

# Routine Practices



# Objectives

By the end of this presentation you will be able to:



- Define Routine Practices and explain why we follow them
- Assess the risk of exposure to blood, body fluids and non-intact skin and identify strategies to decrease risk of transmission
- Identify types and indications for use of personal protective equipment (PPE) and practice how to safely don and doff PPE
- State the relationship between hand hygiene and the prevention of healthcare-associated infections
- Describe the role of the environment and patient equipment in transmission of microorganisms/infection
- Recognize and explain when Additional Precautions are required

# What are Routine Practices

- Routine practices are steps that you can take to protect yourself from becoming exposed and infected by communicable diseases
- By protecting yourself, you also protect others from diseases that can be spread from person to person
- Based on the principle that anybody can carry a communicable disease without you knowing it
- We don't know which person may be potentially infectious so routinely treat all patients as if they are infectious even when asymptomatic



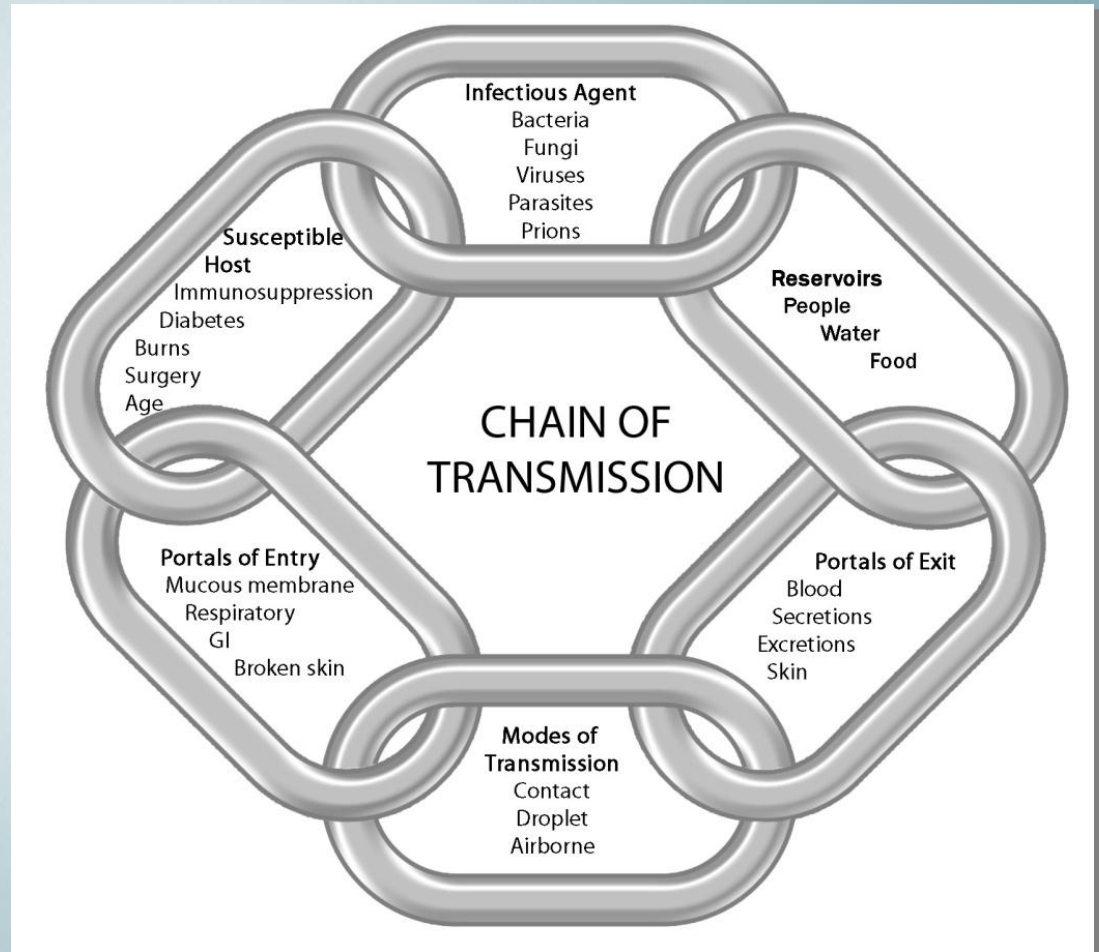
# Elements of Routine Practices

- Point of Care Risk Assessment (PCRA)
- Hand Hygiene
- Control of the Environment (Patient Placement, Cleaning, Engineering Controls)
- Personal Protective Equipment (PPE)
- Administrative Controls (Policies and Procedures, Staff/Patient/Visitor Education, Healthy Workplace Policies, Respiratory Etiquette)

