

IPAC PLAN

PARTICULARS	D I R E C T I V E S :	RESP .	FREQ .
LEGISLATION	<p>The Home shall designate an Infection Prevention & Control (IPAC) Manager who will be responsible to oversee the IPAC Program at all levels in the organization</p> <p>The IPAC Manager shall enforce IPAC policies, provide staff education on same, conduct interdepartmental infection control audits, attend scheduled departmental committee meetings at minimum quarterly and maintain close communication with the PHU</p>	Admin IPAC Mngr	
LEGISLATION	<p>Compliance with legislated requirements and facility IPAC Program shall be reviewed, evaluated by the multi disciplinary care team and findings fully documented, including date, participants and plan of action to improve the overall program before next review.</p> <p>Findings shall be shared with PAC & JHS committee members</p>	Admin	annually
IPAC POLICY & PROCEDURE MANUAL	<p>IPAC policies and procedures manuals shall be developed and updated each time there is a change in legislated requirements and/or procedure in collaboration with senior management team, PH/PAC committee members</p> <p>The Home shall ensure that policies and procedures are fully implemented, staff education provided and to regularly evaluate compliance by all staff, individual department, service provider, visitors and public in general , including CQI program related to infection prevention and control</p> <p><u>Performance evaluation</u> - shall include evaluation of employee participation and IPAC educational component, including employee compliance with infection prevention and control guidelines.</p>	Corp. Committee Admin/ Dept. Mangr	ongoing ongoing as per schedule
HUMAN RESOURCES	<p>The Home shall identify the minimum staffing needs and prioritize critical and non-essential services based on residents health status, functional limitations, disabilities, and essential facility operations.</p>	Admin/ Dept. Mangr	annually and as needed

PARTICULARS	D I R E C T I V E S :	RESP .	FREQ .
HUMAN RESOURCES continued	The Home shall arrange and have in place signed service agreements with external agencies that provide staffing services for registered and non-registered staff on a 24 hours basis	Admin/ Dept. Head	annually and as needed
	Other available resources such as <i>Ontario Health and Health Workforce Matching Portal</i> shall be accessed if the home is unable to meet the staffing needs.		as needed
NEW STAFF HEALTH REQUIREMENTS	The Home shall ensure that each newly hired staff completes and provides the Home with a copy of a Pre-Employment Health Assessment, including 2 step TB negative test results prior to commencement of employment	Dept. Head	new staff
STAFF SCREENING/ TESTING	The Home shall ensure that each staff member undertakes required screening and/or rapid testing as may be directed by the Ministry of Long Term Care (MLTC) and/or Public Health Unit (PHU)	IPAC Manager	as directed
STAFF IMMUNIZATION	Each Staff member shall be offered immunization against influenza and Covid-19 at the normally scheduled time each year or as mandated by the government.	IPAC Manager	annually and as needed
	Staff participating in the immunization program is required to complete Influenza Vaccine or Covid-19 Consent/ Immunization form on an annual basis , including the Immunization Intent form to be provided to each employee upon hiring and a signed copy placed in employee health file.		
STAFF EDUCATION	<p><u>General Orientation</u> - shall include an overview of facility wide IPAC practices.</p> <p><u>Department Specific Orientation</u> - shall include staff education on specific IPAC procedures withing the department, including reporting requirement</p> <p><u>On-The-Job Training</u> - shall include working with and shadowing a co-worker and learning job specific routines, including infection prevention and control guidelines and practices.</p>	IPAC Manager/ Dept. Head	all newly hired staff

