



**November 19, 2020**

## **Local Hubs for Infection Prevention and Control (IPAC) Expertise and Support**

As part of the [Fall Preparedness Plan for Health, Long-Term Care and Education](#) announced September 30, the Government of Ontario indicated that work is underway to develop and implement local networks (hubs) of infection prevention and control (IPAC) expertise to support IPAC readiness and response in community congregate living settings, including retirement homes, long-term care homes, residential settings for adults and children, shelters, and supportive housing.

These local networks will be organized province-wide, overseen by Ontario Health and the Ontario Health Regions. Training and education will be provided by Public Health Ontario, IPAC expertise and administrative support by hospital and PHU leads. Local public health units will continue with responsibility and oversight for outbreak management.

By participating in local network hubs, congregate living settings will be able to quickly access IPAC expertise, collaborative assistance and just-in-time advice, guidance and direct support on infection prevention and management practices for prevention and response.

IPAC hubs will:

- Identify and monitor IPAC training and practice needs of congregate living settings in their catchment area.
- Support a network of IPAC service providers and experts to align local resources to the IPAC needs in congregate living settings for both prevention and response. Services will be allocated based on a risk-based framework.
- Share IPAC expertise and support expertise development among hub members.
- Strengthen current partnerships and help to broker new ones.

To start, approximately 25 new IPAC hubs are being established. The hub locations, catchment areas and lead contacts are still being finalized.

**To be ready to collaborate with hubs** and the network of service providers, each retirement home should ensure that the most accountable individual for IPAC/Occupational Health and Safety is identified as an IPAC lead within the home and ready to work collaboratively with the hub-led local community of practice.

In addition, retirement homes should:

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- Ensure clear accountability and leadership for IPAC practices within the home.
- Ensure staff have up-to-date training (see below).
- Have policies and plans in place to enable strong IPAC practices during an outbreak such as increased environmental cleaning, process to obtain PPE and other critical supplies, timely cohorting of residents and staff, staffing to support surge capacity, and communications protocols.
- Work collaboratively with the hub and draw on expertise provided.
- Disseminate knowledge, expertise and assistance from the hub within the home and to peers and colleagues as/when appropriate.

As hubs become operational throughout the fall, they will communicate directly with the congregate living organizations, including retirement homes, in their catchment areas. To confirm your local IPAC hub or get connected, contact [EOOperations.moh@ontario.ca](mailto:EOOperations.moh@ontario.ca).

Retirement homes are encouraged to use the [COVID-19 Preparedness Self-Assessment tool](#) on the RHRA website and the IPAC checklist on the Public Health Ontario website to proactively address gaps and help guide the development of a COVID-19 outbreak response plan.

## Updated Educational Resources on IPAC Fundamentals

Public Health Ontario website has updated and packaged a number of educational resources geared toward congregate settings, including retirement homes, to support preparedness for the second wave of COVID-19.

The resources contain targeted modules, courses, and webinars which address foundational elements of Infection Prevention and Control (IPAC) practices including proper use of personal protective equipment (PPE), screening, physical distancing and COVID-19 case management. Resources have been updated and organized for easier access by key audiences including:

- Clinical staff (e.g., registered nurses, registered practical nurses, personal support workers, physicians, therapists and social workers).
- Non-clinical staff (e.g., environmental cleaning, dietary, maintenance, and administrative staff).
- Family/visitors/other caregivers (e.g., volunteers, faith leaders).

The resources can be found on the Public Health Ontario website at:

<https://www.publichealthontario.ca/en/education-and-events/online-learning/ipac-fundamentals>

Retirement home operators are strongly encouraged to make existing and new staff aware of these resources and ensure they complete those that are most relevant to their specific role and level of knowledge as soon as possible. While some of the resources may have previously been completed by existing staff, this is a good time for staff to refresh their knowledge. Staff and volunteer completion of these training resources is critical for strengthening IPAC capacity, in addition to supporting your home's participation in the new IPAC hubs described above.

Operators are also encouraged to make residents and family members aware of the resources targeting family caregivers and encourage them to complete the modules provided.

You may also wish to consider accessing additional staff training opportunities through [IPAC Canada](#), [Centennial College](#) or other recognized institutions, particularly for staff who are at a more advanced level in their current knowledge and with responsibility for infection prevention and control program within your home.

Retirement Home participation in local IPAC hub networks will increase IPAC capacity and response to

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## Clarification on Screening of ECPs in Co-located Homes

RHRA would like to offer clarification on the Retirement Home COVID-19 Visitors policy for co-located homes and screening of external care providers (ECPs).

- Directive #3 states that Homes must have a visitor policy in place that is compliant with the Directive and is guided by applicable policies, amended from time to time, from the MLTC, the Retirement Homes Regulatory Authority (RHRA), and the MSAA
- Neither Directive #3 nor the Retirement Home COVID-19 Visiting Policy require retirement home visitors to attest upon entry to the home that they have tested negative for COVID-19 within the previous two weeks.
- However, the Retirement Home COVID-19 Visiting Policy requires that retirement homes co-located with long-term care homes adopt the long-term care home's visitation policy if that policy is more restrictive than the retirement home visitation policy, unless the retirement home and long-term care home are physically and operationally independent.
- The Long-Term Care Visitor Policy states that homes should ask support workers and caregivers to verbally attest to the home that they have tested negative for COVID-19 within the previous two weeks and not subsequently tested positive. Homes are not required to provide the testing.
- Therefore, a retirement home co-located with a long-term care home should ask support workers and caregivers to verbally attest to the home that they have tested negative for COVID-19 within the previous two weeks and not subsequently tested positive.
- "Co-located" refers to two homes that are not physically and operationally independent (i.e. do not have separate entrances and separate areas to ensure there is no mixing of residents or staff between the two homes).

## Retirement Home Consult Line Extension

Access to the Long-Term Care (LTC) and Retirement Home (RH) Consult Line and Virtual Care™ App is being extended. These services are intended to address gaps in virtual care supports available in long-term care and retirement homes.

### 1. Long-Term Care (LTC) and Retirement Home (RH) Consult Line (1-8338-2HELPU)

This service provides primary care providers in LTC and RH with 24/7 telephone access to general internal medicine specialists to discuss urgent medical issues. This service is extended to **December 31, 2020**. For questions about the LTC & RH Consult Line contact: [lcrh.consult@wchospital.ca](mailto:lcrh.consult@wchospital.ca).

### 2. VirtualCare™ App:

This service provides virtual video-enabled visits to connect primary care providers with nurses and residents in the LTC/RH home via laptop or tablet and is fully integrated with PointClickCare and MED e-care EHRs. Special COVID-19 funding is extended to homes already onboarded to this service until **March 31, 2021**. This service will be available on a *fee for service* basis thereafter. Homes not onboarded and interested in starting with this service on a *fee for service* basis may contact [VCSeniors@thinkresearch.com](mailto:VCSeniors@thinkresearch.com).

For homes without an existing virtual solution or needing additional supports, please see the following for more options:

- [Virtual Support for LTC Curated Resources](#)
- [Virtual Care Supports for LTC Homes Placemat](#)

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