

Action IPAC

Activities to Support Infection Prevention and Control Practices in Congregate Living Settings



Primer

2nd Edition: May 2024

Public Health Ontario

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- infection prevention and control
- environmental and occupational health
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- health promotion, chronic disease and injury prevention
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Action IPAC Activities

Introduction

The Action IPAC Series was a joint initiative of Ontario's Ministry of Health and Public Health Ontario in 2021. The activities in the series addressed basic IPAC concepts that are important for everyone in congregate settings (both healthcare and non-healthcare focussed) to follow, and were designed to be easily implemented by anyone, not just an IPAC designate with years of experience.

All 12 activities address key areas of IPAC practice, provide information about why the practice is important and practical ideas about how to strengthen IPAC culture. The final part of this resource includes additional helpful resources to support you in your congregate living setting to maintain the safety of clients, visitors and staff. The term client is used generally throughout this resource and is referring to all Congregate Living Settings clientele.

These activities are not designed to replace the role of regular audits that use more detailed tools and form a key part of any IPAC program. However, because these activities support the goal of continuous improvement, we encourage all employees to make use of them.

How to Use the Action IPAC Activities

These activities are examples that can be used as they're described here, or you can tailor them to the unique aspects of your setting. Either way, they're an engaging, hands-on way to support an overall goal of building a safe and healthy workplace for everyone.

Activity 1: Masking

What You'll Learn

This activity has two parts and provides a refresher on the best masking practices. While masking is not always a requirement, there may be times when it is a recommended or required practice in your organization (such as during a COVID-19 or another respiratory virus outbreak). As you observe your workplace, you'll learn how well your co-workers and others are following the best masking practices. You'll learn what works well and where practices can be improved. We also hope you'll share with your team what you learned.

Part 1. Monitor Mask Wearing in Different Areas

1. Visit a variety of areas in your workplace (e.g. clinical, administrative, recreational, screening and exit areas) and observe the mask use of as many individuals as possible.
2. Record their mask practices in the following ways:
 - **Fit:** mask fits over nose and mouth (Yes(Y)/No(N))
 - **Clean:** mask appears clean (Y/N)
 - **Double:** instances of unnecessary double masking (Y/N)

A simple table, like the example below, is an easy way to track your observations

No.	Fit	Clean	Double	No.	Fit	Clean	Double	No.	Fit	Clean	Double	No.	Fit	Clean	Double
1	Y/N			6				11				16			
2				7				12				17			
3				8				13				18			
4				9				14				19			
5				10				15				20			

Part 2. Monitor Mask Interactions and Storage

Select a specific area (e.g. Care station) and observe the individuals in this space for 10 minutes. Count each time they touch their face or their masks. (Tip: Use a smart phone counter app.)

Record your observations:

1. What type of area did you observe?
2. How many individuals did you observe?
3. What was the total number of times faces and/or masks were touched?

Take Action to Improve IPAC Practices

Now that you've observed mask practices in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where improvements can be made. Feel free to share with your manager and team.

Best Practices for Masking

- Masks should fit snugly over the nose and mouth
- Clean your hands before putting on your mask
- Avoid touching your face and the outside of your mask
- Clean your hands before touching your face and if you touch the outside of your mask
- Avoid hanging your mask under your chin
- Double masking is not advised. Use one mask that fits well

Resources

[Public Health Ontario. Recommended Steps: Putting On and Taking Off Personal Protective Equipment¹](#)

Activity 2: Cleaning and Disinfecting

What You'll Learn

The 'how' and 'how often' we clean and disinfect in healthcare settings is important. The increased risk of infection transmission in these settings means that cleaning and disinfecting surfaces, items and equipment correctly is an important way to protect everyone. Cleaning and disinfecting is important in non-healthcare settings too.

As you observe your workplace, you'll learn how well your co-workers and others are following the best cleaning and disinfecting practices. You'll learn what works well and where improvements can be made. We hope you'll share with your team what you learned.

Part 1. Record Cleaning Information

1. Select one of the following areas to perform this activity: clinical, administrative, recreational, screening or exit area.
2. Record your observations:
 - Look at all the containers of cleaner/disinfectant wipes and note and follow the "contact time" as listed on the label.
 - How many had the lids open?
 - Review the high touch surface cleaning log for the area. If there is one, has it been completed as per organizational policy?

Part 2. Interview Ten Co-Workers

If staffing levels permit, ask 10 individuals the following questions and record your results as Yes or No.