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
STAFF EDUCATION	<p><u>Mandatory IPAC Education for ALL STAFF</u> shall include:</p> <ol style="list-style-type: none"> 1. Annual participation and completion of on-line learning; 2. Hand Hygiene Program - how/when to perform hand hygiene 3. Effective Use of PPE - Donning/Doffing 4. Isolation Procedures/Signage/High Touch Cleaning 5. Physical Distancing/ Coffee/Meal Breaks/Car Pool 6. Outbreak Management <p>In all cases of a suspected or declared outbreak in the Home, all staff shall receive education on point-of-care risk assessment, routine practices and additional precautions to include hand hygiene policy, how to safely don and doff PPEs and clean/disinfect high touch areas after each use</p>	<p>Staff Ed.</p> <p>Dep. Head</p> <p>IPAC Mngr</p> <p>Dept. Head</p> <p>IPAC Manager Clinical Manger</p>	<p>new staff</p> <p>new staff</p> <p>annually quarterly quarterly semi- annual</p> <p>ongoing</p>
COMMITTEE MEETINGS	<p>Establish and maintain a multidisciplinary Infection Prevention and Control Committee through its Professional Advisory Committee.</p> <p>Home's Administrator, DON, Medical Director, IPAC Manager, Nurse Practitioner, Dietitian, Pharmacist and a representative from the PHU shall be invited to attend and participate in quarterly meetings or more frequently during an infectious disease outbreak.</p> <p>IPAC shall be a permanent agenda item on departmental committee meetings (see IPAC Committee meeting attendance policy), including the Joint Health & Safety committee meetings</p>	IPAC Manager	quarterly
SUPPLIES PERSONAL PROTECTIVE EQUIPMENT (PPEs)	<p>The Home shall ensure there is a minimum of 30 days PPE supplies on hand or as may be directed, to include but not limited to masks (including N95) gloves, gowns, eye protection that have not expired. Rotation of supplies shall be maintained with each new delivery.</p> <p>Staff shall be fit tested for N95 respirators</p>	Admin/ Dept. Head	ongoing

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
SUPPLIES CLEANING	There shall be a minimum of 30 days back up supply of cleaning disinfectants to include hand sanitizers, ONE Minute wipes and other cleaning disinfectants approved for use by PH	Admin/ Dept. Head	ongoing
SUPPLIES MEDICAL	There shall be adequate supply for screening, testing, including thermometers, , no touch waste receptacle, proper signage and critical medications	Admin/ Dept. Head	ongoing
RESIDENT ADMISSION	<p><u>MRSA/VRE</u> - Swabs shall be taken on admission, including upon returning from hospital admission. Swabs shall be taken from residents nares and rectal area, including any identified wound area</p> <p>The resident shall be kept under contact precautions until the results are received. If negative, contact precautions are removed. If positive, follow established procedure and re-screen monthly for 6 months</p>	Reg. Staff	within 24 hours admission (night RN)
	<p><u>TB Test</u> -STL Diagnostic Imaging requisition for Tuberculosis Screening (chest x-ray) shall be completed on each newly admitted resident, unless the resident was already screened within the 90 days prior to admission and the documented results of this screening is provided upon admission to the Home. <u>Reason for Examination shall state: To rule out TB</u></p>	Reg. Staff	within 14 days of admission
	<p>Complete Medical /Physical examination is required for all residents upon admission and annually thereafter</p>	Attending Physician	within 7 days of admission
	<p>Process RX for blood work</p>	Reg. Staff Attending Physician	within 24 hrs of admission
	<p><u>Signed Consents</u> - the following consents shall be signed upon admission by the Resident/SDM:</p> <ul style="list-style-type: none"> * Tetanus, Diptheria & Pertussis Immunization Consent; * Pneumovax Vaccine Consent; * Influenza Vaccine Consent; * Covid-19 Vaccine Consent * Antiviral Medication Consent; * Tuberculosis (TB) Test Consent * Advanced Health Care Wishes 		

