Minnesota Department of Health

# Infection Control Assessment and Response Program (ICAR)Personal Protective Equipment (PPE) Observation Tool

MDH ICAR INFECTION PREVENTION AUDIT TOOLS

This audit tool can be used to determine compliance of hand hygiene and personal protective equipment practices for any staff member.

**Observer:**

**Date: Unit:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Role** | **Action** | **Hand Hygiene Observed** | **Transmission Based Precautions and PPE Donned** |
| ☐ RN ☐ LPN ☐ CNA ☐ EVS  ☐ PCA ☐ TMA ☐ DSP ☐ RT  ☐ REHAB ☐ PROVIDER  ☐ DIETARY ☐ LAUNDRY  ☐ ACTIVITIES ☐ FACILITIES  ☐ CONTRACTOR ☐ OTHER: \_\_\_\_\_\_ | ☐ ENTER  ☐ EXIT | ☐ WASH  ☐ RUB  ☐ MISSED | ☐ STANDARD  ☐ CONTACT **Gloves:** ☐ Yes ☐ No **Gown:** ☐ Yes ☐ No  ☐ CONTACT/DROPLET **Gloves:** ☐ Yes ☐ No **Gown:** ☐ Yes ☐ No **Mask:** ☐ Yes ☐ No  ☐ DROPLET **Mask:** ☐ Yes ☐ No  ☐ ENHANCED BARRIER **Gloves:** ☐ Yes ☐ No **Gown:** ☐ Yes ☐ No  ☐ ENHANCED RESPIRATORY **Gloves:** ☐ Yes ☐ No **Gown:** ☐ Yes ☐ No  **N95 or PAPR:** ☐ Yes ☐ No **Eye Protection:** ☐ Yes ☐ No |
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**UNIT:** Location of observation

**ROLE:** RN–registered nurse; LPN–licensed practical nurse; CNA–certified nursing assistant; EVS–environmental services and housekeeping; PCA–personal care attendant; TMA–trained medical assistant; DSP–direct support professional; RT–respiratory therapist; REHAB–rehabilitation including physical occupational, music, and speech therapy; PROVIDER–medical doctor (MD), doctor of osteopathic medicine (DO), nurse practitioner (NP), physician assistant (PA), dentist (DDS); OTHER–administration, family, hospice, volunteers, etc.; DIETARY–dietary and kitchen staff; LAUNDRY–laundry staff; ACTIVITIES–activities staff; FACILITIES–facilities and maintenance staff

**HAND HYGIENE OBSERVED:** WASH–handwashing (soap and water); RUB–alcohol-based hand rub; MISSED: hand hygiene not performed

**PPE:** Personal Protective Equipment

## How to complete a personal protective equipment (PPE) audit

### Definitions

**Hand hygiene:** cleaning one’s hands by using either an alcohol-based hand rub or by washing hands with soap and water.

**Contact precautions:** hand hygiene plus donning gloves and gowns before room entry or passing room threshold.

**Droplet precautions:** hand hygiene plus donning mask before room entry or passing room threshold.

**Contact and Droplet precautions:** hand hygiene plus donning gloves, gowns and mask before room entry or passing room threshold.

**Enhanced Respiratory precautions:** hand hygiene plus donning gloves, gowns, N95/PAPR/Respirator and eye protection before room entry or passing room threshold.

**Enhanced Barrier precautions:** hand hygiene plus donning gloves and gowns before room entry or passing room threshold.

### Observation opportunities

The observer records the occasions in which they observe a staff member when they have completed hand hygiene and donning or doffing of PPE. Hand hygiene is a component of a PPE audit. Opportunities for hand hygiene include before room entry, before donning PPE, after doffing PPE, and upon room exit. For this tool, the focus will be on performing hand hygiene before donning PPE (also typically before entering the room or if PPE is immediately inside room the hand hygiene is completed and PPE is donned) and after doffing PPE (perform hand hygiene after doffing or exiting the room)

Basic direct observation suggestions:

1. Count each opportunity as it occurs, then complete form appropriately. The list below is an example of an observation that includes hand hygiene and PPE audit.
2. Each opportunity refers to one line in each row; each line is independent from one row to another.
3. If more than one opportunity occurs, use more than one row to complete audit.

