

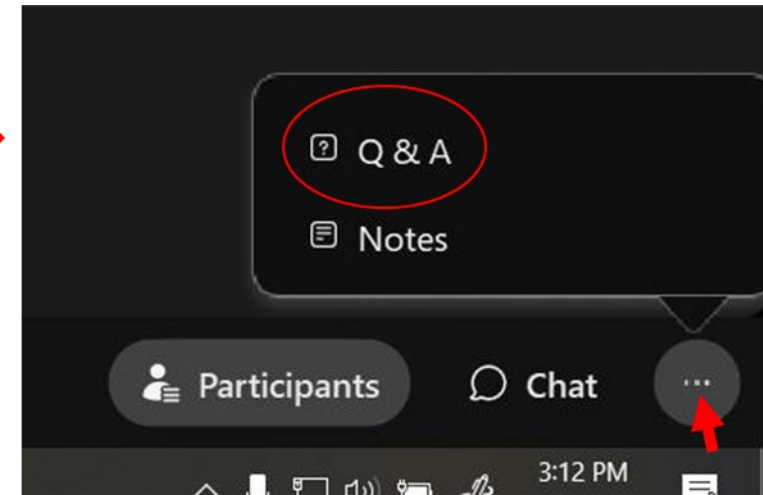


MDH ICAR Infection Prevention Audit Tools

02.22.2023

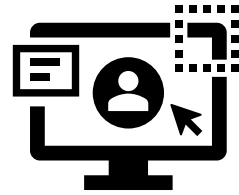
Introduction

- Thank you for joining us!
- Please submit general questions in the “Q&A” box found at the bottom right of the WebEx screen.
 - Our presenters will use the "Chat" box to place links and resources.



- Britt Bailey, MPH - Epidemiologist Senior
 - Tool Function and Demonstration
- Kathy Hogan, RN, BSN, MA, CIC – Nurse Specialist
 - Wound Care
- Kristi Juaire, MSN, RN, CIC – Nurse Specialist
 - Project Lead & Environmental Cleaning
- Caramae Steinwand, BS – Planner Intermediate/Project Firstline Team Lead
 - Hand Hygiene & Personal Protective Equipment (PPE)

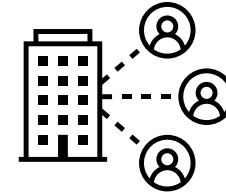
Developed easy-to-use Word and Excel based resources to assist with Infection Prevention Audits.



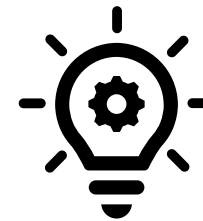
Observation audits are a way to understand if staff fully comply with IPC practices



Partnerships & collaborations with health care facilities and the Infection Control and Response (ICAR) Team



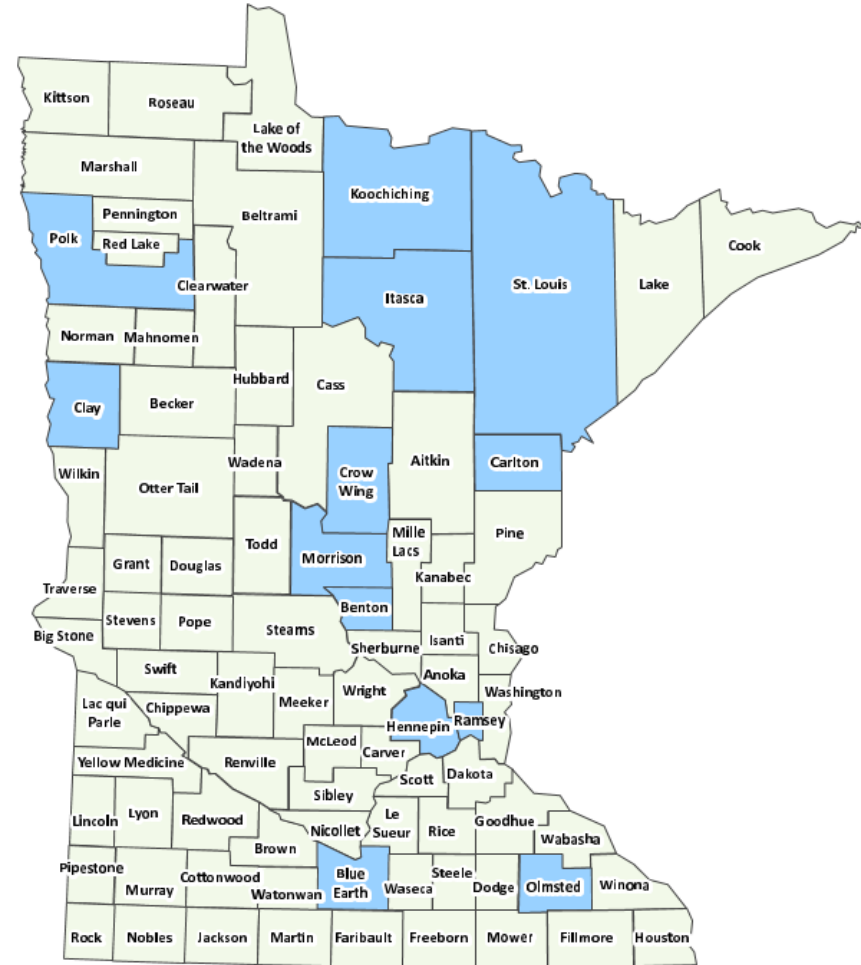
MDH ICAR team identified a need for a standardized resource to audit staff compliance



Why Infection Prevention Audit Tools?

