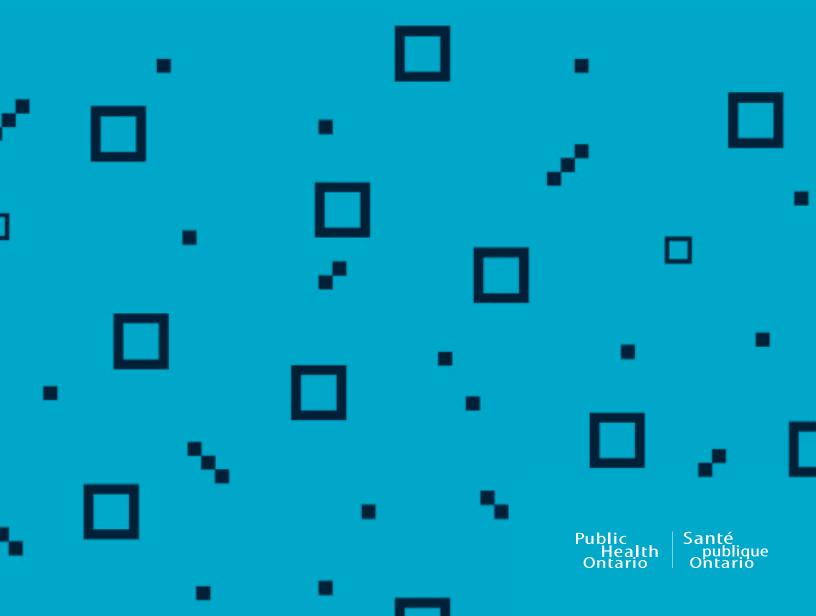
# Orientation for Infection Prevention and Control Leads in Long-Term Care



## When to Use This Checklist

This checklist can be used by infection prevention and control (IPAC) Leads and their Supervisors to select areas of focus for learning, professional development and planning. IPAC Leads may choose to use this roadmap as a guide to build knowledge, skills and abilities needed to be successful in the IPAC Lead role.

This checklist is to be used in addition to –and does not replace- the advice, guidelines, recommendations and directives, or other direction of provincial Ministries and local public health authorities.

#### How to Use This Checklist

- IPAC Leads can work through each section and check off each activity upon completion.
- Topics can be prioritized based on immediate individual and organizational needs and priorities.
- The estimated duration of time needed to complete each section is included to support planning and securing adequate time and resources.
- There is an option to include a start date and completion date for each section to help manage time and monitor progress.

#### Checklist

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# **Contents**

## **Get started**

In this phase you will begin to establish the foundations for developing your professional role in IPAC. You will become familiar with important resources and organizations and begin to plan your learning and professional development activities.

Duration: 1 month Start date: Completion date:

#### **ACTIVITIES**

#### 1.1 Plan Your Learning Activities

Discuss your plans with your organizational leadership team and ensure you have adequate resources, time and support for your learning

Establish personal learning objectives and a personal development training plan based on gaps in knowledge and experience

Establish a work plan that provides dedicated time for your professional development

#### 1.2 Begin Your Professional Development

Create your MyPHO account.

Your account will allow you to save important resources, access online learning, and select areas of interest to help Public Health Ontario (PHO) recommend content and subscribe to our emails

Complete PHO's **IPAC Core Competencies** modules:

Chain of Transmission Additional Precautions

Control of the Environment Occupational Health and Safety

Health Care Provider Controls Personal Risk Assessment for Long-term Care

#### 1.3 Get to Know Some IPAC Organizations

Explore IPAC Canada membership in order to gain access to the IPAC resources, education and networking opportunities offered to IPAC Canada

Register for an IPAC Canada endorsed course listed on the <u>Canadian Infection Prevention and Control Courses</u>, to increase IPAC knowledge and explore practical application of IPAC practices

Review the Certification Board of Infection Control and Epidemiology (<u>www.cbic.org</u>) and consider entry-level certification (Associate - Infection Prevention and Control (A-IPC)

# **Build Your Knowledge**

In this phase you will develop the foundational knowledge, skills and abilities critical for your role. After reviewing these resources and completing the learning activities, you will have a basic understanding of IPAC principles and how to apply them in your long-term care home. Additionally, you can share these resources with other staff to support their own learning and knowledge of IPAC principles.

