



# Negative Pressure Isolation Room Procedure

## 1. Guiding Principles

To ensure a safe working environment for staff and patients when isolating a patient in a Negative Pressure Isolation Room (NPIR) with a suspected or confirmed airborne transmissible disease such as Pulmonary Tuberculosis, Measles, Varicella (Chicken Pox) or COVID-19.

## 2. Procedure

- Ensure the Negative airflow is functioning effectively prior to transferring a patient into a NPIR.
- If the room can be turned on or off Negative pressure, ensure the room dial is in the Negative Pressure / Isolation mode. This may require the use of a key and the location of the key should be well socialised with relevant staff.
- Review the Pa display (digital display or dial may be available) generally mounted outside the NPIR / airlock / ante room. The display noting the negative pressure within the patient room should note a minimum of **“minus 30 Pa”** to the airlock / anteroom.
- If there are any concerns identified in relation to the appropriate Pa reading of the room, please contact facilities maintenance urgently to request a review of the room to ensure appropriate functioning, prior to patient transfer.
- If required, place the patient in an alternative NPIR if available. If there is no other suitable NPIR available, a single room with an ensuite, with demonstrated negative flow from adjacent areas can be utilised with the door kept closed. Consider the use of an air purifier if available.
- Ensure only essential patient care equipment is kept in the room.
- Prior to placing the patient in the room, ensure the appropriate equipment / PPE is available in the airlock / ante room:
  - Particulate filter respirators (PFRs) of appropriate sizes and types
  - Illustrative posters outlining “Fit- checking” and donning and doffing processes
  - Surgical masks for the patient to wear during transfers to and from the room
  - Protective eyewear / face shields
  - Disposable long sleeved fluid repellent gowns and non-sterile gloves
  - Alcohol based hand sanitiser
  - Appropriate hand wash solutions, paper towels, waste bin/s, linen skip/s lined with soluble bag liners
  - Combination neutral detergent and disinfectant pre-impregnated cleaning wipes
- If the NPIR has an access door to the corridor, the door must remain closed other than when being accessed to transfer the patient in / out of the room. Please advise the patient not to access this door at any time. Routine access to and from the room should only be via the airlock / anteroom.

**Staff must undertake a successful “Fit Check” prior to each entry into the room.**

### 3. Definitions

Fit Check	A fit check is the minimum requirement at the point of use for staff using particulate filter respirators (PFRs). No clinical activity shall be undertaken until a satisfactory fit check has been achieved. It involves a check each time a PFR is put on to ensure it is properly applied, that a good seal is achieved over the bridge of the nose and mouth and there are no gaps between the face and respirator.
Fit Test	A quantitative fit test is a validated method to determine whether the type of respirator being worn provides an adequate seal with a person's face. The testing is done while a person is wearing a PFR attached to a testing unit while performing several physical movements and talking exercises.
Negative Pressure Isolation Room (NPIR)	A room in which the air pressure differential between the room and the adjacent indoor airspace directs the air flowing into the room i.e. room air is prevented from leaking out of the room and into adjacent areas such as the corridor. Refer to the <a href="#">Australasian Health Facility Guidelines - Part D</a>
Particulate Filter Respirators (PFR)	Respirators that filter at least 94 percent of 0.3- micron particles from the air. PFRs are used when implementing airborne precautions. Both P2 and N95 respirators are appropriate for use with airborne precautions.

### 4. Roles and Responsibilities

**WACHS Executive and Regional Executive teams** are responsible for ensuring the processes outlined in the relevant National Safety and Quality Health Service Standards are in place.

**Managers and supervisors** are responsible for monitoring compliance of relevant staff to this procedure.

**All Staff** are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be and all WACHS health care workers involved in the care of a patient in a NPIR or maintenance of the room have a responsibility to ensure they comply with the WACHS NPIR procedure.

### 5. Compliance

It is an expectation that staff will comply with these procedures. Any concerns regarding compliance are to be addressed with the individual concerned and if unable to be resolved, escalated to the appropriate line manager.

Failure to comply with this procedure may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to section 26 of the [Health Services Act 2016](#) (WA) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies is mandatory.

### 6. Records Management

All WACHS clinical records must be managed in accordance with [Health Record Management Policy](#).

### 7. Evaluation

An evaluation of these procedures will occur as per the review date by the owner of the document and / or when any update(s) to relevant reference documents occurs.

### 8. Standards

[National Safety and Quality Health Service Standards](#) - 3.06, 3.07, 3.08, 3.09

### 9. Legislation

[Public Health Act 2016](#) (WA)

### 10. References

[Australasian Health Facility Guidelines](#)  
[Series of National Guidelines \(SoNGs\)](#)

### 11. Related Policy Documents

WACHS [Infection Prevention and Control - Patient management and healthcare worker exclusion periods Policy](#)  
WACHS [Infection Prevention and Control Policy](#)  
WACHS [Personal Protective Equipment \(PPE\) Procedure](#)

### 12. Related WA Health System Mandatory Policies

[Coronavirus Disease - 2019 \(COVID-19\) Infection Prevention and Control in Western Australian Healthcare Facilities](#)  
[Western Australian Health Facility Guidelines for Engineering Services \(Building Guidelines\)](#)

### 13. Policy Framework

#### Public Health Policy Framework

**This document can be made available in alternative formats  
on request for a person with a disability**

<b>Contact:</b>	Clinical Nurse Specialist Infection Prevention and Control		
<b>Directorate:</b>	Infection Control	<b>EDRMS Record #</b>	ED-CO-22-165258
<b>Version:</b>	1.00	<b>Date Published:</b>	1 July 2022

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.