Facility engagement around the State of MN

The counties highlighted in blue are where facilities expressed interest in participating in the Pilot Program.



Infection Prevention Domains



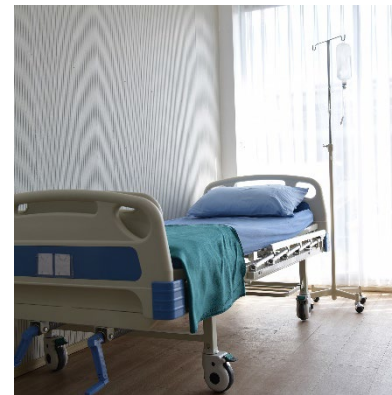
Hand Hygiene



Wound Care



Personal Protective
Equipment (PPE)



Environmental Cleaning

Audit Tools Objectives

- Assess compliance at the role, department/unit, and facility level.
- Identify whether there are opportunities to improve.
- Identify the specific steps where improvement needs to be targeted.
- Measure improvement over time and visualize it in a run chart that the tracking tool generates automatically as data is entered

Infection Prevention Audit Tools

- **Observation tools**
 - Built in Microsoft Word and to be used by the auditor to assess if evidence-based infection prevention standards were met within the topic area.
- **Audit Workbooks**
 - Built in Microsoft Excel to manage and analyze 12 months of audit data

Observation Tools

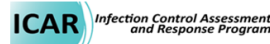


Hand Hygiene Observation Tool

This audit tool can be used to determine compliance of hand hygiene practices for any staff member. Facilities may also consider using this tool for outside contractors, visitors, and volunteers.

Observer: _____ Date: _____ Unit: _____

Role	Action	Hand Hygiene Observed
<input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> CNA <input type="checkbox"/> EVS <input type="checkbox"/> PCA <input type="checkbox"/> TMA <input type="checkbox"/> DSP <input type="checkbox"/> REHAB <input type="checkbox"/> RT <input type="checkbox"/> DIETARY <input type="checkbox"/> LAUNDRY <input type="checkbox"/> ACTIVITIES <input type="checkbox"/> FACILITIES <input type="checkbox"/> PROVIDER <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> ENTER <input type="checkbox"/> EXIT	<input type="checkbox"/> WASH <input type="checkbox"/> RUB <input type="checkbox"/> MISSED
<input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> CNA <input type="checkbox"/> EVS <input type="checkbox"/> PCA <input type="checkbox"/> TMA <input type="checkbox"/> DSP <input type="checkbox"/> REHAB <input type="checkbox"/> RT		<input type="checkbox"/> WASH



PPE and Hand Hygiene Observation Tool

This audit tool can be used to determine compliance of hand hygiene and personal protective equipment practices for any staff member.

Observer: _____ Date: _____ Unit: _____

Role	Action	Hand Hygiene Observed	Transmission Based Precautions and PPE Donned/Doffed
<input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> CNA <input type="checkbox"/> EVS <input type="checkbox"/> PCA <input type="checkbox"/> TMA <input type="checkbox"/> DSP <input type="checkbox"/> RT <input type="checkbox"/> REHAB <input type="checkbox"/> PROVIDER <input type="checkbox"/> DIETARY <input type="checkbox"/> LAUNDRY <input type="checkbox"/> ACTIVITIES <input type="checkbox"/> FACILITIES <input type="checkbox"/> OTHER: _____	<input type="checkbox"/> ENTER <input type="checkbox"/> EXIT	<input type="checkbox"/> WASH <input type="checkbox"/> RUB <input type="checkbox"/> MISSED	<input type="checkbox"/> STANDARD <input type="checkbox"/> CONTACT <input type="checkbox"/> CONTACT/DROPLET <input type="checkbox"/> DROPLET <input type="checkbox"/> ENHANCED BARRIER <input type="checkbox"/> ENHANCED RESPIRATORY Gloves: <input type="checkbox"/> Yes <input type="checkbox"/> No Gown: <input type="checkbox"/> Yes <input type="checkbox"/> No Gloves: <input type="checkbox"/> Yes <input type="checkbox"/> No Gown: <input type="checkbox"/> Yes <input type="checkbox"/> No Mask: <input type="checkbox"/> Yes <input type="checkbox"/> No Mask: <input type="checkbox"/> Yes <input type="checkbox"/> No Gloves: <input type="checkbox"/> Yes <input type="checkbox"/> No Gown: <input type="checkbox"/> Yes <input type="checkbox"/> No Gloves: <input type="checkbox"/> Yes <input type="checkbox"/> No Gown: <input type="checkbox"/> Yes <input type="checkbox"/> No N95 or PAPR: <input type="checkbox"/> Yes <input type="checkbox"/> No Eye Protection: <input type="checkbox"/> Yes <input type="checkbox"/> No

02/22/2023



Wound Dressing Change Observation Tool

This audit tool can be used to determine compliance of wound dressing change practices for any staff member.

