

Policy Applies to:

All staff employed by Mercy Hospital.

Credentialed Specialists, Allied Health Professionals, patients, visitors and contractors will be supported to meet policy requirements

Related Standards:

- Infection and Prevention and Control Standards NZS 8134.3:2008
- EQUIP Standard Criterion 1.5.2

Rationale:

A two-tiered approach is used to protect patients, healthcare workers (HCWs) and others from cross-infection of micro-organisms. The two levels of transmission-based precautions are Standard Precautions and Expanded Precautions (previously known as isolation precautions).

Definitions:

Standard Precautions: Are applied to the care of all patients, regardless of their diagnosis or presumed infection status and are the minimum acceptable level of practice in infection control as detailed in the Standard precaution policy.

Expanded transmission-based Precautions: Are additional precautions used for patients known or suspected to be infected by pathogens where the spread is through;

- Contact (**Appendix 3**)
- Droplet (**Appendix 5**)
- Airborne (**Appendix 6**) (Mercy Hospital does not have negative pressure air isolation rooms. Patients requiring airborne isolation will need to be transferred to another healthcare facility as soon as possible).

In some cases, protective care would be required. While this is not a transmission precaution in the traditional sense, the following details the process for patients requiring infection protection from others.

- Protective (**Appendix 7**) (to create a protective environment for immune-compromised patients).

Sometimes there is more than one route of transmission therefore more than one transmission-based precaution may be used e.g. an additional category for gastroenteritis such as Enteric Contact Precautions (**Appendix 4**), or a respiratory illness that requires contact and droplet precautions in addition to the standard precautions.

IPC Nurse: Infection Prevention and Control Nurse

MDRO: Multidrug Resistant Organisms

PPE: Personal Protective Equipment

Objectives:

- To ensure that the highest standard of isolation management is maintained for the duration of the infectivity period.
- To ensure that patients with an infectious disease are cared for using the correct category of transmission-based precautions to prevent cross-infection.
- To ensure staff have current IPC resources to provide IPC assessment and care of patients requiring transmission-based precautions.
- To identify patients who have a neutrophil count of less than 0.5 (10.9/L) and implement protective isolation precautions.
- To identify patients who carry a multidrug-resistant organism AND meet the risk criteria for transmission to other patients and/or the environment (see MDRO policy Appendices One, Two and Three).

Implementation:

Assessment

- If a patient is known or suspected to have an infection, the policy *Infectious Diseases – Patient Management* must be consulted. This details the type of isolation required, infectivity, transmission and if the infection is reportable to the Medical Officer of Health.
- When a patient requires isolation, the Clinical Coordinator or senior nursing personnel will decide on appropriate room placement. The Infection Prevention and Control (IPC) Nurse or outside of office hours, Senior Nurse on call is available for consultation
- A Patient Isolation Management Assessment Form must be completed by nursing staff to ensure compliance with policies and procedures, (**Appendix 3**). The assessment must be provided to the IPC Nurse
- Removal of a patient from isolation will only occur if;
 - 48 hours since the last symptom e.g. diarrhoea, vomiting.
 - laboratory confirmation of non-infectious status
 - under the guidance of the IPC Nurse or senior nurse on shift

Isolation Equipment

Isolation equipment supplies are located

- in the ward and area storerooms and
- theatre corridor near the main decontamination room.

The trolley must be placed outside the patient room with equipment as listed in, **Appendix Two**, Isolation Equipment for Isolation Trolley, which is appropriate for the intended area.

Patient assessment equipment must be single-use or washed and disinfected before removal from the isolation room at discharge. IPC Nurse approved cleaning and disinfection products only are to be used.

Communication:

- When a patient is placed in isolation, this must be documented in the patient clinical record and the type of isolation communicated to relevant clinical, housekeeping, food services and laundry staff by phone.

- TrakCare alert of the level of risk is to be created by Clinical Coordinators or IPC Nurse or delegated clinical staff members, such as preadmissions staff and bookings staff. The risk level is to be assessed with the risk matrix in **Appendix 11**.
- Signage for staff and visitors must be applied in a visible place such as beside the door/on the bathroom door alerting staff and visitors of the precautions required for entering the patient area. Signage remains in its visible location and will be removed by Housekeeping staff when terminal cleaning is completed. This communicates to staff the requirement for PPE remains.
- IPC Nurse is to be provided with a copy of the Patient Isolation Assessment.
- It is important for staff, patients and their whanau to be informed of the type of isolation required and what this will entail. Relevant information booklets are available in **Appendices 8 & 9**. Booklets for visitors must be available outside of the room. The patient must be provided with information that is relevant to their situation. Further information booklets specific to MDRO are available in the MDRO policy appendices.

TrakCare and TrendCare

Document charges in TrakCare per 8-hour shift and the patient care requirements on Trendcare per 8-hour shift.

Meal Delivery

- Patient meals can be delivered to the patient for patients that are at low and medium risk of transmission. Low and medium risk patients are to have meals presented with washable tableware (**Appendix 11**).
- Patients that are high risk such as contact, droplet, airborne or protective precautions must have their meals delivered on disposable tableware, and the nurse will deliver the meal to the patient wearing mandatory PPE appropriate to the type of isolation.

Cleaning Room and Equipment on Patient Discharge

Isolation room cleaning guidelines must be followed by nursing and housekeeping staff as per the Housekeeping Work manual, Risk Assessment for Environmental cleaning and Meal Delivery (**Appendix 11**), Linen Management (**Appendix 10**), the Patient Isolation Management Assessment Form (**Appendix 3**) and using IPC Nurse approved products (**Appendix 12**). Infectious Diseases – Patient Management policy details specific cleaning and disinfection processes that are required e.g., Sporicidal cleaning and disinfection for suspected or confirmed gastrointestinal infections, causing diarrhoea and or vomiting.

Evaluation:

- The Infection Prevention and Control Nurse will review all the completed Patient Isolation Management Assessment forms for accuracy (**Appendix Three**).
- Reporting of patient isolation management including, delayed admission or referral to another healthcare facility, will be documented by the Infection Prevention and Control Nurse to the Infection Prevention and Control Committee.

Associated Documents:

External

- NZS 8134.3: 2008 Health and Disability Services (Infection Prevention and Control) Standards
- CDC Guidelines for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2015)
- Guidelines for the Control of Multidrug-resistant Organisms in New Zealand, Ministry of Health (2007)
- Guidelines for the Control of Methicillin-resistant *Staphylococcus aureus* in New Zealand. Ministry of Health 2002.
- Lippincott

Internal

- Standard Precautions
- Infectious Diseases – Patient Management
- Management of Staff with Communicable Disease
- MDRO policy and Appendices
- Personal Protective Equipment – Infection Prevention and Control
- Waste Management
- Environmental Cleaning
- Laundry Policy
- Linen Services Work Manual: Infectious Linen
- Housekeeping Work Manual: Isolation Room Cleaning Guidelines, MDRO Protocols

Appendices

Appendix 1. Equipment for Isolation Trolley

Appendix 2. Isolation Management Checklist

Appendix 3. Contact Isolation Process and Signage

Appendix 4. Enteric Contact Isolation Process and Signage

Appendix 5. Droplet Isolation Process and Signage

Appendix 6. Airborne Isolation Process and Signage

Appendix 7. Protective Isolation Process and Signage

Appendix 8. Patient Resource – Isolation. What you need to know

Appendix 9. Whanau Resource - Isolation

Appendix 10. Linen Management Pictorial

Appendix 11. Risk Assessment for Environmental Cleaning and Meal Delivery

Appendix 12. Cleaning Wipes in Isolation