

**NIPP: Nursing Home Infection Prevention Program...*Nipping Infections in the Bud*©
 Environment of Care Infection Prevention and Control Rounding Checklist**

S = Satisfactory NI = Needs Improvement N/A = Not Applicable N/O = Not Observed

Standard Precautions and Availability of Personal Protective Equipment				
Observation	S	NI	N/A or N/O	Action Taken
Gloves in multiple sizes				
Latex free gloves (for those with allergies)				
Gowns				
Face shields, masks, goggles				
PPE located where staff can easily access				
Staff can verbalize or demonstrate where PPE is located				
Staff can verbalize process to re-stock supplies				
Gloves worn per standard precautions				
Alcohol-based hand rub available per facility practice (i.e. with staff or wall dispensers)				
Soap and paper towels available for hand washing in resident rooms				
Resident care staff fingernails are short				
Resident care staff do not have artificial nails				
Educational materials posted/available (i.e. cover your cough, hand hygiene, symptom free of illness, etc.)				
Visitors: alcohol based hand rub available to visitors				
Visitors: masks available for visitors who may have been exposed to respiratory illness				

Transmission-Based Precautions and Isolation Rooms				
Observation	S	NI	N/A or N/O	Action Taken
Isolation rooms designated per facility policy (i.e., signs indicate PPE needed)				
PPE located where staff can easily access				
Staff can verbalize where PPE is located for isolation rooms				
Staff can verbalize process to re-stock supplies				
Hand hygiene supplies available/ accessible for isolation rooms				
Staff adhere to transmission-based precautions (i.e. staff put on gowns and gloves for contact precautions or mask for droplet precautions)				
Trash can available at exit of room to dispose of PPE				
Cohorting: Curtain pulled closed between residents if one or both require droplet precautions				
Cohorting: Residents with <i>C. difficile</i> do not share a commode with another resident				
Visitors and family members educated on type of precautions required for resident				
Staff free of illness and uncovered skin lesions				
Equipment is dedicated to resident on precautions				
Shared equipment is properly cleaned and disinfected immediately after use				
Process in-place to complete terminal room cleaning, including removal and laundering of curtains, when resident is removed from isolation precautions				

Hand Hygiene and Resident Care Practices				
Observation	S	NI	N/A or N/O	Action Taken
Staff perform hand hygiene prior to caring for resident				
Staff perform hand hygiene before handling medications				
Staff perform hand hygiene before putting on gloves				
Staff perform hand hygiene after removing gloves				
Proper hand washing technique followed by staff				
Staff do not layer gloves in place of changing gloves when needed				
Additional hand hygiene observation				
Staff adhere to aseptic technique when inserting an indwelling catheter				
Staff adhere to aseptic technique when changing surgical site dressing within 24 hours of surgery				
Staff who perform care tasks requiring aseptic technique can verbalize what aseptic technique is and where supplies are located (i.e. sterile gloves, mask)				
When accessing a central line, staff clean/disinfect port with CHG/alcohol (i.e., scrub the hub)				
Dressings are changed when soiled and on regular schedule (i.e. every 7 days for transparent dressings)				
Wound care: clean field is created to perform dressing change				
Wound care: gloves changed and hand hygiene performed after removing dirty dressing and prior to putting on clean dressing				

Point of Care Devices (I.E. Glucometers)				
Observation	S	NI	N/A or N/O	Action Taken
Point of care devices appear clean and free of dried blood				
Point of care devices dedicated to resident are labeled with resident's name and are stored in a way to prevent cross-contamination				
Shared point of care devices are cleaned and disinfected after each use				
Point of care devices are disinfected with EPA registered product effective against HIV, and HBV and is used according to instructions (i.e., contact time/wet time)				
Unused point of care testing supplies taken into resident room are discarded				
Supplies are kept on cart outside of resident room				
Insulin vials are dedicated to each resident				
The top on an insulin vial is cleaned with alcohol prior to accessing vial with needle				
All needles, syringes, and lancets are discarded in sharps container after use and never re-used				
Sharps containers are available at point of care and are no more than $\frac{3}{4}$ full				
Sharps containers are emptied on regular schedule and when needed				
Needles are not re-capped				
Insulin pens are used for only one person and are clearly labeled with resident's name				
Insulin and glucose controls labeled with date opened and expiration date (based on date opened if applicable)				

