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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

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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

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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

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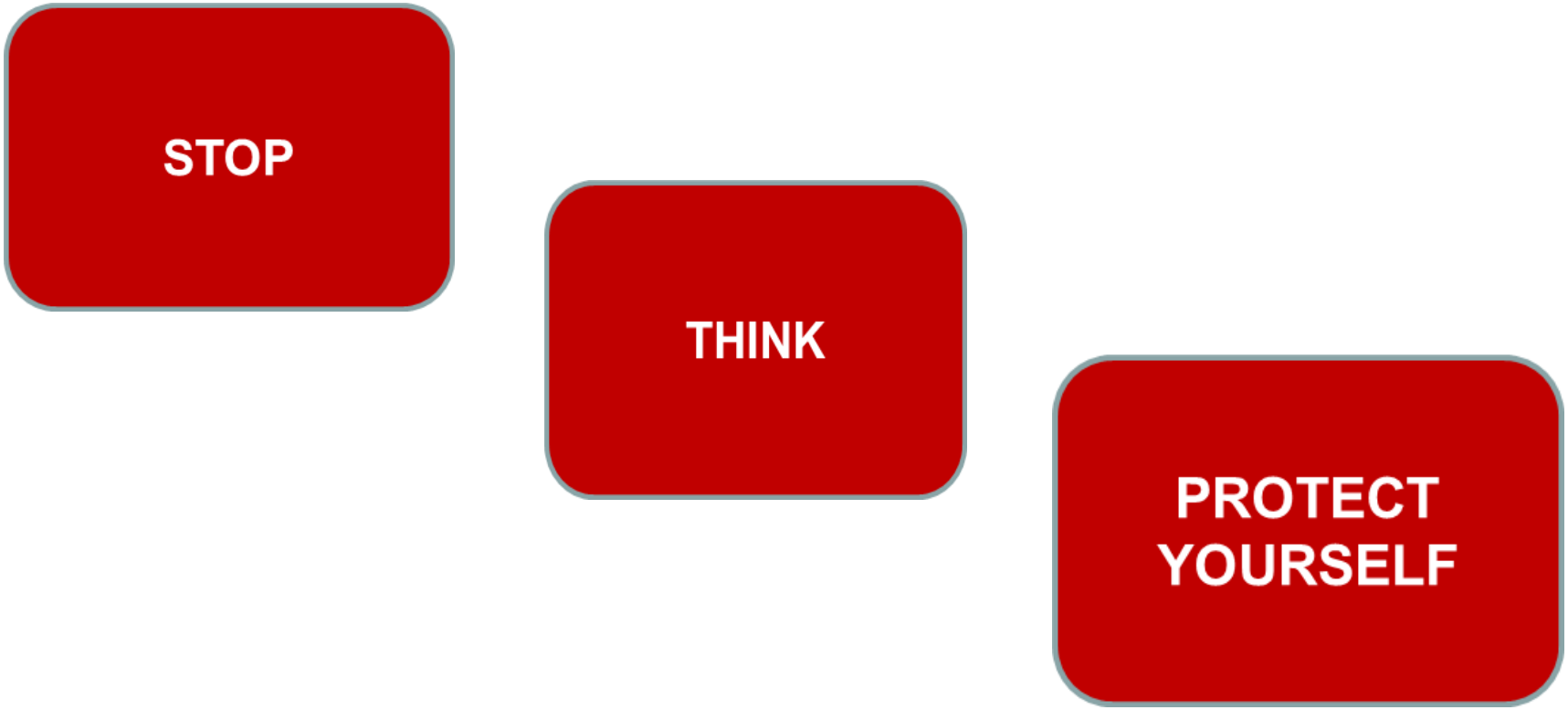
Summary Of Risk Assessment

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



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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

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PPE

Donning

Doffing

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

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Hand Hygiene

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

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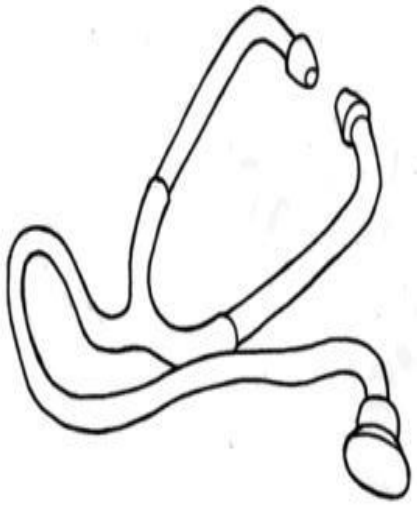
Cleaning Equipment

- 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

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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

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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)

<2 metres

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)

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Who has an ARO?

Public Health Ontario, 2013

Be Safe