#### IPAC Programs and the Role of the IPAC Lead

In this section you will become familiar with the key resources that will inform the development of your IPAC program and your responsibilities as an IPAC Lead. You will be able to assess your current IPAC program in order to identify and fill any gaps to strengthen your program and ensure it aligns with best practices.

Duration: 2 to 6 months Start date: Completion date:

#### **ACTIVITIES**

#### 1.4 Assess Your Current IPAC Program

Review and become familiar with your organizational IPAC Program

Review these resources to evaluate your IPAC program:

- Ministry of Long-Term Care's Infection Prevention and Control Program Guidance
- Long term care homes act, 2007
- · Public Health Ontario (PHO)'s IPAC for Long-Term Care Homes Summary of Key Principles and Best Practices

Apply PHO's IPAC Checklist for Long-Term Care and Retirement Homes

Complete an organizational risk assessment (i.e. annually or more frequently as needed) as outlined in <a href="PHO's Path to Success with your IPAC Program Review">PHO's Path to Success with your IPAC Program Review</a>

Review policies and procedures related to the scope and responsibilities of the IPAC Lead and IPAC program

Develop plan to review and update regularly (as with all IPAC-related policies and procedures)

#### 1.5 Establish Your IPAC Committee

Identify members to participate in your IPAC Committee or, if an IPAC Committee is already formed, review the membership to determine if additional members should be invited. For more information on the role and membership of an IPAC committee, see PHO's Best Practices for Infection Prevention and Control Programs in Ontario

Develop a regular schedule (i.e. quarterly) for IPAC Committee meetings

#### 1.6 Develop Goals and Objectives

Develop goals, measurable objectives and action plans using information gathered from your organizational risk assessment

Review or develop a written mandate that includes your IPAC priorities and responsibilities

## **Routine Practices**

In this section, you will learn about IPAC practices such as donning and doffing personal protective equipment and performing hand hygiene. You will be able to assess and identify areas for improvement.

#### **ACTIVITIES**

#### 1.7 Learn How and When to Perform Hand Hygiene

Watch PHO's How to Hand Rub and How to Hand Wash videos

Watch PHO's Just Clean Your Hands for Professionals video to become familiar with the four moments of hand hygiene

#### 1.8 Establish a Hand Hygiene Audit Program

Review PHO's <u>Hand Hygiene</u> webpage along with PHO's <u>Best Practices for Hand Hygiene in All Health Care</u> <u>Settings</u> to learn about hand hygiene programs

Review and become familiar with your organization's hand hygiene policy and program

Determine who is responsible for and how hand hygiene monitoring is being conducted

Consider implementing PHO's Just Clean Your Hands program

Review PHO's Implementation Guide: Ontario's Step-by-step Guide to <u>Implementing a Hand Hygiene Program in your Long-term Care Home</u>

Develop a process for collecting data, analyzing and sharing hand hygiene monitoring compliance to relevant stakeholders (e.g. staff, leadership, residents and families)

Develop strategies to improve compliance with hand hygiene best practices such as monitoring methods, recruiting hand hygiene champions and/or reward and recognition opportunities

Review PHO's <u>Recommendations for the Prevention</u>, <u>Detection and Management of Occupational Contact</u>
<u>Dermatitis</u> to assess or develop a hand care program

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#### 1.9 Learn How to Select and Use Personal Protective Equipment (PPE)

Review the order and correct techniques for donning and doffing gloves, gowns, medical masks, eye protection and N95 respirators, and practice these techniques.

Putting on a Gown and Gloves Putting on Cone N95 Respirator

<u>Taking off a Gown and Gloves</u>

<u>Putting on Flatfold N95 Respirator</u>

Putting on Mask and Eye Protection Taking off Cone N95 Respirator

<u>Taking off Mask and Eye Protection</u>
<u>Taking off Flatfold N95 Respirator</u>

Review PHO's <u>Routine Practices and Additional Precautions in All Health Care Settings</u> to learn how to perform a Personal Risk Assessment (PRA), how to choose appropriate PPE and about the Chain of Transmission

Review PHO's Interim IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19 to see the list of aerosol-generating medical procedures (AGMPs)

Review PHO's COVID-19: Aerosol Generation from Coughs and Sneezes to see the list of what is NOT an AGMP

