



# Washington State Hospital Association Standardization of Isolation Precaution Signage in Washington *Implementation Toolkit*



## Washington State Hospital Association

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September 2008

Washington State Hospital Association (WSHA) produced these materials based on documents from the Arizona Hospital and Healthcare Association and other hospital associations.

“Washington Hospitals – Collaborating to Keep Patients Safe”



# Standardization of Isolation Precautions Signage in Washington State



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September 2008

To download a copy of this toolkit, go to  
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Special Thanks to  
**Franciscan Health System**  
&  
**MultiCare Health System**  
for leading the way in  
Washington's quest to  
standardize  
Isolation Precautions Signage.



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# Acknowledgments

We would like to thank the taskforce and participating hospitals that worked on developing the Standardized Isolation Precautions Signage. Each contributed in several ways. Their content expertise, time commitment, continuous suggestions for improvement, and eye for details helped make this work a reality.

Participating hospitals:

Hospital
Central Washington Hospital
Columbia Basin Hospital
Deaconess Medical Center
Franciscan Health System
Harrison Medical Center
Mason General Hospital
MultiCare Health System
Naval Hospital
St. Joseph Hospital- Bellingham
Sacred Heart Medical Center and Children's Hospital
Samaritan Hospital
Seattle Children's
Sunnyside Community Hospital
Swedish Health Services
Valley Medical Center – Renton
University of Washington Medical Center
Yakima Regional Medical and Cardiac Center



# Executive Summary

**STOP STANDARD PRECAUTIONS STOP**  
(If you have questions, go to Nurse Station)

**Everyone must:**

- Clean hands when entering and leaving room  
Cover mouth and nose with arm or tissue when coughing or sneezing

**Doctors and Staff must:**

- Gown and glove if soiling likely
- Wear mask and eye cover if splashing body fluids likely

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**STOP CONTACT PRECAUTIONS STOP**  
(In addition to Standard Precautions)

Families and Visitors follow instructions from information sheet  
(If you have questions, go to Nurse Station)

**Everyone must:**

- Clean hands when entering and leaving room

**Doctors and Staff Must:**

- Gown and glove at door
- Use patient dedicated or disposable equipment.  
Clean and disinfect shared equipment.

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**STOP CONTACT ENTERIC PRECAUTIONS STOP**  
(In addition to Standard Precautions)

Families and Visitors follow instructions from information sheet  
(If you have questions, go to Nurse Station)

**Everyone must:**

- Wash hands when entering and leaving room

**Doctors and Staff must:**

- Gown and glove at door
- Use patient dedicated or disposable equipment.  
Clean and disinfect shared equipment.

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**STOP DROPLET PRECAUTIONS STOP**  
(In addition to Standard Precautions)

Families and Visitors follow instructions on information sheet  
(If you have questions, go to Nurse Station)

**Everyone must:**

- Clean hands when entering and leaving room
- Wear mask

**Doctors and Staff must:**

- If contact with secretions likely, use gown, glove, and eye cover

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**STOP AIRBORNE CONTACT PRECAUTIONS STOP**  
(ENTER ONLY IF NEEDED)

Families and Visitors follow instructions from information sheet  
(If you have questions, go to Nurse Station)

**Everyone Must:**

- Clean hands when entering and leaving the room

**Doctors and Staff Must:**

- Airborne Infection Isolation Room required  
Keep door closed
- Gown and glove at door

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**STOP AIRBORNE RESPIRATOR PRECAUTIONS STOP**  
(In addition to Standard Precautions)

Families and Visitors need approval before entering room  
Follow instructions from information sheet  
(If you have questions, go to Nurse Station)

**Everyone must:**

- Clean hands when entering and leaving the room

**Doctors and Staff must:**

- Wear PAPR or fitted N95 mask prior to entering room
- Airborne Infection Isolation Room required  
Keep door closed

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**STOP SPECIAL PRECAUTIONS STOP**  
(In addition to Standard Precautions)

Patients, Visitors, Physicians, and Staff clean hands when entering and leaving the room. Follow instructions as given below.  
(If you have questions, go to Nurse Station)

**Everyone must:**

- IP to add symbol and specific directions
- IP to add symbol and specific directions
- IP to add symbol and specific directions

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# Washington State Hospital Association

## Isolation Precaution Signage

### Executive Summary

Washington hospitals provide good care for patients. Yet, we know more needs to be done to make care safer. Across the nation, hospitals are looking for ways to make care safer and less complicated for physicians and staff to deliver.