Linens				
Observation	S	NI	N/A or N/O	Action Taken
Clean linen appropriately stored (i.e. covered)				
Clean linen transported in covered carts				
Linen carts have solid shelf or plastic liner on bottom shelf				
Staff do not carry clean linen next to clothing				
Dirty linen is placed in lined hampers or bags at bedside				
Dirty linen is in closed bags or covered hampers for transport to soiled utility room and transported to soiled utility per facility policy (i.e. one glove)				
Dirty linen containers and bags are not left in hallways or resident rooms				
Containers for clean and dirty linen are cleaned and disinfected regularly				
Heavy duty gloves available for sorting soiled linens to protect from sharps.				
Gowns are available and easily accessible for staff handling dirty linens				
Gowns worn when handling dirty linens that may come in contact with clothing				
Clean laundry areas are separate from dirty laundry areas				
Staff wear gown or apron and gloves when loading washing machines				
All laundry areas appear clean and free of dust (including ceiling vents)				
Clean linens do not touch floor when folded				
Lint is removed from dryer vents regularly (i.e. every 2 hours when in use)				
Containers for clean linen are kept clean and free of dust				

Environmental Cleaning and Disinfection				
Observation	S	NI	N/A or N/O	Action Taken
Surfaces appear clean with no visible dirt, dust, or dried body fluids				
Resident bathrooms appear clean				
Disinfecting wipes located where all staff can easily access				
Staff can verbalize or demonstrate where disinfecting wipes are located				
Healthcare grade broad spectrum disinfection wipes per EPA label (i.e., kills Hepatitis B, MRSA, at minimum)				
Disinfecting wipes effective against <i>C. difficile</i> are accessible when needed				
Staff can verbalize where disinfecting wipes for <i>C. difficile</i> are located				
Staff can verbalize kill times/contact times for disinfecting wipes				
Housekeeping staff can verbalize which product is used to clean and disinfect <i>C. difficile</i> rooms				
Blood spill kits are available in each unit/wing of facility				
Cleaning carts/environmental services carts appear clean				
Solutions used for mopping floors appears clean and dirty mop heads are not placed in clean solution				
Environmental services staff can verbalize or demonstrate that they need to adhere to transmission based precautions				
Environmental services staff have access to and can verbalize where PPE is located				
Environmental services staff perform hand hygiene after removing gloves				
Staff perform hand hygiene after transporting trash or soiled linens to soiled utility room				
Staff transport trash and soiled linens to soiled utility per facility policy (i.e. one glove)				

Meal Trays				
Observation	S	NI	N/A or N/O	Action Taken
Hand hygiene performed prior to serving food or handling meal trays				
Clean meal trays are stored separately from dirty meal trays				
Meal trays are handled per facility practice/policy				
Meal trays and utensils from isolation rooms are handled per facility practice/policy				
Meal carts free of newspapers & other non-dietary items (except alcohol gel)				
Eye Wash Stations				
Observation	S	NI	N/A or N/O	Action Taken
Eye wash stations are checked weekly (availability of wash solution and not expired or water lines flushed; sink / basin clean) & checks are documented in log				
Facility				
Observation	S	NI	N/A or N/O	Action Taken
Ceiling tiles are in-tact and free of stains and leaks				
Staff food and drinks not in resident care areas and nurse's stations (or per facility policy)				
Facility appears clean and free of dust				
Bathrooms in common areas appear clean and have supplies for hand hygiene				
Comments				

Nourishment Room 1			
Observation	S	NI	N/A or N/O
Only resident food in resident refrigerator			
Refrigerator temperature log available and documents daily temps			
Items in refrigerator appropriately labeled			
No items in refrigerator are expired			
Refrigerator appears clean			
Refrigerator appears to be working properly			
No ice scoops or any other items stored in ice machine			
Ice machine appears clean and free of water deposits			
Ice machines are drained and cleaned regularly/per manufacturer's instructions			
Juice machines appear clean and juice is not expired			
Other canned/boxed foods are not expired & do not appear damaged			
Nourishment Room 2			
Observation	S	NI	N/A or N/O
Only resident food in resident refrigerator			
Refrigerator temperature log available and documents daily temps			
Items in refrigerator appropriately labeled			
No items in refrigerator are expired			
Refrigerator appears clean			
Refrigerator appears to be working properly			
No ice scoops or any other items stored in ice machine			
Ice machine appears clean and free of water deposits			
Ice machines are drained and cleaned regularly/per manufacturer's instructions			
Juice machines appear clean and juice is not expired			
Other canned/boxed foods are not expired and do not appear damaged			
Comments			