Review PHO's <u>Routine Practices and Additional Precautions in All Health Care Settings</u> to understand when Additional Precautions are needed to interrupt the transmission of infectious agents

#### 1.10 Establish a PPE Audit Program

Familiarize yourself with auditing best practices, as described in PHO's <u>Routine Practices and Additional Precautions in All Health Care Settings</u>

Review your current PPE auditing program and identify opportunities for improvement

If you don't have PPE auditing program, review PHO's <u>Personal Protective Equipment (PPE) Auditing</u> webpage to learn how to get started

# Surveillance

In this section you will become familiar with infection surveillance best practices and how to collect, analyze, evaluate, present and use surveillance data. You will be able to use use this data to identify trends in health care-associated infections in your home and plan interventions to reduce transmission and protect your residents, staff and visitors.

#### **ACTIVITIES**

#### 1.11 Learn about Surveillance Best Practices

Review requirements as outlined in the <u>Long-Term Care Homes Act, 2007</u>. (Note: this Act is undergoing changes. Please ensure most up-to-date legislation is being followed)

Review the advantages and disadvantages of passive and active data collection methods in PHO's <u>Best Practices for Surveillance of Health Care-associated Infections in Patients and Resident Populations</u>

Explore IPAC Canada's Long-Term Care Surveillance Toolkit and determine if it could be used to support your surveillance program.

#### 1.12 Assess Your Current Surveillance Program

Review PHO's <u>Best Practices for Surveillance of Health Care-associated Infections in Patients and Resident Populations</u> to learn how to assess your resident population and the types of infections for which they are most at risk. Use this information to determine which types of surveillance strategies should be in place.

Learn about different sources of data for infection case finding in PHO's <u>Best Practices for Surveillance of Health Care-associated Infections in Patients and Residents</u> and determine the available sources of data in your home.

Confirm that standardized case definitions are being used and applied consistently. See IPAC Canada's <u>Surveillance Definitions of Infections in Canadian Long-Term Care Facilities</u>.

Develop, review and/or update the surveillance plan for your home.

Learn about the components of a surveillance program in PHO's <u>Best Practices for Infection Prevention and Control Programs in Ontario</u>.

Ensure that there is monitoring and recording of signs and symptoms of infections in residents on all shifts.

Review the Ministry of Long-Term Care's <u>IPAC Program Guidance</u> to determine frequency of reviewing surveillance data:

Review daily to identify cases of infections.

Review monthly to identify trends and actions that need to be taken

Confirm that the mandatory reporting of <u>Diseases of Public Health Significance</u> to your local public health unit is occurring.

Identify gaps based on the assessment of your home's surveillance program and develop a plan to revise your program if needed.

Develop an action plan for when health care-associated infection (HAI) cases are increasing

#### 1.13 Review Your Surveillance Program

Develop a plan to periodically review your surveillance process (e.g. at IPAC Committee meetings) to ensure accuracy, efficiency and consistency of the elements of your surveillance program. Learn about surveillance process evaluation in PHO's <u>Best Practices for Surveillance of Health Care-associated Infections in Patient and Resident Populations</u>.

Regularly audit staff practices to ensure accuracy in the recognition of signs and symptoms of infection, consistency in application of case definitions and timely reporting.

Develop a plan to, perform an outcome evaluation (i.e. annually). The plan should determine if your surveillance program is effectively detecting outbreaks and that the collected data is being used to reduce HAIs.

Learn about surveillance outcome evaluation in PHO's <u>Best Practices for Surveillance of Health Care-associated</u> <u>Infections in Patient and Resident Populations</u>.

# **Environmental Cleaning and Disinfection**

In this section, you will learn about the key principles of cleaning and disinfection of the environment, including techniques, considerations for product selection, and the important role the Environmental Services team plays in your IPAC program. You will be able to assess the cleaning and disinfection practices in your home to ensure consistency with best practices.