# Chain of Transmission

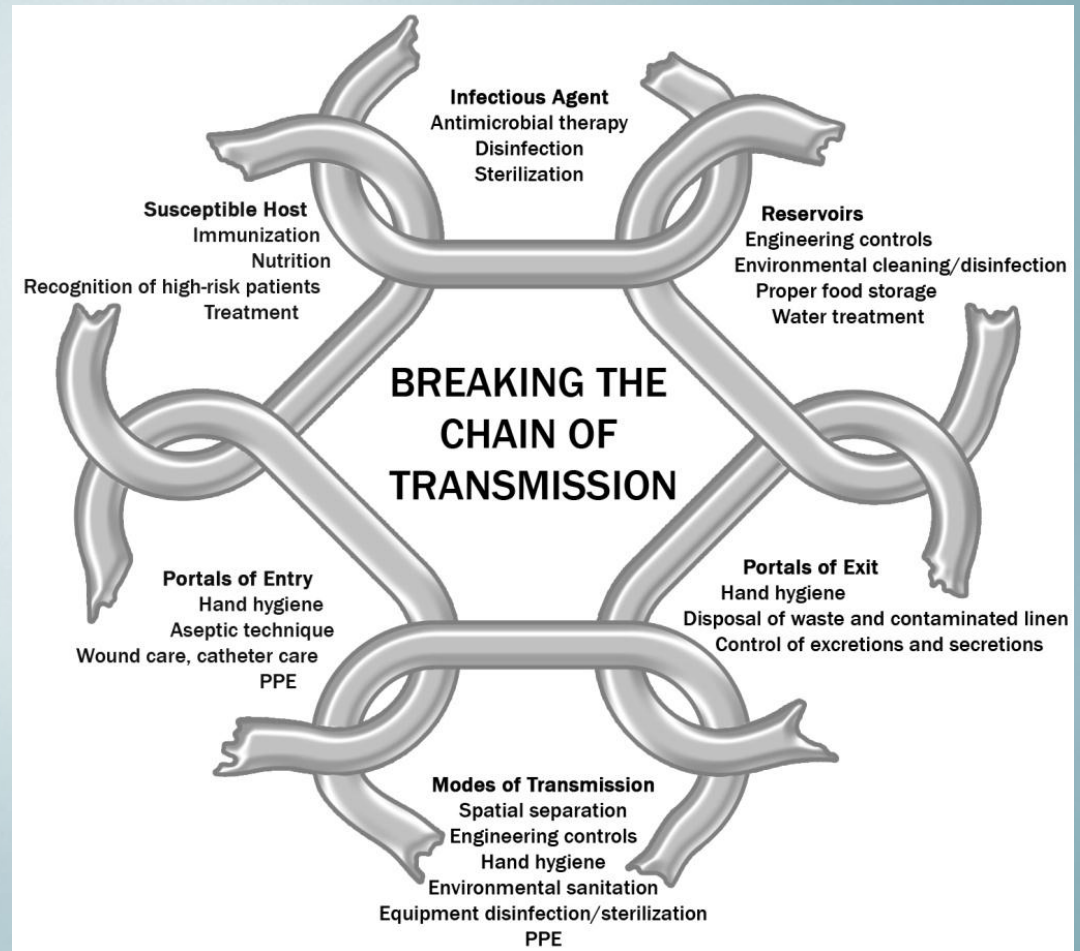
The Chain of Transmission is the way all infectious diseases spread.

There are six links to the chain - all of which must be present for infection to occur.



# Chain of Transmission

The goal of infection prevention and control practice is to break a link in the chain to prevent the transfer of microorganisms.



# Point of Care Risk Assessments

Perform a PCRA **before each interaction** with a patient or their environment to determine which interventions are required in order to prevent transmission of microorganisms.

- Consider:
  - the patient's infectious status
  - the patient's symptoms
  - the risk of exposure to blood or body fluids or contaminated equipment
  - how cooperative the patient will be
  - the type of care you are providing
  - your skill level for this task
  - resources available



Risk Reduction Strategies include all of the following:

- Hand hygiene
- Appropriate use of PPE
- Appropriate patient placement
- Proper cleaning and disinfection of equipment / environment
- Proper handling of linen and waste
- Sharps injury prevention

**STOP, THINK AND PROTECT  
YOURSELF!**



# Modes of Transmission

## CONTACT:

- The most common means of transmission
- Occurs when microorganisms are spread by direct physical contact from an infected or colonized person to a susceptible host



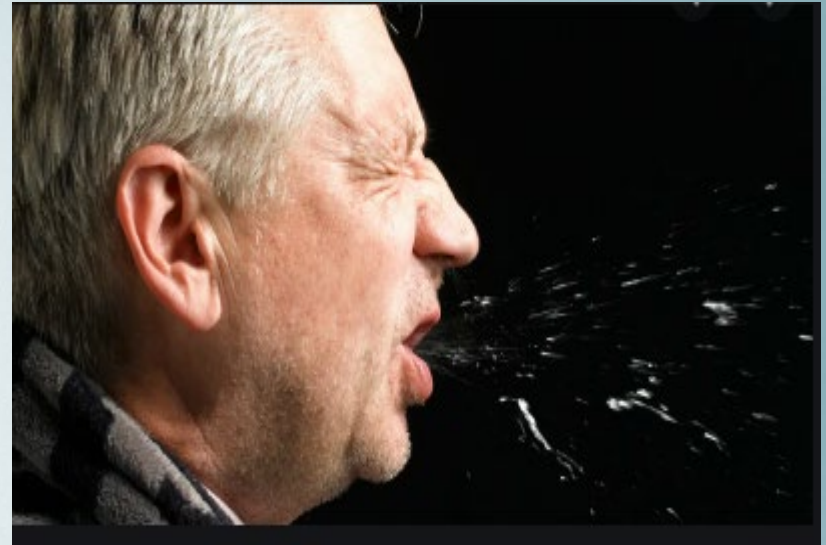
## INDIRECT CONTACT:

- Occurs when microorganisms are spread by an object or intermediate person (e.g., contaminated equipment or hands of healthcare workers)



## DROPLET TRANSMISSION

- Occurs when large droplets are generated from the respiratory tract of an infected individual during coughing, sneezing or laughing or during such procedures as suctioning
- These droplets are heavier than air and can only travel about two metres before they fall to the ground



## AIRBORNE TRANSMISSION

- Occurs when very tiny droplets, (<5 microns) exit the respiratory tract when a person talks, coughs or sneezes and then remain suspended in the air
- Can be widely dispersed by air currents and inhaled by susceptible hosts (e.g., tuberculosis, chicken pox)



## COMMON VEHICLE TRANSMISSION

- Occurs when a single contaminated source spreads germs to multiple susceptible hosts (e.g., contaminated food, medication, water, or equipment)



## VECTOR-BORNE TRANSMISSION

- Refers to transmission by insect vectors and is prevented by appropriate hospital construction and maintenance
- This route of transmission is of less significance in health care facilities in Canada than in other settings.



# Personal Protective Equipment

- PPE includes one or more of the following: gloves, gowns, masks (procedure or N95), and eye protection (goggles or face shield)
- Clean PPE is applied immediately before providing care, and removed and disposed of immediately after
- PPE must be removed in proper sequence to prevent contamination of self



**Eye protection**  
*Protecteur oculaire*



**Mask**  
*Masque*



**Gloves**  
*Gants*



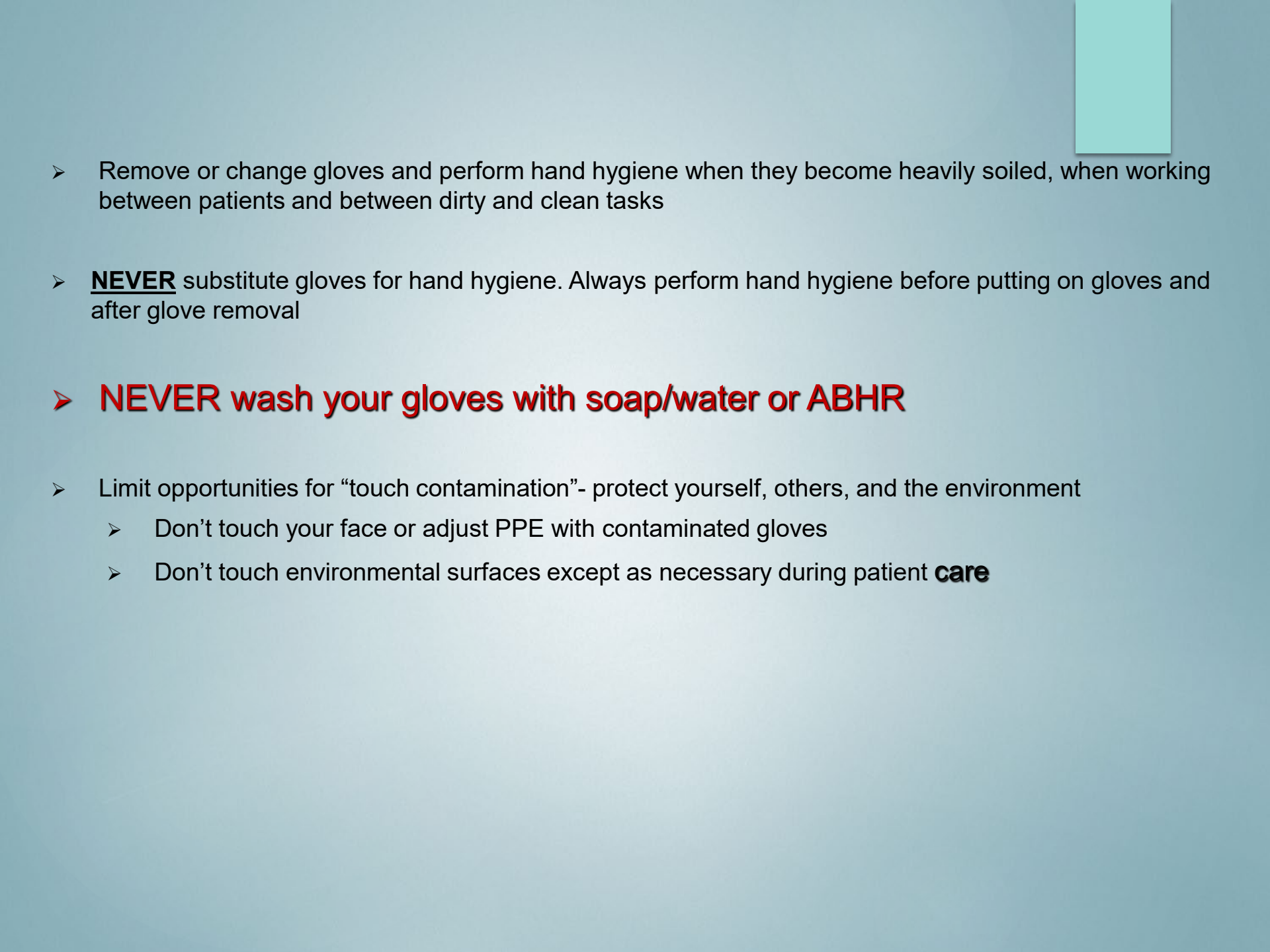
**Isolation gown**  
*Chemise d'isolation*

