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:
This policy outlines the precautions required to prevent transmission of infectious agents. Standard precautions are to be followed at all times. Additionally, transmission-based precautions may be required on a case by case basis.

Definitions:

Transmission- Based Precautions
Transmission-based precautions include standard precautions, and are divided into four categories.
- Contact Precautions - used for known or suspected infections spread by direct patient contact or by contact with items in the patient’s environment.
- Droplet Precautions - used for known or suspected infections spread by large droplets, >5 microns in size.
- Airborne Precautions - are used for known or suspected infections spread by airborne droplets ≤ 5 microns in size, or dust particles, both of which remain suspended in the air for a long time.
- Protective Isolation - precautions are initiated when the patient’s neutrophil count is less than 0.5 (10.9/L).

Note:
Mercy Hospital does not have negative pressure air handling rooms for airborne isolation and patients requiring this level of isolation will be transferred to other healthcare facilities.

Objectives:
- To identify patients who have an infectious disease that may be spread by direct patient contact or contact with items in the patient’s environment, or spread by droplets or where the infection may be airborne.
- To identify patients who have a neutrophil count less than 0.5 (10.9/L) and implement protective isolation precautions.
- To delay admission or refer to another healthcare facility (with appropriate air handling conditions) those patients with airborne infections or those patients requiring a lamina flow protective isolation.
- 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 that the highest standard of isolation management is maintained for the duration of the infectivity period

Implementation:

Assessment:
If a patient is known or suspected to be suffering from infection, the policy Disease Specific Isolation Precautions must be consulted for patient management.

Note:
If a specimen is taken, from the above patient group this must be documented in the patient notes and on the surveillance form in the McAuley, Mercy Cancer Care, DSU and Manaaki ward staff office.

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 is available for consultation.

Isolation Equipment
Isolation equipment supplies are located in the McAuley storeroom, the DSU utility room and Mercy Manaaki storeroom, and must be placed outside the patient room with equipment as listed in, Appendix One, Isolation Equipment for Isolation Trolley.

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 during work hours and email outside work hours. The Infection Prevention and Control Nurse must be informed as soon as possible, by phone during work hours and email outside work hours.

It is important for staff, patients and their families/whanau to be informed of the type of isolation required and what this will entail. The relevant information sheet, e.g. Appendix three Contact Isolation Information for Patients and their Families/Whanau, must be given to and discussed with the patient and this action documented in the patient notes.

Isolation Assessment
(For patient’s in contact isolation), A Patient Contact Isolation Management Assessment Form, Contact Precautions, must be completed by nursing staff to ensure compliance with policies and procedures, (Appendix Two) and placed in the patient clinical record.

Trak Charge
Document charges in Trak Care and the patient care requirements, in terms of care hours, on Trendcare per shift.
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 and the Contact Isolation Management Assessment Form (Appendix 2)

Evaluation:
- The Infection Prevention and Control Nurse will review all the completed Contact Isolation Management Assessment forms.
- Monthly reporting of patient isolation management including, delayed admission or referral to another healthcare facility, will be documented by the Infection Prevention and Control Nurse and reported to the Infection Prevention and Control Committee.
- Environmental audits will include a review of the isolation trolley and supplies management.

Associated Documents:

External
- NZS 8134.3: 2008 Health and Disability Services (Infection Prevention and Control) Standards
- Guidelines for the Control of Multidrug-resistant Organisms in New Zealand, Ministry of Health (2007)

Internal
- Standard Precautions
- Disease Specific Isolation Precautions
- Management of Staff with Communicable Disease
- PACU Contact Precautions Isolation
- MDRO policy
- MRSA information sheet,
- Personal Protective Equipment - infection control policy
- Waste Management
- Cleaning, Disinfection and Sterilisation policy
- Laundry Policy
- Contact Precautions Patients, Food Services Work manual
- Isolation Procedures for Patients, Food Services Work manual
- Isolation Room Cleaning Guidelines, Housekeeping Work manual
Appendices

Appendix 1. Isolation Equipment for Isolation Trolley
Appendix 2. Patient Contact Isolation Management Assessment
Appendix 3. Contact Isolation - Information for Patients, Family / Whanau

The following isolation types are outlined below

1. Protective isolation
2. Airborne precautions
3. Contact Isolation
4. Droplet precautions

Protective Isolation
Protective isolation precautions are initiated when the patient’s neutrophil count is less than 0.5 (10.9/L).

