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IPAC BEST PRACTICES GUIDELINE

Point of Care Risk Assessment

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PURPOSE

To provide guidance on the use of and indications for health care worker (HCW) point of care risk assessment (PCRA) in VCH facilities. PCRA is performed regularly by HCW's many times a day for their safety and the safety of patients/clients/residents (patients) and others in the healthcare environment.

BACKGROUND

Prior to every patient interaction, HCWs have a responsibility to assess the infection risk posed to themselves and other patients, visitors and HCWs by the patient, situation or procedure. The PCRA is an evaluation of the risk factors related to the interaction between the HCW, the patient and the patient's environment to assess and analyze their potential for exposure to infectious agents and identify risks for transmission.

PROCEDURE

A PCRA includes assessment of the task, the patient and the environment at the start of each HCW and patient interaction to:

1) Evaluate the likelihood of exposure:

- to blood and body fluids, mucous membranes or non-intact skin, including:
 - vaginal secretions
 - seminal secretions
 - cerebral spinal fluid
 - synovial fluid
 - pleural fluid
 - peritoneal fluid
 - pericardial fluid
 - amniotic fluid
 - non-bloody saliva and tears
 - nasal secretions
 - sputum
 - sweat
 - vomitus
 - urine
 - feces
- from a specific interaction such as:
 - performing/assisting with aerosol-generating medical procedures
 - clinical procedures (e.g., wound care, feeding)
 - non-clinical interaction (e.g., patient registration)
 - transporting patients
 - direct face-to-face interaction with patients

- with a specific patient, examples of higher risk patient groups include:
 - infants and young children
 - patients incapable of self-care/hand hygiene
 - patients with poor compliance to respiratory hygiene principles
 - patients having copious respiratory secretions
 - patients with frequent cough/sneeze, or with early stage of influenza-like illness

- in a specific environment, consider accommodation and location factors such as:
 - single room
 - shared room/washroom
 - hallway
 - emergency department
 - public area
 - therapeutic or diagnostic imaging department
 - cluttered or crowded health care environments

- under available conditions:
 - air exchanges in an airborne infection isolation room
 - special separation of patients in a waiting room
 - timely access to housekeeping services

2) Choose the appropriate actions, control measures, and/or personal protective equipment (PPE) needed to minimize the risk of patient, HCW/staff, visitor, and/or contractor exposure to infectious agents.

- Appropriate actions include consideration of:
 - Hand Hygiene
 - at point-of-care
 - before and after PPE use
 - according to the 4 moments for hand hygiene
 - Use of Additional Precautions and PPE as required
 - Accommodation selection
 - Environmental /equipment cleaning
 - Patient ambulation/transportation

- PPE selection will vary based on patient characteristics and the nature of the task performed. Note: A PCRA is indicated for PPE selection even when a patient is on Additional Precautions as more PPE may be indicated

- Refer to the VCH PCRA algorithm:
<http://ipac.vch.ca/Documents/Routine%20Practices/PCRA%20Algorithm.pdf>

REFERENCES

PHAC. (2013). Routine Practices and Additional Precautions for Preventing the Transmission of Infections in Health Care Settings. Retrieved from http://publications.gc.ca/collections//collection_2013/aspc-phac/HP40-83-2013-eng.pdf