

Infection Prevention Control Checklist

Institution: _____

Date Completed: _____

Auditor 1 Name and Title: _____

Auditor 1 Contact Information: _____

Auditor 2 Name and Title: _____

Auditor 2 Contact Information: _____

INSTITUTION

1.1 INFECTION CONTROL STANDARDS

Indicator	Complete
1.10 Handwashing stations with soap and water or at least a 60% alcohol-based hand rub (ABHR) are available at the entrance before people get their mask.	Yes / No
1.11 There is a process in place for the active and consistent screening at the institutional entrance where all staff, essential visitors and volunteers entering are asked about COVID-19 symptoms, and receive a temperature screening. Anyone with a temperature of 38°C or higher is denied entry.	Yes / No
1.12 a. Masks are being handed out by the employee at the reception desk. b. State how is this being done.	Yes / No Describe in Appendix A.
1.13 There is a manager observing the screening process.	Yes / No
1.14 There is a process in place for disinfecting items (including pens, clipboards, visitor passes and lockers) at the reception area.	Yes / No
1.15 There is a staff member present to monitor the use of masks within the institution.	Yes / No
1.16 Bins and belts are cleaned and disinfected between staff entering the institution.	Yes / No

1.2 SIGNAGE

Indicator	Complete
1.20 Bilingual Signage for each of the following easily visible at a key location: a. Active Screening for Persons Entering the Institution b. Visitor Restrictions c. How to Protect Selves (handwashing, monitoring for symptoms)	a. Yes / No b. Yes / No c. Yes / No
1.21 Information on hand hygiene, physical distancing and self-monitoring for symptoms are visible in staff and inmate accessible areas. Posters should include written instructions, sources for additional information, and be issued by CSC to ensure consistency across institutions.	Yes / No
1.22 Donning and Doffing posters are visible where PPE is donned and doffed. Donning and doffing poster are located as close as possible to the donning and doffing areas to facilitate readability.	Yes / No
1.23 There is signage to direct the flow of movement in and out of donning and doffing stations, to provide a better control of the environment and reduce chances of cross-contamination (i.e. no contact between clean PPE and used PPE).	Yes / No
1.24 Floor stickers are placed on the floor 2 metres apart to promote physical distancing in common areas where people may congregate (i.e., main entrance, medication line, in front of sinks, and in lunch rooms).	Yes / No
1.25 Where applicable, there is a sign in elevators indicating the maximum number of occupants at a time.	Yes / No

1.3 SUPPLIES

Indicator	Complete
1.30 Supplies for cleaning and disinfection are easily accessible and readily available, for staff and inmates, and are found in key locations (i.e., near shared equipment, in common areas, where PPE is put on/removed).	Yes / No
1.31 Disinfectant products approved for COVID-19 (with DIN number, appropriate labels and disinfection times) are provided. Proper dispenser (test) strips that state appropriate disinfection concentrations are included to ensure staff and inmate safety.	Yes / No
1.32 There is a staff member responsible for verifying disinfectant concentrations and expiration dates, regularly.	Yes / No

1.4 ENVIRONMENTAL CLEANLINESS

Indicator	Complete
1.40 An accountable manager, responsible for auditing cleaning practices (i.e., monitoring the disinfection of any surfaces that may be touched by an infected patient/inmate while out of the room) is identified.	Yes / No
1.41 Inmates are instructed to regularly declutter and keep their cells clean.	Yes / No
1.42 All non-essential equipment/materials stored in the following areas are kept to a minimum: a. Hallways b. Health Services c. Common areas Remove all unnecessary items from counters (including the pamphlets located in the reception area, and magazines located in the visitor area) and keep surfaces uncluttered to facilitate cleaning and disinfection.	a. Yes / No b. Yes / No c. Yes / No
1.43 Contaminated laundry is bagged and washed in hot water at a centralized facility in the institution. Bins containing contaminated laundry are kept covered, and contaminated laundry is marked with a biohazard sticker.	Yes / No
1.44 Plywood dining tables should be covered with a smooth, non-absorbent and easily washable material/table cloth.	Yes / No

