## Ministry of health Infection control directorate



Infection Control Directorate Audit of COVID-19 Infection Control Guidelines in Healthcare Regions

Name of the health region/hospital:.....Date:.....Date:.....

Check items		Yes	No	NA	Comments
1.	Hand hygiene (HH)				
1.	Hand hygiene is emphasized.				
2.	MOH approved alcoholic hand ruband posters of HH are available in patient care and waiting areas.				
2.	Respiratory Triage:				
3.	Respiratory triage is established at casualty, outpatient and primary healthcare centers.				
4.	Hand Hygiene is performed as indicated (5 moments)				
5.	Visual triage personnel enquiring about respiratory symptoms are keeping spatial distance of 1m and				
	performing frequent Hand Hygiene (HH). If cannot, wear medical/surgical mask and eye protection.				
6.	Triage personnel with direct patient contact (e.g. taking vital signs) are wearing medical/surgical mask,				
	gown, gloves and eye protection.				
7.	Patients with respiratory symptoms are provided with mask (if tolerated) and placed in a well-				
	ventilated area away (1m apart) from other patients, ensure they have a separate waiting area.				
3.	Transmission based precautions				
8.	Designate an area at the facility (e.g., an ancillary building, structure or identify entire units) to be a				
	"respiratory evaluation center" where patients with respiratory symptoms can seek evaluation/care.				
	Contact and droplet precautions are implemented for suspected or confirmed COVID-19 patients.				
	Patient is placed in a well-ventilated single room with the door closed and dedicated bathroom.				
11.	If single rooms are not available, patients suspected of being infected with COVID-19 are grouped				
	together; patients' beds are placed at least 1 m apart.				
12.	Airborne Infection Isolation Room (AIIR) is reserved for aerosol-generating procedures and patients				
	requiring close monitoring .				
	HCWs should be dedicated to care exclusively for suspected or confirmed cases (including cleaners).				
	Appropriate doffing and disposal of all PPE's and hand hygiene are carried out.				
	Equipment is either single-use or dedicated equipment (e.g., stethoscopes, blood pressure cuffs).				
	Equipment shared among patients are cleaned and disinfected between uses (e.g. ethyl alcohol 70%).				
	Movement of patients out of their room is restricted (e.g. use designated portable X-ray equipment).				
18.	If transport is required, predetermined transport route is used to minimize exposure, and the patient is				
	provided a medical mask. HCWs transporting patients perform HH and wear appropriate PPE.				
	The receiving area is notified as early as possible before patient's arrival.				
	The number of HCWs in contact with a suspected and confirmed COVID-19 patient is limited.				
21.	Minimize all HCW not directly involved in patient care (e.g., dietary, housekeeping employees)				

Check items		No	NA	Comments
4. Personal protective equipment (PPE)				
22. There is available stock from all the needed PPE (gown, medical/surgical mask, N95 respirator, mask with face				
shield and goggles).				
23. Health Care Workers (HCWs) providing direct care to suspected or confirmed COVID-19 patients are wearing				
medical/surgical mask, gown, gloves and eye protection (goggles or face shield).				
24. HCWs are wearing N95 mask, gown, gloves and eye protection during aerosol generating procedures on suspected or confirmed COVID-19 patients.				
25. HCWs performing physical examination of patient with respiratory symptoms are wearing medical/surgical mask, gown, gloves and eye protection.				
26. Emergency Medical Services (EMS) personnel transporting suspected or confirmed COVID-19 patients are				
wearing medical/surgical mask, gown, gloves and eye protection (EMS driver does not require PPE unless assisting in loading/unloading patient from the vehicle).				
27. During daily cleaning of patient care areas dealing with suspected or confirmed COVID-19 patients; cleaners				
are wearing medical/surgical mask, gown, gloves and eye protection (if risk of splash).				
28. All administrative staff must not use PPE- other than surgical mask- and keep 1 meter distance.				
29. Improper use of PPE is observed in different areas of the healthcare facility, (specify type of misuse/location).				
30. Improper use of PPE is discouraged and clarified.				
5. Environment				
31. Hand rub products and closed waste bins are available at patient care areas, corridors and waiting areas.				
32. Waste from suspected or confirmed COVID-19 patients and used PPE are treated as infectious waste.				
33. Sharp yellow box available in the patient care area for discarding sharps, box is closed after each use				
34. For suspected/confirmed COVID-19 patients, cleaning is done once daily and on need with neutral detergent				
followed by freshly prepared chlorine solution of 1000 ppm.For frequently -touched surfaces around the				
patient bed, clean by 70% Ethyl alcohol at least three times daily.(refer to updated disinfection policy) 35. Terminal cleaning for rooms is done after evacuating the room (minimum of 45 min).				
36. For suspected/confirmed COVID-19 patients, Cleaners wear full PPE during cleaning and discard it after.				
37. Laundry from suspected/COVID-19 patients are treated as infectious and sent to laundry in heat soluble bags.				
6. Sampling				
38. HCWs are wearing N95 mask, gown, gloves and eye protection during taking nasopharyngeal samples, PPE				
can be used for several patients if done on the same time, provided that they change gloves and perform HH.				
39. HCWs are wearing surgical mask and gloves during taking rapid blood test of non-respiratory patient, and all PPE if suspected COVID-19.				
40. All samples from suspected or confirmed COVID-19 patients are placed in biosafety bags.				
41. The samples are transferred by trained personnel in a closed waterproof box.				
42. Laboratory workers dealing with respiratory samples from suspected or confirmed COVID-19 patient are				
wearing surgical mask, gown, gloves, eye protection (if risk of splash).				

Signature of infection control doctor:.....

Signature of director:....