**Multidisciplinary Infection Prevention and Control Rounding Tool for Long-Term Care Settings**

Use this tool when rounding at your long-term care community to assess areas for infection prevention and control gaps. It is recommended to perform rounding at least quarterly and involve other leaders and frontline staff in the assessment. This assessment can be performed by the infection preventionist or other designated staff.

|  |  |
| --- | --- |
| **Location:** |  |
| **Observer:** |  |
| **Date:** |  |

**Observations and assessment**

Acceptable (A); Needs improvement (NI); Not applicable (NA);

| **Criteria** | **Assessment** | | | **Comments or follow-up actions needed** |
| --- | --- | --- | --- | --- |
| **A** | **NI** | **NA** |
| **Entrance and lobby area** | | | | |
| Respiratory hygiene or cough etiquette signage is in place |  |  |  |  |
| Alcohol-based hand rub is available |  |  |  |  |
| Tissues and waste receptacles are accessible |  |  |  |  |
| Masks are available |  |  |  |  |
| Furniture is wipeable and free of tears |  |  |  |  |
| Floor and walls are clean |  |  |  |  |
| **Shower and bathing rooms** | | | | |
| Curtain is cleaned on routine basis and free of visible contamination |  |  |  |  |
| Shower and bath are cleaned per facility policy |  |  |  |  |
| Shower and bath are free of visible grime, biofilm, and mold |  |  |  |  |
| Personal resident bathing supplies are stored in the resident’s room and are brought with them each time they bathe |  |  |  |  |
| Multi-use bathing products are used according to facility policy, ensuring that a process is followed to prevent contamination of the product |  |  |  |  |
| Soaps and shampoos are not refilled and pumps are not reused |  |  |  |  |
| Clean bath linens are stored in a manner that prevents water exposure and contamination |  |  |  |  |
| Shared bath equipment (such as shower chairs) are visibly clean |  |  |  |  |
| The area is free from clutter |  |  |  |  |
| Disinfectant is readily available for staff use |  |  |  |  |
| Clean personal protective equipment (PPE) is available for staff and stored in a manner that prevents water exposure and contamination |  |  |  |  |
| **Personal protective equipment (PPE) use** | | | | |
| A respiratory protection program is established, per Occupational Safety and Health Administration (OSHA) recommendation, including respirator fit testing |  |  |  |  |
| Washable isolation gowns are laundered per instructions for use (IFU) |  |  |  |  |
| PPE is not reused |  |  |  |  |
| PPE is readily accessible |  |  |  |  |
| There is a process for cleaning and disinfecting PPE carts |  |  |  |  |
| PPE carts in use are visible clean and well stocked |  |  |  |  |
| Transmission-based precautions and enhanced barrier precautions signage is visible on or near applicable resident room doors |  |  |  |  |
| **Clean storage rooms** | | | | |
| No soiled equipment or materials are present |  |  |  |  |
| Floors and walls are clean |  |  |  |  |
| No supplies are stored on floor |  |  |  |  |
| Storage units and shelving have solid bottom shelves |  |  |  |  |
| Supplies are stored away from windows and vents |  |  |  |  |
| Shelving, drawers, and cabinets are clean |  |  |  |  |
| No expired supplies are stored |  |  |  |  |
| Sterile patient care supplies are free of dust and unopened |  |  |  |  |
| No corrugated carboard boxes or shipping boxes are present |  |  |  |  |
| **Gym and therapy area** | | | | |
| Alcohol-based hand rub (ABHR) is available |  |  |  |  |
| Exercise equipment is clean and free of tears with no taped surfaces |  |  |  |  |
| PPE is available |  |  |  |  |
| Ultrasound gel is not refilled from bulk container |  |  |  |  |
| Shared therapy equipment is disinfected between resident use |  |  |  |  |
| Disinfectant is readily available for staff use |  |  |  |  |
| Equipment that uses water (such as hydrocollator) are maintained according to IFU and are included in the facility’s water management plan |  |  |  |  |
| **Equipment and non-critical patient care items** | | | | |
| Equipment in resident use is clean |  |  |  |  |
| Stored equipment is clean |  |  |  |  |
| Shared equipment is disinfected between resident use |  |  |  |  |
| Disinfectant is readily available for staff use |  |  |  |  |
| Staff know the dwell time of the disinfectant in use and observe the dwell time properly when disinfecting equipment |  |  |  |  |
| Lift slings are stored off the ground and in a manner that prevents contamination. |  |  |  |  |
| Slings are devoted to each resident who needs one and are laundered between residents |  |  |  |  |
| **Linen storage** | | | | |
| Clean and dirty linen are stored separately |  |  |  |  |
| Clean linen is covered during transport |  |  |  |  |
| Walls and floor are clean and free of contamination |  |  |  |  |
| Clean linen is handled and stored in a manner that prevents contamination |  |  |  |  |
| **Laundry services** | | | | |
| PPE is one time use |  |  |  |  |