1.5 ENVIRONMENTAL STRUCTURE

Indicator	Complete
1.50 Donning and doffing stations are set-up, physically separated, and appropriately located outside of isolation zones to support the desired flow of staff from clean to protected zones.	Yes / No
1.51 Clean gloves and masks are located outside of the doffing station for staff to access after washing their hands and exiting the doffing station.	Yes / No
1.52 Soap and water (or at least 60% ABHR) and disinfectant wipes approved for use for COVID-19 are available throughout the institution (i.e., the entrance/exit of each zone or wing, cafeteria entrance, boardrooms, staff lounge, nursing stations, and control posts) and are appropriately placed in proximity to all common use, high touch surfaces and entrance units.	Yes / No
1.53 60% ABHR for inmates is placed in a space where its use can be observed and monitored.	Yes / No
1.54 No touch receptacles for disposal of PPE are available and properly emptied to prevent overflow.	Yes / No
1.55 There is an established program for maintaining heating, ventilation and air conditioning (HVAC) systems appropriate to the care setting, with specific expectations for dental and CPAP, as per CSC Guidelines.	Yes / No
1.56 There is a sign-in and sign-out sheet located at both the donning and doffing stations to record the time of entry and time of exit, and to report PPE deficiencies (breakage/breaches).	Yes / No
1.57 Potentially contaminated equipment (including used PPE or waste) from the dirty zone is not stored in the clean zone.	Yes / No

1.6 HEALTH SERVICES

Indicator	Complete
1.60 There are physically separated ranges identified to cohort the following groups of inmates: (i) those who are symptomatic/awaiting test results, (ii) new warrants of committal/return to federal custody, and (iii) confirmed positive cases	Yes / No
1.61 Upon entry into the Health Care Centre, all individuals should wash their hands at the sink with soap and water or disinfect using 60% ABHR.	Yes / No
1.62 Arrangements have been made to perform and document daily wellness assessments performed for all inmates in medical isolation.	Yes / No
1.63 Arrangements have been made to monitor and document inmates who are at increased risk of illness, based on identification of underlying medical conditions.	Yes / No
1.64 Has the capacity to provide oxygen therapy.	Yes / No
1.65 Has the capacity to provide intravenous medication/fluids.	Yes / No

1.7 OUTBREAK MANAGEMENT

Indicator	Complete
1.70 A verifiable, documented process is in place for the following: <ul style="list-style-type: none"> a. Contact person(s) for local public health (not just a number to call) for daily reporting to public health (use of required local public health agency forms) with ongoing verbal discussions with local public health agency (provide name and contact information); b. Systematic documentation on all information to be shared with local public health agencies; c. Discharge/Release; d. A local and regional IPC/Outbreak committee with representation from local public health (grouped according to local public health catchment area has been established); e. National Headquarters, Health Services is informed of sharing of personal health information in order to inform the Office of the Privacy Commissioner. 	<ul style="list-style-type: none"> a. Yes / No b. Yes / No c. Yes / No d. Yes / No e. Yes / No
1.71 There is a plan in place describing how areas impacted by outbreak will be deep cleaned and disinfected (including showers which should be washed and disinfected after each use and shower curtains should be washed regularly). Describe this plan.	Yes / No Describe in Appendix A.
1.72 In an outbreak, waste from cells/rooms is double bagged and disposed of daily in accordance with municipal guidelines.	Yes / No
1.73 Food service arrangements have been made to enable the practice of physical distancing. In outbreak institutions, use disposable food items (i.e., plates, cutlery) and tray service. It is recommended that all food handlers wear a surgical mask that covers both the mouth and nose to prevent droplets from getting onto food or food containers.	Yes / No
1.74 In an outbreak there is a plan to restrict the movement of inmates within the institution, including preventing the congregation of inmates in common areas, as well as discontinuation of all non-essential activities, including communal activities.	Yes / No
1.75 The movement of presumptive and confirmed inmate cases is as follows: <ul style="list-style-type: none"> a. Presumptive cases should be medically isolated or placed on modified routine as per the symptomatic inmate and close contacts algorithm. b. Confirmed cases should remain in their cell. Care and essential activities should be provided in their individual cell. 	<ul style="list-style-type: none"> a. Yes / No b. Yes / No
1.76 Protocols exist for transferring inmates who test positive for COVID-19 <ul style="list-style-type: none"> a. within institutions b. between institution c. to and from community 	<ul style="list-style-type: none"> a. Yes / No b. Yes / No c. Yes / No
1.77 In the case of an outbreak, physician services can be made available 7 days per week on site and stand by coverage is available if needed.	Yes / No
1.78 In the case of an outbreak, nursing services can be made available 24 hours per day, 7 days per week.	Yes / No
1.79 Percent of staff on 699 leave by staff grouping	State in Appendix A.