Observer: _____ Date: _____ Location (room/unit/etc.): _____

Role	All supplies gathered before dressing change ¹	HH performed before dressing change	Clean gloves donned before dressing change ²	Multi-dose wound care meds used appropriately ³	Dressing change performed in manner to prevent cross-contamination ⁴	Gloves removed after dressing change completed	HH performed after dressing change completed	Reusable equipment cleaned and/or disinfected appropriately ⁵	Clean, unused supplies discarded or dedicated to one resident	Wound care performed/assessed regularly ⁶	Wound care supply cart is clean ⁷
<input type="checkbox"/> RN <input type="checkbox"/> REHAB <input type="checkbox"/> PROVIDER <input type="checkbox"/> CONTRACTOR	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
<input type="checkbox"/> RN <input type="checkbox"/> REHAB <input type="checkbox"/> PROVIDER <input type="checkbox"/> CONTRACTOR	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA



Environmental Checklist for Monitoring Terminal Cleaning

Selection of detergents and disinfectants should be according to institutional policies and procedures.

Nursing homes may choose to include identifiers of individual environmental services staff for feedback purposes.

Initials of ES staff (optional): _____

Date: _____

Unit: _____

Room Number: _____

Monitoring method used:

- Direct observation
- Fluorescent gel
- Swab cultures
- ATP system
- Agar slide cultures

Evaluate the following priority high touch sites most frequently touched in each resident room.

High Touch Surface Types	High Touch Room Surfaces	Cleaned	Not Cleaned	Not Present in Room
High Touch I	Bed rails/controls			
	Tray table			

How do the tools work together?

*All data represented in this presentation are from a sample dataset



Hand Hygiene Observation Tool

This audit tool can be used to determine compliance of hand hygiene practices for any staff member. Facilities may also consider using this tool for outside contractors, visitors, and volunteers.

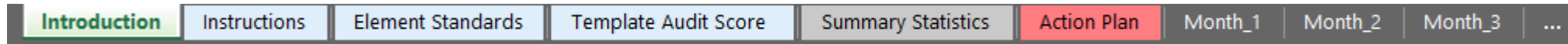
Observer: Britt Bailey Date: 10/1/2022 Unit: Rehab

Role	Action	Hand Hygiene Observed
<input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> CNA <input type="checkbox"/> EVS <input type="checkbox"/> PCA <input type="checkbox"/> TMA <input type="checkbox"/> DSP <input checked="" type="checkbox"/> REHAB <input type="checkbox"/> RT <input type="checkbox"/> DIETARY <input type="checkbox"/> LAUNDRY <input type="checkbox"/> ACTIVITIES <input type="checkbox"/> FACILITIES <input type="checkbox"/> PROVIDER <input type="checkbox"/> OTHER: _____	<input checked="" type="checkbox"/> ENTER <input type="checkbox"/> EXIT	<input type="checkbox"/> WASH <input checked="" type="checkbox"/> RUB <input type="checkbox"/> MISSED



October 2022									
Audit Information						Hand Hygiene Performed (Calculated Field)	Actual Score	Missed Opportunities	Percentage Attained
Job Role	Audit Date (mm/dd/yyyy)	Location (e.g. Room #, Unit)	Room Enter/Exit (choose one)	Hand Hygiene Observed					
Rehab	10/1/2022	Rehab Room	Enter	RUB	Y	1	0	100%	
LPN	10/1/2022	A1	Enter	RUB	Y	1	0	100%	
LPN	10/2/2022	A1	Exit	WASH	Y	1	0	100%	
RN	10/2/2022	B1	ENTER	WASH	Y	1	0	100%	
CNA	10/3/2022	B3	EXIT	RUB	Y	1	0	100%	
EVS	10/3/2022	Memory Care	EXIT	MISSED	N	0	1	0%	
						0	0		
						0	0		
Total Score						5			
Missed Opportunities						1			
Achievable Score						6			
Comments: (insert comments here)									
								83.3%	

Features of the Audit Workbook



Each workbook contains 18 tabs

- **Introduction:** why the tool was developed, other resources available and where to begin
- **Instructions:** setting the timeframe and compliance goal
- **Element standards:** data dictionary and provides information on the data elements
- **Template Audit Score:** example of a completed month tab
- **Summary Statistics:** data entered in each month is rolled up into the Summary Statistics tab
- **Action Plan:** document audit action plans and track progress
- **Month_1:Month_12:** recording employee and audit data

Audit Tool: Instructions Tab

- This tab allows you to set your timeframe (tracking year and tracking start date) and goal compliance rate
- After selecting the tracking start date (mm-yyyy), the workbook will calculate the next 11 months.
- The goal compliance rate will be included in the compliance rate graph to allow for you to see how the monthly compliance rate compares.