1. What is the contact time of the disinfectant you use on your equipment? Were the individual responders correct? (Y/N)
2. Do you feel confident that all high touch surfaces and common items in the organization are cleaned appropriately? (Y/N)
3. Can you easily find cleaning products when you need them? (Y/N)

Take Action to Improve IPAC Practices

Now that you've observed the cleaning and disinfecting practices in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where improvements can be made. Feel free to share with your manager and team.

Best Practices for Cleaning and Disinfecting

- Remove and clean dirt and organic material (e.g. blood, secretions) from soiled surfaces.
- After you've removed visible dirt, the surface must remain wet with the disinfectant for the recommended contact time (time the disinfectant must be in contact with the surface to be effective) and allowed to air dry.
- The appropriate contact time can be found on the label of the disinfectant.
- Prior to using any cleaners or disinfectants, review the label for instructions and safety.
- Ensure the product is in good condition (e.g., check expiry dates, make sure wipes are moist).
- Avoid the use of spray bottles as they can be a health hazard to staff and residents.

Resources

[Public Health Ontario: Environmental Cleaning²](#)

Activity 3: Physical Distancing

What You'll Learn

Physical distancing is a practice which adds a layer of prevention of disease transmission and was a key part of organizational practice during the COVID-19 pandemic. It may also be considered as an additional precaution when managing other respiratory virus outbreaks. When in place it must be practiced in the specified area as much as possible. As you observe your workplace, you'll learn where physical distancing is easy to do and other areas where it's a constant challenge. We hope you'll share what you learned with your team.

Observe Physical Distancing

1. From the table below, pick two or more areas where physical distancing may be in place. For example during an outbreak in a clinical area, break areas, dining areas.
2. Observe each area you've selected for at least 10 minutes.
3. Record your observations in the chart.

Table 1: Physical Distancing Observational Chart

Observations	Area 1	Area 2	Area 3	Area 4	Area 5
Is everyone physically distanced by 2 metres or as much as the space will allow?					
If needed, is there visible and easy to understand signage reminding people to physically distance?					
If needed, is there signage showing maximum number of people allowed in the space?					
If needed and depending on the size of the setting, are there markings showing where to sit or stand?					
Are there more chairs than the number of people who should be in the room?					

Take Action to Improve IPAC Practices

Now that you've observed physical distancing in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where it was more challenging and how you adapted. Feel free to share with your manager and team.

Best Practices for Physical Distancing

- Physical distancing means staying away from others as much as possible (at least 2 metres).
- Physical distancing works best when practiced in combination with wearing a mask, only touching your face with clean hands and cleaning your hands often. Physical distancing is especially important if you or others are not wearing a mask.
- Avoid spaces that are cramped, crowded and may involve close contact with others.
- Physical distancing will help stop the spread of illnesses including RSV, Influenza and COVID-19, but it may leave you feeling isolated. Find new ways to connect with others while still keeping each other safe.

Group gatherings

When planning a group gathering, consider the risk of exposure to respiratory viruses based on:

- number of cases reported in the local community
- setting – indoor poorly ventilated areas are more risky than outdoor events
- duration of the event
- number and crowding of individuals
- behaviour of individuals – close interaction with individuals from other households, singing, shouting, exertion, not masking or distancing consistently, not cleaning hands can all increase risk.
- level of cleaning and disinfection of the space to be used

Resources

[How to Protect Yourself and Others from Respiratory Viruses³](#)

Activity 4: Indoor Air Quality

What You'll Learn

Indoor air quality can be improved by removing stale indoor air and supplying fresh (outdoor) air into a given space – also known as ventilation.

As you observe your workplace, you'll learn more about the air quality in your environment.

You'll learn where air quality meets the best practices and where improvements can be made. We also hope you'll share with your team what you learned.

Record Indoor Air Quality

Select an area in your workspace (e.g. clinical, administrative, recreational, screening and exit areas) and answer the following questions:

- Do you notice a problem with the air quality? (e.g., feels stuffy, lingering odours, drafts, doors don't shut properly)?
- Can you identify any air vents (grills or registers) in the area?
- Do you feel air coming from or returning to the vents? Note: ventilation systems usually cycle on and off (check again if you don't feel air movement at the vents). Tip: Use a piece of tissue near the air vent to check for air from or returning to vents.
- If there are no air vents, are there windows in the area that you can safely open?
- How many individuals can be in this area (maximum room occupancy)?
- How many individuals are typically in this area?
- Who would you contact in your organization if you saw ways to improve the indoor air quality?

Take Action to Improve IPAC Practices

Now that you've observed the air quality in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where improvements can be made. Feel free to share with your co-workers.

