COVID-19: Self-Assessment Audit Tool for Long-term Care Homes and Retirement Homes

Published: December 23, 2021

Instructions

Purpose:

This self-assessment audit tool is designed to help infection prevention and control (IPAC) leads at long-term care homes and retirement homes assess how their IPAC practices meet minimum IPAC requirements under applicable legislation, regulations, and specifically Directive#3 issued by the Ministry for Long-Term Care Homes under the Long-Term Care Homes Act, 2007.

When to use:

This tool can be used to monitor the implementation and ongoing adherence to IPAC practices. Some areas will likely require more in-depth auditing (i.e. PPE) if there is a change of policy / practice or there is an identified gap in adherence to best practice.

How to use:

- · Set aside time to tour your facility and complete this tool.
- Consider bringing another staff person with you. You may each notice different areas for improvement. Certain items may require
 checking in with your administrator or charge nurse.
- Provide specific location/s and gaps identified under "Notes for Improvement" column.
- Complete the action item section in the end for prioritizing and addressing items where response was "no". Share these action items with the senior management to support improvement plans within defined time.
- · Re-visit this audit tool both to complete another audit and determine if areas for improvement from the previous audit were addressed.

Date (yyyy/mm/dd):	Auditor's name:
Time (24hr - HH:MM):	Auditor's signature:
Tillie (24III - FIR.IVIIVI).	2nd auditor's name:
	2nd auditor's signature:

1.1	Passive COVID-19 screening signage posted	Yes	No
1.2	Physical distancing (>2 metres) is being practiced	Yes	No
1.3	Alcohol based hand rub (ABHR) with 70-90% alcohol is available	Yes	No
1.4	Medical masks are available with instructions for use posted	Yes	No
1.5	All individuals clean hands with ABHR and wear a medical mask to enter	Yes	No
1.6	Screener is wearing a medical mask and also eye protection if not behind a barrier	Yes	No
1.7	Screener is actively screening and logging in all individuals entering	Yes	No
1.8	Anyone who fails screening is not permitted entry	Yes	No
Notes	for improvement:		

	obby (Skip to section 3 if no lobby)			
2.1	Minimal furniture with surfaces that can be easily cleaned and disinfected	Yes	No	
2.2	All surfaces are cleaned/disinfected at least daily	Yes	No	
2.3	Signage visible for physical distancing, wearing mask and cleaning hands	Yes	No	
Not	es for improvement:			
3. E	levators (Skip to section 4 if no elevators)			
3.1	Signage for maximum number of people allowed at a time	Yes	No	
3.2	ABHR is available on the outside wall adjacent to the elevators	Yes	No	
3.3	All high touch surfaces are cleaned at least daily	Yes	No	
Not	es for improvement:			
4. A	Administrative areas - reception, offices			
4.1	If shared offices, there is >2 m distance between the occupants and masks are worn as part of universal masking	Yes	No	N/A
Not	es for improvement:			
5. S	Staff break rooms / locker rooms			
	ABHR accessible at entrance and inside the room	Yes	No	
5.1		Yes Yes	No No	
5.1 5.2	ABHR accessible at entrance and inside the room			
5.1 5.2 5.3	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting	Yes	No	
5.1 5.2 5.3 5.4	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area	Yes Yes	No No	
5.1 5.2 5.3 5.4 5.5	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance	Yes Yes Yes	No No No	
5.1 5.2 5.3 5.4 5.5 5.6	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance Cleaning/disinfecting supplies are accessible to clean surfaces after use	Yes Yes Yes Yes	No No No	
5.1 5.2 5.3 5.4 5.5 5.6	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance Cleaning/disinfecting supplies are accessible to clean surfaces after use The room is cleaned / disinfected at least once daily	Yes Yes Yes Yes	No No No	
5.1 5.2 5.3 5.4 5.5 5.6 Not	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance Cleaning/disinfecting supplies are accessible to clean surfaces after use The room is cleaned / disinfected at least once daily	Yes Yes Yes Yes	No No No	
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5.1 5.2 5.3 5.4 5.5 5.6 Not	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance Cleaning/disinfecting supplies are accessible to clean surfaces after use The room is cleaned / disinfected at least once daily es for improvement: Resident care floor - nursing station	Yes Yes Yes Yes Yes	No No No No	
5.1 5.2 5.3 5.4 5.5 5.6 Not	ABHR accessible at entrance and inside the room Staff clean hands before entering / exiting Staff remove mask only when sitting to eat or drink at the designated area Staff maintain >2 m physical distance Cleaning/disinfecting supplies are accessible to clean surfaces after use The room is cleaned / disinfected at least once daily es for improvement: Resident care floor - nursing station No food or drink at the station	Yes Yes Yes Yes Yes	No No No No	