#### **ACTIVITIES**

#### 1.14 Learn about Environmental Cleaning and Disinfection Best Practices

Review the tools and resources available through PHO's Environmental Cleaning website

Understand key environmental cleaning and disinfection concepts as outlined in PHO's Best Practices for Environmental **Cleaning for IPAC**:

Learn about the two measures of cleanliness (i.e. hotel clean and health care clean). See section on Health Care **Cleaning Practices** 

Learn about factors that determine the frequency of cleaning and disinfection. See sections on:

High- and Low-Touch Probability of Contamination of Items and Surfaces in the **Surfaces Health Care Environment** 

**Risk Stratification Matrix** 

Learn about considerations when a resident is on Additional Precautions. See sections on:

**Additional Precautions Norovirus** Vancomycin-resistant Enterococci

Carbapenemase-Producing C. difficile

**Enterbacteriaceae** 

#### 1.15 Assess Your Current Environmental Cleaning and Disinfection Program

Review your organizational policies related to environmental cleaning, laundry and linen, and waste management

Review the manufacturer's instructions for use (MIFU) for the disinfectants being used

Verify that the disinfectants being used in your home appear on Health Canada's Drug Identification Number (DIN) list

Ensure staff are adhering to the following practices when using disinfectants:

- · Minimizing contamination (i.e. no double-dipping)
- Following the MIFU related to dilution, contact time, and PPE
- · Not applying cleaning and disinfection chemicals by aerosol or trigger sprays

Ensure an effective system is in use to communicate to Environmental Services staff when a resident is on Additional Precautions See PHO's Additional Precautions Signage

Review the process for waste management including storage, transport, handling and disposal

Review the process of laundry and linen handling including collection, transport, handling, washing and drying

Inspect housekeeping closets to ensure they meet the required standards as per PHO's Best Practices for Environmental Cleaning for IPAC, and develop a plan to improve/upgrade them

Identify and develop a plan to remove any finishes and surfaces that increase the risk of microbial contamination (i.e. fabric, carpet, furniture with seams)

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#### 1.16 Identify Opportunities to Collaborate with Your Home's Environmental Services Lead

Collaborate with Your Home's Environmental Services Lead as described in PHO's <u>Best Practices for Environmental</u> <u>Cleaning for IPAC</u>

Participate in decisions related to new technologies. See section on: <u>New and Evolving Technologies for Environmental Cleaning</u>

Select and approve new detergents or cleaning and disinfection agents. See section on: Choosing a Disinfectant

Review existing or develop an assessment of cleanliness and quality control program. See section on: <u>Assessment of Cleanliness and Quality Control</u>

Regularly review audit results and identify areas of improvement

# Reprocessing of Medical Equipment and Devices

This section supports the identification of the existing processes for cleaning, disinfecting and/or sterilizing (reprocessing) of shared medical equipment and devices occuring in your home and provides resources to ensure best practices are being followed.

#### **ACTIVITIES**

#### 1.17 Learn about Best Practices for the Reprocessing of Medical Equipment and Devices

Understand key reprocessing concepts as described in PHO's <u>Best Practices for Cleaning</u>, <u>Disinfection and Sterilization in All Health Care Settings</u>

Learn about the goals a medical equipment/device reprocessing program. See section on: General Principles.

Understand Spaulding's Classification of Medical Equipment/Devices. See Table 1: <u>Spaulding's Classification</u> of <u>Medical Equipment/Devices</u>

Use the PHO's <u>Algorithm for Level of Reprocessing for Equipment and Instruments</u> to apply Spaulding's Classification to the medical devices/equipment used in your home

Learn about low-level disinfection (LLD), high-level disinfection (HLD), and sterilization. See section on: Disinfection of Reusable Medical Equipment/Devices

Understand the advantages and disadvantages of single-use and reusable devices and equipment. See section on: <u>Single-Use Medical Equipment/Devices</u>

#### 1.18 Assess Your Medical Device and Equipment Reprocessing Program

Review your organization's reprocessing policies and procedures to determine what equipment and devices are being reprocessed onsite, which staff are responsible for reprocessing and their training requirements

Ensure reprocessing area and practices are compliant with current standards, including but not limited:

CAN/CSA-Z314-18 <u>Canadian medical device reprocessing</u>

If high-level disinfection (HLD) is being performed, review manufacturer's instructions for use (MIFU) for any HLD solutions

Verify that HLD solutions have a drug identification number (DIN) and are compatible with the items being disinfected. See Health Canada's <a href="Drug Identification Number (DIN)">Drug Identification Number (DIN)</a> list

Verify that HLD solutions are being diluted and used properly, including achieving adequate contact time and rinsing equipment appropriately

Verify that HLD solutions are undergoing regular testing with chemical test strips (e.g. the HLD solution should be tested every days that it's in use following manufacturer's instructions)

As per PHO's <u>Best Practices for Cleaning</u>, <u>Disinfection and Sterilization in All Health Care Settings</u>, ensure accurate logs are being kept of medical equipment and devices that receive HLD including:

- Date/time HLD occurred
- · Length of contact time
- · Person performing HLD

See PHO's High-Level Disinfection Log for a sample.