# When to Wear Gloves

When it is anticipated that hands will be in contact with:

- mucous membranes
- non-intact skin
- tissue, blood, body fluids, secretions, excretions
- or equipment or surfaces that may be contaminated with any of these
- follow added precautions sign posted in doorway to patient's room



- 
- Remove or change gloves and perform hand hygiene when they become heavily soiled, when working between patients and between dirty and clean tasks
  - **NEVER** substitute gloves for hand hygiene. Always perform hand hygiene before putting on gloves and after glove removal
  - **NEVER wash your gloves with soap/water or ABHR**
  - Limit opportunities for “touch contamination”- protect yourself, others, and the environment
    - Don't touch your face or adjust PPE with contaminated gloves
    - Don't touch environmental surfaces except as necessary during patient **care**

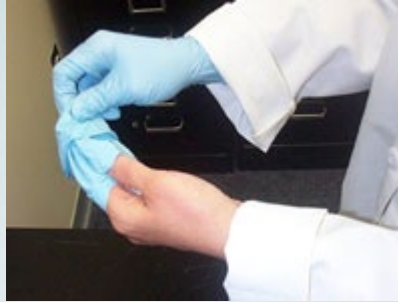
Remember, when removing:

- Glove to glove for the first glove and skin to skin for the second glove

1.



2.



3.



4.



5.



6.



**\*Single patient use, single procedure use only\***

# When to Wear a Gown

- Wear a gown when it is anticipated that a procedure or care activity is likely to generate splashes or sprays of blood, body fluids, secretions or excretions
- Secure gown appropriately (tie at neck **and** waist)
- Follow added precautions sign posted in doorway to patient's room



# When to Wear a Mask, Face & Eye Protection

- When splashes or sprays of blood, body fluids, secretions, or excretions may be generated and when within 2 metres of a coughing patient
- Prescription glasses **are not** considered eye protection
- An N95 respirator is used to prevent inhalation of small particles that may contain infectious agents transmitted via the airborne route



# Donning PPE

Steps to put on PPE:

- Perform hand hygiene
- Put on gown, tie at neck and waist
- Put on procedure mask/N95 respirator
- Put on protective eyewear if required (goggles or face shield)
- Put on gloves, pulling gloves up over cuff of gown

1	PERFORM HAND HYGIENE	
2	PUT ON GOWN	
3	PUT ON MASK/N95 RESPIRATOR	
4	PUT ON EYE PROTECTION	
5	PUT ON GLOVES	

# Doffing PPE

Steps to remove PPE:

- Remove gloves using “glove to glove, skin to skin” technique (slide 15)
- Remove gown
- Perform hand hygiene
- Remove eye protection
- Remove mask/N95 respirator
- Perform hand hygiene again

1	REMOVE GLOVES	
2	REMOVE GOWN	
3	PERFORM HAND HYGIENE	
4	REMOVE EYE PROTECTION	
5	REMOVE MASK/N95 RESPIRATOR	
6	PERFORM HAND HYGIENE	

# Hand Hygiene

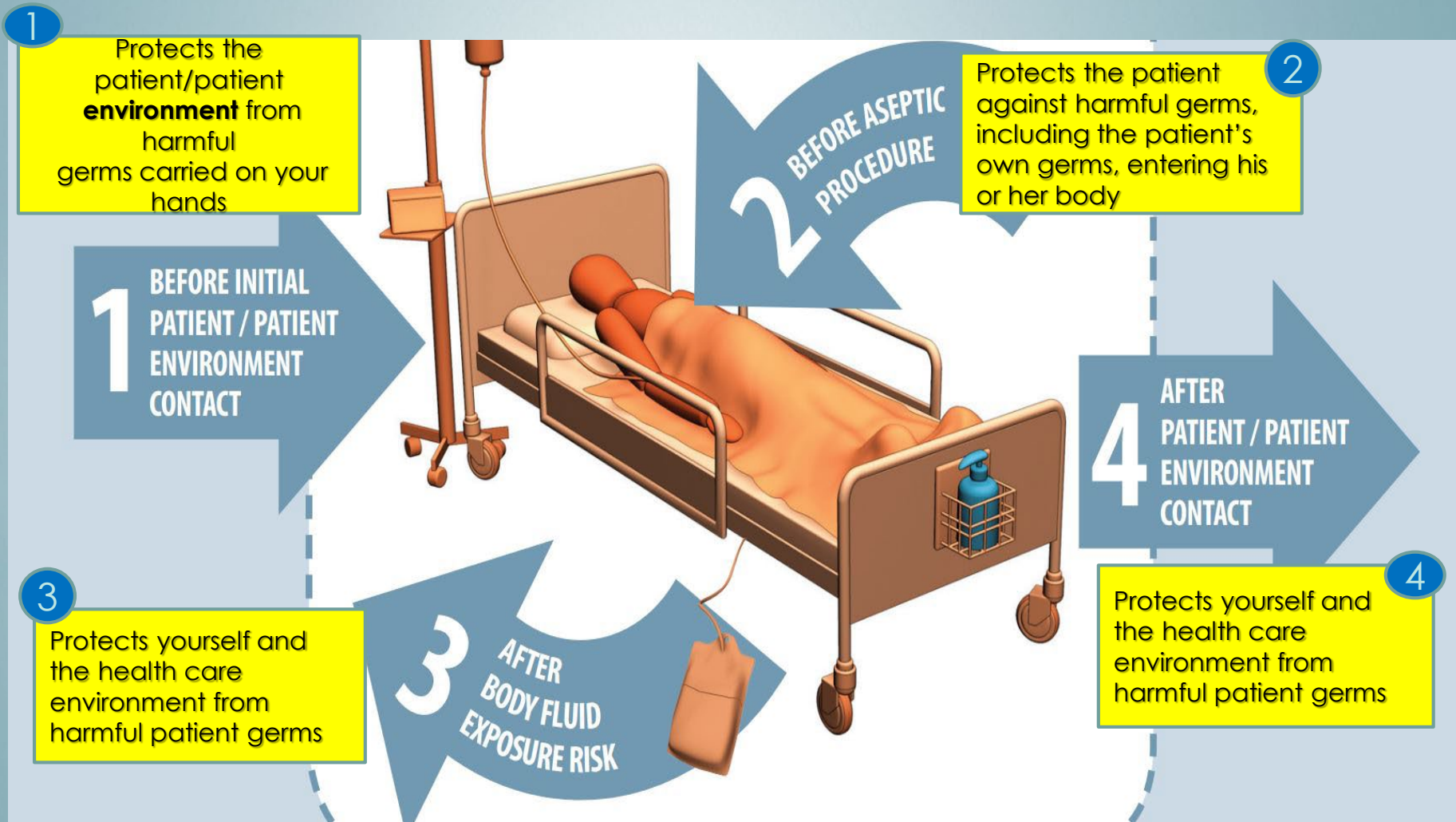
Hand hygiene is the most important way to prevent the spread of germs

**15 to 20 seconds**: The time required to thoroughly wash your hands.

Alcohol Based Hand Rub (ABHR) is the recommended method of hand hygiene when hands are not visibly soiled



# Four Moments of Hand Hygiene



1

Protects the patient/patient **environment** from harmful germs carried on your hands

**1** BEFORE INITIAL PATIENT / PATIENT ENVIRONMENT CONTACT

**2** BEFORE ASEPTIC PROCEDURE

2

Protects the patient against harmful germs, including the patient's own germs, entering his or her body

**4** AFTER PATIENT / PATIENT ENVIRONMENT CONTACT

3

Protects yourself and the health care environment from harmful patient germs

**3** AFTER BODY FLUID EXPOSURE RISK

4

Protects yourself and the health care environment from harmful patient germs

# Control of the Environment

Refers to controlling and minimizing the level of microorganisms in the environment

Environmental Controls include:

- Accommodation & Placement (ie. isolation rooms)
- Cleaning & disinfection of Equipment
- Cleaning & disinfection of the Environment
- Patient transporting procedures



## Cleaning & Disinfection of Equipment

- Contamination of equipment has been implicated in infection transmission



- Whenever possible, dedicate non-critical equipment to a single patient

- Clean and disinfect items that have been in direct contact with a patient before use on another patient (wear appropriate PPE)



Other elements of environmental controls include:

- Safe handling and disposal of sharps
- Proper handling of soiled linen and waste to prevent personal contamination and transfer to other patients or environment
- Engineering controls including appropriate ventilation, air exchanges, barrier curtains, hand wash sinks, ABHR dispensers



## Preparing Patient for Transport:

**It is the responsibility of NURSING STAFF to ensure patient is ready for transport to other departments!**

- Ensure Patient's hospital gown/clothing/linen is clean (no need to have patient wear isolation gown)
- Patient has clean hands prior to going to another department (no need to wear gloves)
- Wounds are covered with clean, intact dressings
- Incontinence products are in place and intact
- Patients who are coughing should wear a mask if tolerated
- Refer to isolation signage for precautions required

# Administrative Controls

Administrative Controls are built into the “day-to-day” operation of every health care setting. These include:

