# Point-of-Care Risk Assessment (PCRA)

The PCRA is a <u>routine practice</u> that must be conducted by a health care worker (HCW) before every patient/client/resident (hereafter 'patient') interaction to assess the likelihood of exposing themselves and/or others to infectious agents. This assessment informs the selection of appropriate actions and personal protective equipment (PPE) to minimize the risk of exposure. This is a general tool. The questions and actions may need to be adapted for specific health care settings and/or roles.



## Assess before each patient interaction



### The patient

- What are the patient's clinical signs and symptoms related to transmissible infections (e.g., coughing, fever, diarrhoea, vomiting, rash, open wounds)?
- Does the patient have known conditions or risk factors that require additional precautions? If yes, what additional precautions are required?
- ☐ What is the patient's health status (e.g., are they clinically extremely vulnerable)?
- ☐ Is the patient able to practice personal infection prevention and control (IPC) measures (e.g., hand hygiene, respiratory etiquette) or follow simple instructions?



#### The task

- ☐ What type of task am I carrying out (e.g., personal care; a non-clinical interaction)?
- Am I providing direct face-to-face care (e.g., performing an <u>aerosol generating medical procedure</u> (AGMP)) or coming into contact with blood and body fluids?
- Am I trained, equipped and ready for the task?



#### The environment

- Do I have easy access to the equipment and supplies needed to carry out IPC practices (e.g., a sharps container, waste disposal bin, hand hygiene station, PPE, soiled linen hamper, cleaning and disinfection wipes, and other supplies)?
- Are additional precautions, such as patient placement, ventilation or cleaning practices, required and in place?



## Plan and implement your actions



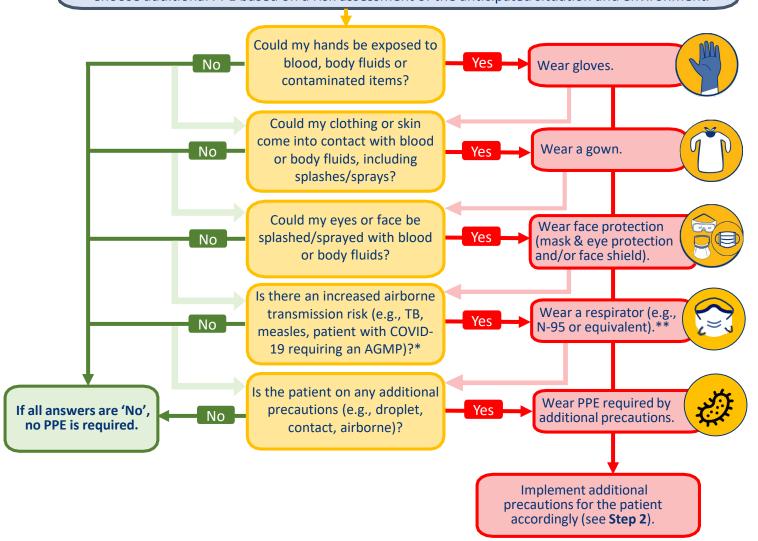
- ☐ Ensure appropriate cleaning and disinfection of equipment and the environment.
- ☐ Clean your hands according to the 4 moments of hand hygiene and before donning/after doffing PPE.
- ☐ Select appropriate PPE (see **Step 3**).
- ☐ Support the patient in following personal respiratory hygiene and other IPC measures.
- ☐ Assess the need for any additional precautions, such as:
  - Patient placement and accommodation (e.g., single room, spatial separation, physical barrier).
  - Additional cleaning and disinfection.
  - Signage.





#### **Assessment for PPE Selection**

- Follow all provincial and organizational masking policies.
- Choose additional PPE based on a risk assessment of the anticipated situation and environment.



- \* Note: An <u>organizational risk assessment</u> is essential for evaluating the hierarchy of controls to minimize risk. The assessment must include reviewing and maintaining ventilation systems. Measures to improve indoor air quality and ventilation are important to decrease the risk of aerosol transmission. See <u>IPC ventilation</u> resources for more information.
- \*\* Note: HCWs must only wear the respirator (i.e., N-95) that they have been currently fit-tested for and must perform a seal check prior to use. Other equivalent respirators, such as elastomeric half-face respirators (EHFRs if fit-tested) and powered air purifying respirators (PAPRs), may also be used if staff have been provided training on their appropriate use and if organizational procedures related to their use are followed. Respirators will be provided in circumstances where a HCW determines there is an elevated transmission risk through patient interaction.

Local organizational guidance may include additional precautions required by local epidemiology and other considerations. Please consult your IPC and/or workplace health & safety teams as needed.

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