

Addendum C:



Isolation Risk Assessment Lifting Contact Precautions for Endemic Organisms

INSTRUCTIONS

Each facility should perform a risk assessment to determine if isolation precautions can be modified for patients that have a history/colonization of a multi-drug resistant organism (MDRO). The risk assessment elements have been integrated into a Yes/No questionnaire as detailed below. Upon completion, a report of findings should be considered and presented to your local Infection Control Committee for review and adoption.

DEFINITIONS

Any shaded area within the risk assessment does not require an action plan. However, the answer of each question is taken into consideration when determining the need to remove or continue isolation for colonized or known history of an MDRO.

Any question that has a “*” mark requires an action plan if the answer is “NO”.

A question that has a “**” mark does not require an individual action plan by the facility if it is currently not in place as a standardized process will be created for system wide adoption.

INTERPRETATION OF RESULTS

After the completion of the risk assessment, it is recommended that the decision to remove or continue contact transmission based precautions for colonized or known history of an MDRO be established based on the following results:

- Remove Contact Precautions: if < 7 questions are answered as “NO”
- Continue Contact Precautions: if ≥ 7 questions are answered as “NO”

Each facility may conduct a follow up risk assessment upon completion of action plans if ≥ 7 questions were answered as “NO” in order to remove contact precautions for MDRO history or colonization.

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CDC Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings	Yes	NO	Action Plan	Responsible Person	Expected Date Of Completion	Measure of Effectiveness
A questions that is marked by an “*” requires an action plan if the answer is “NO”						
Overview						
A number of guidelines and literature that have been published throughout the years discussing isolation precautions have lacked clarity, consistency, and practice. Due to the lack of consensus and evidence on the isolation requirement for colonization or known history of an MDRO, a risk assessment to determine the ability to remove or continue isolation precautions for this patient population needs to be completed.						
Risk Assessment						
1. *Standard Precautions <ul style="list-style-type: none"> Does the facility have a process in place to monitor and report hand hygiene compliance on a monthly basis? 						
2. *Standard Precautions <ul style="list-style-type: none"> Score YES if ≥75% compliant with hand hygiene audits for the past 3 months Score NO if <75% compliant with hand hygiene audits for the past 3 months 						

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	A questions that is marked by an "*" requires an action plan if the answer is "NO"					
3. *Standard Precautions <ul style="list-style-type: none"> Is staff educated to use personal protective equipment (PPE) based on anticipated exposure? 						
4. *Standard Precautions <ul style="list-style-type: none"> Has the facility seen a decline in staff exposure of an MDRO due to compliance with PPE usage throughout the past 3 years? (If no exposures were noted, answer YES) 						
5. *Standard Precautions <ul style="list-style-type: none"> Does the facility educate staff and patients on respiratory hygiene/cough etiquette? (e.g., handouts, signage, etc.) 						
6. Environmental Controls: <ul style="list-style-type: none"> Does the facility place patients with known history or colonization in single rooms? 						

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	A questions that is marked by an “*” requires an action plan if the answer is “NO”					
7. *Environmental Controls: • Does EVS staff receive annual training on processes and policies regarding environmental cleaning?						
8. *Environmental Controls: • Does Nursing staff receive training on appropriate dwell times for disinfectants when new products are introduced?						
9. *Environmental Controls: • Is compliance monitored to identify opportunities for improvement with the utilization of disinfectants? (e.g., dwell time, appropriate disinfectant)						
10. *Environmental Controls: • Is there an established frequency for quality assurance testing for EVS by utilizing florescent markers?						

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	A questions that is marked by an “*” requires an action plan if the answer is “NO”					
11. *Environmental Controls: <ul style="list-style-type: none"> Is there a policy that delineates the responsibility of EVS and other stakeholders for equipment disinfection? 						
12. *Environmental Controls: <ul style="list-style-type: none"> Score YES if ≥70% of quality assurance testing passes for the last 3 months. Score NO if <70% of quality assurance testing passes for the last 3 months. 						
13. *Antimicrobial Stewardship <ul style="list-style-type: none"> Does the facility have an active/ongoing antimicrobial stewardship program (ASP)? 						
14. *Antimicrobial Stewardship <ul style="list-style-type: none"> Has the facility been able to reduce broad spectrum antibiotic use within the past 3 years? 						

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	A questions that is marked by an “**” requires an action plan if the answer is “NO”					
15. **Antimicrobial Stewardship <ul style="list-style-type: none"> Does the facility have a process in place to deescalate antibiotic orders? 						
16. *Other Considerations <ul style="list-style-type: none"> Has the facility reduced or maintained horizontal transmission/Hospital Acquired rates of MRSA, VRE, and ESBL in the past 3 years? 						
17. Other Considerations <ul style="list-style-type: none"> Is your facility utilizing chlorhexidine bathing in the ICU population? 						
18. *Other Considerations <ul style="list-style-type: none"> Is your facility performing nasal decolonization on specific surgical populations? 						

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	A questions that is marked by an "*" requires an action plan if the answer is "NO"					
19. *Other Considerations <ul style="list-style-type: none"> Does the facility enforce a policy prohibiting artificial fingernails? 						
20. *Other Considerations <ul style="list-style-type: none"> Does the facility provide toys for patients that can be easily cleaned (does not share stuffed furry toys)? (If the facility does not provide toys to patients, answer YES) 						

Total number of questions answered "NO": _____

Infection Prevention Department Manager/Lead: _____ Date of Completion: _____

Other: _____