Clean Storage Room 1			
Observation	S	NI	N/A or N/O
Door to room appropriately labeled			
Supplies are not expired			
Supplies are at least 18 inches from the ceiling/sprinkler heads			
Supplies are stored off the floor (8 inches)			
Bottom shelf of storage racks has a solid surface/plastic covering			
No cardboard shipping boxes/corrugated cardboard boxes			
Supplies correctly labeled			
Room appears clean and uncluttered			
Clean equipment is bagged/covered and appropriately labeled			
Only clean supplies and equipment present in clean storage areas			
Clean Storage Room 2			
Observation	S	NI	N/A or N/O
Door to room appropriately labeled			
Supplies are not expired			
Supplies are at least 18 inches from the ceiling/sprinkler heads			
Supplies are stored off the floor (8 inches)			
Bottom shelf of storage racks has a solid surface/plastic covering			
No cardboard shipping boxes/corrugated cardboard boxes			
Supplies correctly labeled			
Room appears clean and uncluttered			
Clean equipment is bagged/covered and appropriately labeled			
Only clean supplies and equipment present in clean storage areas			
Clean Storage Room 3			
Observation	S	NI	N/A or N/O
Door to room appropriately labeled			
Supplies are not expired			
Supplies are at least 18 inches from the ceiling/sprinkler heads			
Supplies are stored off the floor (8 inches)			
Bottom shelf of storage racks has a solid surface/plastic covering			
No cardboard shipping boxes/corrugated cardboard boxes			
Supplies correctly labeled			
Room appears clean and uncluttered			
Clean equipment is bagged/covered and appropriately labeled			
Only clean supplies and equipment present in clean storage areas			
Comments			

Soiled Utility Room and Biohazardous Waste 1			
Observation	S	NI	N/A or N/O
Door to room is appropriately labeled, including biohazard label if biohazardous waste present			
Containers for soiled linen are covered/closed			
No clean supplies in room			
PPE available (i.e. gloves)			
Sink splash zone free of clutter			
Hand hygiene supplies readily available			
Biohazard containers labeled properly			
Biohazard bags remain closed & covered for transport			
Biohazard bags are available and staff can verbalize where located			
Staff can verbalize what goes into biohazard bag			
Soiled Utility Room and Biohazardous Waste 2			
Observation	S	NI	N/A or N/O
Door to room is appropriately labeled, including biohazard label if biohazardous waste present			
Containers for soiled linen are covered/closed			
No clean supplies in room			
PPE available (i.e. gloves)			
Sink splash zone free of clutter			
Hand hygiene supplies readily available			
Biohazard containers labeled properly			
Biohazard bags remain closed & covered for transport			
Biohazard bags are available and staff can verbalize where located			
Staff can verbalize what goes into biohazard bag			
Soiled Utility Room and Biohazardous Waste 3			
Observation	S	NI	N/A or N/O
Door to room is appropriately labeled, including biohazard label if biohazardous waste present			
Containers for soiled linen are covered/closed			
No clean supplies in room			
PPE available (i.e. gloves)			
Sink splash zone free of clutter			
Hand hygiene supplies readily available			
Biohazard containers labeled properly			
Biohazard bags remain closed & covered for transport			
Biohazard bags are available and staff can verbalize where located			
Staff can verbalize what goes into biohazard bag			
Comments			

Medication Room 1			
Observation	S	NI	N/A or N/O
Door to room is appropriately labeled			
Medications are not expired			
Medications are properly labeled			
Medication refrigerator daily temperature log is up to date			
Medication refrigerator appears clean and in working order			
Medication refrigerator properly labeled and no other items stored in this refrigerator			
Medications are appropriately secured			
Medication Room 2			
Observation	S	NI	N/A or N/O
Door to room is appropriately labeled			
Medications are not expired			
Medications are properly labeled			
Medication refrigerator daily temperature log is up to date			
Medication refrigerator appears clean and in working order			
Medication refrigerator properly labeled and no other items stored in this refrigerator			
Medications are appropriately secured			
Therapy Services Area			
Observation	S	NI	N/A or N/O
Hand hygiene supplies are readily available			
Disinfecting wipes/supplies to disinfect equipment are available and staff can verbalize where located			
PPE available (gowns, gloves, mask) and staff can verbalize where located			
Equipment is wiped down with disinfectant between each use			
Hydrocollator water levels maintained and temperature checked and documented daily			
Hydrocollator drained and cleaned (i.e. all water deposits removed) every 2 weeks or per manufacturer's instructions			
Sink splash areas are clean and free of clutter			
Comments			