

When to use this checklist: Planning phase

Use this guide to identify infection prevention and control (IPAC) requirements when planning and designing patient/client/resident/spaces in a health care environment. HVAC and plumbing requirements are not addressed in this guide. For more information, consult these reference documents:

- Hand hygiene and scrub-sink design, CSA Standard Z8000-11
- Placement of waterless hand hygiene stations (alcohol based hand rub), found in both Just Clean Your Hands and PIDAC’s Best Practices for Hand Hygiene, on the Public Health Ontario website

If there are competing priorities related to space and IPAC issues, conduct a risk assessment and discuss it with the multidisciplinary construction and renovation team to find the best solution.

Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
Adult Day Programs	Wall-mounted sink for hand-hygiene follows sink specifications	X	X		<i>An adult day program may be located in any health care facility that has other programs and purposes</i>
	Patient washroom with toilet and sink required for every 10 clients in program(s)	X	X		
	Shower or bathtub required	X	X		
Allied Health Areas (e.g., chiropody assessment, multi-faith rooms, activity rooms)	Wall-mounted sink for hand-hygiene follows sink specifications	X	X	X	
	Appropriate storage for materials associated with program to be delivered	X	X	X	
Ambulatory Care Areas	Exam rooms follow requirements for exam/treatment room space with the following additions: Cast room (including fracture room): <ul style="list-style-type: none"> ▪ Disposal method for waste materials ▪ Wall-mounted sink for hand-hygiene that follows sink specifications ▪ Adequate storage for cast materials and supplies 	X			

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	<p>Dialysis</p> <p>Hand-hygiene sinks: Follow specifications for hand-hygiene sinks Water supply and drainage separate from hemodialysis plumbing Dedicated e.g., sink in treatment, exam, and procedure rooms One-hand-hygiene sink for every 3 treatment stations at a minimum in each treatment pod Minimum of 4 feet between lounge / treatment chairs Adequate storage for supplies including PPE that is accessible to staff Adequate number of rooms based on functional program needs and following specifications for such rooms Clean supply room within the space includes:</p> <ul style="list-style-type: none"> ▪ Wall-mounted sink for hand-hygiene follows sink specifications ▪ Counter space for supply preparation ▪ Space for additional storage in the event of delivery delays <p>Soiled utility room within the space includes:</p> <ul style="list-style-type: none"> ▪ Method for disposal of chemical waste ▪ Space for higher volumes of regular and biomedical waste 	X			
	<p>Endoscopy</p> <p>Space for collection, storage and disposal of soiled materials (e.g., soiled utility room) Storage area for clean supplies and linens Closed, ventilated cupboards for cleaned scopes if stored in the procedure room Housekeeping closet in the area Patient washroom Toilets for public near the waiting room but separate from patient-care and staff areas</p>	X			

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	<p>Oncology Adequate storage for supplies within the department All rooms as per functional program needs</p>	X			
	<p>Radiation treatment Wall-mounted sink for hand-hygiene at room entry follows sink specifications, and small shelf for patient-specific denture containers Space for a linen hamper against a wall</p> <p>Transesophageal echocardiography (TEE) equipment cleaning area*:</p> <ul style="list-style-type: none"> ▪ Separate hand -hygiene sink follows specifications ▪ Eye-wash station ▪ Consider ventilation requirements such as fume hoods and other reprocessing safety measures ▪ Deep sinks and stainless steel counters where reprocessing takes place 	X			<i>This space must meet design and ventilation requirements as found in CSA Z314.8 and CSA Z317.2</i>
Assessment Room (i.e., small group counselling)	Wall-mounted sink for hand-hygiene follows sink specifications	X	X *	N/A**	* LTC may not have an assessment room ** CHC s do not require a hand-hygiene sink in counselling or group rooms or offices
Beauty Salon	Sufficient space to allow for secure storage of chemicals, hair drying area, hairdressing chairs and work counters Wall-mounted sink for hand-hygiene follows sink specifications	X*	X		* If an acute-care facility offers this service for long-term care areas, the recommendations should be followed
Breastfeeding Room	Wall-mounted sink for hand-hygiene follows sink specifications	X		N/A*	If a community health clinic determines a BF room is needed, it must meet requirements as per acute care
	Change table	X			
	Storage space provided for equipment/supplies	X			

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Chiropody (foot care services) <i>May include nail care, wound care, tissue debridement</i>	Room dedicated to foot care services			X	
	Wall-mounted sink for hand-hygiene follows sink specifications			X	
	If orthotics are manufactured, a separate area is required with appropriate storage and management of glues and thinners including a fume hood			X	
	Sharps management process			X	
	Follow College of Chiropodists of Ontario guidelines <i>Infection Control Standards of Practice for Chiropodists and Podiatrists</i> for additional information on sinks	X	X	X	
Clean Supply Room (Central)	Separate from soiled utility area	X	X	X	
	Room has secure access limited to clinical/support staff	X	X		
	Mobile shelving for medical /surgical supplies and linen In the central supply area, the bottom shelf of the shelving should be solid	X	X	X	
	Follow the recommendations for spacing between shelving for clean or sterile supplies: <ul style="list-style-type: none"> ▪ 230 mm off the floor (8-10 inches) ▪ 450 mm (18 inches) from the ceiling ▪ 50 mm from outside walls (2 inches) 	X	X	X	
	There is a designated location for storing: <ul style="list-style-type: none"> ▪ Clean and sterile supplies ▪ Clean linen ▪ Crash carts 	X	X	X	
	Equipment and supplies in storage areas not exposed to direct airflow from HVAC system	X	X	X	
	Central supply rooms have controlled humidity, temperature and ventilation	X	X	X	

