



Participant Workbook

Infection Prevention and Control (IPAC)

Point of Care Risk Assessment (PCRA)

Application for Non-Health Care Settings

Point of Care Risk Assessment (PCRA)

What is a Point of Care Risk Assessment (PCRA)?

A thought process used to help identify what steps need to be taken to reduce risk of infection to yourself, the person you support and others in the environment.

Before each interaction, you must assess the following:



The Person

- Does the person have new or worsening symptoms? Do you notice any unusual changes in the person's behaviour or activity level from their baseline?
- Have I been informed that the person requires Additional Precautions (droplet, contact, airborne) due to an infection (i.e. signage)?
- What is the person's health status (i.e. immunocompromised)?
- Are there any unpredictable behaviours that may put myself or others at risk?



The Task

- What type of task am I carrying out (i.e. providing direct face-to-face care, coming into contact with body fluids, direct care)?
- Am I prepared for the task (i.e. supplies ready, equipment required, knowledgeable about the process etc.)?



The Environment

- What is required to prepare the environment to protect myself and others?
- Does the person have their own bedroom? Is the bathroom shared?
- Will cleaning and disinfecting be required, and where are the supplies?



Point of Care Risk Assessment (PCRA)

When do you do a Point of Care Risk Assessment (PCRA)?

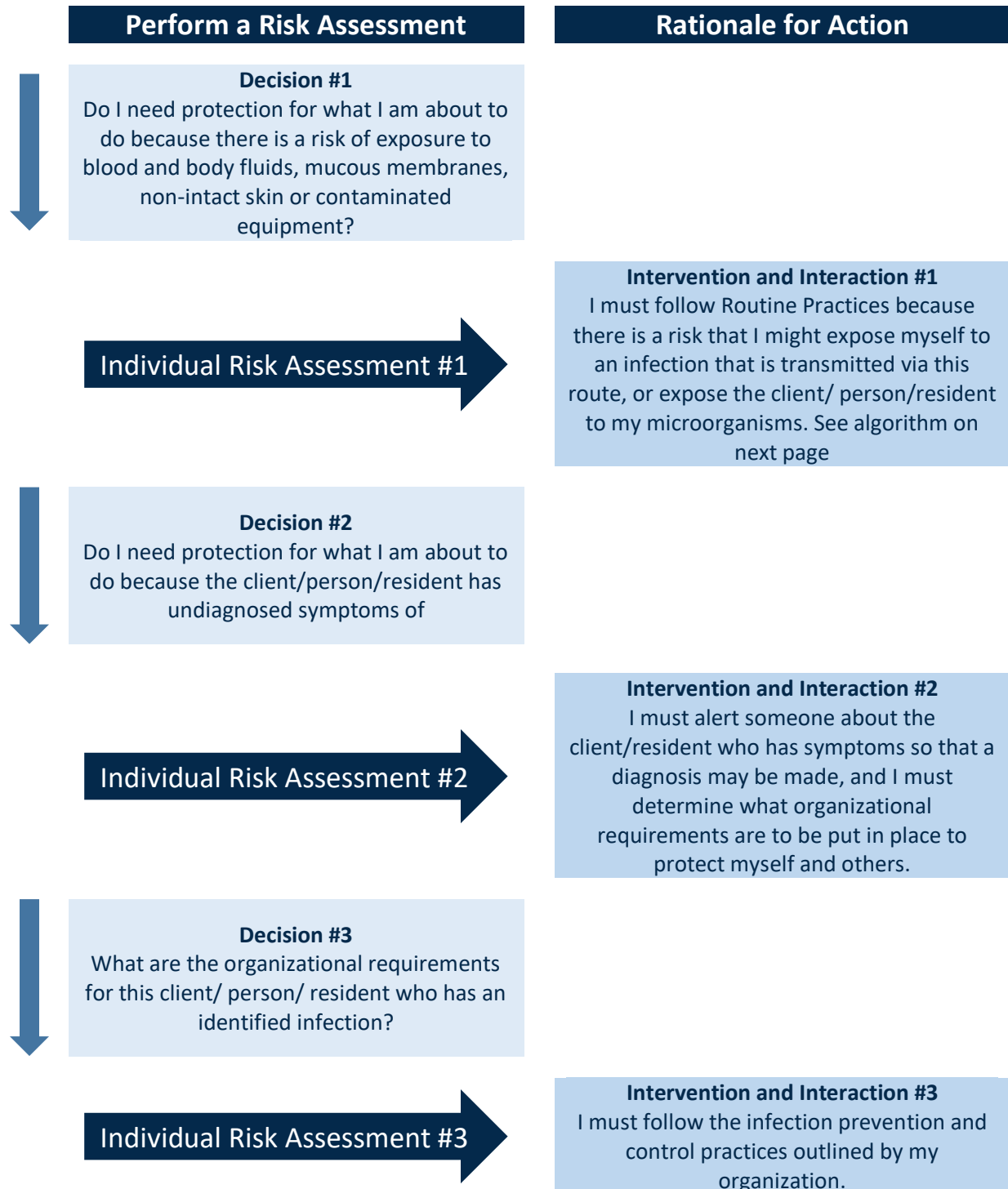
A PCRA should be completed before every interaction with a person you are providing care to. This would include an assessment of the environment in which the care is being provided in.

The following pages illustrate the Public Health Ontario Risk Assessment steps to be performed to determine an individual's risk of transmission of infectious agents and the associated protective measures.

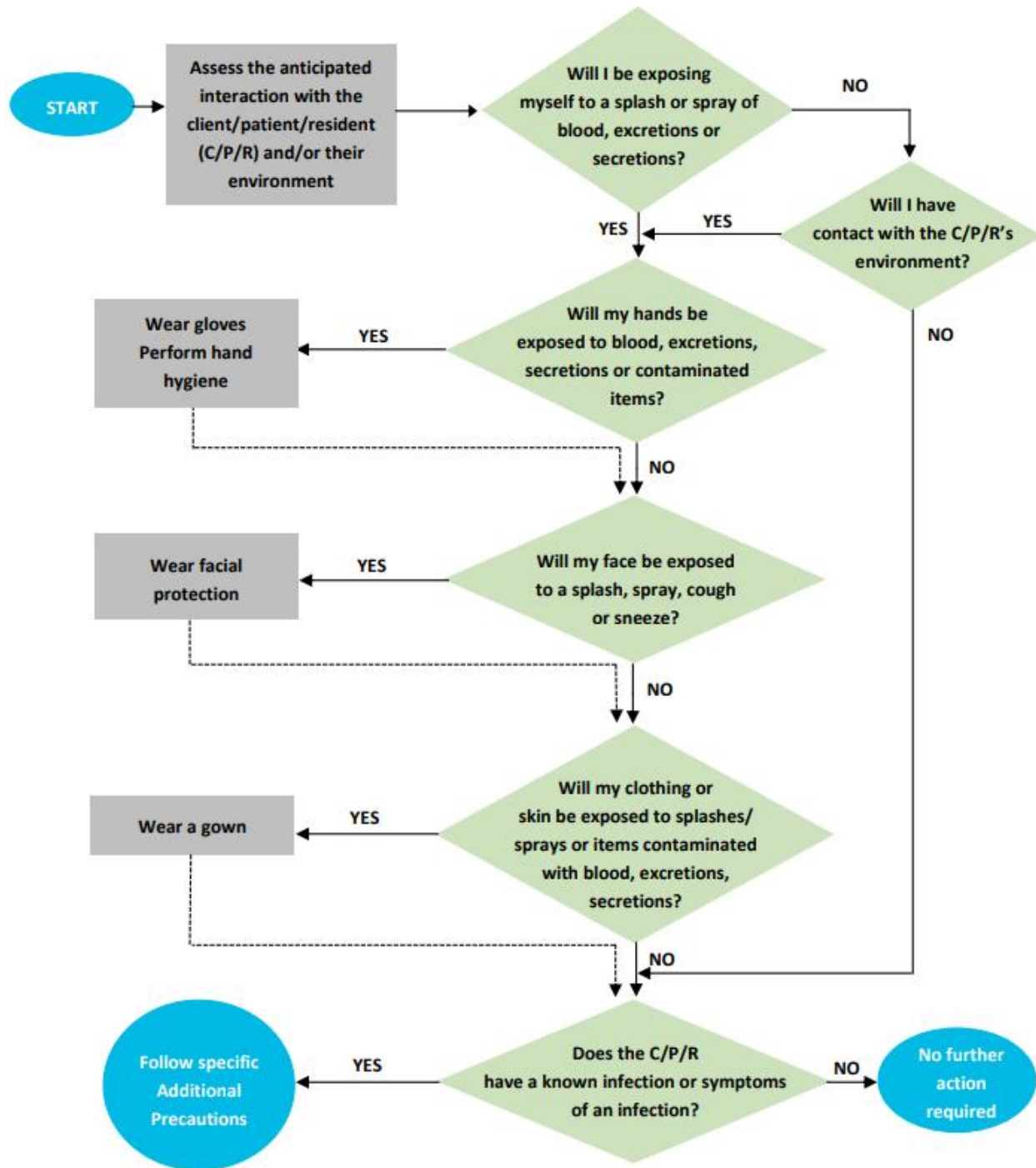
After reviewing the information, proceed to Section Two. You will find a series of scenarios and corresponding questions to review with your team. Use the algorithm and flow chart to help answer the questions.



Risk assessment steps to be performed to determine an individual's risk of transmission of infectious agents and the rationale for associated protective measures.



Routine Practices Risk Assessment Algorithm for All Client/Patient/Resident (C/P/R) Interactions.



Section Two

Scenarios



Scenario #1

George is a 50-year-old man temporarily residing in a shelter. He is a regular smoker and often suffers from a “smokers cough”.

One morning at breakfast, George’s room mate approached a staff member and told him that George was awake coughing all night, far worse than normal.

George has not yet arrived for breakfast, so the staff member on duty decides to check in with George. Upon arrival George is notably coughing and hunched over in discomfort with a pile of tissues on his bed.

Discussion Questions

1. Before attending to George, what should be the first step taken by the staff member?

2. Based on your PCRA performed in question 1 what PPE is needed before checking in with George?



Scenario #2

Sally is a support worker in a congregate care residential setting. The home in which she works at was recently declared to be in influenza outbreak. Jessica, a person Sally supports and two other staff members have received an influenza diagnosis.

Sally and her colleagues have tried their best to help Jessica stay isolated in her bedroom, in alignment with IPAC best practices, however, she has become upset and is beginning to act out.

In an effort to reduce some of the stress from the situation, they began allowing Jessica, with approval from the Public Health Unit, to use some other rooms in the house - always being mindful of the location of the other residents, which so far remain asymptomatic.

Sally is wearing a medical mask, eye protection, gloves and a gown when attending to Jessica including any time that she is out of her room. Sally is providing 1-1 care to Jessica, but occasionally must also perform some other tasks while at work during her shift.

Discussion Questions

1. In which of the following situations should Sally doff her PPE?

- before entering the staff office to complete paperwork
- before leaving for the day
- when preparing a meal for Jessica

2. In order to best assist Sally in caring for Jessica while she is sick, where should PPE, ABHR, signage, disinfectant, etc. be located within the home?



Scenario #3

Five-year-old Selma arrives for therapy. At drop off, the parent noted that she was a bit tired and was not hungry for breakfast that morning.

Throughout the morning staff notice that she is fatigued, disinterested in regular activities, refusing fluids and snacks and is very clingy. Her nose has been running and she has been rubbing her eyes.

Her eyes are pink in colour and staff note a small amount of discharge.

Discussion Questions

1. What PPE would be required, and at what point should PPE be donned?

2. Following Routine Practices to care for Selma, what steps should staff take in this situation?



Scenario #4

A support worker in a congregate care residential setting is supporting an individual named Pete. Pete has had a recent bout of loose stool and has vomited.

Pete needs assistance with hygiene and toileting. He is 47 years old, diagnosed with Cerebral Palsy and Hepatitis B and wears an adult brief due to incontinence.

Pete has requested assistance with cleaning himself up and changing his brief.

Discussion Questions

1. What elements (person, task, environment) of the PCRA do you need to consider before providing assistance to Pete?

2. What PPE would be required when changing and assisting Pete?



Scenario #5

Staff member Jesse is working the night sleep shift when he is awoken by the sounds of loud noises coming from the washroom. Upon further follow-up, he finds resident Jerry leaning over the toilet vomiting. Jerry had tried to make it to the washroom, but he also had a loose bowel movement on the way, outside of the washroom door.

Jesse assesses the situation and looks for appropriate gloves but only finds a box of small, which is too small for his use. Due to the time of night, rather than leave and go look for the proper size, he assists by getting Jerry and the floor cleaned up.

Jesse performs hand hygiene using the bathroom sink, but not well enough as little did he know at the time he had been exposed to Norovirus.

Discussion Questions

1. What did Jesse do correctly in this situation?

2. If Jesse had completed a Risk Assessment, how should he have proceeded with his care of the individual?



Scenario #6

A day program staff is facilitating a baking activity with three people in the kitchen when the staff noted that Samantha appeared to be feeling unwell.

Samantha was pale, shaky and was holding her stomach. Staff asked if she was okay and Samantha replied that she felt like she was going to be sick.

Samantha was weak, so staff helped her to the bathroom. She vomited into the toilet as soon as she arrived.

Discussion Questions

1. Based on your PCRA, what PPE would your Risk Assessment say is required to support Samantha?

2. What other factors do you need to consider within this group environment?



Scenario #9

Mateo works at a short-term respite shelter and an altercation occurred with two people staying there over the weekend. Although minor, one person has been hurt, suffering a bloody nose and some scrapes and bruises. Some blood has also dripped onto the floor.

He is a person who uses illicit drugs and often shares equipment with others. You are required to provide first aid for his abrasions and bloody nose, as well as clean up the environment.

Discussion Questions

1. What elements (person, task, environment) should Mateo consider when conducting his PCRA?

2. If this person was not known as someone who uses drugs and shares equipment, would you approach this situation differently?



Scenario #10

Megumi has recently returned to her residential support home after surgery. She is alert but not moving well in bed because of pain. Aldo, her staff, prepares her pain medication and hands her the medicine cup containing the two pills and a glass of water.

While she is taking her meds, Aldo can see that there is bloody fluid oozing through the bandaged area, and the bandage needs to be changed.

Discussion Questions

1. Based on Aldo's initial PCRA, what PPE is required to give Megumi her medication? When should Aldo clean his hands?

2. When Aldo sees that wound care is required, would his initial PCRA change? If so, what elements (person, task, environment) should be considered?



Reflection

What have you learned from this discussion that you will change, begin doing or discontinue doing in your own day to day practice?

Are there additional resources you need from your organization to support you with Point of Care Risk Assessments (PCRAs) and other Routine Practices?

Is there any additional information on Routine Practices that you want to learn more about (see resources)?



Resources

[Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Health Care Settings \(PIDAC\)](#)

[Chain of Transmission](#)

[COVID-19 IPAC Fundamentals Training \(PHO\)](#)

[Point-of-Care Risk Assessment Handout](#)

[Putting on PPE / Taking of PPE Videos](#)

[Routine Practices and Additional Precautions \(PIDAC\)](#)

[Routine Practices Fact Sheet for All Health Care Settings \(PHO\)](#)

Questions or Feedback

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Acknowledgements

Hamilton Niagara Haldimand-Norfolk Brant (HNHB) IPAC Hub & Spoke

Niagara Region Public Health & Emergency Services

Ontario Health West IPAC Hub CoP Development Sub-Working Group

