



COVID-19 Infection Prevention and Control Assessment Tool

*****SEND COMPLETED FORM TO M.COSTA@CENTERFORAUTISM.COM**

Center Demographics

Center Name: _____

Center Address: _____

Which of the following situations apply to the Center? (Select all that apply)

- Cases identified in their Center (either among Staff and/or Patients)
- If yes, please specify the number of cases among Patients _____ and among Staff _____

Visitor restrictions and non-essential personnel restrictions

Both CDC and CARD have recommend restricting all visitors from entering the Center. Exceptions may be considered on a case-by-case basis. All visitors should first have temperature and symptom screening (e.g., **fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell**) to safeguard Patients. Ill visitors should not enter. Visitors who are granted access should perform frequent hand hygiene, wear a cloth face covering (for source control), and conduct their visit in a location designated by the Center. Additional best practices include designating a single entrance for visitors, posting signage at entrances to the Center, and providing communication to Patients and families.

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p>What is your current policy for visitors?</p> <p>Center restricts all visitation except for certain compassionate care situations, such as end-of-life situations.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Are there any exceptions to your visitation policy?</p> <p>What are those exceptions?</p> <p>Decisions about visitation are made on a case-by-case basis.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>If visitors are allowed in, what screening occurs?</p> <p>Potential visitors are screened prior to entry for fever or symptoms of COVID-19. Those with symptoms are not permitted to enter the Center (e.g., fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell).</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

<p><i>Are there any restrictions or requirements on visitors once they enter? Do you provide them with any additional information on hand hygiene?</i></p> <p>Visitors that are permitted inside, must wear a cloth face covering while in the building and restrict their visit to the patient's room or other location designated by the Center. They are also reminded to frequently perform hand hygiene.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>What has your Center done to communicate with family members of Patients? What have you told family members about visiting?</i></p> <p>Center has sent a communication (e.g., letter, email) to families advising them that no visitors will be allowed in the Center except for certain pre-approved situations.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Is the Center offering alternative means of communication instead of visits? What are those?</i></p> <p>Center has provided alternative methods for visitation such as video conferencing for Patients.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Are there signs to prevent entrance into the Center (e.g., no visitors)?</i></p> <p>Center has posted signs at entrances to the Center advising that no visitors may enter the Center.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

Education, Monitoring, and Screening of Staff

Education of STAFF (including consultant personnel) should explain how the IPC measures protect Patients, themselves, and their loved ones, with an emphasis on hand hygiene, PPE, and **monitoring** of their symptoms. Consultant personnel are individuals who provide specialized care or services (for example, wound care or podiatry) to Patients in the Center on a periodic basis. They often work at multiple Centers in the area and should be included in education and screening efforts as they can be exposed to or serve as a source of pathogen transmission. If STAFF work while ill, they can serve as a source of pathogen transmission within the Center. STAFF should be reminded not to report to work when ill. All STAFF should self-monitor when they are not at work and be **actively screened** upon entering the Center. Ideally, this would occur at the entrance to the Center, before they begin their shift. Screening includes temperature check and asking about symptoms like subjective fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell. If they have a fever of 100.0 F or higher or symptoms, they should be masked and sent home. Because symptom screening will not identify individuals who are infected but otherwise asymptomatic or pre-symptomatic, Centers should also implement universal source control policies requiring anyone in the Center to wear a facemask or cloth face covering. When available, facemasks are generally preferred over cloth face coverings for STAFF as facemasks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others. Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is required.

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p>Have you provided any in-service training or education to the staff due to COVID-19? What was included in those?</p> <p>Center has provided education and refresher training to STAFF (including consultant personnel) about the following:</p> <ul style="list-style-type: none"> • COVID-19 (e.g., symptoms, how it is transmitted) 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<ul style="list-style-type: none"> • Sick leave policies and importance of not reporting to or remaining at work when ill 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<ul style="list-style-type: none"> • New policies for source control while in the Center 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Do you ever audit or record performance of things like hand hygiene? Selection and use of personal protective equipment? Environmental cleaning?</p> <p>Center monitors STAFF adherence to recommend practices, including:</p> <ul style="list-style-type: none"> • Hand hygiene 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<ul style="list-style-type: none"> • Selection and use of PPE; have STAFF demonstrate competency with putting on and removing PPE including face coverings and face shields. 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<ul style="list-style-type: none"> • Cleaning and disinfecting environmental surfaces and patient toys and equipment. 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>What is your current staffing capacity?</p> <p>Center is aware of staffing needs and has a plan in the event of staffing shortages.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p><i>What is the Center encouraging for staff in terms of social distancing?</i></p> <p>All STAFF are reminded to practice social distancing when in break rooms and common areas in compliance with CARD CBS Protocols.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Do you pre-screen all staff screening in accordance with CARD health screening protocols? How does that work? What do you do if someone has a fever or symptoms?</i></p> <p>All STAFF are screened at the beginning of their shift for fever and symptoms of COVID-19 (i.e., they do not have fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell).</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<ul style="list-style-type: none"> If they are ill, they are instructed to keep their cloth face covering or face mask on and leave the Center. STAFF with suspected or confirmed COVID-19 should notify their supervisor at any Center where they work. 	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Has your Center had any symptomatic staff? How are they tracked or monitored? Have you communicated this to CARD headquarters?</i></p> <p>Center keeps a list of symptomatic STAFF.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	



