When within 2 metres of a coughing patient, client or resident
• Eye protection is used in addition to a mask
• Eye glasses are not considered protective
Hand Hygiene

- Compliance remains low
- Need a multifaceted, multidisciplinary facility-wide program
- Management support is needed to be effective
Factors Affecting Hand Hygiene

- How well it is done
- When it is done
- Nails, nail polish, artificial nails or nail enhancements, rings
Hand Hygiene

1. Before initial resident/resident environment contact
2. Before aseptic procedures
3. After body fluid exposure risk
4. After resident/resident environment contact
Environmental Controls

• Accommodation & Placement
• Cleaning of Equipment
• Cleaning of the Environment
• Engineering Controls
• Point of Care Hand Hygiene
Accommodation and Placement

- Maintain a 2 metre spatial separation between a coughing person and others in the room
- Draw a privacy curtain or move the symptomatic person out of the common area
Cleaning Equipment

- Equipment can harbour germs
- Should be cleaned and disinfected between uses
- Dedicated
Cleaning of the Environment

- Maintaining a clean environment is essential in stopping the spread of germs
- Environment cleaned on a routine and consistent basis
- Daily and terminal cleaning is imperative
- Audits
Engineering Controls

• Well maintained heating, ventilation and air conditioning systems are essential to Routine Practices
Administrative Controls

• Policies and procedures (stay home if ill)
• Immunization program
• Respiratory etiquette for staff and clients
• Staff education/training
• Monitoring of Compliance
• Sufficient, easily accessible and appropriate PPE
Additional Precautions

Used in addition to routine practice when a patient:

- Has uncontained body fluids and is contaminating the environment
- Is identified as a carrier or infected with a multi-drug resistant organism
- Is suspected or diagnosed as having an infection that is contagious to others
Contact Precautions:

- Gloves (and sometimes a gown) when providing direct care
- Good hand hygiene
- Don PPE immediately before entering/remove prior to exit

Direct Contact

Indirect Contact
Droplet Precautions

• Expelled during coughing, sneezing or during procedures such as suctioning

• Propelled a short distance (<2m)
Airborne Precautions

- Used for microorganisms small enough to remain suspended in air for long periods of time and are dispersed by air currents.
- Long enough to be inhaled by susceptible host (>2m).
- Control of airborne transmission requires control of air flow through special ventilation systems and the use of a respirator (N95 mask).
Who has an ARO?
Be Safe