Best Practices for Indoor Air Quality

- When feasible, windows can be opened to help draw in fresh air or exhaust indoor air directly outside e.g., by pointing a fan outdoors

- Opening windows daily, even for a few minutes can improve indoor air quality
- Make sure there is regular maintenance on the ventilation system (e.g., change filters per manufacturer's recommendation)

Resources

[Health Canada. Maintain and improve indoor air quality](#)⁴

Activity 5: Health Care Signage

What You'll Learn

Signage in healthcare organizations should be laminated or in a plastic cover so that it's easy to clean and disinfect. As you observe your workplace, you'll learn more about the signage in your environment. You'll learn where it meets best practices and where improvements can be made. We hope you'll share with your team what you learned.

Observe Workplace Signage

1. Review screening signage at the entrance to your building.
 - Is screening signage easily visible and legible for the following situations?
 - If you are shorter or taller than average height?
 - If you are approaching from various angles?
 - If the doors are open and closed?
 - If there is an individual in front of you?
 - If you are over 6 feet away (i.e., letters are at least 1 inch tall for every 10 feet away)?
 - Is the message clear in the following situations?
 - If you have less than 1 minute to read it?
 - If the language on the sign is unfamiliar to you?
2. Review signage at a care station, workspace or team area for clutter.
 - How many different signs do you see on one wall/door?
 - How many are applicable to your work?
 - Have you noticed and read these signs before?
 - Are signs outdated?
 - Can signs be combined or organized a different way?
 - Is the amount of signage distracting or overwhelming?

3. Review signage at a hand-washing sink/station.

- Is there signage on the 4 moments of hand hygiene and how to clean hands?

4. Review signage at a client room that is under Additional Precautions.

- Is there signage at the door visible prior to entry outlining the type of Additional Precautions and required PPE (e.g., Contact and Droplet)? Is the signage standard across the organization?
- Is the sign in Colour or Black and White?
- Is the signage laminated or in a plastic cover?
- Is there signage on PPE donning outside the door and PPE doffing inside the door by the garbage bin?

Having completed this exercise, do you feel that IPAC signage in your organization serves its intended purpose?

Take Action to Improve IPAC Practices

Now that you've observed signage in your workplace, we encourage you to share what you learned. Provide examples where signage works well and examples where improvements can be made. Feel free to share with your manager and team.

Best Practices for Health Care Signage

- Visible, easily recognizable and legible (i.e. at least 1 inch tall for every 10 feet of viewing distance).
- Clear message with pictures and few words - Less is more!
- Avoid clutter! If there are too many signs, they may be overlooked, which increases the chances of an incident
- Available in multiple languages
- Consistent across all areas without mixed messages
- Signage is close to the area, but visible before entering the area

Activity 6: Protecting Your Skin

What You'll Learn

After you perform this activity, you'll learn how your work and home activities may be affecting your skin. We hope you'll share with your manager and colleagues what you learned.

Answer questions about your job and your skin

How does my job affect my skin?

- Do I clean my hands many times during a work shift?
- Do I wear gloves for a significant part of the day (adding up to 2 hours)?
 - If so, I could be more likely to develop work-related contact dermatitis
- Do I get exposed to chemicals (e.g., cleaning and disinfecting products, rubber chemicals)?
 - If so, I could be more likely to develop work-related contact dermatitis
- Am I wearing the right glove for the task?
- Is it important to wear nitrile gloves for chemical exposures?
- Do I know to not wash hands with soap and water and using ABHR together concurrently?

How do my home activities affect my skin?

- Do I have a child/children under the age of four?
- Do I do a lot of gardening, or household chores with my hands in water?
- Do I have hobbies that expose me to certain chemicals (e.g., making jewelry)?
 - If so, I could be more likely to develop contact dermatitis (non-occupational when not related to work)

Carefully read the skin descriptions below then look closely at your own skin.

Choose which sentence best describes your skin, then follow the suggestions provided.

1. My skin is smooth and clear and soft without any breaks in it.
 - You have healthy skin. Keep up the good work and keep moisturizing!
2. My skin is dry, red (chapped) and/or flaky but has no cracks or small blisters.

- You may have mild dermatitis. It is important to moisturize at least 3 times daily.
 - You may need over the counter creams and should check with your pharmacist.
3. My skin is dry, red, flaky, and also has cracks and/or small blisters.
- You may have moderate or severe dermatitis.
 - You should report to occupational health or delegate and contact your health care provider.
 - You may need to see a specialist for special skin testing or prescription creams.
 - You may need modified duties or use different types of gloves..
4. I have a skin condition unrelated to work. I have eczema, psoriasis, hives or another skin condition.
- If it seems to get worse when I am working I should tell my health care provider.

