including Portable Isolation Containment System [PICS])

This checklist was developed by Alberta Health Services (AHS) Infection Prevention and Control for use by experienced Infection Control Professionals (ICPs) during the establishment and commissioning of any communicable disease assessment centre.

Overview

Health services are an integral component of every community. In the event of a large-scale event (man-made or natural) which increases the demands for healthcare services, the availability of, and access to health services can become challenging. In some circumstances, Temporary Assessment/Treatment Centres may be established to function in addition to emergency departments, urgent care and other existing healthcare services.

The AHS Incident Management System (IMS) organizational structure is based on the Incident Command System (ICS), which enables rapid integration and connectivity between sites, services, zones, external partners and stakeholders. It defines the roles and responsibilities of personnel and the operating procedures to be used in the management and direction of emergencies and disasters.

Infection Prevention and Control (IPC) is represented at each level of the IMS structure. IPC requirements are integral to establishing and commissioning temporary health service delivery areas and structures used during the post-disaster period, such as a temporary assessment/treatment centre.

Strikethrough any lines that are not applicable.

No	Area	Yes	No	
1.	General considerations			
1.1.	Consult with IPC during site selection and before opening			
1.2.	Areas are secure and cleaned prior to occupancy			
1.3.	External signs indicate site is for specific assessment/treatment			
1.4.	Procedure/surgical masks for patients available at entry to centre			
1.5.	Clear separation of clean and soiled supplies and linens			
1.6.	Supply areas large enough to accommodate needed supplies and equipment and IPC storage principles			
1.7.	Designate separate entrance and exit routes for one-way patient flow			
1.8.	General workflow: clean to dirty			
1.9.	General waste holding area is away from assessment and/or treatment spaces			
1.10.	Defined area for assessment and triage, as required			
1.11.	Defined area for environmental services and supplies			





Infection Prevention & Control

No	Area	Yes	No
1.12.	Defined area for charting		
1.13.	Defined area for medication and medical supplies		
1.14.	Biohazardous waste holding area is away from assessment and treatment spaces		
1.15.	Potable water is accessible		
1.16.	Grey water holding tank is separated from potable water		
1.17.	Plan for management of reusable soiled equipment and instruments		
1.18.	Promote single-use medical devices		
2.	Water intrusion management resources (PICS only)		
2.1.	Sandbags, squeegee, bailing bucket, wet vacuum available		
2.2.	Vinyl flooring sections are sealed during setup		
3.	Pre-occupancy cleaning requirements (PICS only)		
3.1.	Floors are cleaned with a HEPA filter-equipped vacuum and washed		
3.2.	Interior and exterior walls are cleaned with a standard detergent and warm water as per manufacturer's instructions		
3.3.	Isolation pods' interior walls are disinfected with AHS provided disinfectant		
4.	Washroom/portable toilet		
4.1.	Toilet and hand hygiene sink are available for staff		
4.2.	Toilet and hand hygiene sink are available for patients		
4.3.	Dedicated toilet and hand hygiene sink for isolation patients based on specific additional precautions required		
5.	Hand hygiene accessibility		
5.1.	Consult the <u>AHS ABHR Dispenser Placement Algorithm</u> to optimize locations and determine the maximum allowable number of dispensers		
5.2.	Priority for placement of ABHR		
5.3.	a. Priority 1 - point-of-care		
5.4.	b. Priority 2 - clean and sterile supplies		
5.5.	c. Priority 3 - PPE donning and doffing		
5.6.	d. Priority 4 - at entrance/exit to the healthcare area		
5.7.	Portable hand hygiene sink, soap dispenser, and disposable single-use towels are available		

Original date: May 1, 2025

Revised date:



No	Area	Yes	No
6.	Environmental Cleaning		
6.1.	Environmental Services Standard Operating Procedures followed		
6.2.	General and Biomedical Waste management SOP followed		
6.3.	Consider secondment of AHS ES staff or contracted agency familiar with cleaning healthcare facilities		
6.4.	Schedule for routine environmental cleaning based on existing SOP, including patient area and outbreak events is established and adjusted for specific activities and patient characteristics		
6.5.	AHS-provided RTU (ready to use) disinfectant products and wipes are available		
6.6.	Cart with cleaning supplies, cleaning agents and disinfectants are available		
6.7.	Blood and body fluid spill kit including cleaning cart, hand pail, clean cloths, wet mop, bucket and wringer, cleaning/disinfecting product(s), spill pack, dustpan, brush, wet floor signs, garbage bags, soiled linen bags, mask and gloves, absorbent material, and safety goggles/glasses. Additional PPE may be required, as appropriate.		
7.	Heating/ventilation/air conditioning		
-	ding on the use of centre, including PICS, air pressure and air exchanges may be ers, otherwise directional airflow will be verified and not all will apply	validat	ed by
7.1.	Minimally establish directionality, pressure, temperature and humidity		
7.2.	Relative humidity monitoring and documentation: 30-60%		
7.3.	Temperature monitoring and documentation: 20-24° C		
7.4.	Documented maintenance schedule for Air/HEPA Filters		
7.5.	IPC recommendations for Temporary Airborne Isolation Rooms, as required.		
7.6.	Clean storage area - positive pressure: 12 ACH		
7.7.	Resuscitation, treatment area and/or airborne isolation room: negative pressure: 12 ACH		
7.8.	Soiled storage area - negative pressure: 10 ACH		
7.9.	Operating room - positive pressure: 20 ACH (airflow from top-down ideal) *OR use not applicable in all situations		

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8.	Triage area		
8.1.	Consider space and privacy for conducting assessments		
8.2.	Routine, surgical masks for patients and ABHR are available		
8.3.	Triage area is able to separate patients requiring isolation, i.e., distance / physical barriers		
8.4.	Symptom-based assessment tools, including GI/ILI/rash/wound, are available to assess all patients for signs and symptoms of acute infection		
8.5.	Symptom-based references for PPE and additional precautions are available as part of the IPC Resource Manual		
9.	Treatment area (when in use.)		
9.1.	Beds/cribs are separated by 2 meters with barriers (walls/screens/curtains)		
9.2.	ABHR dispensers are readily available (see section 5)		
9.3.	Smooth, non-porous, solid-surface general waste containers are available		
9.4.	Biohazardous waste containers are available		
9.5.	Sharps containers available at point-of-care		
9.6.	Clean and sterile supplies are minimized, i.e., no overstocking		
9.7.	Supplies and linens stored away from potential contamination		
9.8.	Adequate types, sizes, models and quantities of PPE are available		
10.	Isolation treatment area		
10.1.	Is connected to a vestibule or interconnected hallway that is used as an anteroom		
10.2.	Beds are separated by 2 meters with barriers (walls/screens/curtains)		
10.3.	Hand hygiene ABHR dispensers are readily available. In case of a GI outbreak, consider relocating a portable hand hygiene sink (see section 5)		
10.4.	General waste containers are available large enough for PPE disposal		
10.5.	Biohazardous waste containers are available		
10.6.	Sharps containers are at point-of-care		
10.7.	Clean and sterile supplies are minimized, i.e., no overstocking		
10.8.	Personal Protective Equipment is outside of patient area in anteroom with adequate sizes, models, and quantities		



11.	Isolation PPE cart supplies				
11.1.	Four sizes of gloves				
11.2.	Disposable isolation gowns/aprons				
11.3.	Protective eyewear, i.e., procedure masks with attached face shield or face shield/safety glasses				
11.4.	Respirators - N95 respirators including adequate makes/models/sizes				
11.5.	Procedure masks for use with face shield/safety glasses and for transporting patients on droplet or airborne precautions				
11.6.	ABHR dispenser				
11.7.	Additional precautions signs				
11.8.	AHS-provided disinfectant wipes				
12.	Signage/posters				
It is red	commended that signs be prepared and printed				
These signs are available at www.ahs.ca/ipc					
12.1.	Hand Hygiene				
12.2.	Additional Precautions				
12.3.	PPE Donning/Doffing				
For PICS					
12.4.	Clean supplies				
12.5.	Soiled supply holding area				
12.6.	Soiled linen holding area				
12.7.	Clean linen holding area				
12.8.	General waste holding area				
12.9.	Biohazard/sharps waste holding area				
12.10.	"STOP! DO NOT ENTER" for back door of isolation pod				
12.11.	Patient flow entry and exit routes				