Hand Hygiene Audit Tracking Tool Instructions

Step 1: Before entering your monthly observational audit data, select an option from each of the drop-down menus (click on the arrow icon). Complete the following fields: Facility Name, Tracking Year, Tracking Start Date, and Goal Compliance Rate.

FACILITY NAME:	Test Facility
TRACKING YEAR:	2022
TRACKING START DATE: (mm-yyyy)	January 2022
GOAL COMPLIANCE RATE: (e.g. 90%, 95%, etc.)	75%

Step 2: Navigate to the Month_1 tab to begin the first month of tracking.

Step 3: Insert "Y" for yes, "N" for no and "N/A" for not assessed, for each opportunity during the EVS audit. The box will automatically go blue for "Y", red for "N" and yellow for "N/A". The pop-up box for 'Allowed Values' can be temporarily disabled.

Step 4: Achievable Score, Total Score, Actual Score, Missed Opportunities, and Overall Percentage Score will be automatically calculated.

Audit Tool: Template Audit Score Tab

January 2022 ← Month is automatically calculated based on information entered in the 'Instructions' tab

Audit Information					Actual Score	Missed Opportunities	Percentage Attained
Job Role	Audit Date (mm/dd/yyyy)	Location (e.g. Room #, Unit)	Room Enter/Exit (choose one)	Hand Hygiene Observed	Hand Hygiene Performed (Calculated Field)		
DIETARY	1/11/2022			MISSED	N	0	1 0%
LAUNDRY	1/12/2022			MISSED	N	0	1 0%
ACTIVITIES	1/13/2022			MISSED	N	0	1 0%
FACILITIES	1/14/2022			MISSED	N	0	1 0%
CONTRACTOR	1/15/2022			MISSED	N	0	1 0%
OTHER	1/16/2022			MISSED	N	0	1 0%
PROVIDER	1/17/2022			WASH	Y	1	0 100%
DIETARY	1/18/2022			WASH	Y	1	0 100%
DIETARY	1/19/2022			WASH	Y	1	0 100%
Total Score					32		
Missed Opportunities					18		
Achievable Score					50		

Comments (insert comments here):

Any concerns or notes should be entered here

Monthly Compliance: **64.0%**

Monthly compliance rate

Audit data

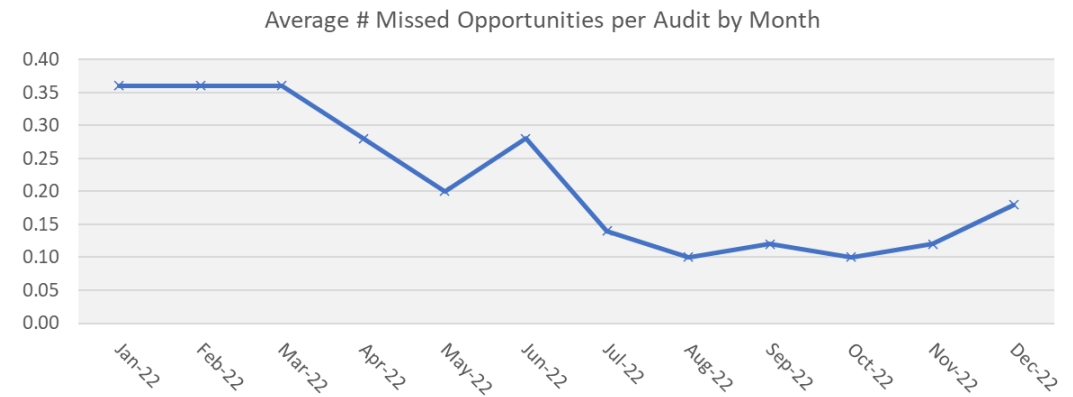
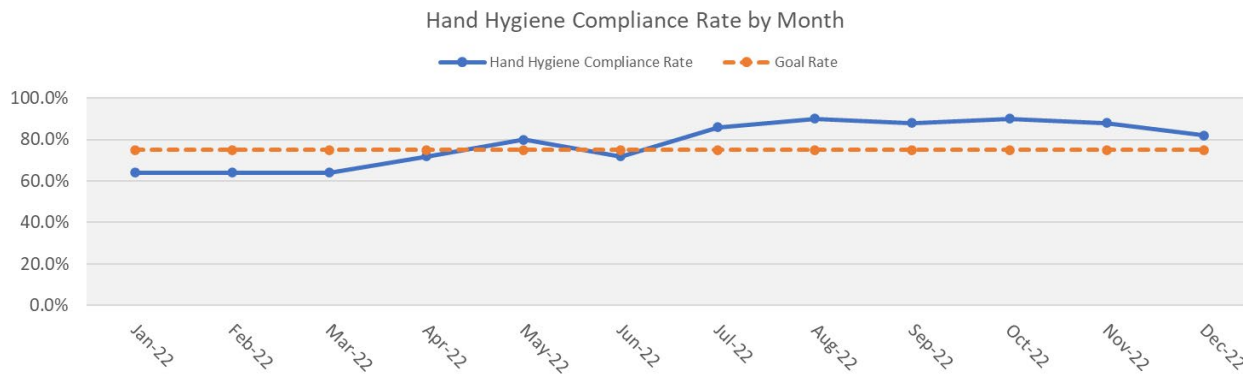
Data calculations