Staff or patients with infectious diseases must not have direct patient contact. Refer to Guidelines for Management of Staff with Communicable Diseases

Patient Placement
A designated positive air pressure room must be used for patients in protective isolation (not available at Mercy hospital).

(If the patient remains at Mercy hospital), the patient must be placed in a single, self contained room with en suite bathroom facilities.

Signage
A laminated Protective Isolation sign must be placed on or by the external door to be visible before entering the room.

Communication
When a patient is placed in protective isolation, this must be documented in the clinical record and the type of isolation communicated to relevant clinical, housekeeping, food services and laundry staff by phone during work hours and email outside work hours. The Infection Prevention and Control Nurse must be informed as soon as possible, by phone during work hours and email outside work hours.

It is important for staff, patients and their families/whanau to be informed of the type of isolation required and what this will entail and this action documented in the patient notes.

Patient – care equipment
Dedicate the use of non-critical patient care equipment to a single patient. If common equipment is used, clean and disinfect between patients.
Only essential items should be taken into the patient room and these should remain in the room.

**Masks, Gowns**
Masks and gowns are not required to be worn by staff or visitors.

**Food Services**
Food Services are to be advised the patient is in protective isolation precautions. Meal choice forms are to be completed by the nurse and on the ward the nurse is asked to deliver food and beverages.

**Transport of Patients**
Patient transport from their room should be limited to essential purposes only. Immunosuppressed patients must wear a surgical mask during transport. The receiving service must be informed prior to the patient leaving the ward of the type of precautions required.

**Visitors**
Enter of non-essential personnel (including healthcare personnel) should be strictly limited to two at a time.

Persons with colds or infections should not be allowed to visit.

**Plants and Flowers**
No plants or flowers or other items which may attract fungal spores are permitted.

**Airborne Precautions**
*Mercy Hospital does not have airborne isolation facilities and patients requiring these would be cared for by another healthcare facility.*

Airborne precautions are used for known or suspected infections spread by airborne droplets ≤ 5 microns in size, or dust particles, both of which remain suspended in the air for a long time. Examples of disease for which airborne precautions are required are tuberculosis, measles, and varicella (shingles / chickenpox).

**Contact Precautions**

Contact precautions are used for known or suspected infections spread by direct patient contact or by contact with items in the patient’s environment. These guidelines must be observed in addition to standard precautions when contact spread infections are diagnosed or suspected.

Examples of disease for which contact precautions are required are MRSA, MREC (Multi-resistant E. coli), VRE (Vancomycin resistant E.coli) and Clostridium difficile.
Patient Placement
The patient must be placed in a single, self-contained room with en suite bathroom facilities. The room must have a vinyl chair or fabric chairs must have a cover.

Isolation Equipment
An isolation equipment trolley must be placed outside the patient room with equipment as listed in Appendix One, Isolation Equipment for Isolation Trolley. The patient notes must be kept on the isolation equipment trolley.

Signage
A laminated Contact Precautions sign must be placed by the external door to be visible before entering the room. The door may be left open.

Communication:
When a patient is placed in contact isolation, it is important that this is documented in the clinical record and the type of isolation communicated to relevant clinical, housekeeping, food services and laundry staff by phone during work hours and email outside work hours. The Infection Prevention and Control Nurse must be informed as soon as possible, by phone during work hours and email outside work hours.