- Policies and Procedures
- Education
- Respiratory Etiquette
- Healthy Workplace Policies
- Immunization
- Monitoring of Compliance with Feedback (Audits)

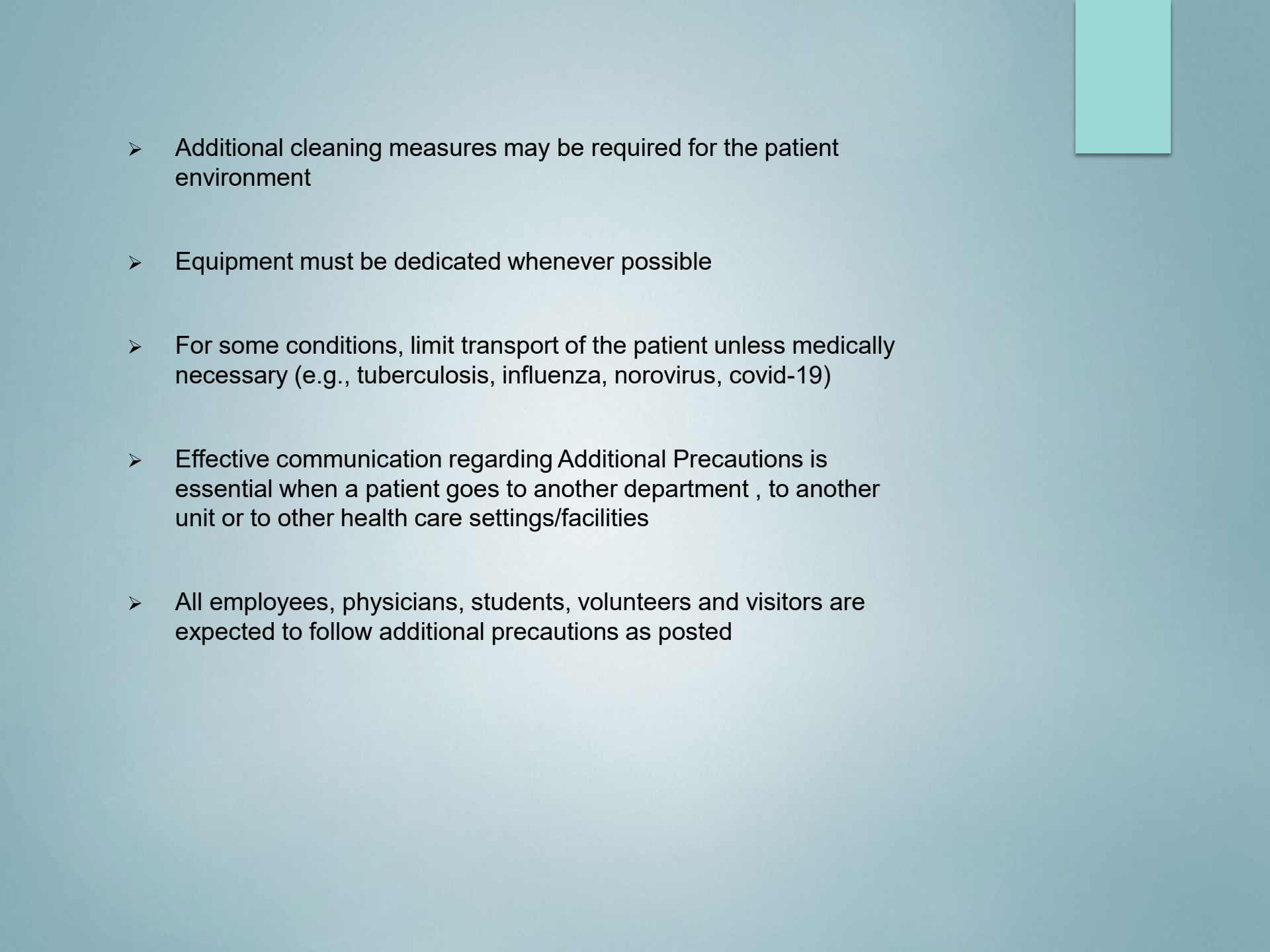
## Visitor Management and Education

- Visitors can transmit infections
- Hand hygiene before and after visiting should be emphasized
- If PPE is required by the visitor, instruction in its application, use and disposal is required
- Visitors with symptoms of infection (cough, fever, diarrhea) should post-pone visit



# Additional Precautions

- Additional Precautions are based on the method of transmission (contact, droplet, airborne...) and are necessary in addition to Routine Practices for certain pathogens or patient symptoms.
- Additional precautions should be implemented as soon as disease or risk factors are suspected or identified and remain in place until there is no longer a risk of transmission
- Additional Precautions are based on the mode of transmission. PPE **is** standardized and specific to the type(s) of Additional Precautions

- 
- Additional cleaning measures may be required for the patient environment
  - Equipment must be dedicated whenever possible
  - For some conditions, limit transport of the patient unless medically necessary (e.g., tuberculosis, influenza, norovirus, covid-19)
  - Effective communication regarding Additional Precautions is essential when a patient goes to another department , to another unit or to other health care settings/facilities
  - All employees, physicians, students, volunteers and visitors are expected to follow additional precautions as posted