7. Resident care floor - resident common areas (activity rooms, physiotherapy, dining)				
7.1	ABHR accessible at entrance and inside the room	Yes	No	
7.2	Residents hands are cleaned at entry and exit (if observed)	Yes	No	N/A
7.3	Staff clean hands as per four moments of hand hygiene (if observed)	Yes	No	N/A
7.4	Physical distancing and masking (as tolerated) is maintained by residents between the cohorts / groups	Yes	No	N/A
Note	es for improvement:			

3.1	ABHR accessible at entrance and at point of care	Yes	No	
3.2	Staff cleaning hands as per four moments of hand hygiene (if observed during this audit)	Yes	No	N/A
3.3	For Routine Practices staff has access to PPE as per their point of care risk assessment (PCRA)	Yes	No	
3.4	For resident placed on Additional Precautions there is appropriate signage and access to PPE supplies	Yes	No	N/A
3.5	Staff are wearing a fit-tested, seal-checked N95 respirator or equivalent for the care of suspect, probable or confirmed case of COVID-19	Yes	No	N/A
3.6	Staff are wearing a fit-tested, seal-checked N95 respirator or equivalent when performing aerosol-generating medical procedure on a suspect, probable or confirmed case of COVID-19	Yes	No	N/A
3.7	Residents are assessed at least once daily for signs and symptoms of COVID-19, including temperature checks (check with the charge nurse)	Yes	No	
3.8	The room is cleaned / disinfected at least once daily	Yes	No	

	ockpile is sufficient n rooms are set aside and available as per Ministry of Long-term care guidance	Yes	No	
9.3 Isolatio	n rooms are set aside and available as per Ministry of Long-term care guidance	.,		
		Yes	No	
9.4 HVAC	systems are functioning properly (check with facility manager)	Yes	No	
	eve been informed about the most recent Ministry directives and guidance obdated communication boards, interviewing staff, email blasts)	Yes	No	

10. List any additional IPAC concerns (e.g., physical distancing in outside visiting areas or smoking areas):
Summary of action items (set a date for completion for each item):

Resources

Ontario. Ministry of Health; Ministry of Long-Term Care. COVID-19 directive #5 for hospitals within the meaning of the Public Hospitals Act and Long Term Care Homes within the meaning of the Long-Term Care Homes Act, 2007. Issued under Section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7 [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [modified 2021 Dec 17; cited 2021 Dec 21].

Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/public hospitals_act.pdf

Ontario. Ministry of Health; Ministry of Long-Term Care. COVID-19 directive #3 for long-term care homes under the Long-Term Care Homes Act, 2007. Issued under section 77.7 of the Health Protection and Promotion Act (HPPA), R.S.O. 1990, c. H.7 [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [modified 2021 Dec 17; cited 2021 Dec 21].

 $\textbf{Available from:} \ \underline{\textbf{https://www.health.gov.on.ca/en/pro\ programs/publichealth/coronavirus/docs\ directives/LTCH_HPPA.pdf}$

Ontario. Ministry of Health; Ontario. Ministry of Long-Term Care. COVID-19 guidance: long-term care homes and retirement homes for public health units [Internet]. Version 2.1. Toronto, ON: Queen's Printer for Ontario; 2021 [cited 2021 Dec 21].

Available from: https://www.health.gov.on.ca/en/pro-programs/publichealth/coronavirus/docs/2019_LTC_homes_retirement_homes_for_PHUs_guidance.pdf

Ontario Agency for Health Protection and Promotion (Public Health Ontario). COVID-19 long-term care resources [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [updated 2021 Jan 8; cited 2021 Dec 23].

Available from: https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/long-term-care-resources

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infection prevention and control (IPAC) [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [updated 2021 Mar 30; cited 2021 Dec 23].

Available from: https://www.publichealthontario.ca/en/health-topics/infection-prevention-control

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