Education, Monitoring, and Screening, of Patients and Caregivers

Education of Patients and their loved ones should include an explanation of steps the Center is taking to protect them. The Center should ask Patients and Caregivers to report if they feel feverish or have respiratory symptoms. They should actively monitor all Patients upon admission and at least daily for fever and symptoms of COVID-19 (fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell). All of this needs to be done in accordance with CARD issued health screening protocols.

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p>Have you provided any education to your Patients and Caregivers on ways they can protect themselves (like washing hands, visitor restriction, social distancing)?</p> <p>Center has provided education to Patients and Caregivers about the following:</p> <ul style="list-style-type: none"> • COVID-19 (e.g., symptoms, how it is transmitted) 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Importance of immediately informing STAFF if they feel feverish or ill 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Actions they can take to protect themselves (e.g., hand hygiene, covering their cough, maintaining social distancing) 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Actions the Center is taking to keep them safe (e.g., visitor restrictions, changes in PPE use, canceling group activities and communal dining) 	<input type="radio"/> Yes <input type="radio"/> No	
<p>Are you screening Patients? How are you screening them/what questions are you asking them? How often? What is included?</p> <p>Center assesses Patients for fever and symptoms of COVID-19 (fever, new or worsening cough, difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat, and new loss of taste or smell) upon admission and at least daily throughout their stay in the Center.</p>	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Patients with suspected COVID-19 are immediately placed in appropriate Transmission-Based Precautions consistent with CARD CBS Protocol. 	<input type="radio"/> Yes <input type="radio"/> No	

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p><i>Are you keeping track of Patients who are symptomatic or have symptoms in Skills?</i></p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Has your Center made any changes to group activities (e.g., playground activities, gyms or field trips)?</i></p> <p>Center has stopped group activities inside the Center and field trips outside of the Center.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>How are Patients receiving meals? Has anything changed with communal dining?</i></p> <p>Center has stopped communal dining.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>If there is a case within the Center in the future, have you made a plan for where the patient with COVID-19 will be placed consistent with CARD protocol while they are waiting to be picked up?</i></p> <p>Center has dedicated a space in the Center to care for Patients with confirmed COVID-19.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

Availability of PPE and Other Supplies

Major distributors in the United States have reported shortages of PPE. Shortages of alcohol-based hand sanitizers and refills and certain disinfectants have also been reported. Centers should assess their current supplies of PPE and other critical materials as soon as possible and begin implementing strategies to optimize their current supply of PPE.

Any shortages of PPE or cleaning products needs to be communicated immediately to the CARD Facilities Department. Plan in advance and do not wait until you are low on supplies.

(Disinfectants used at a Center should be EPA-registered, hospital-grade disinfectants with an emerging viral pathogens claim against SARS-CoV-2. List N on the EPA website lists products that meet EPA's criteria for use against SARS-CoV-2 (<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>))

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p>How is your current supply of facemasks and face shields; disposable cleaning gloves; for the next 1-2 weeks?</p> <p>Center has assessed current supply of PPE and other critical materials (e.g., alcohol-based hand sanitizer, EPA-registered disinfectants, tissues). (https://www.cdc.gov/coronavirus/2019-ncov/Staff/ppe-strategy/burn-calculator.html)</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>What is your Center doing to try and conserve PPE? Are you aware of the recommendations to conserve PPE? Do you have a backup plan if you don't have enough?</p> <p>If PPE shortages are identified or anticipated, Center has an immediate plan to work with CARD Facilities.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Center has implemented measures to optimize current PPE supply</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Where is your PPE located? Is it readily available for staff that need it?</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	<p><input type="radio"/></p>
<p>How much disinfectant does your Center have on hand? Do you expect a shortage?</p> <p>EPA-registered, hospital-grade disinfectants with an emerging viral pathogens claim against SARS-CoV-2 are available to allow for frequent cleaning of high-touch surfaces and shared patient care equipment.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p>Are trash cans accessible throughout the Center? What about tissues?</p> <p>Tissues and trash cans are available in common areas and patient rooms for respiratory hygiene and cough etiquette and source control.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