Take Action to Improve IPAC practices

Now that you've assessed the impact of work and home on your skin, please note areas where you see room for improvement. We encourage you to share your findings with your co-workers.

Resources

[Public Health Ontario: Infection prevention and control practices for occupational contact dermatitis](#)⁸

[Centre for Research Expertise in Occupational Disease. Skin health resources](#)⁹

[Occupational dermatitis to facial personal protective equipment in health care workers: a systematic review](#)¹⁰

Activity 7: Healthy Hands

What You'll Learn

Maintaining and encouraging healthy hands is important in increasing compliance with hand hygiene, avoiding outbreaks, preventing the spread of antimicrobial-resistant organisms, and reducing overall infection rates.

As you observe your workplace, you'll learn more about the health of hands in your environment. You'll learn where it meets best practices and where improvements can be made. We hope you'll share with your team what you learned.

Observe Workplace, Speak With Coworkers

1. Choose a setting to perform this activity (e.g. clinical, administrative, recreational, screening and exit areas)
2. Look around the following high-touch areas. Is hand sanitizer easily accessible? (Y/N)
 - Elevator:
 - Stairwell:
 - Entrances:
 - Keyboards:
 - Phones:
 - Microwave:
3. Choose a few co-workers you know well. Ask them if you can talk to them about their hand cleaning training and inspect their hands. Then record their answers.

Did they receive training on how to protect and care for their hands?

Are their hands:

- red/ blotchy/rashy?
- dry, cracked or have open areas?
- itchy, sore or have burning areas?

Do they have:

- fake nails?
- hand or wrist jewelry (e.g. rings, bracelets, watches)?

Are they wearing gloves outside of resident care or cleaning (e.g. in hallways, when typing, on the phone or charting)?

Take Action to Improve IPAC Practices

Now that you've observed hand cleaning and care in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where improvements can be made. Feel free to share with your manager and team.

Best Practices for Healthy Hands

- Cleaning your hands reduces the risk of getting and passing on infections.
- Individuals clean their hands more when sinks or hand sanitizer are easily accessible.
- Workers who have to clean their hands often are at high risk for damage to the skin.
- Avoid fake nails and hand and wrist jewelry as they can hide bacteria and viruses from the antiseptic action of alcohol. Alcohol and soap can get stuck under jewelry and cause skin irritation.
- Glove use:
 - Wear gloves only when necessary and for as short a time as possible.
 - If moisture builds up under the glove, it can lead to skin irritation.
 - Hands must be cleaned before and after glove use.
- Regular use of lotions and creams keeps skin healthy.
- Inspect your hands often for signs of irritation such as redness, dry/cracked skin and itchiness

Resources

[Public Health Ontario: Just clean your hands: hand care program](#)⁵

[Public Health Ontario: How to Protect Your Skin – A Self-Assessment Checklist](#)⁹

[Public Health Ontario: Caring For Your Hands](#)⁷

Activity 8: Declutter to Clean

What You'll Learn

Clutter increases the risk of healthcare acquired infections by impacting the ability to clean. Increased clutter means more items may become contaminated and transmit infection when touched.

As you observe your workplace, you'll learn more about clutter in your environment. You'll learn where it meets best practices and where improvements can be made. We also hope you'll share with your team what you learned.

Observe Your Workplace

Try this activity in different areas (e.g. clinical, administrative, recreational, entry and exit areas).

1. Trace the most common pathway you would take through a hallway in the building and note the following:
 - How many objects are in the hallway?
 - Are the surfaces beneath the objects clean?
 - Do you have to move yourself out of the way or move objects out of the way to proceed?
 - How many extra surfaces could a visitor or a client potentially touch due to clutter?
2. Survey a team room or care station where you work often:
 - Are there items stored on the floor, under desks and in corners?
 - How many items would need to be moved off a horizontal surface to clean appropriately?
 - Since your last shift, do you think items have been moved around to facilitate daily cleaning?
 - How many items are in the care station that have a home elsewhere? (e.g. dressing tray, bottle of saline, a kidney basin)?
3. Survey a client room (if applicable):
 - Is the bedside table free of clutter?
 - Is the meal tray table ready to receive a delivered meal tray?
 - Can the floor be cleaned without needing to move multiple items?
 - What proportion of horizontal surfaces are free of clutter to facilitate daily cleaning?