## CONTACT PRECAUTIONS

### PRÉCAUTIONS CONTRE LA TRANSMISSION PAR CONTACT

#### Staff/Employé(e)s



Gloves  
Gants



Isolation gown  
Chemise d'isolation

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque



Clean patient gown/sheet  
Chemise d'hôpital propre/drap

- Private room  
Chambre privée
- Gowns and gloves at all times  
Chemise d'hôpital et gants en tout temps
- Mask (during high activity times such as bed changing, dressing changes)  
Masque (pendant périodes d'activité élevés tel que changement de la literie ou de pansements)
- Visitors to wear gloves and gown,  
Visiteurs doivent porter gants et chemise d'hôpital



#### CONTACT REQUIRED BUT NOT LIMITED TO:

• AROs • Clostridium Difficile • Uncontained drainage

## DROPLET PRECAUTIONS

### PRÉCAUTIONS CONTRE LA TRANSMISSION PAR GOUTTELETES

#### Staff/Employé(e)s



Eye protection  
Protecteur oculaire



Mask  
Masque

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque



Clean patient gown/sheet  
Chemise d'hôpital propre/drap

- Semi-wall divisible  
Chambre semi-divisible
- Mask and eye protection/face shield  
Masque et protection oculaire/protecteur facial
- Visitors to wear procedure mask  
Visiteurs doivent porter masque régulier



#### DROPLET REQUIRED BUT NOT LIMITED TO:

• Pneumonia • Mumps/Pertussis • Meningococcal Disease

AROs  
C-diff  
Uncontained drainage

Mumps/Pertussis  
Meningococcal disease  
Pneumonia

## DROPLET/CONTACT PRECAUTIONS

### PRÉCAUTIONS CONTRE LA TRANSMISSION PAR CONTACT/GOUTTELETTES

#### Staff/Employé(e)s



Eye protection  
Protecteur oculaire



Mask  
Masque



Gloves  
Gants



Isolation gown  
Chemise d'isolation

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque



Clean patient gown/strip  
Chemise d'hôpital propre/strap

- Private room  
Chambre privée
- Gown and gloves at all times  
Chemise d'hôpital et gants en tout temps
- Mask and eye protection/face shield at all times  
Masque et protecteur oculaire/protecteur facial en tout temps
- Visitors to wear gloves, gown and procedure mask  
Visiteurs doivent porter gants, chemise d'hôpital et masque régulier



#### DROPLET/CONTACT REQUIRED BUT NOT LIMITED TO:

- Invasive Group A Streptococcus
- Noroviruses
- Failed ARI screen

## ADULT AND CHILDREN PROTECTIVE PRECAUTIONS

### MESURES DE PRÉCAUTIONS POUR ADULTES ET ENFANTS

#### Staff/Employé(e)s



Mask  
Masque

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque

- Private room  
Chambre privée
- No plants – fresh fruit or raw vegetables must be washed  
Pas de plantes – les fruits et les légumes crus doivent être lavés
- No sick visitors or employees  
Pas de visiteurs ou d'employé(e)s malades
- Visitors to wear procedure mask  
Visiteurs doivent porter un masque régulier



#### PROTECTIVE REQUIRED BUT NOT LIMITED TO:

- Adults with Neutrophils 0.5 or less, a count dropping rapidly or physician ordered
- Children with Neutrophils 2.0 or less or physician ordered

Invasive Group A Strep (IGAS)  
Noroviruses  
Influenza  
Failed ARI screening  
Covid-19

For adults with Neutrophils <0.5 or less,  
a count dropping rapidly or physician  
ordered  
For children with Neutrophils <2.0 or  
less, or physician ordered

## AIRBORNE PRECAUTIONS

### PRÉCAUTIONS CONTRE LA TRANSMISSION PAR VOIE AÉRIENNE

#### Staff/Employé(e)s



N95

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque



Clean patient gown/sheet  
Chemise d'hôpital propre/drap

- Private room with negative air pressure – keep door closed at all times  
*Chambre privée avec pression d'air négative – garder la porte fermée en tout temps*
- (N95) Respirator (Staff to wear N95 for patient transport)  
*(N95) Respirateur (Employé(e)s doivent porter N95 pour transport du patient)*
- Visitors to wear procedure mask  
*Visiteurs doivent porter masque régulier*



#### AIRBORNE REQUIRED BUT NOT LIMITED TO:

• TB (suspected or confirmed) • Chickenpox • Disseminated Zoster • Measles

## AIRBORNE/DROPLET/CONTACT PRECAUTIONS

### PRÉCAUTIONS CONTRE LA TRANSMISSION PAR GOUTTELETTES/CONTACT/VOIE AÉRIENNE

#### Staff/Employé(e)s



Eye protection  
Protecteur oculaire



N95



Gloves  
Gants



Isolation gown  
Chemise d'isolation

#### Patient Leaving Room/Patient Quitte Chambre



Clean hands  
Mains propres



Mask  
Masque



Clean patient gown/sheet  
Chemise d'hôpital propre/drap

- Private room with negative air pressure – keep door closed at all times  
*Chambre privée avec pression d'air négative – garder la porte fermée en tout temps*
- Gowns and gloves at all times  
*Chemise d'hôpital et gants en tout temps*
- (N95) Respirator, eye protection/face shield at all times  
*(Staff to wear N95 for patient transport)*  
*(N95) Respirateur/protecteur oculaire/protecteur facial en tout temps*  
*(Employé(e)s doivent porter N95 pour transport du patient)*
- Visitors to wear gloves, gown and procedure mask  
*Visiteurs doivent porter gants, chemise d'hôpital, masque régulier*