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
IMMUNIZATION RESIDENT	<p><u>Influenza vaccine</u> - Influenza vaccine shall be offered only to the residents admitted during the period from October to April of each year. Proof of vaccination prior to admission to the Home shall be required</p> <p>Each Resident will be offered immunization against influenza at the normally scheduled time each year. Signed consent is required</p>	Reg. Staff	within 7 days of admission
	<p>Each resident will be provided with Antiviral medication in an event that there is an influenza outbreak. Signed Consent by the Resident/SDM is required.</p>	Reg Staff	as required
	<p>Each Resident will be provided immunization against pneumococcus, tetanus and diphtheria, Covid-19 or any other approved vaccine in accordance with the publicly funded immunization schedules. Signed consent is required.</p>	Reg Staff	as per policy
CONTACT INFORMATION	<p>The Home shall ensure that all Resident/SDM/POA contact information is kept current and readily available to outbreak management team, including the contact information for:</p> <ul style="list-style-type: none"> * attending physicians, * medical director, * laboratory, * pharmacy * PHU, * MLTC, * HCCSS - Home Care Community Support Services * local hospital * suppliers, * waste management, * funeral homes * staffing agencies, and * other contacts as may be needed. 	Admin/ Business Office	ongoing
	<p>The Home shall designate a qualified staff member (IPAC Manager) and a Charge Nurse in his/her absence to liaise with the local PH department representative/s</p>	Admin	

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
SURVEILLANCE	<p><u>O. Reg. 246/22, s. 102 (9)</u> Every shift shall:</p> <p>(a) monitor symptoms indication the presence of infection in residents are monitored in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices</p> <p>(b) the symptoms are recorded and that immediate action is taken as required.</p> <p>The Home shall ensure that all residents are actively monitored on each shift for symptoms and signs of an infection to include:</p> <ul style="list-style-type: none"> * fever over 37.8 °C; or * symptoms which may include cough, sore throat, runny nose or sneezing, shortness of breath, nasal congestion, difficulty swallowing, taste disorder, nausea vomiting, diarrhea, abdominal pain; or * clinical evidence of pneumonia <p>Residents who meet surveillance definitions will be monitored and all precautionary measures initiated</p> <p>Residents will be immediately isolated as recommended by PHU, in an approved area in the Home and established procedures strictly followed</p>	Reg. Staff Charge RN CL. Mngr IPAC Mngr	ongoing
	<p><u>O. Reg. 246/22, s. 102(10)</u> The information gathered is analyzed daily to detect presence of infection and reviewed at least once a month to detect trends, for the purpose of reducing the incidence of infection and outbreaks.</p> <p>Implement any surveillance protocols given by the Director for a particular communicable disease .</p>	IPAC Manager	
	<p>The Home shall ensure a daily line listing of suspected or known cases with similar symptoms is kept and updated as new cases develop and all information shared with the local Public Health Unit. (Health Connex)</p>	Reg. Staff Clinical Manager IPAC Manager	ongoing

PARTICULARS	D I R E C T I V E S :	RESP .	FREQ .
SURVEILLANCE... . continued	The Registered Staff shall ensure that residents who were in close contact (i.e. shared room, dining at the same table) with the symptomatic residents are closely monitored and tested, including the residents residing in rooms closest to the rooms of symptomatic residents.	IPAC Manager Clinical Manager	ongoing
	Where there is a suspected outbreak, the Home shall isolate the suspected residents and have their meals delivered to their rooms, unless otherwise directed by the Public Health Unit.	IPAC Manager	
	Where there is a suspected outbreak, the Home shall ensure that large group activities on affected unit/s are stopped, unless otherwise recommended by the Public Health Unit .	IPAC Manager	
	Where there is a suspected outbreak, the Home shall ensure that all departments are immediately notified and precautionary measures immediately initiated by each department	IPAC Manager	each time
OUTBREAK MANAGEMENT	Call for the initial outbreak management team meeting. Follow established policies and procedures in the manual Notify and request the Medical Director, pharmacy to participate in the scheduled meetings	Admin	declared outbreak
	Ensure outbreak control measures are fully implemented and are specific to the type of outbreak declared (respiratory or enteric), including precautionary measure in RHA not affected	DON IPAC Manager	
	Ensure outbreak signs are posted at each door of symptomatic residents, in front lobby, elevators, outbreak unit, including donning/doffing procedures. Assign resident care equipment to be used by the residents in infected areas only, including waste containers. Ensure dedicated care equipment is fully cleaned and disinfected before and after use. Ensure sanitary disposal of waste	IPAC Manager	