It is important for staff, patients and their families/whanau to be informed of the type of isolation required and what this will entail. The information sheet, Contact Isolation Information for Patients and their Families/Whanau, Appendix Three must be given to and discussed with the patient and this action documented in the patient notes.

Isolation Assessment
A Patient Contact Isolation Management Assessment form, Appendix Two must be completed by nursing staff at the commencement of care (to review compliance with policies and procedures) and placed in the clinical record.

Trak Charge
Document isolation charges in Trak Care per 8 hr shift

TrendCare
Document the patient care requirements, in terms of care hours, on Trendcare each shift.

Gloves and Gown
Staff must wear gloves and gown when entering the patient room.
Note: Disposable gowns are single use only.

Patient – care equipment
Patient care equipment, e.g. Stethoscope, thermometer, blood pressure monitor, should be dedicated to the patient in contact isolation.
Only essential items should be taken into the patient room and these should remain in the room.

Note:
Patient notes, observation sheet and patient drug chart must not be taken into the room. These should be kept in the patient isolation trolley outside the room.

Laundry
A linen trolley should be set up in the room using a yellow linen bag with a disintegrating inner liner. Full yellow linen bags should be sent to the laundry in a white and green vinyl linen bag.

Waste
A yellow hazardous waste bag, lined with a white bag, in a large size foot treadle waste bin must be set up in the room and all disposable items must be treated as hazardous waste.

Food Services
Meal choice forms are to be completed by the nurse and on the ward the nurse is to deliver food and beverages.

Nursing staff are to place the used meal tray in clear plastic bags, and place in food trolley for collection.

Transport of Patients
Patient transport from their room should be limited to essential purposes only. The receiving service must be informed prior to the patient leaving the ward of the type of precautions required (gowns, gloves, schedule the patient last on the list to allow for cleaning). Staff transporting the patient must wear gown and gloves. Patient notes should be transported in a plastic bag.

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. Gowns and gloves are to be worn for cleaning.

Housekeeping staff are responsible for stripping the bed, removing soiled linen, cleaning the linen trolley, cleaning the room and changing the curtains.

Nursing staff are responsible for cleaning non-disposable equipment using disinfectant wipes; e.g. stethoscope, thermometer, blood pressure monitor and the isolation trolley.
Restocking of the Isolation trolley
Nursing staff must restock the isolation equipment as listed in, Appendix One, Isolation Equipment for Isolation Trolley. The isolation equipment must be returned to the service area storeroom.

Droplet Precautions
Droplet precautions are used for known or suspected infections spread by large droplets, >5 microns in size.

These guidelines must be observed in addition to standard precautions where a droplet infection is diagnosed or suspected.

Examples of diseases for which droplet precautions are required are influenza, mumps and meningococcal infection.

Patient Placement
The patient must be placed in a single, self-contained room with ensuite bathroom facilities. Isolation equipment is available from the isolation trolley in the linen room.

Signage
A laminated Droplet Precautions sign must be placed on/by the external door to be visible before entering the room. The door may be left open.

Communication
When a patient is placed in droplet isolation, it is important that this is documented in the patient notes and the type of isolation communicated to relevant clinical, housekeeping, food services and laundry staff by phone during work hours and email outside work hours. The Infection Prevention and Control Nurse must be informed as soon as possible, by phone during work hours and email outside work hours.

It is important for staff, patients and their families/whanau to be informed of the type of isolation required and what this will entail and this action documented in the patient notes.

Masks
Staff must wear surgical masks when working within 1 metre of the patient. When masks become damp they must be removed and discarded outside the room.

Food Services
Food Services are to be advised the patient is in droplet precautions. Meal choice forms are to be completed by the nurse and on the ward the nurse is asked to deliver food and beverages.
Transport of Patients
Patient transport from their room should be limited to essential purposes only. Patients must wear a surgical mask during transport. The receiving service must be informed prior to the patient leaving the ward of the type of precautions required.