

Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 1 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

**STANDARD:**

All Health Professionals will complete a Point of Care Risk Assessment (PCRA) before **interacting with a resident or entering a resident's environment**. During this assessment, the Health Professional assesses their risk of exposure to an infectious agent, considering the resident environment and the task being performed. Upon completing a PCRA, the Health Professional determines what routine practices need to be implemented, including the appropriate personal protective equipment (PPE) that needs to be worn to reduce their risk of exposure to bodily fluids and potentially infectious agents. The PCRA must also include the frequency and probability of routine or emergent Aerosol Generating Medical Procedures (AGMP).

**DEFINITIONS:**

**Health Professionals AND Health Care Workers::** This includes physicians, nurses, physiotherapists, dieticians, dentists, Personal Support Workers, Program Therapists, Housekeepers, Laundry Aides and Dietary Aides, Porters, etc.

**PROCEDURE:**

1. Every Health Professional must complete a PCRA prior to **EVERY** intervention with a resident or their environment.
2. Additional precautions must be implemented per provincial infection prevention and control guidelines if a resident exhibits clinical signs and symptoms of infectious illness or disease. Depending on the resident's symptoms and the suspect, presumed or confirmed cause of illness, contact, droplet, droplet-contact, or airborne precautions may be initiated. When additional precautions are implemented, these are



Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 2 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

the minimum precautions that must be used when interacting with or entering the resident's environment.

3. Upon completing a PCRA, the health professional will use their clinical judgment to determine if additional interventions or personal protective equipment are needed to mitigate the risk of exposure and safely provide care.
  
4. If it is suspected or confirmed that a resident has COVID-19, droplet-contact precautions should be initiated immediately.
  
5. Additionally, as an interim precaution in light of the uncertainty around the mechanisms of transmission of the COVID-19 Omicron variant of concern (B.1.1.529) etc., required precautions for all health care workers providing direct care to or interacting with a suspected, probable (i.e. placed in precautions as high-risk contact, in an outbreak zone of the facility or recently transferred from a facility in outbreak) or confirmed cases of COVID-19 are strictly mask, eye protection (goggles or face shield maybe of extended wear as determined by IPAC designate), gown and gloves.
  
6. When performing an AGMP on a suspect or confirmed case, the health professional must wear an N95 mask during the procedure. Other considerations for N95 mask use include interacting with a resident with symptoms, underlying diagnosis, and psychiatric behaviours that may result in the expression of bodily fluids or excretions during care that may compromise the use of droplet-contact precautions.

**Aerosol Generating Medical Procedures (AGMPs)** include, but are not limited to, the following:

- a. Intubation and related procedures (e.g. manual ventilation, open endotracheal



Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 3 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