Use transmission-based precautions for residents with documented or suspected infection or colonization with highly transmissible or pathogens for which additional precautions are needed to prevent transmission.

### Using the tool

1. Write the name of observed unit on the form. Include name/initials of observer (optional).
2. Refer to the key on the tool for staff type and other abbreviations used on the monitoring form.
3. For each opportunity, the observer records the following:
   1. Role – Place an X in the box for the position of the person you are observing.
   2. Action- Place an X in the box if the observation is on room entry or exit
   3. Hand Hygiene Observed: Place an X in the box if the hand hygiene was performed by Rub, Wash or Missed.
   4. Transmission Based Precaution: Place X in the box that matches the posted precaution sign.
   5. PPE donned in CORRECT order: Place an X in the box that correlates with staff member donning PPE.
4. Hand hygiene before room entry and on exit of room—mark each opportunity for hand hygiene observed.   
   (List below are examples on observation)
   1. If a staff member performs hand hygiene with an alcohol hand rub (before entering or at exit of room), place an X in the box labeled RUB.
   2. If a staff member performs hand hygiene by washing hands with soap and water (before entering or at exit of room), place an X in the box labeled WASH.
   3. If a staff member did not perform hand hygiene (before entering or at exit of room), place an X in the box labeled MISSED.
5. Other considerations during hand hygiene observations:
   1. Unless hands are visibly soiled, alcohol-based hand rub is preferred over soap and water.
   2. Soap and water are preferred methods of hand hygiene IF hands are visibly soiled OR resident is experiencing loose stools, suspected infection, or colonization with highly transmissible or pathogens such as *C. difficile*.
   3. If staff member enters threshold of room while carrying items, staff member must immediately place items inside room and complete hand hygiene before proceeding.
   4. If staff member exits room while carrying items, staff member must immediately place items outside of room and complete hand hygiene.
   5. If observer is unable to visually confirm if staff member performed hand hygiene the observation cannot be counted.
6. Precautions – Place an X in the box that corresponds with transmission-based precaution sign on the entrance of resident room.   
   Example: If the resident is in Contact Precautions, place an X in the box labeled CONTACT. Staff member **MUST** don and doff PPE in correct order to be compliant according to precaution.
   1. Staff member must perform hand hygiene before donning PPE. (Refer to hand hygiene audit process)
   2. Staff member dons specific PPE in correct order before entering room, place an X in the box that corresponds with the PPE donned labeled Yes.
   3. If staff member enters room without donning specific PPE, place an X in the box that corresponds with the PPE labeled No.
   4. Staff member doffs PPE in correct order before exiting room or at threshold of room and places PPE in proper receptacle.
   5. Before proceeding to next task or upon exit of the room; hand hygiene must be performed by either RUB with alcohol-based hand sanitizer or WASH with soap and water.
7. Correct order of donning PPE: Hand Hygiene, Gown, Mask/Respirator, Eye Protection, and Gloves
8. Correct order of doffing PPE: Gloves, Gown, Hand Hygiene, Eye Protection, and Mask/Respirator

## Personal protective equipment program framework

The framework below can assist health care organizations/facilities to be able to measure and improve correct use of personal protective equipment (PPE) to reduce the spread of infection to those who are receiving care to those providing the care.