Infection Prevention and Control Practices

Sinks should still be stocked with soap and paper towels. Hand hygiene should be performed in the following situations: before patient contact, even if PPE is worn; after contact with the patient; after contact with blood, body fluids, or contaminated surfaces or equipment; before performing aseptic tasks; and after removing PPE. Alcohol-based hand sanitizer (ABHS) is an alternative but not priority method of hand hygiene.

Recommended PPE when caring for Patients with suspected or confirmed COVID-19 includes gloves, facemask if and face shield or goggles. PPE should be readily available and the Center should consider assigning a staff member to shepherd supplies and encourage appropriate use.

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p>When, during patient care, is hand hygiene expected?</p> <p>STAFF perform hand hygiene in the following situations:</p> <ul style="list-style-type: none"> • Before patient contact, after sessions. 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • After contact with the patient 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • After contact with blood, body fluids, or contaminated surfaces or equipment 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Before performing an aseptic task 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • After removing PPE 	<input type="radio"/> Yes <input type="radio"/> No	
<p>What does your Center recommend for hand hygiene? Is there a preference for soap and water or alcohol-based hand sanitizer?</p> <p>Center has preference for alcohol-based hand sanitizer over soap and water</p>	<input type="radio"/> Yes <input type="radio"/> No	
<p>What PPE is being used by STAFF caring for anyone with suspected or confirmed COVID-19</p> <p>STAFF wear the following PPE when caring for Patients with suspected or confirmed COVID-19</p> <ul style="list-style-type: none"> • Gloves 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Face covering 	<input type="radio"/> Yes <input type="radio"/> No	
<ul style="list-style-type: none"> • Eye protection (goggles or face shield) 	<input type="radio"/> Yes <input type="radio"/> No	

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p><i>How are staff taught to remove PPE?</i></p> <p>PPE are removed in a manner to prevent self-contamination and hand hygiene is performed immediately after removal.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>What product do you use for alcohol-based hand sanitizer – do you know the alcohol percentage? Are you experiencing any shortages in alcohol-based hand sanitizer? If so, how are you addressing?</i></p> <p>Hand hygiene supplies are available in all patient care areas.</p> <ul style="list-style-type: none"> • Alcohol-based hand sanitizer* with 60-95% alcohol is available in every patient room and other patient care and common areas. <p>*If there are shortages of alcohol-based hand sanitizer, hand hygiene using soap and water is still expected.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>Do you ever audit or record performance of things like hand hygiene? Selection and use of personal protective equipment? What do you do if you see someone not washing their hands appropriately?</i></p> <p>Hand hygiene and PPE compliance are audited.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>How often are shared equipment and toys cleaned and disinfected? Non-dedicated, non-disposable patient care equipment and toys are cleaned and disinfected after each use.</i></p> <p>Non-dedicated, non-disposable patient care equipment and toys are cleaned and disinfected after each use.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	
<p><i>What disinfectant is used at your Center? Is this ready-to-use (premixed) or does it need to be diluted by your staff? Have you checked to see if that product is effective for coronavirus (EPA List N)?</i></p> <p>EPA-registered, hospital-grade disinfectants with an emerging viral pathogens claim* against SARS-CoV-2 are available to allow for frequent cleaning of high-touch surfaces and shared patient care equipment.</p> <ul style="list-style-type: none"> • *See EPA List N: https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2 • Name of EPA-registered disinfectant used in Center: <p>_____</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	

Communication

Communicating is essential during an outbreak—with STAFF, Patients, families, and the CARD Legal Department. Centers should notify the CARD Legal Department about any patient, staff member or caregiver whom they learn tests positive for COVID-19. All information should be reported to the following email: cardcovid19@centerforautism.com

Elements to be assessed	Assessment (Y/N)	Notes/Areas for Improvement
<p><i>If you have known or suspect cases of COVID-19, how do you plan to communicate this with staff? With Patients? With family members? Corporate Legal Department?</i></p> <p>Center has process to notify CARD Legal Department which in turn works with the center to notify Patients, families, and staff members about COVID-19 cases occurring in the Center or through home-based therapy sessions.</p>	<p><input type="radio"/> Yes <input type="radio"/> No</p>	