Indicator	Complete
1.80 Where possible, health services and care are provided in a purposeful direction, from presumptive to confirmed cases in order of risk, with attention to PPE to prevent cross-contamination and potential transmission from 'clean' areas to 'contaminated' areas.	Yes / No

2. OFFENDER CARE AND ENGAGEMENT

2.1 EDUCATION

Indicator	Complete
2.10 Inmates are explained (a) the rationale for the IPC measures (including, why staff are using PPE during higher risk activities and why medical isolation is an important measure), (b) the requirements for sharing of information with local public health agencies and hospitals, and how this benefits their health and the institution, and (c) the importance of reporting symptoms.	a. Yes / No b. Yes / No c. Yes / No
2.11 Continuous guidance on proper hand hygiene protocols.	Yes / No
2.12 Continuous guidance on mask use, including reinforcing the need for masks among inmates when outside their cells and to change masks at least daily, and/or when visibly soiled or wet.	Yes / No
2.13 Continuous guidance on cleaning procedures and respiratory etiquette, as well as encouragement to report symptoms is provided to inmates. A comprehensive cleaning and disinfection procedure has been developed to indicate: (a) what surfaces are to be cleaned and disinfected, (b) how often and in what order they are to be cleaned and disinfected (e.g. cleanest to dirtiest), (c) what maintenance equipment and disinfectant products are to be used, (d) what the product dilution ratio (concentration) is, (e) what contact time is required, (f) what PPE is to be worn, and (g) how the PPE is to be donned and removed.	Yes / No
2.14 Inmate rooms are inspected and training/education on cleaning and disinfecting is available/ongoing.	Yes / No
2.15 Safety data sheets (WHIMIS) are provided to the inmate for disinfection products.	Yes / No
2.16 Large posters and written information on COVID-19 are provided to inmates and, where available, is provided on inmate television monitors.	Yes / No

2.2 COLLABORATION

Indicator	Complete
2.20 Ongoing COVID-19 related meetings are held with inmate committees, range representatives and individuals inmates, and suggestions are sought.	Yes / No

2.3 MOVEMENT, TRANSFERS AND RELEASES

Indicator	Complete
2.30 Release of inmates to the community is be planned in consultation with local public health and in accordance with legislative requirements.	Yes / No
2.31 Transport vehicles are cleaned and disinfected before and after use. It is encouraged to have a written protocol outlining the defined roles for staff members (including cleaning responsibilities) and a route of transport for the inmate is identified.	Yes / No

3. STAFF

3.1 TRAINING

Indicator	Complete
3.10 Formal and hands-on training for staff on the donning and doffing of PPE have been conducted and educational support is readily available. This includes demonstration of competency in donning and doffing protocols and documentation of training. Regular check-ups are practiced.	Yes / No

Indicator	Complete
3.11 All staff and contractors are routinely trained on practices and additional precautions for IPC as per National standards, including respiratory etiquette and hand hygiene, as well as reminders of compliance fatigue. Continuous guidance and quality assurance checks are provided.	Yes / No
3.12 Masks are changed at least daily, and/or when visibly soiled or wet and the proper procedure for re-use of masks is available, when applicable.	Yes / No
3.13 Proper protocols exist for when in staff room/eating.	Yes / No
3.14 Staff are encouraged to remove any unnecessary items on desks and place them in cabinets.	Yes / No
3.15 PPE is collegially observed during donning and doffing, and correction is provided to ensure proper technique. Education and reminders from managers are provided to those not wearing PPE or not wearing PPE properly.	Yes / No
3.16 Staff hand hygiene is reinforced when moving between buildings.	Yes / No
3.17 Staff who come in contact with soiled bedding or linens use appropriate PPE (gown, gloves and mask) while doing so, and place in dedicated soiled linen container.	Yes / No
3.2 OCCUPATIONAL HEALTH AND SAFETY	
Indicator	Complete
3.20 An Occupational Health and Safety (OH&S) workplace policy is put in place, clearly outlining the roles and responsibilities of staff.	Yes / No
3.21 Staff have access to an occupational health and safety committee.	Yes / No

Please document any additional comments in Appendix B.