* Assess current training, education intervals, competency, and expectations
* Policy
  + Organizations PPE policy to support expectations to address:
    - Transmission based precautions
    - Procedures that may require additional PPE
    - Transport of residents in transmission-based precautions
    - Launder of PPE or correct disposal of PPE
* Establish clear expectations on when and where to appropriately don and doff PPE
  + Identify proper order to don and doff PPE
  + Location of where PPE is stored (per resident in transmission-based precautions and central storage for stocking)
  + Selection of correct PPE based on precautions
  + Identify staff who should be considered for training on PPE
* Organizational goals
  + Current base line obtained
  + Identify metrics for audits and compliance
    - Example: Increase compliance from 43% (baseline) to 60% compliance by X week
    - Example: By X 2023 have PPE compliance 90% or greater
* Auditing
  + What is an audit? (direct observation)
  + How is an audit counted? (room entry/room exit)
  + Review tool being utilized and expectations of completing audits (secret shopper and internal data verification)
  + Audit throughout a 24-hour period
  + Designate champions (those who would positively promote program and assist in audits)
  + Provide immediate coaching for identified gap
* Data
  + Be transparent
  + Involve staff for feedback
  + Transparency: share data on weekly/monthly bases in huddles or team meetings
  + Post data for staff accountability
  + Celebrate metrics that are met
  + Create an action plan from observed audits and staff feedback
    - Identified barriers, challenges, and gaps – this will assist in support and drive change on how to resolve it

## Resources

**Handwashing**

* [Don't Forget to Wash Poster (www.health.state.mn.us/people/handhygiene/wash/dontforget.html)](https://www.health.state.mn.us/people/handhygiene/wash/dontforget.html)  
  Use same process for ABHR
* [Videos for COVID-19 Response: Hand Hygiene (www.health.state.mn.us/diseases/coronavirus/materials/videos.html#hand)](https://www.health.state.mn.us/diseases/coronavirus/materials/videos.html#hand)  
  How to Wash Your Hands video in 10 additional languages

**PPE**

* [CDC: Sequence for Putting On and Safely Removing Personal Protective Equipment (PPE) (www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf)](https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf)

**Transmission-based precautions**

* [CDC Infection Control: Isolation Precautions | Guidelines Library (www.cdc.gov/infectioncontrol/guidelines/isolation/index.html)](https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html)
* [CDC Infection Control: Appendix A Isolation Precautions | Guidelines Library (www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/index.html)](https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/index.html)
* Contact Precautions:
  + [CDC: Contact Precautions Sign - English (www.cdc.gov/infectioncontrol/pdf/contact-precautions-sign-P.pdf)](https://www.cdc.gov/infectioncontrol/pdf/contact-precautions-sign-P.pdf)
  + [CDC: Contact Precautions Sign - Spanish (www.cdc.gov/infectioncontrol/pdf/spanish-contact-precautions-sign-P.pdf)](https://www.cdc.gov/infectioncontrol/pdf/spanish-contact-precautions-sign-P.pdf)
* Droplet Precautions:
  + [CDC: Droplet Precautions Sign - English (www.cdc.gov/infectioncontrol/pdf/droplet-precautions-sign-P.pdf)](https://www.cdc.gov/infectioncontrol/pdf/droplet-precautions-sign-P.pdf)
  + [CDC: Droplet Precautions Sign - Spanish (www.cdc.gov/infectioncontrol/pdf/spanish-droplet-precautions-sign-P.pdf)](https://www.cdc.gov/infectioncontrol/pdf/spanish-droplet-precautions-sign-P.pdf)
* Enhanced Barrier Precautions:
  + [CDC: Enhanced Barrier Precautions Sign - English (www.cdc.gov/hai/pdfs/containment/enhanced-barrier-precautions-sign-P.pdf)](https://www.cdc.gov/hai/pdfs/containment/enhanced-barrier-precautions-sign-P.pdf)
  + [CDC: Enhanced Barrier Precautions Sign - Spanish (www.cdc.gov/hai/pdfs/containment/spanish-enhanced-barrier-precautions-sign-P.pdf)](https://www.cdc.gov/hai/pdfs/containment/spanish-enhanced-barrier-precautions-sign-P.pdf)
* Enhanced Respiratory Precautions:
  + [MDH: Enhanced Respiratory Precautions Sign (www.health.state.mn.us/diseases/coronavirus/hcp/ppepresign.pdf)](https://www.health.state.mn.us/diseases/coronavirus/hcp/ppepresign.pdf)

[www.health.state.mn.us/icar](http://www.health.state.mn.us/icar)

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