

Ministry of Long-Term Care

Infection Prevention and Control Standard

Why is the Ministry issuing this Standard? What is the purpose of this Standard?

The *Infection Prevention and Control (IPAC) Standard* (the "Standard"), once effective, will mandate certain requirements that licensees must follow in respect to IPAC programs in Ontario's Long-Term Care homes, including requirements related to IPAC program evaluation, hand hygiene, symptom surveillance, and infectious disease screening. These requirements are in addition to other IPAC requirements that licensees are required to comply with, including those in *the Fixing Long-Term Care Act, 2021* (FLTCA), O. Reg. 246/22 (the "Regulation"), and the Minister's COVID-19: Long-term care home surveillance testing and access to homes Directive.

The Regulation provides that a licensee is required to implement any standard or protocol issued by the Director with respect to infection prevention and control. Once FLTCA comes into force, licensees will be required to comply with the Standard, which is grounded in current evidence and best practice.

Each section of the Standard contains requirements for evidence-based IPAC programming, which licensees must follow.

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Questions?

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What is the Standard based on?

The Standard is based on guidance from several agencies including IPAC Canada, and Public Health Ontario. As well, it was also developed based on current advice from expert IPAC practitioners with direct experience in long-term care and other healthcare settings, and will be updated regularly when related evidence or best practice changes.

What new requirements related to IPAC are included in FLTCA and the Regulation?

FLTCA and the Regulation build on requirements in *the Long-Term Care Homes Act, 2007* related to IPAC, and also add new requirements, including:

- Additional required training and education for designated IPAC leads;
- Certification for designated IPAC leads three years after the regulation comes into force;
- Minimum required hours of work per week on site for designated IPAC leads;
- A new requirement for a quality management program for IPAC;
- Additional personnel and resource assignments as may be required for the IPAC program;
- A requirement that the IPAC program is implemented in a manner consistent with the precautionary principle as set out in the standards and protocols issued by the Director under subsection 102 (2) of the Regulation and the most current medical evidence, and
- The requirement that the licensee shall implement any standard or protocol issued by the Director with respect to infection prevention and control, which would include the Standard.

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What are the main sections of the Standard?

The main sections of the Standard include:

- IPAC Program
- IPAC Resources
- Surveillance
- Outbreak Preparedness and Management
- IPAC Policies and Procedures
- Personal Protective Equipment (PPE)
- Training and Education
- Regular Evaluation and Quality Improvement
- Routine Practices and Additional Precautions
- Hand Hygiene Program
- Immunization and Screening

How often will this Standard be updated?

This Standard will be updated and amended regularly as new evidence or best practices emerge.

What is the timeline for implementation of the Standard?

The Standard will be in effect and enforceable under FLTCA once FLTCA comes into force. At that time licensees will be required to comply with the Standard.

Will the Ministry of Long-Term Care be developing informational or other supports that licensees may use in implementing the Standard?

Yes. The Ministry of Long-Term Care will be developing informational and other resources for licensees relating to the implementation of the Standard.

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Additional resources will address specific new requirements in the Standard such as the requirement for an ethical framework for the IPAC Program.

As well, further educational webinars and other events will be scheduled in the coming months.

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