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
OUTBREAK MANAGEMENT continued	Ensure adequate supplies of PPE is assessed and made available at all times	DON	declared outbreak
	Ensure High Touch Cleaning schedule is initiated and that approved cleaning methods and disinfectants are used by housekeeping staff, including the nursing staff for cleaning and disinfecting equipment/area used.	Reg. Staff Clinical Manager IPAC Manager DON	
	Ensure adequate PPE are available at each door before entering the residents room. Assign a staff to replenish adequate supplies for each shift		
	Determine if cohort and isolation of symptomatic residents is warranted		
	Ill residents are cohorted and grouped together. All doors to RHA must remain closed at all times as part of the cohorting. All doors to other resident Home areas shall remain closed as well to minimize transmission		
	Cohort nursing staff (staff is assigned to look after ONLY the ill residents OR only the well residents), including assignment to specific unit and separate location in the Home for staff coffee/meal breaks		
	Position waste and laundry bins near the exit inside of the resident's room - staff must discard the PPE before exiting the room		
	Coordinate safe collection and delivery of infected personal clothing and linen to the laundry area		
	Stop admissions to the Home if directed by the PHU		
	Stop general visitations, if directed by PHU. Only essential caregivers are to be allowed, including the families of residents deemed palliative, end of life care		
	Stop all group activities, if recommended by the PHU		
	If needed, modify menu, arrange for room service and use disposable trays/dishware/utensils	Dietitian/N utrit. Manager	
	Dietary to order individual containers for water, juice, soft drink, milk, etc for serving infected residents	Nutrit. Manager	

OUTBREAK MANAGEMENT continued	Ensure the residents rooms are cleaned/disinfected daily	IPAC Manager	
	Initiate enhanced staff/visitor screening and or testing ONLY if directed by the PHU. Post screening signs and set up an area at the front entrance which is equipped with: <ul style="list-style-type: none"> - screening tool for all individual entering; - medical masks with instructions for use posted - hand sanitizer- 70-90 % alcohol concentration; - eye protection, if directed; - disposable gloves, if directed by PH; - disposable gowns, if directed by PH; - kleenex; - waste basket with a lid; - thermometer - ONE Minute cleaning wipes <p>Employee Surveillance is ongoing. Employees exhibiting symptoms of infectious nature, will be asked to remain at home. The agency staff, including the qualified management staff shall be used to replace missing shifts.</p> <p>Staff will be tested as required and the criteria for return to work shall be determined by IPAC Manager, in consultation with the PHU</p>	IPAC Manager	declared outbreak
	Notify SDP/POA of declared outbreak and provide ongoing updates - PCC -Automated message system - Cliniconex	Reg. Staff/ Social Worker	
	Notify MLTC and file CI Report and other information as may be requested	DON	
	Notify HCCSS and keep them informed on the outbreak status, including a letter from PHU confirming the outbreak is OVER	DON	
	Coordinate daily meetings with PH units and submit required reports	Admin/ DON IPAC Manager	
	Notify the admitting hospital in all cases where there is suspected or declared outbreak in the home	Reg. Staff	