Review existing program, or develop a program, for auditing medical equipment/device reprocessing practices in your home to ensure best practices are being followed

See PHO's Sample Audit Checklist for Reprocessing of Medical Equipment/Devices for more information

Ensure you are a part of the committee (i.e. product evaluation) and/or decision-making process when new equipment is being purchased to ensure it can be reprocessed

#### 1.19 Assess the Practices of External Companies Performing Reprocessing

If your organization has external companies sterilizing critical reusable devices/equipment or performing other reprocessing services, ensure that:

- · they are compliant with best practices and standards
- · there are adequate training requirements for their staff
- · there are quality control measures in place
- · all requirements related to storage and transportation of dirty equipment are being followed

# Construction, Renovation, Maintenance and Design (CRMD)

This section will help you prepare for the important role of the IPAC Lead during all large and small CRMD projects that may occur in your home. You will be able to perform risk assessments to determine the IPAC strategies and considerations needed to reduce the risk of infections in residents and staff during these projects.

#### **ACTIVITIES**

#### 1.20 Learn about Key IPAC Considerations during CRMD Projects

Review PHO's webinar on <u>The Role of IPAC in Construction, Renovation, Maintenance and Design (CRMD) in Long-term Care Homes</u>

Review Heath Canada's <u>Construction-related Nosocomial Infections in Patients in Health Care Facilities</u> to learn about the characteristics and modes of transmission of key CRMD-related pathogens (i.e. Aspergillus spp. Legionella spp)

Review Health Canada's <u>Mould Guidelines for the Canadian Construction Industry</u> to understand the health risks of mould and practices to minimize moisture intrusion

Understand the legal obligations to protect staff as outlined in the Occupational Health and safety Act

#### 1.21 Plan for CRMD Projects in Your Home

Review PHO's CRMD webpage to become familiar with the phases of CRMD (i.e. planning, work and commissioning)

Review PHO's CRMD Checklist: ICP responsibility tool to learn about IPAC's involvement in each of the phases

Determine if your organization is planning any CRMD projects in the near future in order to begin to prepare for your role in the project

#### 1.22 Prepare for Your Role During the Planning Phase

Review PHO's <u>Construction, Renovation, Maintenance and Design – Planning Phase</u> to learn about the IPAC Lead's role in planning CRMD projects

Establish a working relationship with project lead and attend all planning meetings

Perform an Infection Control Risk Assessment (ICRA) as outlined in PHO's <u>CRMD Checklist: ICRA</u> and using the Risk Group Matrix found in Health Canada's <u>Construction-related Nosocomial Infections in Patients in Health Care</u>
<u>Facilities</u> document, identify the preventative measures needed to mitigate the risk of transmission of infectious agents during the CRMD project

Ensure contractors and workers have sufficient IPAC knowledge (e.g., hand hygiene, IPAC construction requirements)

Ensure appropriate hoarding is used and inspect it regularly throughout the duration of the CRMD project

Ensure a plan is developed to address common issues such as traffic flow, cleaning of the CRMD area and downtime procedures

Ensure the project is compliant with current standards and requirements, including but not limited to:

- · Canadian Standards Associations (CAN/CSA) documents for Health Care Facilities:
  - CAN/CSA-Z317.13-17 <u>Infection control during construction, renovation and maintenance of health care</u> facilities
  - CSA Z8000-18 Canadian health care facilities
  - CAN/CSA Z317.2 <u>Special requirements for heating, ventilation and air conditioning (HVAC) systems in health care facilities</u>
- Ministry of Health and Long-term Care's Long-term care home design manual 2015

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#### 1.23 Prepare for Your Role During the Work Phase

Review PHO's Construction, Renovation, Maintenance and Design - Work Phase

Participate in scheduled project meetings

Ensure there is a system to communicate breaches or IPAC gaps as soon as identified

