

<i>INFECTION PREVENTION POLICY AND PROCEDURE</i>	
TITLE: CONTACT PRECAUTIONS POLICY	DATE OF ISSUE:
APPROVED BY:	REVIEW/REVISED DATE:

Contact Precautions Policies and Procedures

This document will illustrate how to properly create a Contact Precautions policy for your facility.

What needs to be included in a Contact Precautions policy.

1. **Purpose:** This section should describe why the Contact Precautions policy exists. For example, to ensure the prevention of diseases spread through contact, by utilizing the appropriate PPE and disinfectants.
2. **Goal:** This section should describe the goals of having this policy. The goal of this policy is to provide SNF staff with a safe and healthy work environment, both for working with residents and for staff protection.
3. **Scope:** The scope is to whom this policy applies to. For example, staff, visitors, and residents.
4. **Definitions:** This section should define any terms in the following policy that may not be commonly known or that the facility administration feels are important to have explicitly defined.
5. **Procedure:** This section describes the roles and responsibilities of SNF administration and staff, the actions needed to be taken by SNF staff to be in compliance with this policy, and resources for further questions and education.

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PURPOSE:

- To prevent the transmission of infectious agents, including epidemiologically important microorganisms, which are spread by direct and indirect contact with resident or their environment.

DEFINITIONS:

- Personal Protective Equipment (PPE) – used to prevent or minimize exposure and to protect from potential transmission of biological agents that can be transferred from person to person by direct and indirect contact, for Contact Precautions this includes gown and gloves.
- Standard Precautions (SP) –used for all resident care. They’re based on a risk assessment and use of personal protective equipment (PPE) that protect healthcare providers from infection and prevent the spread of infection from resident to resident. The use of PPE is based on the “anticipated exposure” to blood, body fluids, secretions, or excretions.

INFECTIONS REQUIRING CONTACT PRECAUTIONS:

- Hepatitis A
- Diarrhea (non-Clostridium Difficile Infection [CDI])
- Scabies

For more examples, see Type and Duration of Precautions Recommended for Selected Infections and Conditions ([CDC Appendix A](#)).

POLICY STATEMENT:

- In addition to Standard Precautions, Contact Precautions will be promptly initiated when a resident is suspected or confirmed to have a disease that is transmitted by direct or indirect contact with resident or their environment.

PROCEDURE:

1. Assess resident for contact transmission risk. This is to be performed upon admission or when there is a change in condition associated with suspected or confirmed contact designated pathogen.
2. If suspected or confirmed, immediately notify IP and DON and place contact precautions signage on the door.
3. Perform hand hygiene prior to entering the room.
4. Don PPE (gown + gloves) outside of resident’s room or upon entry, or prior to resident care task.
5. Doff (remove) and discard PPE (gown + gloves) prior to exiting the room.
6. Perform hand hygiene.

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PROCEDURE FOR ROOM PLACEMENT:

1. Single room preferred.
2. Residents with same disease or same organism may share a room. Please refer to Los Angeles County Department of Public Health (LACDPH) guidelines on cohorting.
3. Prioritize residents with conditions that may foster transmission (i.e., uncontained drainage, stool incontinence), for single room placement.

PROCEDURE ON TRANSFER WITHIN FACILITY:

1. Limit patient transport outside of the room (i.e., only when medically necessary).
2. Inform receiving department or staff of contact precautions.
3. Cover or contain potentially infectious body fluids before transport.
4. Practice hand hygiene before and after transporting resident.
5. Staff should adhere to standard and contact precautions when deciding what PPE to wear while transporting resident.

PROCEDURE ON INTER-FACILITY TRANSFERS:

1. If transport is necessary, cover or contain potentially infectious body fluids before transport.
2. Notify the receiving facility that Contact precautions are required.
3. Use the LACDPH Infectious Organism Transfer form.
4. Practice hand hygiene before and after transporting the resident.
5. Staff should adhere to standard and contact precautions when deciding what PPE to wear while transporting resident.

CLEANING & DISINFECTION:

1. Staff must wear appropriate PPE (gown + gloves).
2. Use disinfectants that are EPA-approved and follow instructions for use (contact time).
3. High touch surfaces should be disinfected often.

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RESOURCES:

1. *CDC Resource*
<https://www.cdc.gov/infectioncontrol/guidelines/isolation/precautions.html#:~:text=These%20include%3A%20hand%20hygiene%3B%20use,exposure%3B%20and%20safe%20injection%20practices.>
2. *LACDPH Contact precaution signage:*
<http://publichealth.lacounty.gov/acd/docs/IPContactPrecautions.pdf>
3. *Adherence monitoring tool contact precautions:*
<https://www.cdph.ca.gov/Programs/CHCO/HAI/CDPH%20Document%20Library/AdherenceMonitoringContactPrecautionsApproved101516.pdf>
4. *LACDPH infectious disease transfer form:*
<http://publichealth.lacounty.gov/acd/docs/FacilityTransferForm.pdf>
5. *CDC Appendix A:*
<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html>