



**ACCREDITATION  
CANADA**

# **COVID-19 Toolkit**

## **Infection Prevention and Control Practices in Long-Term Care, Residential and Retirement Homes**

### **V: 1.0**



Contents of this toolkit is derived from:  
HSO 4001:2015 Infection Prevention and Control

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# COVID-19 Toolkit

## Infection Prevention and Control Practices in Long-Term Care, Residential and Retirement Homes

### A Guidance Document to Support Residents, Caregivers, Care Providers and Leaders

#### Purpose of this toolkit:

This toolkit has been created by Accreditation Canada (AC) and Health Standards Organization (HSO) to assist long-term care and residential care homes across Canada in understanding how to integrate essential Infection Prevention and Control (IPC) practices into their services in the context of the COVID-19 pandemic.

This toolkit draws from a combination of national and international resources on COVID-19 such as the World Health Organization (WHO) and Public Health Agency of Canada (PHAC) as well as actionable criteria found within HSO's evidence-based standards. This toolkit does not replace any jurisdictional legislation or professional regulatory requirements and should be used in conjunction with relevant clinical practice guidelines and other detailed IPC resources. We welcome feedback or further resources, which can be sent to [communications@healthstandards.org](mailto:communications@healthstandards.org)

#### How to use this toolkit:

The toolkit is intended for three audiences: residents and caregivers; staff and contractors; and leaders, both administrative and clinical. It is divided into the following eight essential elements:

- Prevention, Screening and Testing
- Hand Hygiene
- Personal Protective Equipment (PPE)
- Cleaning and Disinfecting (Equipment and Physical Environment)
- Isolation Practices
- Health and Wellness
- People Flow and Transfers
- Outbreak Management

Each section has a series of questions to guide your home in assessing your Infection Prevention and Control practices which will provide a foundation for your management of COVID-19. A complimentary copy of relevant HSO (Accreditation) standards can be accessed [here](#).

Accreditation Canada is also exploring new/additional solutions to further guide organizations in the post COVID-19 environment and will keep you updated. To learn more about other supports for COVID-19, we encourage you to also visit the resources listed at the end of the document.



## RESIDENTS AND CAREGIVERS

### Prevention, Screening and Testing

- Do my caregivers and I have information from staff about what symptoms related to COVID-19 we should watch for?
- How do my caregivers and I report the start of new symptoms such as cough, fever, sore throat, aches and pains, or general feelings of unwellness to the staff?
- Do my caregivers and I know what to do if we cough or sneeze? If we don't know what to do, who do we ask?  
*For example: sneezing into my elbow or a tissue.*
- If my caregivers have a cough, fever or any other symptom, do they have the proper information to decide whether they should come to visit me?
- Do my caregivers and I understand why I do or do not need to be tested for COVID-19?

### Hand Hygiene

- Do my caregivers and I know when and how to properly wash our hands and the importance of doing so?  
*For example: before eating, after using the toilet, after touching my cell phone, sneezing etc.*
- Do my caregivers and I have access to educational materials about hand hygiene?  
*For example: signage, pamphlets etc.*
- Do my caregivers and I have easy access to soap and water and/or alcohol-based hand rubs?
- Is there signage throughout the home to remind people to wash their hands?
- Do my caregivers and I feel comfortable asking staff to wash their hands and to help me wash mine?  
*For example: prior to eating or handling oral medications, after using the washroom.*

### Personal Protective Equipment (PPE)

- Do my caregivers and I know when we need to wear a face mask?
- Do my caregivers and I know how to put on and take off a face mask correctly?
- Are my caregivers and I provided with face masks when needed?
- Do my caregivers and I know when and where to dispose of the face masks?
- If my caregivers and I are not sure how to protect ourselves or others, are we comfortable to ask the staff for help?
- Beyond face masks, if there are any other things my caregivers and I need to wear to keep ourselves or others safe, do staff help us with them?