Take Action to Improve IPAC practices

Now that you've observed clutter in your workplace, we encourage you to share what you learned. Provide examples of what's working well and examples where improvements can be made. Feel free to share with your co-workers.

Best Practices to Declutter

- Reduce - things you take into client rooms- bring only what is needed.
- Remove - excess linens, meal trays, papers, equipment and anything not immediately needed or being used.
- Refresh - by re-arranging furniture, equipment, papers, to clean forgotten surfaces.
- Re-distribute - bulk storage items out of hallways and rooms

Activity 9: Point of Care Risk Assessment (PCRA)

Overview of PCRA

PCRA is a routine practice completed before every client interaction to assess risk of exposure to infection for yourself and for others.

PCRA is a dynamic risk assessment, meaning it can change with every interaction as the client health status changes (e.g., develops fever, cough) or the tasks are different, requiring different PPE, or the environment is different (e.g., client transfer, new admission).

Always consider the:

- client
- task
- environment

The risk assessment determines what actions are needed and what personal protective equipment (PPE) is right for the task(s).

Client(s)

- What are their symptoms (e.g., coughing, sneezing, or diarrhea)?
- Are Additional Precautions required (e.g., droplet/contact) for HCW protection?
- What is their health status (e.g., cognitively impaired, incontinent)?
- Can they perform respiratory etiquette and can they clean their own hands?

Task

- What type of task(s) to be carried out such as providing direct care, (potential contact with body fluids, wound dressing, continence care), or dropping off food tray?
- Do I have the training, equipment and confidence to perform the task?

Environment

- Where is the task being performed? Is the space or surface adequate?
- Is the client in a separate or multi-bed room? Is the bathroom shared?
- What is required for proper cleaning and disinfection before and after the task?

What You'll Learn

As you perform this activity, you'll learn more about point of care risk assessments in your environment. You'll learn where they meet best practices and where improvements can be made. We also hope you'll share with your team what you learned.

Perform Two PCRA's

Incorporate the points below while performing your PCRA in two different areas, one client single room area and one multi-bedroom area.

Select two areas to perform this survey and consider specific client for this exercise.

1. Specific characteristics of each client need consideration:
 - Are they cognitively impaired? Consider best time of day or need for assistance.
 - Are they incontinent of urine or feces? Gloves and gown likely required.
 - Do they have open wounds (e.g., skin ulcers on their back or legs, or a rash)? Gloves and gown likely required.
 - Do they have any lines such as an I.V. that requires special care to keep clean? Follow organizational policy for any lines or catheters and use sterile gloves where appropriate.
2. How does hand hygiene fit into a PCRA?
 - Is there a difference if you are in a single or multi-bed room? Important to remember each client's bed space is handled like a separate unit.
 - You will need to clean your hands regardless (e.g., before and after a task, before and after PPE use, before and after contact with the client and their environment).
 - Are there sufficient point-of-care alcohol-based hand rub (ABHR) containers?
 - How can you help a client with respiratory etiquette? Can you support them to cover their coughs with a tissue or their elbow then clean their hands?
3. What about client placement and organization of tasks?
 - Are you responsible for the care of more than one client in a multi-bed room?
 - As part of the PCRA can you bundle tasks and ensure all equipment and PPE required for multiple activities is at hand and that clean space is available to perform the tasks?
 - Can you prioritize a client with risks for infection into a single occupancy room where possible?

4. What are the environmental cleaning considerations for a PCRA?

- Is equipment being shared between clients? You will need to clean and disinfect re-usable equipment between each use and clean surfaces as appropriate.
- Is there access to a point-of-care sharps container? You will need to ensure all sharps are placed immediately after use into the correct CSA approved container.
- Do you have access to waste bins? PCRA includes assessment of proper waste disposal prior to performing the task(s).

Take Action to Improve IPAC Practices

Now that you've analyzed point of care risks assessments in your workplace, we encourage you to share what you learned. Provide examples of what's working well think and how PCRA's can be improved to decrease the risk of transmission.

Activity 10: Elements of Design

What You'll Learn

How we function in our work environment has a lot to do with how we interact with the physical and organizational environment around us, and how we use the tools and technologies at hand to perform our tasks. The technical term for this is human factors engineering (HFE). In infection prevention and control (IPAC) it means focusing on important human factors that can increase or decrease the risk of spreading infections to other staff and clients. We can promote and maintain a healthy and safe work environment by always keeping IPAC principles top of mind.

After you perform this activity, you'll learn about some of the important human factors that can impact the spread of infections to other staff and clients. Remember that depending on your setting some of these items might not apply. We hope you'll share with your team what you learned.