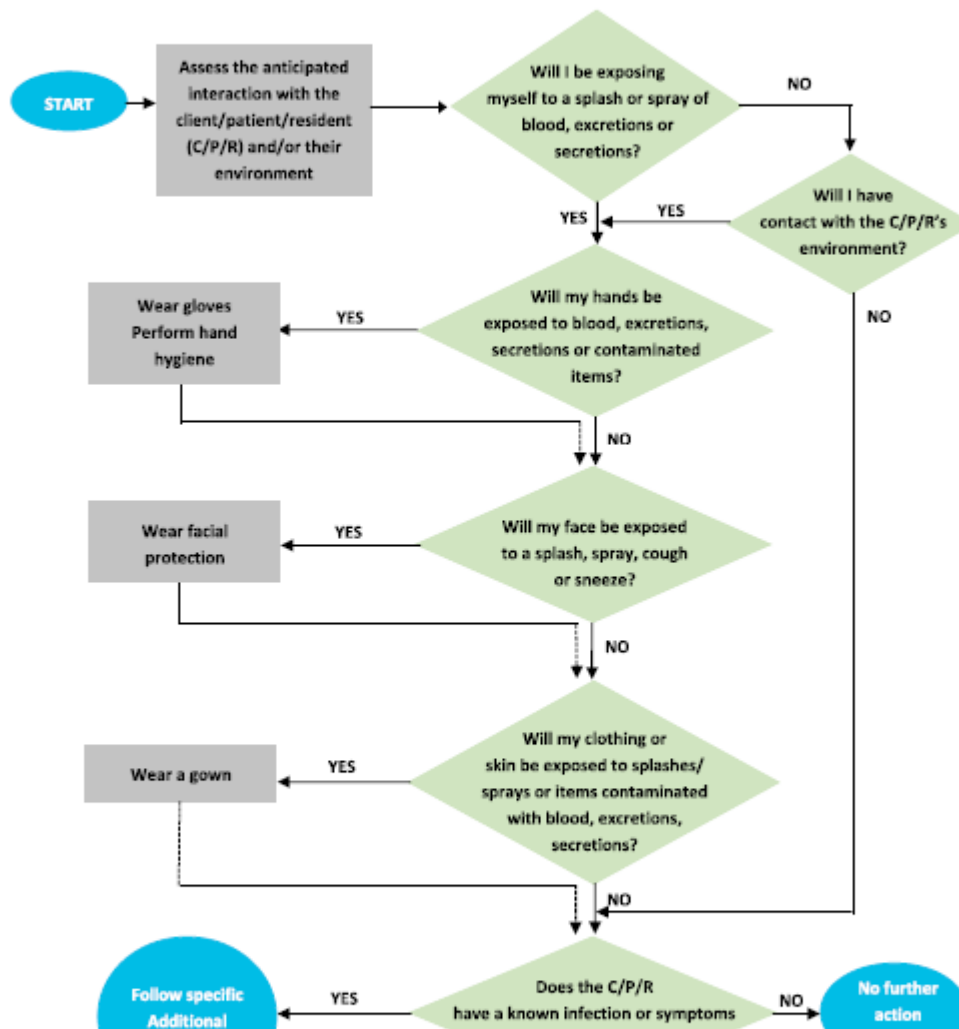
- suctioning)
  - b. cardiopulmonary resuscitation during airway management
  - c. bronchoscopy
  - d. sputum induction
  - e. non-invasive ventilation (i.e. BiPAP)
  - f. open respiratory/airway suctioning
  - g. high-frequency oscillatory ventilation
  - h. tracheostomy care
  - i. nebulized therapy/aerosolized medication administration
  - j. high flow heated oxygen therapy devices (e.g. ARVO, optiflow)
7. autopsy The Health Professionals should also take into consideration the following when performing a PCRA
- a. The resident may exhibit neuropsychiatric behaviours that result in the expression of body fluids, excretions or aerosols during the course of routine care;
  - b. The resident may exhibit symptoms or behaviours or have underlying diagnoses that result in the expression of body fluids, excretions, or aerosols during the course of routine care; or
  - c. Any other considerations that are appropriate given the current science, evidence and Directives regarding COVID-19 transmission and the current COVID-19 circumstances at the Home.

**Point of Care Risk Assessment:**



Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 4 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

**Routine Practices Risk Assessment Algorithm for All Client/Patient/Resident Interactions**



Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 5 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

**Access to Fit Tested N95 Respirators or equivalent - Non-Outbreak:**

While droplet and contact precautions are the appropriate precautions based on the evidence of the mode of transmission for COVID-19, there may be circumstances where the usage of a fit-tested N95 respirator is more appropriate.

The key process for accessing N95 respirators in a **non-outbreak** situation are as follows:

- The . Health Professional must undertake a PCRA **before** all resident interactions
- If through the PCRA and based on professional and clinical judgement, a . Health Professional determines that an N95 respirator is needed when delivering care or services within a 2-meter distance to a resident, the . Health Professional and the Health Care Workers interacting with the resident should have access to the N95 respirator.

**Access to Fit Tested N95 Respirators or equivalent - Outbreak**

If the Home is in an outbreak:

- The . Health Professional can access an N95 respirator
- Health Care Workers can access an N95 respirator when in contact with a suspect, a probable or confirmed case where 2 meters distance cannot be assured

**OUTCOME:**

1. All . Health Professionals will complete a Point of Care Risk Assessment (PCRA) prior to every interaction with a resident or their



Shepherd Village Inc.	Policy No.: J-85
Section: INFECTION PREVENTION AND CONTROL	Page No.: 6 of 6
Subject: Point of Care Risk Assessment (PCRA)	Approved By: Assistant Director of Care Manager, IPAC
Reviewed date: May 9, 2023	Effective date: July 11, 2023

environment and will select and utilize appropriate interventions and personal protective equipment (PPE) guided by evidence-based practices and their clinical and professional judgement.

2. All . Health Professionals and Health Care Workers will be provided an N95 respiratory when in contact with a suspect, a probable or confirmed COVID-19 case.

### **ADDITIONAL REFERENCES**

1. Routine Practices and Additional Precautions - Provincial Infections Diseases Advisory Committee (PIDAC) 3<sup>rd</sup> edition
2. 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
3. PHO's Technical Brief on IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19
4. COVID-19 Directive #5: Questions and Answers, December 17, 2021
5. Ministry of Health COVID-19 Guidance: Personal Protective Equipment (PPE) for Health Care Workers and Health Care Entities Version 1.0 June 10, 202
6. Ministry of Health COVID-19 Guidance for Public Health Units: Long-Term Care Homes, Retirement Homes, and Other Congregate Living Settings Version 11 - June 26, 202