Tour the CRMD area daily and use PHO's CRMD Checklist: Hoarding to audt compliance with IPAC measures

Perform ongoing surveillance to quickly identify infections that may be linked to CRMD activity

#### 1.24 Prepare for Your Role During the Commissioning Phase

Review PHO's Construction, Renovation, Maintenance and Design – Commissioning Phase

Verify and document that all requirements are met and that any deficiencies are identified and addressed prior to occupancy

Use PHO's <u>CRMD Checklist: Commissioning</u> to ensure commissioning activities are complete prior to occupancy and/or resumption of operations

# Occupational Health and Safety (OHS)

In this section, you will become familiar with the components of an OHS program, key resources and legislation. You will be able to work with your OHS department to ensure appropriate measures are in place to mitigate the risks of transmission of infectious agents to staff.

#### **ACTIVITIES**

#### 1.25 Learn about Key Elements of an Occupational Health and Safety (OHS) Program

Familiarize yourself with the relevant legislation:

- Occupational Health and Safety Act. See sections on:
  - Health Care and Residential Facilities
  - Workplace Hazardous Materials Information Systems (WHMIS)
  - Needle Safety
  - Control of Exposure to Biological or Chemical Agents
- Long-Term Care Homes Act (s 86)
- Workplace Safety and Insurance Act

Familiarize yourself with Diseases of Public Health Significance that are to be reported to your local Public Health Unit

#### 1.26 Learn about Pre-Placement and Surveillance Protocols

Learn about protocols related to Mycobacterium tuberculosis, review the Ontario Hospital Association (OHA) and Ontario Medical Association (OMA)'s <u>Tuberculosis Surveillance Protocol for Ontario Hospitals</u>, specifically:

- · Tuberculin skin testing (TST) and protocols if staff have a positive TST
- · facility risk categorization and resulting frequency of TST surveillance
- · definition of a staff exposure
- · work restrictions

Learn about protocols related to bloodborne infections, review the OHA/OMA's <u>Blood-Borne Diseases Surveillance Protocols for Ontario Hospitals</u>, specifically the sections on:

- · Mode of transmission and definition of a staff exposure
- Immunization policy (e.g. Hepatitis B)
- · Post-exposure procedures and prophylaxis indications

Learn about protocols related to enteric infections, review the OHA/OMA's <u>Enteric Diseases Surveillance Protocols for Ontario Hospitals</u>, specifically the sections on:

- Mode of transmission of common enteric pathogens (i.e. Norovirus)
- · Safe food handling procedures
- · Work restrictions

Learn about protocols related to respiratory infections, review the OHA/OMA's <u>Influenza Surveillance Protocols for Ontario Hospitals</u> and any other required, relevant protocols (e.g. COVID-19), specifically sections on:

- · Mode of transmission
- Work restrictions
- · Immunization policies

#### 1.27 Review Your OHS Program

Review your organization's OHS policies and procedures:

- · Pre-placement medical evaluation
- Screening

- Immunizations
- Exposure to bloodborne pathogens (e.g. post-exposure prophylaxis)
- · Sharps injury prevention
- Work restrictions

Collaborate with your OHS department to perform regular (e.g. annual) reviews and updates to OHS-related organization's policies and procedures

Collaborate with your OHS department on your organization's annual Influenza vaccination campaign

In collaboration with your OHS department, ensure there is a respiratory protection program in accordance with the Occupational Health and Safety Act (O. Reg. 185/19) that includes respirator fit-testing

# Outbreak Investigation and Management

This section will help prepare you to investigate and manage outbreaks in your home. It provides you with key resources and highlights the important responsibilities of the IPAC Lead and you will be able to determine the key IPAC strategies to implement during an outbreak.