Observe Areas in Your Workplace

Perform this activity in both the client care area and in one staff break area.

In the client care area:

- Are the hallways clear of excess clutter such as extra carts and furniture?
- Are the people who are visible to you all necessary for the activities being performed?
- Is there a dedicated hand hygiene (hand washing sink) close at hand and/or are there alcohol-based hand rubs (ABHR) easily accessible and available at point of care?
- Are there sharps containers available at point of care?
- Are the sharps containers all below the fill line?
- If the case are healthcare workers (HCWs) bringing in only the items required to care for the client?
- If the case are HCWs organizing their work so they can perform several activities at one visit (e.g., bringing in needed medication, providing personal hygiene care, changing linens)?
- Are bed space areas clearly outlined (e.g., area taped on the floor)
- Are clean and contaminated pieces of equipment clearly marked and separated?

In the break area:

- Are staff following the capacity limits?
- Can staff remain distanced while eating or drinking if necessary?
- Is there a hand hygiene sink and/or easily accessible ABHR?
- Is there a clear pathway to any appliances such as the microwave and refrigerator?
- Are the eating areas free of excess clutter such as magazines, empty coffee cups and water bottles?
- Are there any trip hazards such as electrical cords or boxes on the floor?
- Are there wipes to clean the table and counters when staff are finished eating?
- Are staff wearing gloves for this task and cleaning their hands after glove removal?
- Is the waste receptacle (garbage can) close at hand?
- Is the waste receptacle hands-free in design?

Take Action to Improve IPAC Practices

Now that you've assessed some of the human factors that can increase or decrease the spread of infection, please note the areas that work well, and areas that can be improved. We encourage you to share your findings with your co-workers.

Best Practices for Human Factor Engineering

When planning your work set-up consider:

- the layout of the work/break space (e.g., entry/exit, personal protective equipment [PPE] and hand hygiene)
- control of clutter to avoid contamination of supplies (e.g., carts in hallways, extra furniture in rooms)
- easy access to clean supplies and proper clean and dry storage (i.e., not near sink counters, cabinets under sinks or bathrooms)
- separation of clean and contaminated (dirty) supplies and equipment
- PPE set up to be put on in the right order and taken off in the right order
- safe disposal of used items (e.g., gloves, gowns, wound dressings, sharps)

We can promote and maintain a healthy work environment by ensuring smooth work flow and being thoughtful in how we organize our work each day:

- Pause to imagine each task or group of tasks from beginning to end, thinking of how to streamline or bundle tasks, think of all required supplies and equipment and also cleaning and safe disposal practices
- Think through the 4 moments of hand hygiene and where the alcohol-based hand rub (ABHR) and hand hygiene sinks are located to ensure no moments are missed
- Be intentional in considering your work flow (e.g., working from clean to contaminated)
- Consider taping the floor of each bed space in a multi-bedded room as a visual reminder that each bed space is to be treated as a separate 'room' with individual needs for hand hygiene moments, environmental and equipment cleaning and appropriate use of PPE

Resources

[Role of human factors engineering in infection prevention: gaps and opportunities](#)¹¹

[Preventing healthcare- associated infections through human factors engineering](#)¹²

[Infection Prevention and Control Canada. Infection prevention and control \(IPAC\) program standard](#)¹³

Activity 11: Routine Auditing

An audit is an on-site review of our practices. Providing feedback and sharing the audit results is an important part of any IPAC program. Auditing various aspects of IPAC practice can help everyone know where they are doing well and where to focus efforts on improvement.

Audits often focus on particular individual actions such as how we clean our hands or how we put on our mask or gloves. Audits can also assess the organizational processes or systems in place that help us carry out practices safely, such as accessibility of alcohol based hand rub, and can lead to overall improvements

Nothing can change without feedback. Feedback on a specific activity is best given at the time the individual is being observed. Feedback about IPAC processes and systems should also be given to those who are in a position to make an organizational change

Sometimes audits can cover a number of areas, and at other times a single practice can be the focus of an audit:

- Large scale audits use tools such as the [Outbreak Preparedness, Prevention and Management in Congregate Living Settings](#). For smaller, more frequent audits, a more streamlined tool can be used such as the [IPAC Self-Assessment for Congregate Living Settings](#).
- Single practice audits can be done using simple observation tools such as the hand hygiene audit tool or the PPE audit tool

What You'll Learn

After you perform these audit activities, you'll learn more about how to reduce the spread of infections to other staff and clients. We hope you'll share with your manager and colleagues what you learned.