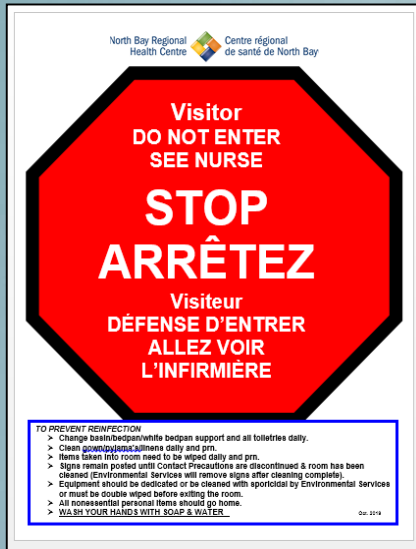


#### DROPLET/CONTACT REQUIRED BUT NOT LIMITED TO:

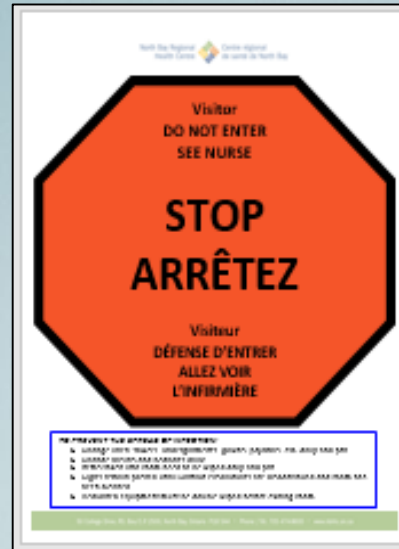
• Novel Respiratory Infections (i.e. SARS) • Viral Hemorrhagic Fever (i.e. Ebola)

TB (suspected or confirmed)  
Chickenpox  
Disseminated Zoster  
Measles

Novel Respiratory Infections (SARS)  
Viral Hemorrhagic Fever (Ebola)



C.Diff



AROs



Influenza



Covid

Stop signs are used in combination with additional precautions to alert staff of the following:

- ❖ **Red** indicates C.diff precautions and **Orange** indicates AROs alerting EVS on type of cleaning to be done
- ❖ **Yellow** alerts staff Influenza precautions in place: only immunized staff should enter
- ❖ **Purple** is used to alert staff that an **N95** is to be worn.

**\*\*\*Please ensure to post signs: other departments can not guess if patients are on added precautions!**

# Conclusion

Each health care provider plays a vital role in infection prevention and control strategies which are designed to protect patients, staff and the community.

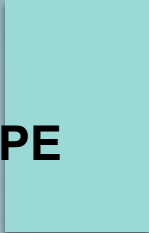
**You can make a difference!**

**Thank You**

Your IPAC team is available Monday through Friday between 0700 and 1600 hours.

# Learning Checkpoint

- 1. Hand hygiene is the most important way to prevent the spread of germs.**
  - a) True
  - b) False
  
- 2. Infectious agents, reservoirs, susceptible hosts are links in the Chain of Transmission.**
  - a) True
  - b) False
  
- 3. Most health-care associated infections are transmitted to patients:**
  - a) On the hands of health-care workers
  - b) From dirty washrooms
  - c) From hospital food



- 4. Persons responsible for cleaning soiled equipment should wear PPE suited to the task.**

  - a) True
  - b) False
  
- 5. Use of gowns and gloves is required at all times when providing any care or service to a patient.**

  - a) True
  - b) False
  
- 6. If you wear gloves while providing care, hand hygiene is not required.**

  - a) True
  - b) False
  
- 7. It doesn't matter in what order you remove PPE, as long as you remove it and perform hand hygiene before going to care for another patient.**

  - a) True
  - b) False

**8. Airborne precautions include:**

- a) N-95 Mask and positive pressure room
- b) N-95 Mask and negative pressure room
- c) None of the above

**9. MRSA and other ARO's can be transmitted:**

- a) Through medical equipment that is shared and not disinfected appropriately between patients
- b) On the hands of health-care workers who do not perform hand hygiene as indicated in the 4 Moments of Hand Hygiene
- c) Through environmental surfaces that are not properly cleaned
- d) All of the above

**10. When transporting a patient on isolation you should:**

- a) Follow Routine Practices and any other designated additional precautions for the patient
- b) Prepare the patient: clean dressings, clean gown, clean hands
- c) Notify the receiving department of the patient's isolation requirements prior to the transfer
- d) All of the above