### Cleaning and Disinfecting (Equipment and Physical Environment)

- Do my caregivers and I avoid sharing personal items with other residents?  
*For example: brushes, tablets, phones, games, books etc.*
- Are my caregivers and I comfortable to ask staff to make sure that my surroundings and furniture are properly cleaned? *For example: my phone, bedrails, my chair, my TV remote.*



## RESIDENTS AND CAREGIVERS

### Isolation Practices

- Do my caregivers and I receive information from staff about any isolation precautions that we need to follow?  
*For example: that I need to eat my meals in my room.*
- Do my caregivers and I understand what we can do to prevent the spread of COVID-19 infection?  
*For example: following precautions, hand hygiene, taking meals alone, respecting physical distancing.*
- Are my caregivers and I supported by staff so we can follow the recommendations?  
*For example: if I must eat in my room, do staff make sure I receive my meals?*
- Are there visual reminders in my living environment about what I need to do?  
*For example: stay in my room, wear a face mask, wash my hands.*

### Health and Wellness

- Do I have meaningful activities to keep me entertained?
- Do my caregivers and I have other ways to communicate with each other, if we are not able to visit each other in person? *For example: telephone, support with WIFI tablet calls (Skype, Facetime, Zoom etc.), window visits, email.*
- Are my caregivers and I able to share our feelings or concerns with staff?
- Do my caregivers and I know how we can connect with the leaders at the home to discuss difficult situations?

### People Flow and Transfers

- Are my caregivers and I informed if I am being moved to another location, and the reason for that move?
- Do my caregiver and I understand the safety precautions I need to follow while I am being moved or transferred? *For example: wear a mask, try not to touch things outside of my room.*
- Do my caregivers know where I am going and how to find me and how to reach me if I am transferred?
- Do I have all my personal belongings or things that I need to perform my daily activities if I am being moved?  
*For example: hearing aids, dentures, glasses, mobility aids.*



## STAFF AND CONTRACTORS

### Prevention, Screening and Testing

- Have I received timely information on prevention, screening and testing for COVID-19?
- Do I promptly screen residents who report symptoms of COVID-19 as per protocol?
- Do I have a tool to decide on the appropriate Infection Prevention and Control (IPC) measures to protect residents, caregivers and myself if the COVID-19 screening is positive?
- Do I assess my own health if I am not feeling well and take appropriate precautions to protect others as per protocol? *For example: wear a mask, take my temperature, report my symptoms to my supervisor etc.*
- Do I know how to perform the COVID-19 testing process if a resident has a positive screening result?
- Am I wearing the appropriate face mask as per protocol?

### Hand Hygiene

- Have I received training on hand hygiene, both handwashing and use of alcohol-based hand rubs?
- Do I have access to hand hygiene educational materials that meet my needs?  
*For example: posters, pamphlets etc.*
- Do I consistently use good hand hygiene in my practice and while providing care to residents?
- Are hand-washing stations and alcohol-based hand rubs located in the right place to support best practices?  
Are the stations kept well supplied and equipped?
- Is there signage throughout the home to remind me to wash my hands?
- Do I monitor residents' and caregivers' hand hygiene and incorporate it into the care I provide to them?  
*For example: prior to eating or handling oral medications.*

### Personal Protective Equipment (PPE)

- Do I have access to the personal protective equipment (PPE) that I need?
- Have I received training on how to correctly don and doff PPE?
- Is my fit test up to date if I will be performing care that requires an N95 mask?  
*For example: aerosol-generating medical procedures (AGMP).*
- Do I consistently use the required PPE in addition to routine Infection Prevention and Control (IPC) Practices, depending on the type of care I provide?
- Is the signage to remind me how to follow the correct processes for donning and doffing PPE in the right place?
- Do I know who to refer to if I have a concern or question, or if I need guidance on how to use PPE?

### Cleaning and Disinfecting (Equipment and Physical Environment)

- Have I received training on the appropriate personal protective equipment (PPE) that I need to wear when cleaning or disinfecting medical devices or equipment, or the physical environment?
- Have I received training on my roles and responsibilities for cleaning equipment, high touch surfaces and the physical environment?
- Do I discard single-use disposable equipment in a no-touch waste receptacle after use?
- Do I clean and disinfect medical and personal care equipment with the appropriate product after use?
- If I am caring for a resident with a suspected or confirmed infection, do I dedicate medical and personal care equipment to that resident?
- If I am not able to support best practice or do not have enough equipment or supplies, do I know who to refer to if I have a concern or if I need guidance?