Introduce Auditing in Three Simple Ways

1. Every month perform a routine audit of your IPAC program and Outbreak protocols using a simple tool such as the Public Health Ontario IPAC Self-Assessment for Congregate Settings (coming soon).

This checklist was designed for Congregate Living Settings but can easily be adapted to other settings by applying the same approach and modifying the setting-specific elements. There may be other tools that you can use that may be better suited to your setting.

2. Identify an element of IPAC practice in your setting to perform a more focused audit and feedback exercise which can be performed more often. This could include [Environmental](#)

[Cleaning](#), [hand hygiene](#), [PPE use](#), or others. There are videos and links to helpful tools on the [PHO website](#), or through [IPAC Canada](#).

3. Create a process to give feedback to individuals, supervisors and others who are in a position to make changes and advocate for change!

Take Action to Improve IPAC practices

Now that you've carried out a few workplace audits, please note areas where you see room for improvement. We encourage you to share your findings with your manager and team!

Best Practices for Auditing

Everyone can be involved in IPAC audit and feedback! The key to a good IPAC program is to get many members of the team involved.

Before starting an audit routine in your setting, meet with your co-workers to:

- Explain the benefit of IPAC-related audits
- Encourage everyone to get involved either in the role of observer or the one being observed
- Create an environment where giving and receiving feedback is encouraged
- Coach each other on how to give and accept feedback in an effective way

Resources

[Outbreak Preparedness, Prevention and Management in Congregate Living Settings](#)¹⁴

[Public Health Ontario: Audit training for long term care homes \[video recording\]](#)¹⁵

[Public Health Ontario Personal protective equipment \(PPE\) auditing](#)¹⁶

Activity 12: Psychological Health and Safety in with Workplace

Psychological health and safety is an important consideration in how individuals interact with one another on a daily basis and includes the way working conditions and management practices are structured in the workplace.

The Canadian Standards Association (CSA) has developed a Psychological Health and Safety Standard for workplaces that focuses on identifying and reducing hazards that can affect employee psychological health and safety.

The two main goals of the Standard are the prevention of mental illness and the promotion of mental health in the workplace.

There are 13 factors of psychological health and safety recognized in the workplace in the Standard and each can have a positive and/or negative impact.

What You'll Learn

After you perform these activities, you'll learn more about psychological health and safety in the workplace. We hope you'll share what you learned with your team.

Match Questions with Workplace Factors

We've provided some workplace questions below. For each question, think about which of the factors from the 13 Psychological Health and Safety Factors table that match the question.

Are the factors Positive and/or Negative at your workplace?

1. Have you been experiencing a stressful time at work and finding it difficult some days to come into work? Do you feel comfortable to share your struggles with your supervisor/manager or co-worker(s)?
2. Do you feel that you have access to adequate and correct PPE to support your point of care risk assessment (PCRA) and safely provide care?
3. When you volunteer for a special project or make yourself available for extra shifts to help support the team, do you feel appreciated or acknowledged for your effort?
4. When dealing with various team members, regardless of what role or responsibilities you have in the organization, are individuals courteous to each other?
5. If you make a medication error do you feel you can speak freely with your supervisor/manager?

6. Based on the psychological and emotional demands in the job and your skill set do you feel that you have a good fit in your job?

Table 2: 13 Factors of Psychological Health and Safety in the Workplace

Psychological Health and Safety Factor	When Factor is Positive in the Work place, employees experience...	When Factor is Negative in the Work place, employees experience...
Psychological and social support	Support from co-workers and supervisors for psychological and mental health concerns	Increased absenteeism, conflict, burnout, lost productivity and increased risk of accidents and job turnover
Organizational culture	An environment of trust, honesty and fairness that sets the tone for the workplace	Stress, lower well-being which undermines programs and services intended to support workers
Clear Leadership and Expectations	Clarity of roles, responsibilities, and recognition of their work value and increased morale, resiliency and trust	Decrease in morale, increase in irritability, anxiety, and fear of change
Civility and respect	Respectful and considerate behaviours in interactions with supervisors, co-workers, and clients	Emotional exhaustion, conflict, aggression, and exposure to bullying or other threatening behaviour
Psychological job demands	Interpersonal and emotional competencies that fit with the requirements of the position	Job strain, emotional distress, defensiveness, low energy, and mood, and may leave their job
Growth and development	Encouragement and support in developing interpersonal, emotional and job skills that enhance career development and well-being	Boredom, disengagement, lack of well-being and drop in work performance
Recognition and reward	appropriate acknowledgement, reward, and appreciation of their efforts in a fair and timely manner	demoralization and lack of appreciation resulting in emotional distress and burnout