#### **ACTIVITIES**

#### 1.28 Learn about Key Outbreak Investigation and Management Concepts

Review the appropriate sections of the OHA/OMA's <u>Control of Respiratory Infection Outbreaks in Long-Term Care Homes</u>, 2018 and <u>Recommendations for the Control of Gastroenteritis in Long-Term Care Homes</u> to ensure that you understand:

- · The steps involved in outbreak detection and management
- · How to define outbreak cases
- · How to cohort residents and staff
- · How to identify contacts of suspected or confirmed case(s)
- · Considerations for declaring an outbreak over

Review strategies for enhanced active surveillance during an outbreak as outlined in the OMA/OHA's <u>Control of Respiratory Infection Outbreaks in Long-Term care Homes</u>, 2018, specifically:

- · conducting unit rounds
- · reviewing elevated temperature report and nursing progress notes
- · point prevalence screening, if applicable

#### 1.29 Assess Your Organization's Outbreak Preparedness

Review the outbreak management policies and procedures and update if necessary, ensuring they address the detection, prevention, management, and control of outbreaks

Ensure the policies and procedures align with guidance in the Ministry of Long-Term Care's <u>Infection prevention</u> and <u>Control (IPAC) program guidance</u> and relevant sections of the OHA/OMA <u>Control of Respiratory Infection</u> <u>Outbreaks in Long-Term Care Homes</u>, <u>2018</u> and <u>Recommendations for the Control of Gastroenteritis</u> <u>Outbreaks in Long-Term Care Homes</u>

Review the staffing contingency plan to address staffing shortages considering adequate staff to resident ratios, increased workloads and immunization requirements

Review the influenza immunization and antiviral preparation plan including a process to update consent forms and obtain medical directives

Review documentation related to previous outbreaks within your organization and the lessons learned

Develop a plan to review the management of each outbreak in order to improve the detection, management and control of future outbreaks

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#### 1.30 Plan Ahead for Outbreaks

Identify participants for the interdisciplinary outbreak management team

Ensure there is an individual(s) always available (24 hours per day, seven days per week) to liaise with the Public Health Unit if needed

Ensure the availability of outbreak signage (i.e. outbreak notification signage for entrances, <u>Additional Precaution</u> signs for resident rooms, <u>PPE donning and doffing signage</u>)

Develop a communication plan to staff, residents, families, visitors, and receiving facilities (i.e. hospital)

Become aware of your local Public Health Unit's reporting requirements for suspect or confirmed outbreaks including who to report to (including after hours), when to report and what information is required during the initial notification

Become familiar with your local public health unit's line listing form including required information and how to submit to the public health unit

Ensure there is an adequate supply of PPE and that it is readily available to staff and visitors. Use the <a href="PPE Burn Rate">PPE Burn Rate</a> <a href="Calculator">Calculator</a> to help plan and optimize PPE use

Ensure there are adequate disinfection products readily available for infectious agents that require special considerations (i.e. sporicides for a *C. difficile* outbreak)

For enteric outbreak preparation, ensure records are kept for food temperature (i.e., cooking, reheating, holding) and dishwashers

Ensure staff are prepared for specimen collection:

- Use PHO's Requisition for Specimen Containers and Supplies to obtain specimen collection kits/swabs
- Ensure staff have appropriate training for enteric and respiratory specimen collection, storage and transportation, as per PHO's <u>Enteric Outbreak Kit</u> and <u>Virus Respiratory Kit (Nasopharyngeal) Speciment Collection</u> <u>Instructions</u>
- Ensure staff have an awareness of where to obtain PHO's General Test Requistions
- There is an established process of receiving and reporting laboratory results

Determine IPAC control measures to implement during an outbreak (e.g., plan to cohort staff and residents if necessary)

Plan to debrief and identify areas for improvement once the outbreak is declared over

# **Build Your Network**

In this phase, you will connect with other IPAC Leads and organizations to grow your IPAC network.

Duration: 6 months or more Start date:

#### **ACTIVITIES**

Connect with Public Health Ontario IPAC Specialists at <a href="mailto:ipac@oahpp.ca">ipac@oahpp.ca</a> for support in implementing best practices within your home

Participate in your local IPAC hub. For more information about the IPAC Hubs see the Ministry of Long-Term Care's Infection prevention and control (IPAC) program guidance

Identify your local <u>Public Health Unit</u> and learn how they will support you during outbreak management, with Diseases of Public Health Significance (DOPHS), with immunizations, tuberculosis surveillance and food safety inspections

Join your local IPAC Canada chapter to build your IPAC network, gain awareness of IPAC issues and to access education session and resources. Use IPAC Canada's <a href="Chapters Directory">Chapters Directory</a> to identify the chapter nearest to you

Explore the resources on your IPAC Canada's chapter's webpage

Network with your IPAC Canada chapter leader to see what opportunities for involvement are available

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