APPENDIX A

Indicator	Comments
<p>1.12 Describe how masks are being handed out by staff at the reception desk.</p>	
<p>1.71 Describe the plan regarding how areas impacted by the outbreak will be deep cleaned and disinfected.</p> <p>Consider the following:</p> <p>Are high-touch surfaces including telephones, door knobs, commonly used equipment being cleaned regularly?</p> <p>Are showers being washed and disinfected after each use?</p> <p>Are shower curtains being washed regularly?</p> <p>Are cleaning contracts necessary and have they been established?</p>	
<p>1.79 State the percent of staff on 699 leave by staff grouping.</p>	

APPENDIX B

Indicator	Comments
Indicator number: _____	
Indicator number: _____	
Indicator number: _____	
Indicator number: _____	

Indicator	Comments
Indicator number: _____	
Indicator number: _____	
Indicator number: _____	
Indicator number: _____	

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Infection Prevention and Control Sub Assessment: Front Entrance

Institution: _____
Date Completed: _____
Reviewer Name, Title: _____
Reviewer Contact Information: _____

Institution self-assessment **External audit**

Instructions:

This sub-assessment should be conducted in accordance with the Infection Prevention and Control Evaluation Guidelines. Each component (*i.e.*, screening, mask-wearing, and hand hygiene) should be assessed for one hour during peak-entry time into the facility. Depending on the amount of front-entrance traffic and/or the capacity to oversee each component (e.g., hand hygiene stations not co-located with front entrance), this assessment can be spread over multiple days.

1. HAND HYGIENE		
Indicator	STAFF	NON-STAFF
1.1 Total number of individuals that passed through the front entrance.		
1.2 Number of individuals that performed hand hygiene upon entry.		
1.3 Number of individuals that used proper hand hygiene technique. Refer to the Infection Prevention and Control Guidelines .		

Infection Prevention and Control Sub Assessment: Front Entrance

2. MASK-WEARING

Indicator	STAFF	NON-STAFF
2.1 Total number of individuals that passed through the front entrance.		
2.2 Number individuals wearing masks upon entering the institution.		
2.3 Number of individuals using proper mask wearing technique. Refer to the Guidance on the Use of Non-Medical Masks and Personal Protective Equipment .		

Infection Prevention and Control Sub Assessment: Front Entrance

3. SCREENING

Indicator	STAFF	NON-STAFF
3.1 Total number of individuals that passed through the front entrance.		
3.2 Number of individuals that passed through the front entrance and were screened for <u>all</u> screening questions in accordance with applicable CSC screening policy documents including: <ul style="list-style-type: none"> • <u>CSC's COVID-19 Screening Questions</u> • <u>CSC's COVID-19 Screening Form for Use by Operations</u> • <u>CSC's COVID-19 Screening Form for Use by Health Care</u> 		
3.3 Number of individuals that had their temperature taken upon entering the institution.		

Infection Prevention and Control Sub Assessment: Mask-Wearing

Institution: _____
Location in institution: _____
Date Completed: _____
Reviewer Name, Title: _____
Reviewer Contact Information: _____

Institution self-assessment External audit

Instructions:

This sub-assessment should be conducted in accordance with the Infection Prevention and Control Evaluation Guidelines. In total, five locations should be evaluated in the institution – a separate form should be used for each location. Each location should be evaluated for approximately 45 minutes during peak traffic times. The front entrance should not be a location.

MASK-WEARING		
INDICATOR	STAFF	INMATES
Q1. Total number of individuals observed.	Total: _____	Total: _____
Q2. Number individuals wearing masks.	Total: _____	Total: _____
Q3. Number of individuals using proper mask wearing technique. Refer to the Guidance on the Use of Non-Medical Masks and Personal Protective Equipment .	Total: _____	Total: _____