

## Management of Confirmed CPO Patient Checklist

| Action                                   |   | Status |     | Comments |
|--|---|--------|-----|----------|
|  |   | Yes    | N/A |          |
| <b>1. Patient Care Coordinator (PCC)</b> |   |        |     |          |
| 1.1                                      | Consider factors for appropriate patient placement <ul style="list-style-type: none"> <li>Respiratory tract infection, secretions</li> <li>Open areas/invasive devices</li> <li>Wound drainage</li> <li>Desquamating skin conditions</li> <li>Incontinence</li> <li>Cognitive impairment, poor hygiene, instruction compliance</li> </ul> |        |     |          |
| 1.2                                      | Ensure consistent staff assignment  |        |     |          |
| 1.3                                      | Minimize patient movement   |        |     |          |
| 1.4                                      | Notify receiving unit/service when patient is mobilized, transported or transferred   |        |     |          |
| 1.5                                      | Ensure patient CPO status is communicated to Allied Health  |        |     |          |
| 1.6                                      | Request IPAC education for staff  |        |     |          |
| 1.7                                      | Ensure “ring screening” for CPO occurs as directed by IPAC  |        |     |          |
| 1.8                                      | Maintain adequate stock of personal protective equipment (PPE) and cleaning/disinfectants   |        |     |          |
| 1.9                                      | Ensure areas/equipment not cleaned by Environmental Services (EVS) are cleaned and disinfected daily by designated alternative  |        |     |          |
| 1.10                                     | Request UVC/RD machine (where available) through EVS call centre at transfer or discharge following thorough cleaning and disinfection  |        |     |          |
| <b>2. Healthcare Provider (HCP)</b>      |   |        |     |          |
| 2.1                                      | Use private room and Contact Precautions for CPO positive patient   |        |     |          |
| 2.2                                      | If patient is also on Droplet or Airborne Precautions, the patient must wear a mask if out of room  |        |     |          |
| 2.3                                      | Ensure hand hygiene compliance  |        |     |          |
| 2.4                                      | Cover open wounds or lesions with clean dressing  |        |     |          |
| 2.5                                      | Bathe patient daily with neutral soap (or as advised by IPAC)   |        |     |          |



|   |  |  |  |  |
|---|--|--|--|--|
| 2.6   | Daily change of linen (i.e. sheets, pillow cases, towels, facecloths)  |  |  |  |
| 2.7   | Clean gown or pajamas provided to patient daily  |  |  |  |
| 2.8   | Encourage and/or assist with patient hand hygiene before meals, after using washroom, and throughout the day                           |  |  |  |
| 2.9   | Minimize equipment/supplies in patient room and bathroom   |  |  |  |
| 2.10  | Use recommended hospital disinfectant wipe (i.e. Accel Intervention) to clean and disinfect all surfaces patient comes in contact with |  |  |  |
| 2.11  | Dedicate equipment to patient  |  |  |  |
| 2.12  | Clean and disinfect equipment after each use   |  |  |  |
| 2.13  | Clean and disinfect commode on all touched surfaces, from clean to dirty, after each use   |  |  |  |
| <b>3. Infection Prevention and Control (IPAC)</b> |  |  |  |  |
| 3.1   | Ensure patient is flagged in (electronic) medical record   |  |  |  |
| 3.2   | Ensure registry on CPO line list   |  |  |  |
| 3.3   | Communicate patient status to IPAC Medical Microbiologist On-Call  |  |  |  |
| 3.4   | Provide staff education  |  |  |  |
| 3.5   | Initiate "ring screening" / point prevalence screens / spreadsheet tracking as required  |  |  |  |
| 3.6   | Submit enhanced cleaning and disinfection request to EVS   |  |  |  |
| 3.7   | Review EVS schedule for prolonged patient stays  |  |  |  |
| 3.8   | Submit EVS discontinuation of enhanced cleaning to EVS when services no longer required  |  |  |  |
| 3.9   | Communicate with ICP from transferring health authority as required  |  |  |  |
| <b>4. Environmental Services (EVS)</b>            |  |  |  |  |
| 4.1   | Follow posted precaution signage   |  |  |  |
| 4.2   | Initiate and maintain enhanced cleaning and disinfection   |  |  |  |
| 4.3   | Promptly remove garbage and linen when 2/3 full  |  |  |  |
| 4.4   | Provide isolation cleaning and disinfection followed by UVC/RD machine (where available) at PCC request                                |  |  |  |