| Tables are clean and free of clutter |  |  |  |  |
| Equipment and machines are in good repair and preventive maintenance is complete |  |  |  |  |
| Walls and floor are clean and free of contamination |  |  |  |  |
| Clean linen is handled and stored in a manner that prevents contamination |  |  |  |  |
| **Waste management and soiled utility rooms** | | | | |
| Waste containers are clean, operational, and in good condition |  |  |  |  |
| Hopper is well maintained and part of the facility’s water management plan |  |  |  |  |
| Containers are labeled as required |  |  |  |  |
| Regulated medical waste is discarded appropriately |  |  |  |  |
| Floors and walls appear clean |  |  |  |  |
| Free of clean equipment and supplies |  |  |  |  |
| Soiled linen is bagged appropriately |  |  |  |  |
| Sharps containers are available, secured appropriately, and not overfilled |  |  |  |  |
| **Refrigerators and freezers** |  |  |  |  |
| Temperature logs are present and being filled out |  |  |  |  |
| Corrective actions are documented for out-of-range temperatures |  |  |  |  |
| Only medications are stored in the medication refrigerator |  |  |  |  |
| Only lab specimens are stored in the lab specimen refrigerator |  |  |  |  |
| Refrigerators are clean |  |  |  |  |
| Preventative maintenance is performed as required |  |  |  |  |
| Items are labeled per facility policy |  |  |  |  |
| **Medications** | | | | |
| No outdated medications are present |  |  |  |  |
| Opened multi-dose vials are dated with an expiration date of 28 days after opening, unless otherwise specified by the manufacturer |  |  |  |  |
| Medication preparation areas and carts are clean and uncluttered |  |  |  |  |
| Single dose vials are used one time only and for one patient only |  |  |  |  |
| No supplies are stored within splash zone of sink (3 feet) or a splash guard is in place |  |  |  |  |
| Glucometers are dedicated to individual residents (preferred) or disinfected following manufacturer’s IFUs after each use |  |  |  |  |
| A process is in place to prevent contamination of multi-use products such as ointments and creams |  |  |  |  |
| **Hallways and corridors** | | | | |
| Floors clean and free of debris |  |  |  |  |
| Ceiling tiles are damage free |  |  |  |  |
| Artwork and decorations are dust free |  |  |  |  |
| ABHR is available |  |  |  |  |
| Vents are clean with no obstructions |  |  |  |  |
| Handrails are clean |  |  |  |  |
| **Environmental services** | | | | |
| Disinfectants used are Environmental Protection Agency (EPA) registered |  |  |  |  |
| Staff follow disinfectant dwell times |  |  |  |  |
| Mixing stations are maintained by vendor and if necessary, quality control checks (pH) are done by staff per protocol |  |  |  |  |
| Housekeeping closet or area is clean and has separation of clean and dirty |  |  |  |  |
| **Salon** | | | | |
| Walls, floor, furniture, and sinks are clean and free of contamination |  |  |  |  |
| Personal resident hair care supplies are stored in the resident’s room and brought with them each time they go to the salon |  |  |  |  |
| Multi-use hair care products are used according to facility policy, ensuring that a process is followed to prevent contamination of the product |  |  |  |  |
| Disinfectant is readily available for beautician use |  |  |  |  |
| ABHR is available |  |  |  |  |
| **Other** | | | | |
| There is no evidence of water intrusion or leaks |  |  |  |  |
| No patient care devices or supplies are stored under sinks or next to sinks where splashing can occur |  |  |  |  |
| Sharps safety devices are available |  |  |  |  |
| Sharps safety devices are used appropriately |  |  |  |  |
| Eye wash stations are maintained per policy |  |  |  |  |
| Fans are dust free and cleaned on a routine basis |  |  |  |  |
| Hand hygiene products (ABHR and soap) are available, within expiration date, and dispensers are in working order |  |  |  |  |
| Furniture is made of wipeable materials and is free of tears, stains, and damage |  |  |  |  |
| Ice dispenser is clean, maintained, and free of scale |  |  |  |  |
| Flushing of water fixtures is being performed per facility water management plan |  |  |  |  |

**Observations requiring corrective action and follow-up**

|  |  |  |  |
| --- | --- | --- | --- |
| **Observation requiring corrective action** | **Tactics and actions to achieve outcomes** | **Responsible department or person** | **Due date** |
| *Soiled storage room on Wing A had clean resident care supplies stored on the counter tops and in cabinets* | *Ensure staff are educated on separation of clean and dirty and are aware of the new designated clean storage area outside of the soiled storage room.* | *Wing A nurse manager* | *1/1/2026* |
|  |  |  |  |
|  |  |  |  |

For more information on infection prevention and control, visit the Wisconsin Healthcare-Associated Infections (HAI) Prevention Program website (<https://www.dhs.wisconsin.gov/hai/ip-education.htm>).