Monthly compliance rate

Summary Statistics: Show me the data!

- Data entered in each month is rolled up into this tab

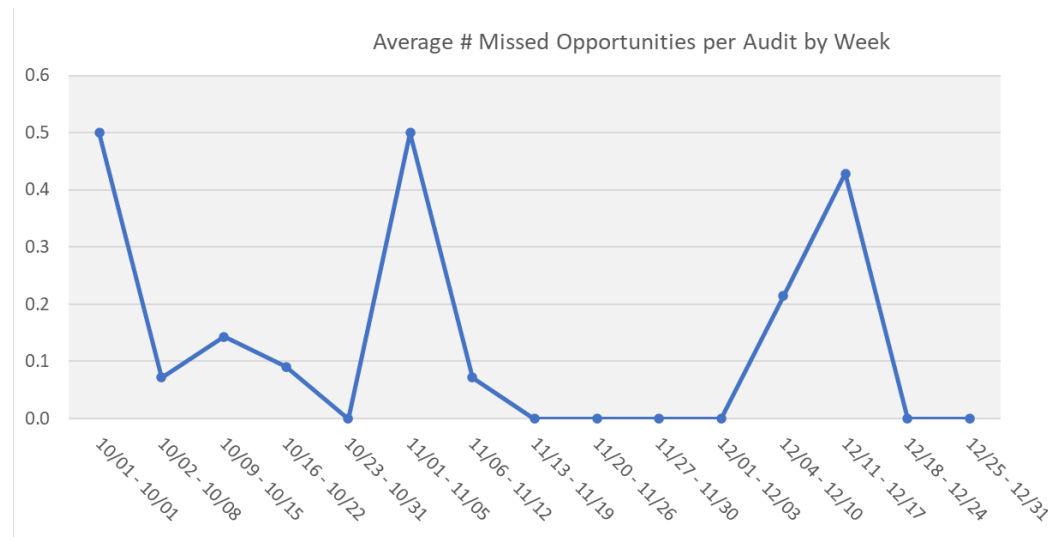
Reporting Month		Month_1	Month_2	Month_3	Month_4	Month_5	Month_6	Month_7	Month_8	Month_9	Month_10	Month_11	Month_12
		Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22
Hand Hygiene COMPLIANCE	# of Audits Conducted	50	50	50	50	50	50	50	50	50	50	50	50
	Hand Hygiene Compliance Rate	64.0%	64.0%	64.0%	72.0%	80.0%	72.0%	86.0%	90.0%	88.0%	90.0%	88.0%	82.0%
	Average # Missed Opportunities per Audit	0.36	0.36	0.36	0.28	0.20	0.28	0.14	0.10	0.12	0.10	0.12	0.18



Summary Statistics: Monthly/Weekly Comparison

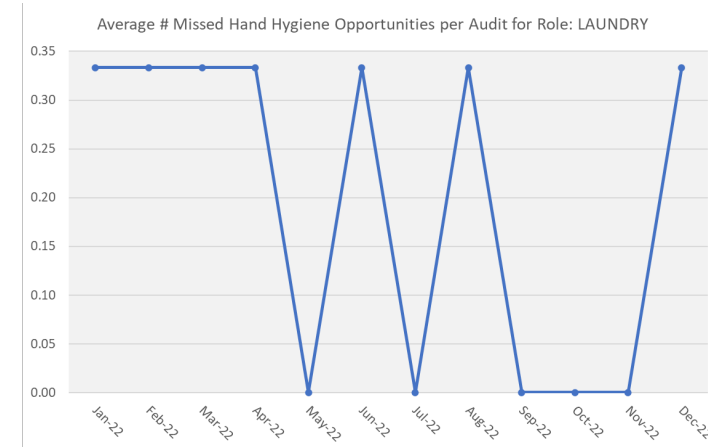
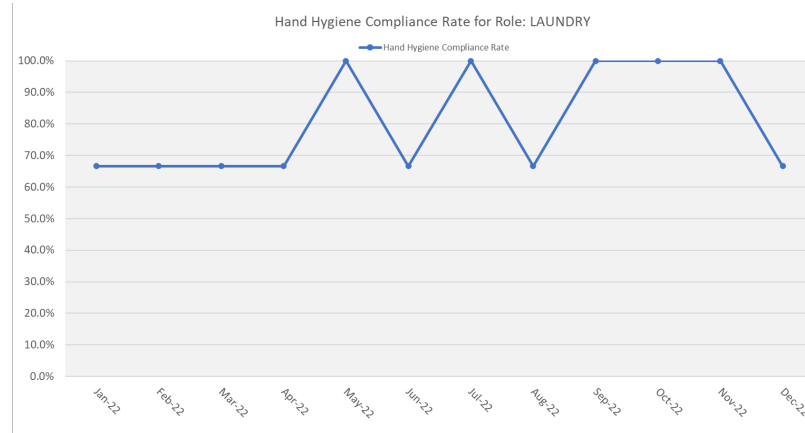
- Monthly/weekly comparison

SELECT MONTHS FOR COMPARISON →		Oct-22					Nov-22					Dec-22				
WEEKLY (Su - Sa) RATES	Start of Week	10/1/2022	10/2/2022	10/9/2022	10/16/2022	10/23/2022	11/1/2022	11/6/2022	11/13/2022	11/20/2022	11/27/2022	12/1/2022	12/4/2022	12/11/2022	12/18/2022	12/25/2022
	End of Week	10/1/2022	10/8/2022	10/15/2022	10/22/2022	10/31/2022	11/5/2022	11/12/2022	11/19/2022	11/26/2022	11/30/2022	12/3/2022	12/10/2022	12/17/2022	12/24/2022	12/31/2022
Hand Hygiene COMPLIANCE	# of Audits Conducted	2	14	14	11	9	10	14	14	8	4	6	14	14	9	7
	# of Missed Opportunities	1	1	2	1	0	5	1	0	0	0	0	3	6	0	0
	Average # Missed Opportunities per Audit	0.5	0.1	0.1	0.1	0.0	0.5	0.1	0.0	0.0	0.0	0.0	0.2	0.4	0.0	0.0
NUMBER OF MISSED OPPORTUNITIES	Hand Hygiene Performed	1.00	1.00	2.00	1.00	0.00	5.00	1.00	0.00	0.00	0.00	0.00	3.00	6.00	0.00	0.00



Summary Statistics: Job Role

Select Job Role:		LAUNDRY											
HH RATES BY JOB ROLE: LAUNDRY													
Reporting Month		Month_1	Month_2	Month_3	Month_4	Month_5	Month_6	Month_7	Month_8	Month_9	Month_10	Month_11	Month_12
		Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22
Hand Hygiene COMPLIANCE	# of Audits Conducted	3	3	3	3	3	3	3	3	3	3	3	3
	Hand Hygiene Compliance Rate	66.7%	66.7%	66.7%	66.7%	100.0%	66.7%	100.0%	66.7%	100.0%	100.0%	100.0%	66.7%
	Total Achievable Score	3	3	3	3	3	3	3	3	3	3	3	3
	Total Completed Opportunities	2	2	2	2	3	2	3	2	3	3	3	2
	Total # of Missed Opportunities	1	1	1	1	0	1	0	1	0	0	0	1
	Average # of Missed Opportunities	0.33	0.33	0.33	0.33	0.00	0.33	0.00	0.33	0.00	0.00	0.00	0.33
NUMBER OF MISSED OPPORTUNITIES	Hand Hygiene Performed	1	1	1	1	0	1	0	1	0	0	0	1



Data Story 1: Specific Data Element

- Completed 1 month of environmental cleaning observations and entered data into the audit workbook
- Monthly Compliance Rate: 65%
 - TDC High Touch 1%: 35.96%

Reporting Month		Month_1
		Jan-22
Environmental Services COMPLIANCE	# of Audits Conducted	50
	Environmental Services Compliance Rate	65.0%
	Average # Missed Opportunities per Audit	6.78
Category TDC Score %	High Touch I	35.96%
	High Touch II	68.89%
	High Touch III	68.89%
	Bathroom Surfaces	68.89%
	Equipment Surfaces	68.89%

Data Story 1: Specific Data Element Example

- Navigate to the "Monthly Tab"

January 2022			
Location	High Touch I		
Mark the monitoring method used	Bed rails/controls	Tray table	IV Pole (grab area)
Missed Opportunities (# of Surfaces Missed)	14	19	40
Achievable Score (# of Surfaces Evaluated)	45	24	45
% of Surfaces Cleaned	68.89%	20.83%	11.11%
Category: Total # of Surfaces Cleaned	41		
Category: Total # of Surfaces Evaluated	114		
Category TDC Score: % of Surfaces	35.96%		

- Within the "Summary Statistics" tab

SELECT MONTHS FOR COMPARISON →		Jan-22				
WEEKLY (Su - Sa) RATES	Start of Week	1/1/2022	1/2/2022	1/9/2022	1/16/2022	1/23/2022
	End of Week	1/1/2022	1/8/2022	1/15/2022	1/22/2022	1/31/2022
Environmental Services COMPLIANCE	# of Audits Conducted	2	14	14	11	9
	# of Surfaces Missed	1	97	96	94	51
	Average # Missed Surfaces per Audit	1	7	7	9	6
	Bed rails/controls	0.00	4.00	4.00	4.00	2.00
	Tray table	0.00	6.00	6.00	5.00	2.00
	IV Pole (grab area)	1.00	11.00	10.00	9.00	9.00

Data Story 1: Specific Data Element (continued)

- Documenting actions within the "Action Plan"

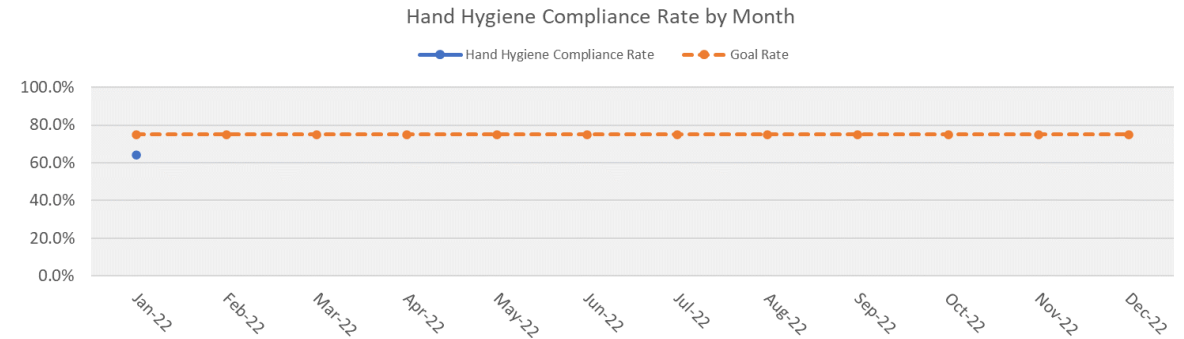
EVS Audit Action Plan

Department	Issue	Action	Assigned Staff	Due Date	Comments / Outcome
EVS	Finding missed or forgotten items	Data was shared with EVS manager	IP	2/10/2022	
EVS	Finding missed or forgotten items	Target education	EVS Manager	2/28/2022	Competency reviewed at staff meeting

Data Story 2: Compliance/Role Data

- Completed 1 month of hand hygiene observations and entered data into the audit workbook
- Monthly Compliance Rate: 64%
 - Goal compliance rate: 75%
 - Are there differences between roles and hand hygiene compliance rate?

Reporting Month		Month_1
		Jan-22
Hand Hygiene COMPLIANCE	# of Audits Conducted	50
	Hand Hygiene Compliance Rate	64.0%
	Average # Missed Opportunities per Audit	0.36



Data Story 2: Compliance/Role Data Example

Select Job Role:	PROVIDER	
HH RATES BY JOB ROLE: PROVIDER		
Reporting Month		Month_1
		Jan-22
Hand Hygiene COMPLIANCE	# of Audits Conducted	4
	Hand Hygiene Compliance Rate	75.0%
	Total Achievable Score	4
	Total Completed Opportunities	3
	Total # of Missed Opportunities	1
	Average # of Missed Opportunities	0.25
NUMBER OF MISSED OPPORTUNITIES	Hand Hygiene Performed	1

Select Job Role:	TMA	
HH RATES BY JOB ROLE: TMA		
Reporting Month		Month_1
		Jan-22
Hand Hygiene COMPLIANCE	# of Audits Conducted	3
	Hand Hygiene Compliance Rate	33.3%
	Total Achievable Score	3
	Total Completed Opportunities	1
	Total # of Missed Opportunities	2
	Average # of Missed Opportunities	0.67
NUMBER OF MISSED OPPORTUNITIES	Hand Hygiene Performed	2

Data Story 2: Compliance/Role Data (continued)

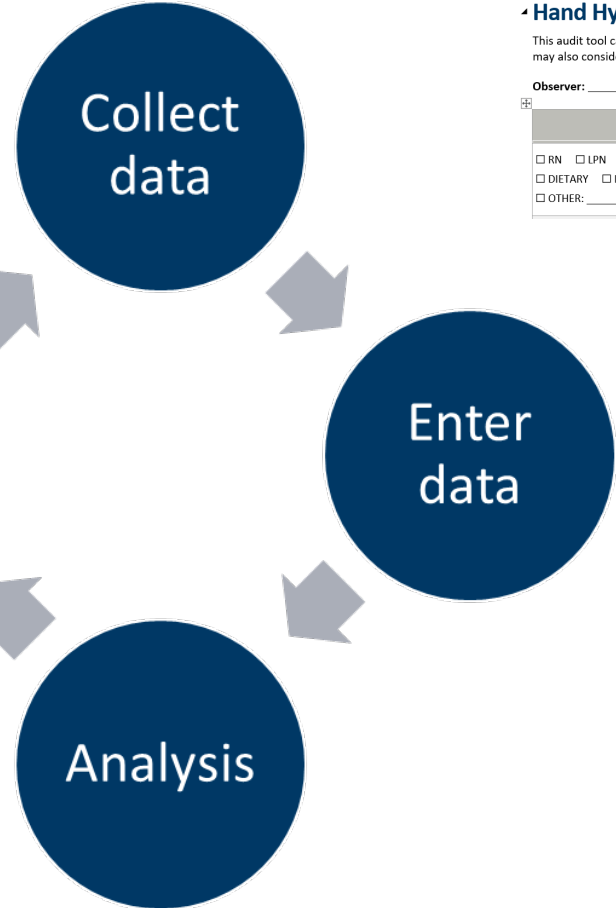
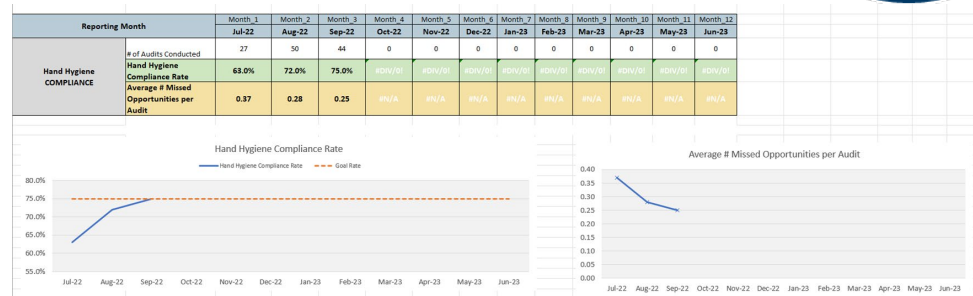
- Documenting actions within the "Action Plan"

Hand Hygiene Audit Action Plan					
Department	Issue	Action	Assigned Staff	Due Date	Comments / Outcome
Nursing	Missed HH opportunities	Share data with Nurse Manager	IP	2/15/2022	
Nursing	Missed HH opportunities	Have TMAs review PFL module on HH	Nurse Manager	2/28/2022	Recorded when TMAs viewed PFL module

Infection Prevention Audit Tools Wrap Up

Hand Hygiene Audit Action Plan

Department	Issue	Action	Assigned Staff	Due Date	Comments / Outcome



Hand Hygiene Observation Tool

This audit tool can be used to determine compliance of hand hygiene practices for any staff member. Facilities may also consider using this tool for outside contractors, visitors, and volunteers.

Observer: Britt Bailey Date: 10/1/2022 Unit: _____

Role	Action	Hand Hygiene Observed
<input type="checkbox"/> RN <input type="checkbox"/> LPN <input type="checkbox"/> CNA <input type="checkbox"/> EVS <input type="checkbox"/> PCA <input type="checkbox"/> TMA <input type="checkbox"/> DSP <input checked="" type="checkbox"/> REHAB <input type="checkbox"/> RT <input type="checkbox"/> DIETARY <input type="checkbox"/> LAUNDRY <input type="checkbox"/> ACTIVITIES <input type="checkbox"/> FACILITIES <input type="checkbox"/> PROVIDER <input type="checkbox"/> OTHER: _____	<input checked="" type="checkbox"/> ENTER <input type="checkbox"/> EXIT	<input type="checkbox"/> WASH <input checked="" type="checkbox"/> RUB <input type="checkbox"/> MISSED

October 2022

Audit Information										Actual Score	Missed Opportunities	Percentage Attained
Job Role	Audit Date (mm/dd/yyyy)	Location (e.g. Room #, Unit)	Room Enter/Exit (choose one)	Hand Hygiene Observed	Hand Hygiene Performed (Calculated Field)							
Rehab	10/1/2022	Rehab Room	Enter	RUB	Y	1	0	100%				
LPN	10/1/2022	A1	Enter	RUB	Y	1	0	100%				
LPN	10/2/2022	A1	Exit	WASH	Y	1	0	100%				
RN	10/2/2022	B1	ENTER	WASH	Y	1	0	100%				
CNA	10/3/2022	B3	EXIT	RUB	Y	1	0	100%				
EVS	10/3/2022	Memory Care	EXIT	MISSED	N	0	1	0%				
Total Score										5		
Missed Opportunities										1		
Achievable Score										6		

Comments: (insert comments here)

83.3%

Where to find the tools?

- Infection Prevention Audit Tools Instruction Manual
- 4 sections (HH, PPE, Wound Care & EVS)
 - Observation (PDF & Word)
 - Audit Tracking Workbook (Excel)
- Location: [MDH ICAR Infection Prevention Audit Tools](http://www.health.state.mn.us/facilities/patientsafety/infectioncontrol/icar/res/audit.html)
(www.health.state.mn.us/facilities/patientsafety/infectioncontrol/icar/res/audit.html)

Thank You!

Questions: email health.icar@state.mn.us