Instituting standard practices among all hospitals has great potential to reduce the chances of errors created by individual hospital variations. With a large number of physicians and staff working in multiple hospitals, variations among hospitals can create an increased risk for error and add unnecessary complexity and frustration for health caregivers. It also adds a resource burden to hospitals which must spend time educating staff and physicians about the processes unique to their facility. Isolation precaution signage is a place where standardization could have an enormous positive impact.

The Centers for Disease Control and Prevention (CDC) has identified isolation precautions as one of the top seven strategies in preventing the transmission of methicillin-resistant *Staphylococcus aureus* (MRSA) and other multidrug-resistant organisms. In late 2007, Governor Gregoire convened a Scientific Panel in Washington to look at reducing the spread of MRSA. The experts raised concerns about the variation in isolation precaution practices in Washington hospitals. WSHA found these concerns were valid through a survey that revealed wide variation in isolation precaution signage between hospitals. The variation makes it more difficult for physicians and staff to comply with this important practice to reduce the spread of infections in hospitals.

At the request of member hospitals through the Safe Table on Eliminating Hospital Acquired Infections, WSHA staff was asked to convene members to standardize isolation signage in Washington hospitals. *The standardized isolation precautions signage is a means to convey important safe practices about a patient and communicate the specific actions health care workers and family/visitors must take.*



The group was comprised of hospitals of various sizes from across the state. The purpose of the standardization is to:

- Prevent the spread of infections between patients and to staff;
- Support hospitals in meeting CDC guidelines;
- Help patients feel more secure (patients worry when practices are done differently);
- Reduce duplication of work;
- Create consistency enabling physicians and staff to deliver safe care;
- Increase compliance and understanding of consistent expectations; and
- Inform family and visitors what they can do to help prevent the spread of infection.

As isolation precautions have not been standardized nationally, the group based their work off of the CDC guidelines, the successful initiative to standardize precaution signage in Pierce County, and examples from other Washington State hospitals.

The signage that was created follows the guidelines from the CDC. Expert Infection Preventionists (Infection Control Practitioners) in Washington chose to create two categories for contact precautions and two categories for airborne precautions for the following reasons:

- Adding Contact Enteric reinforces the unique interventions needed to prevent the spread of the highly transmittable *Clostridium difficile* and other similar organisms where staff must wash hands with soap and water and potentially clean using a chlorine-based disinfectant. This organism has impacted Washington patients and forced the closure of patient care units in Washington hospitals and long term care facilities.
- Airborne was split into two types of precautions because there is significant difference in the precautions needed to keep staff and patients safe. Tuberculosis requires fitted masks like PAPR or N95. Measles, herpes zoster, and chickenpox do not require these special masks.

The standardized Washington isolation precautions signage has three components:

- Precaution signs for patient rooms;
- Instructions for healthcare workers on the back; and
- Color-coded patient, family, and visitor information sheets.



We felt it was important to have the materials reviewed by national experts. *Washington State's standardized signage has been commended and endorsed by the Centers for Disease Control and Prevention (CDC), the Association for Professionals in Infection Control and Epidemiology (APIC), and the Joint Commission.*

The signs were also reviewed by the Washington State Department of Health for regulatory compliance. In addition, input from patients, families, and nursing staff has been incorporated. This work has been supported by the Washington State Nurses Association.

While standardization of isolation precautions signage is voluntary, we hope that all hospitals will implement it. The Washington State Hospital Association is supporting this effort at the request of members who are looking for ways to reduce harm to patients. Hospital leaders believe this process is important because many of our staff and physicians work in multiple hospitals. The Washington State Hospital Association Board has endorsed the uniform signage and encourages Washington hospitals to implement by October 1, 2009.

The types of precautions and colors are:

Type of Precaution	Color
Standard	Yellow
Contact	Orange
Contact Enteric	Orange/Brown Stripe
Droplet	Green
Airborne Contact	Blue/Orange Stripe
Airborne Respirator	Blue/Pink Stripe
Special Precautions	White

Note: All precautions are in addition to Standard Precautions which should be used on all patients.

Special Precautions was designed for Infection Preventionists to be able to create additional precautions for highly unusual infections such as a SARS outbreak.

If you have questions, please contact [CarolW@wsha.org](mailto:CarolW@wsha.org) or (206) 577-1831.