## STAFF AND CONTRACTORS

### Isolation Practices

- Do I have a protocol that I can follow to respect isolation practices?  
*For example: place residents in a single room, cohorting practices.*
- Do I have signage indicating the type of precautions needed at the entry to the resident's room?
- Have I informed residents and caregivers about the required isolation practices they need to respect?  
*For example: resident remaining in his or her room while infected.*
- Do I adapt my care activities for residents who are under isolation to keep them safe?  
*For example: frequent rounds to prevent clinical complications, delirium, and social isolation.*

### Health and Wellness

- Am I provided with information on how to maintain or reorganize recreational and meal activities?
- If I continue to facilitate group activities, do I need to ensure that residents practice physical distancing and wear masks while participating? Do I need to restrict activities by floor or by unit?
- Do I inform families about the COVID-19 outbreak status of the home and how their loved ones are doing?
- Do I facilitate communication for residents and caregivers in other ways if they unable to visit in person?  
*For example: telephone, support with WIFI tablet calls (Skype, Facetime, Zoom etc.), window visits.*
- Do I have the time to actively listen to and acknowledge the feelings or concerns raised by residents or their caregivers?
- Am I able to talk with my co-workers or leaders after difficult situations?

### People Flow and Transfers

- If I am caring for a resident that needs to be transferred, do I have a process or checklist to move the resident safely?
- Do I ensure the resident's caregivers are aware that their loved one is being moved to another room or transferred to another facility?
- Do I ensure that the residents have his or her personal belongings or necessary items to perform daily activities, if they need to be transferred to another facility? *For example: Hearing aids, dentures, glasses, mobility aids.*
- Do I use the designated access points to enter and exit the building and the designated paths to transfer residents while moving around inside the building and for transfers out of the facility?



## LEADERS (ADMINISTRATIVE AND CLINICAL)

### Prevention, Screening and Testing

- Have staff and contractors received training on Infection Prevention and Control (IPC) Routine Practices including respiratory hygiene?
- Have staff, contractors, residents and caregivers been informed and provided the appropriate training for prevention, screening and testing practices?
- Are appropriate diagnostic testing protocols initiated and followed as per public health guidelines?
- If testing has been performed, how do I ensure the results are communicated in a timely way? How do I act upon the results, and inform residents, caregivers and appropriate healthcare professionals?
- Do I have a communication plan to inform families and caregivers as appropriate with the results of screening, or testing or any other changes in health status of the resident?

### Hand Hygiene

- Have I provided hand hygiene educational materials for residents, caregivers, staff and contractors?  
*For example: signage, pamphlets, website etc.*
- Have I provided residents, caregivers, staff and contractors training on when and how to wash their hands and the importance of doing so?
- Are hand-washing stations and alcohol-based hand rubs located in the right place to support best practices? Are the stations kept well supplied and equipped?
- Is there signage throughout the home to remind everyone to wash their hands?
- Is hand hygiene by residents and caregivers monitored and incorporated into the care being provided?  
*For example: prior to eating or handling oral medications.*

### Personal Protective Equipment (PPE)

- Do I provide residents, caregivers, staff and contractors the appropriate guidelines regarding personal protective equipment (PPE) usage?
- Have residents and caregivers (as applicable) received information and training on how to appropriately use PPE, including when and how to wear, change, remove and/or discard it?
- Have staff and contractors received training on when and what PPE to use, and how to appropriately don and doff their PPE?
- Am I following public health recommendations for which medical procedures require N95 mask?  
*For example: for aerosol-generating medical procedures (AGMP).*
- Have staff and contractors had a current fit test for N95 masks if necessary?
- Is signage illustrating the correct method for donning and doffing PPE displayed inside and outside the room of residents placed on precautions?
- Have I ensured that PPE is provided and accessible to residents, caregivers, staff and contractors while at the same time ensuring it is stored safely and the supply is conserved if necessary?
- Is there a plan in place to ensure an adequate supply of PPE for staff and contractors, residents and caregivers is maintained? Do I have information on procurement of PPE?





## LEADERS (ADMINISTRATIVE AND CLINICAL)

### Cleaning and Disinfecting (Equipment and Physical Environment)

- Do staff and contractors wear appropriate personal protective equipment (PPE) when cleaning, disinfecting equipment? *For example: gloves appropriate to the task, fluid-resistant cover garment with sleeves, face mask to fully protect eyes, nose and mouth.*
- Have staff and contractors who have responsibilities to clean and disinfect the physical environment, received updated training for a COVID-19 outbreak situation?
- Do I monitor the quality of cleaning and disinfecting of the physical environment?
- Do I ensure high touch surfaces (e.g. telephones, keyboards, doorknobs, bedrails, call bells) are being regularly disinfected?

### Isolation Practices

- Do we have clear procedures regarding when and how to implement isolation practices?
- Do we have a protocol to reorganize the physical environment to accommodate physical distancing practices and cohorting?
- Do we organize resident care assignments based on infection/non-infection status?  
*For example: cohort staff to care for all infected residents or all non-infected residents but not a mix of both.*

### Health and Wellness

- Am I able to maintain or reorganize recreational and meal activities in the context of an outbreak?
- Do we regularly communicate with residents and caregivers about the status of the home and the conditions of their loved ones? *For example: daily email updates.*
- Am I facilitating multiple methods for residents and caregivers to communicate with each other in situations where in-person visiting is not appropriate?
- Do I regularly remind staff and contractors about the importance of ensuring their own health and wellbeing?  
*For example: signs of stress in staff; monitor staff workload.*
- Do I communicate with staff and contractors and discuss difficult situations such as signs of burnout or emotional distress, and provide resources to help?
- Do we have a compassion plan to address the emotional and physical needs of residents?  
Does the plan include addressing the needs of caregivers?
- Do we provide emotional support for residents, caregivers, staff and contractors throughout palliative and end of life care?
- Do we have a process to facilitate team debriefing sessions following difficult situations?

### People Flow and Transfers

- Do we limit patient transfers to ones required for essential services and diagnostic or therapeutic tests?
- Have we considered using Virtual Health Services as an alternative to in-person services when possible?
- Have I provided staff and contractors with a process or checklist for patient transfers to ensure appropriate practices are being followed?
- Do we have a procedure in place to ensure information relevant to the care of the resident is communicated effectively during care transitions, both when residents are leaving or returning to the home?
- Do we provide staff and contractors with a checklist to ensure they provide or receive all information?



## LEADERS (ADMINISTRATIVE AND CLINICAL)

### Outbreak Management

- Is staff and contractor training on Routine Infection Prevention and Control (IPC) practices, Hand Hygiene, Personal Protective Equipment (PPE) and N95 Fit Testing (as required) up to date and documented, and is staff and contractor compliance tracked?
- Do we have a policy and procedure that outlines when and how to screen all staff and contractors, residents, visitors, essential volunteers or outside care providers at access points? Do we need to implement this procedure?
- Do we have the necessary tools to support screening of everyone at access points or throughout the home?
- Do we have a policy regarding access to the home by residents, visitors, essential volunteers, contractors or outside care providers in the event of an outbreak? Does it identify screening, whether they need to wear personal protective equipment (PPE), when should they be excluded and under what conditions they should be allowed in? *For example: compassionate grounds.*
- Do we have the capacity to provide safe and reliable care and services during the outbreak?
- Have I categorized the areas of the physical environment based on risk of infection to determine frequency of cleaning and level of disinfection required? *For example: high traffic areas (elevators, lobbies, hallways); type of activity performed (clinical or administrative); type of resident served (those with an infectious disease or compromised immune system).*
- Do we need to increase the frequency of cleaning, especially of high touch surfaces?
- Do we have a plan detailing how to maintain essential services during an outbreak?
- Am I aware of new referral pathways that have been implemented because of the outbreak?
- Do I have a procedure to guide decision making regarding accepting admissions?
- Do I know when and how to connect with local public health authorities?
- Do I know what data I am required to collect and how I submit it to public health authorities?
- Do we have a communication plan to ensure information is shared with appropriate stakeholders?

**This document is based on the following accreditation standards:**

HSO 34011: Infection Prevention and Control for Community-Based Organizations;  
HSO 34012: Leadership for Community-Based Organizations;  
HSO 5012: Information Transfer at Care Transitions.

For a complete Virtual Health Services COVID19 Virtual Care Toolkit:  
<https://covid19.healthstandards.org/resource/virtual-health-toolkit>

**This document is also based on the following guidance documents:**

Public Health Agency of Canada (PHAC). (2010). [\*Guidance: Infection Prevention and Control Measures for Healthcare Workers in Acute Care and Long-term Care Settings: Seasonal Influenza.\*](#)

Public Health Agency of Canada (PHAC). (2013). [\*Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings.\*](#) Revised November 2016.

Public Health Agency of Canada (PHAC). (2020). [\*Infection Prevention and Control for COVID-19: Interim Guidance for Long Term Care Homes.\*](#) Last updated April 8, 2020.

**Additional Resources:**

[Health Standards Organization / Accreditation Canada](#)

[Infection Prevention and Control Canada](#)

[Public Health Agency of Canada](#)

[WHO](#)

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