PARTICULARS	D I R E C T I V E S :	RESP .	FREQ .
OUTBREAK MANAGEMENT continued	Ensure all staff at all levels is informed aware and receive clear direction on established protocols, directives and precautionary measures. Question staff regarding the safe procedures, observe staff hand washing and donning/doffing practices.	Reg. Staff IPAC Manager	
	Conduct PPE Donning/Doffing Competency Assessment of all staff working with ill residents, including hand washing practices	Reg. Staff IPAC Manager	
CQI PROGRAM	<p>Monthly reports/statistical data outlining where the infection was acquired (in- house; hospital or community); types of infections; if the resident was hospitalized; the treatment provided and the dates each infection was resolved.</p> <hr/> <p>PPE Donning/Doffing Competency Assessment of all staff shall be completed at least annually.</p> <p>The assessment will be reviewed with the staff and placed on their file.</p> <hr/> <p>Handwashing Audits shall be completed on a monthly basis and further staff training provided, as needed.</p> <p>The assessment will be reviewed with the staff and placed on their file.</p> <hr/> <p>Infection Prevention & Control practices will become part of each employee's performance evaluation</p> <hr/> <p>Conduct scheduled Audits to include but not limited to:</p> <ul style="list-style-type: none"> - Temperature Control Audit - Nursing Audit - Dietary Audit - Housekeeping Audit - Laundry Audit - Building & Maintenance Audit - Screening Area Audit - Hand Hygiene Audit - Donning/Doffing Competency Assessment 	IPAC Manager Dept. Head	as scheduled

PARTICULARS	D I R E C T I V E S :	RESP.	FREQ.
CQI PROGRAM	Review audit finding and statistical data at Senior Management, PAC and JHS committee meetings	IPAC Manager Dept. Head	As scheduled
	Conduct annual multidisciplinary program evaluation, including goals and objectives for the following year		
DIRECT CONTACT INFORMATION	Ensure most current contact information to PHU and IPAC Hub includes the name, telephone number and an email address of the IPAC Manager	Admin/ DON/ IPAC Mngr	as info. changes
IPAC MANAGER QUALIFICATIONS	<p>Education and experience in infection prevention and control practices including:</p> <ol style="list-style-type: none"> 1. Infectious diseases 2. Cleaning and disinfection 3. Data collection and trends analysis 4. Reporting protocols 5. Outbreak management 6. Asepsis 7. Microbiology 8. Adult education 9. Epidemiology 10. Program management 11 Current certification in infection control from the Certification Board of Infection Control and Epidemiology 		
IPAC MANAGER DUTIES	<ol style="list-style-type: none"> a. Working with the interdisciplinary team to implement the IPAC program b. Managing and overseeing the IPAC program c. Overseeing the delivery of IPAC education to all staff, caregivers, volunteers, visitors and residents d. Auditing of IPAC practices in the Home e. Conducting regular infectious disease surveillance f. Convening the Outbreak Management Team at the outset of an outbreak and regularly throughout the outbreak g. Review any daily and monthly screening results collected by the Home and determine if any action is required h. Implement required improvements to the IPAC program as identified through audits i. Ensure there is an effective hand Hygiene program in place, including staff education and scheduled audits 	Admin	

PARTICULARS	D I R E C T I V E S:	RESP.	FREQ.
IPAC MANAGER WEEKLY HOURS	Minimum weekly hours as per legislation: - 69 beds or fewer = 17.5 weekly hours - 69 beds but less than 200 beds = 26.25 weekly hours - 200 beds or more = 35 weekly hours		ongoing
PETS	The Home shall ensure that any pets living or visiting the Home have up-to-date immunization. The certificate of immunization shall be kept on file by the IPAC Manager	IPAC Manager	annually
ATTESTATION	The Administrator of the Home shall submit to the Director a completed Attestation statement attesting that all of the information and answers provided in the attestation are complete, true, and correct	Admin	annually

“Emergency” means an urgent or pressing situation or condition presenting an imminent threat to the health or well-being of residents and others attending the home that requires immediate action to ensure the safety of persons in the Home

REFERENCES

- Fixing Long Term Care Act, 2021
- Ontario Regulation 246/22
- Health Protection and Promotion Act, RSO 1990, CH.7 - duty to report diseases
- Infection Prevention and Control for Long-Term Care Homes , Public Health Ontario - December 2020
- Food Premises RRO 1992, Reg 562 for safe food handling
- Environmental Protection Act* RSO 1990, c E.19 for safe disposal of clinical waste
- General O Reg 63/09* under Pesticides Act, RSO 1990, c P.11 for pest control