Psychological Health and Safety Factor	When Factor is Positive in the Work place, employees experience...	When Factor is Negative in the Work place, employees experience...
Involvement and influence	inclusion in discussion about how their work is done and how important work decisions are made	indifference, helplessness, job alienation, cynicism, burnout, and greater job turnover
Workload Management	ability to accomplish tasks and responsibilities in the allotted time	lack of control over demands resulting in physical, psychological, and emotional fatigue and strain
Protection of Physical Safety	feel safe from physical harm in their work environment	increased risk of illness or injury and feel less secure and engaged
Engagement	motivated, connected to work, energized, have a positive job outlook	disengagement, apathy, loss of productivity, job dissatisfaction
Balance	Balance between demands of work, family, and personal life	high job stress, dissatisfaction, and absenteeism
Psychological Protection	psychological safety in the environment where they can speak freely and where errors can be used as a learning opportunity	demoralization, a sense of threat, disengagement, and strain

Resources

[CSA Group Psychological Health and Safety in the Workplace](#) ¹⁷

[Canadian Centre for Occupational Health and Safety. Mental health - psychological risk factors in the workplace](#) ¹⁸

[Mental Health Commission of Canada. National standard](#) ¹⁹

[Ottawa Public Health. For workplaces](#) ²⁰

IPAC Resources

In this final activity of the Action IPAC series, we're providing a list of web-based and organizational resources to support you in your congregate living organization.

These resources are intended to help you implement IPAC best practices, identify opportunities for improvement and respond to emerging issues e.g. outbreaks.

Web-based resources:

Public Health Ontario has developed evidence-based tools, resources, checklists and recorded webinars on the IPAC related topics for [Congregate Settings](#) and [Long-Term Care and Retirement homes](#)

Additionally, the Ministry of Children, Community and Social Services (MCCSS) has [guidance for congregate settings](#) and the [Ministry of Long-Term Care resources](#) website may be accessed via login.

Organizations that offer IPAC support and services:

Your local IPAC Hub is a great resource for answers to your questions and support for your IPAC program. Contact your Program Supervisor or your local [Public Health Unit](#) for information.

[IPAC Canada](#) is a national association that has local IPAC Chapters across Ontario. It offers excellent resources as well as opportunities to network with others interested in IPAC.

Training and education:

IPAC is everyone's responsibility not just that of a designated IPAC lead. The above links can help everyone to assess and improve on your IPAC practices. For anyone wishing to learn more about IPAC, there are many training opportunities - from [topic-related training resources](#) available through Public Health Ontario, to [courses offered by IPAC Canada](#).

National IPAC Week Activities

National Infection Control Week in the third week of October every year offers an opportunity to engage in some extra promotion of IPAC. Provincial, national, and international efforts are made during this week to highlight the importance of IPAC. Public Health Ontario often hosts webinars and other activities can be found by searching IPAC Week on the [PHO website](#). IPAC Canada dedicates [a webpage to IPAC Week](#) where planning resources for your own IPAC Week promotion can be found.

The theme of National IPAC Week changes each year and it offers an opportunity for you to put a fresh approach on your planning each year. You can include engaging activities to raise awareness about the importance of IPAC practices. Some of the goals during the week include:

- ensuring staff are aware of their IPAC team or practitioner lead and the role they play
- promoting hand hygiene
- encouraging influenza and COVID-19 vaccinations
- creating enthusiasm for infection prevention and control
- celebrating IPAC achievements from the past year
- increasing awareness of infection prevention and control in clients

What You'll Learn

As you observe your workplace, you'll learn how infection prevention and control is taking place in your organization. You'll learn where it meets best practices and where improvements can be made.

We also hope you'll share with your team what you learned.

Photograph Staff Practicing IPAC Activities

For privacy reasons, make sure to get permission to take employee photos and ensure that clients are not in the photo.

- Take your phone/camera around with you for several days prior to your event. Capture images of staff performing IPAC practices that show their effort to prevent and control the spread of infections.
- Make sure to get permission to take the photo. Create a poster collage of these images or post on the organization's intranet site. Create a collage or photo contest; challenge units to compete; give a prize for the best photo. Consider having clients choose the best photo.

Take Action to Improve IPAC Practices

Now that you've participated in some fun activities, we encourage you to share what you learned. Provide examples of what's working well and where improvements can be made. Feel free to share with your co-workers.

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