Infection Prevention and Control COVID-19 Recovery Checklist
For Acute Care Settings

Updated: 13 January 2022

Name of Facility:	
Name of Program:	
Date:	

One part of developing your COVID-19 Safety Plan is identifying protocols to keep workers safe. Consider the elements below as you develop the plan for your workplace.

These protocols are not a list of requirements; however, they should be considered and implemented to the extent that they address the risks your workplace. You may need to identify and implement additional protocols if the protocols suggested here do not sufficiently address the risk to your workers.

To be completed by Operation Lead in conjunction with Manager.

Instructions

1. Assemble an assessment team that includes department leadership and worker representation from the Joint Occupational Health and Safety Committee (JOHSC). For sites without a JOHSC, the applicable safety representative should be part of the assessment team.

2. Review the COVID-19 Key Principles & Safety Plan for Acute Care Settings and update to reflect the Safety Plan for your area.

3. Perform visual inspection of the Unit/Department.

4. Review checklist and check elements that have been implemented. Provide brief comments to describe the implementation at your site. *You may refer to other documents with more detail where applicable.*
   o Mandatory IPAC elements are marked with a red star (*)

5. If there are any concerns, identify further actions.
   o If need extra support, consult with IPAC Team for further guidance.

6. Send the completed checklist to your JOHSC for review and inclusion in the JOHSC minutes.

7. A copy of the complete checklist must be sent to EmployeeSafety@vch.ca to be stored electronically.

Element			Status		Comments
			Yes	**N/A**	
1) Policies and Procedures					
1.1		The facility's capacity to accommodate appropriate patient flow is assessed on a regular basis.			
1.2 (*)	1.2.1	Environmental Services (EVS) contract in place, identifying:			
	1.2.2	Routine cleaning and disinfection procedures.			
	1.2.3	Frequency of cleaning.			
	1.2.4	List of clinical and non-clinical areas EVS will clean and disinfect.			
	1.2.5	Terminal cleaning of rooms suspected of contamination from symptomatic patients			
1.3	1.3.1	The following recommendations for medical and non-medical staff are in place, including:			
	1.3.2 (*)	Not coming to work sick.			
	1.3.3 (*)	No sharing of food.			
1.4 (*)	1.4.1	There is a process in place to support physician's virtual visit or telephone consultation (if appropriate).			
	1.4.2	There is a process in place for MOA or clerk to pre-screen patients for COVID-like symptoms (recommended script). Patients will also be screened: • Upon arrival at the entrance of the facility • At the reception			
	1.4.3	Points of entry have controlled access in place to facilitate: 1. Screening for symptoms 2. Providing medical masks 3. Patient flow 4. Hand hygiene reminder			
	1.4.4	Reception and other staff wear medical mask.			
1.5		There is a process in place to screen patients for COVID-like symptoms upon arrival at the clinic (recommended script).			
1.6 (*)		Designated isolation/private room is available for direct placement of symptomatic/high-risk patients.			
1.7 (*)		There is a process in place to take patients presenting with COVID-like symptoms to the designated examination/isolation room and/or waiting area.			
1.8 (*)		There is a process in place that determines that the terminal clean of symptomatic/high risk patient's examination room will be done upon discharge. Refer to VCH's Cleaning and Disinfecting Guidelines.			
1.9 (*)		There is a process in place for booking high-risk patients at the end of the day, if possible.			
1.10 (*)	1.10.1	There is a process in place to provide medical masks.			
	1.10.2	Personal protective equipment (PPE) is available for staff as outlined in the PPE Recommendations.			
1.11 (*)		Alcohol-based hand rub (ABHR) is available at entrance and exit from clinical and non-clinical areas.			

1.12 (*)	**1.12.1**	Visual alerts (e.g., signs, posters) indicating hand hygiene and masks are present throughout clinical and non-clinical areas.			
	1.12.2	Stairwell access made available to staff.			
1.13 (*)		Non-clinical areas (e.g., waiting area) have been de-cluttered removing non-essential items (remote control, magazines, toys, etc.) Refer to De-clutter Audit Tool.			
1.14 (*)		Examination and clinic rooms have minimal supplies and equipment.			
2) Education					
2.1		Medical and non-medical staff have received education on appropriate use of personal protective equipment, based on guidelines.			
2.2		Medical and non-medical staff training and education has been documented. Please refer to the LearningHub Modules for online education resources.			
2.3 (*)		Medical and non-medical staff are aware of appropriate donning and doffing procedures.			
2.4		Point-of-care Risk Assessment has been reviewed with staff providing direct patient care.			
2.5		Medical and non-medical staff have been provided information relating to COVID-19 and the measures in place to ensure safety within the facility			
3) Routine practices					
3.1 (*)		PPE supplies are readily available and accessible in appropriate sizes.			
3.2		ABHR are located at point of care (clinical areas). Soap, water, and paper towel is available for use at hand washing stations			
3.3		Single use, disposable equipment used if possible.			
4) Environment					
4.1		High touch points (e.g. side tables, side rails, chairs, hand washing sinks, medication carts, charting desks, touch screens, white boards, outside of sharps containers etc.) in common areas are cleaned and disinfected daily (refer to the Cleaning and Disinfecting Guidelines).			
4.2 (*)		Single-use covers (e.g., paper table covers) are discarded after each patient.			
4.3 (*)		A schedule is in place for cleaning and disinfecting surfaces/bins/shelves that are not routinely serviced by EVS or staff.			
4.4		Staff lounges and work spaces are equipped with disinfecting wipes for medical and non-medical staff to clean and disinfect.			
4.5		Products (e.g. creams, lotions) are dedicated to the user.			
4.6 (*)		Any medical/clinic equipment used (e.g. blood pressure cuffs, clipboard) should be cleaned and disinfected using the routine department practices for cleaning and disinfecting between patients.			
4.7		Containers that are used for product storage are cleaned, disinfected and dried in-between use.			
4.8		ABHR are available at computer/phone stations.			

5) Other		
Other elements not otherwise mentioned		

Additional comments:

Decision for recovery: