



Infection Prevention Assessment Tool
Ventilator and Respiratory Care Module
Hospitals, LTACH, and LTCF

Facility Name:	Respondent Name:
Assessment Date:	Respondent Title:
IP Conducting Assessment:	Assessment Type: <input type="checkbox"/> Case/cluster/outbreak response <input type="checkbox"/> Infection prevention breach (<i>specify: injection safety, reprocessing, other</i>) <input type="checkbox"/> Special project, <i>specify:</i>

	TRAINING AND EDUCATION	Response	Notes
1a.	Does your facility have a training program that includes infection prevention and control practices during respiratory therapy for ventilated and/or tracheostomy patients (for example, suctioning, administration of aerosolized medication) or care of ventilator equipment?	<input type="checkbox"/> Yes <input type="checkbox"/> No, <i>skip to 2</i>	
1b.	Who is included in the training? <i>Select all that apply.</i>	<input type="checkbox"/> Registered nurses <input type="checkbox"/> Respiratory therapists <input type="checkbox"/> Respiratory technicians <input type="checkbox"/> Other, <i>specify:</i>	
2.	Do personnel performing respiratory therapy receive training at the time of employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	TRAINING AND EDUCATION	Response	Notes
3.	How frequently does respiratory therapy staff receive training?	<input type="checkbox"/> Annually <input type="checkbox"/> Every 6 months <input type="checkbox"/> Monthly <input type="checkbox"/> Other, <i>specify</i> :	Training should occur at least annually.
4.	Are personnel required to demonstrate competency with respiratory therapy practice (specifically, correct technique is observed by trainer) following each training?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5.	Does facility maintain current documentation of competency with respiratory practices for all personnel who provide respiratory care for ventilated patients?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6.	Is training provided when new equipment or protocols are introduced?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

	EQUIPMENT HANDLING, CLEANING, AND DISINFECTION	Response	Notes
7.	If multi-dose vials are used, are manufacturer's instruction of handling, storing, and dispensing medications followed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
8.	If multi-dose vials are used for more than one patient/resident, are vials dated when initially accessed, stored appropriately, and kept outside the immediate resident treatment area (specifically, vials do not enter the immediate resident treatment area)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	

	EQUIPMENT HANDLING, CLEANING, AND DISINFECTION	Response	Notes
9.	Is each patient's reusable nebulizer appropriately stored in a clean, dry place to prevent microbial contamination between use?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10.	Is sterile water used when nebulizer chambers are cleaned?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11.	Are ventilators cleaned on a routine basis, per facility policy and manufacturer recommendation?	<input type="checkbox"/> Yes, <i>ask to see manufacturer documentation</i> <input type="checkbox"/> No	
12.	Are respiratory personnel responsible for ventilator cleaning and disinfection and held accountable for the process? Note: Process should include auditing and record keeping.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13.	How often are the following respiratory equipment changed?		
13a.	Ventilator circuits		Per policy.
13b.	In-line suction set		Per policy.
13c.	Yankaur suction catheter		Per policy.
13d.	Nebulizer		Per policy.
13e.	Storage bag used to house respiratory materials		Per policy.
14.	Where are ventilators cleaned and disinfected?		
15.	What cleaning and disinfection agent is used for ventilators?		
16.	Is a different cleaning agent used for certain MDRO such as <i>C.difficile</i> or <i>C.auris</i> ?	<input type="checkbox"/> Yes, <i>specify cleaning agent:</i> <input type="checkbox"/> No	

	EQUIPMENT HANDLING, CLEANING, AND DISINFECTION	Response	Notes
17a.	Where are cleaned equipment stored?		
17b.	How do staff know if equipment is clean?		
18.	Is there an obvious designation of clean and dirty in the storage area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19.	When a vented patient/resident with an MDRO is discharged, what happens with the extra supplies that are stored in the patient/resident's room?		
20a.	Does your facility have an oral hygiene program for ventilator patients/residents?	<input type="checkbox"/> Yes <input type="checkbox"/> No, <i>skip to 21</i>	
20b.	Are antiseptic agents used for oral hygiene?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20c.	How often is oral hygiene performed?	<input type="checkbox"/> Daily <input type="checkbox"/> Q shift <input type="checkbox"/> Other, <i>specify:</i>	
21.	Does your facility implement a Ventilator Associated Pneumonia (VAP) prevention bundle?	<input type="checkbox"/> Yes, <i>specify elements implemented:</i> <input type="checkbox"/> Daily oral care with chlorhexidine <input type="checkbox"/> Daily sedation vacations and assessment of readiness to wean (for acute care patients) <input type="checkbox"/> Deep vein thrombosis (DVT) prophylaxis <input type="checkbox"/> Elevation of the head of the bed (HOB)	

	EQUIPMENT HANDLING, CLEANING, AND DISINFECTION	Response	Notes
		<input type="checkbox"/> Peptic ulcer disease prophylaxis <input type="checkbox"/> No	
22.	How does the facility track compliance with adherence to the VAP bundle elements?		