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Clean Supply Room / Equipment Storage (located within service area)	Size of room is based on needs identified in functional program. (Should include, at a minimum, 2% of the unit space)	X	X	X	
	Shelving required and follows same guidelines as for the central supply area including: <ul style="list-style-type: none"> ▪ Adjustable and easily maintained ▪ Open shelving provided along one side ▪ Wire racks used to reduce dust accumulation 	X	X	X	
	Storage areas have controlled access with access restricted to clinical and support staff	X	X	X	
	Where equipment is stored, adequate electrical and mechanical outlets to allow for recharging	X	X	X	
	Soiled items or items for repair should not be stored in clean supply/equipment rooms	X	X	X	
	The need for a hand-hygiene or other sink in clean supply area is dependent upon use of area	X	X	X	<i>A hand washing station should be located in close proximity to the room to allow staff to clean/wash hands prior to handling clean material</i>
	Sink should not be installed in a sterile supply area	X	X	X*	<i>* If trays in a CHC are being prepared in a clean supply room, a hand-hygiene sink may be required. If a sink is provided, it must maintain splash clearances for adjacent surfaces and equipment</i>
	Supply and case carts storage areas provided as close as possible to the point of care	X			
	Clean supply rooms provided to avoid stockpiling of supplies in patient rooms	X	X	X	
	Office supplies stored in a separate area from clean/sterile supplies	X	X	X	
Clean storage areas located away from potential sources of environmental contamination	X	X	X		

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Critical Care Areas	A plan for human waste disposal. Consider patient population to determine number of toilets or other systems that will be used	X*			* <i>Washrooms in ICUs may be omitted; however, consider an alternative means of waste management</i>
	Disposal system for dialysis fluid where dialysis may be performed	X			
Diagnostic / Medical Imaging	Hand-hygiene sink: <ul style="list-style-type: none"> ▪ In an MRI suite, the sink may be immediately outside room or in room if plastic pipes are installed through radio-frequency cage 	X			
	Access to patient washrooms and change rooms provided for each modality or service	X			
	Area(s) for segregation of patients who require airborne precautions	X			
	Hand-hygiene sinks(or stations) follow sink specifications : <ul style="list-style-type: none"> ▪ At point of contact with patients ▪ At entry/exit of patient rooms and procedure rooms, including control room ▪ In areas where invasive/operative procedures are performed 	X			
	Adequate space for storing soiled reusable medical devices. Reprocessing should be done in the central reprocessing area*	X			* <i>If decontamination and sterilization are done in the department, CSA Z314.8 and CSA Z314.3 must be followed</i>
	Clean and soiled areas for disinfection/sterilization are physically separate from each other	X			
Dietary Services	Designated hand-washing area has an appropriate sink that follows sink specifications	X	X		
	Separate and sufficient storage space for garbage cans/recycling bins	X	X		
	Separate housekeeping/janitor's closet and equipped with a curb sink	X	X		

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
Dining Room (seating area only)	New construction: When planning the space, assume 100% of the population is in wheelchairs	X	X		
	Include space to store additional/ stackable chairs and other supplies	X	X		<i>A patient dining room is not required in a community health centre</i>
	Rooms may be subdivided to enable multi-purpose activities (e.g., activities, group education). Consider additional space to accommodate this	X	X		
	Hand-hygiene sink included in each subdivided space	X	X		
	Convenient access to a washroom that is separate from patient/resident bedrooms or tub/shower rooms		X		
	Housekeeper/janitor closet close to dining area for storing supplies and equipment used to clean the dining area/server and equipped with a curb sink		X		<i>Janitor closet is specified in LTC only</i>
	For renovations: CSA identifies the amount of space per bed that must be made available for dining	X	X		
	If the space for dining is shared among programs, consider additional space requirements for programs (such as outpatient day care)	X	X		
Electrodiagnostic Services	Sink for hand-hygiene follows sink specifications	X			
	Reusable medical devices are sent to centralized reprocessing area or there is a separate designated space for reprocessing	X			
	Clean and soiled areas are separated	X			
	If reprocessing is done, plan for: <ul style="list-style-type: none"> ▪ Appropriate ventilation ▪ Appropriate sinks for instrument/equipment cleaning ▪ Space for receiving and cleaning soiled materials is separate from storage of clean equipment 	X			

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
Emergency Department	Triage: Design allows for separation and /or segregation of pediatric patients and patients if presenting with acute respiratory illnesses and gastroenteritis	X		X	
	Triage area has adequate ventilation (minimum 12 ACH with negative pressure— see CSA Guidelines)	X		X	
	Barrier at reception desk protects staff from potentially infectious patient	X		X	
	Wall-mounted hand-hygiene sink next to the triage workstation follows sink specifications	X		X	
	A space for transporting of specimens to the lab	X		X	
	Waiting rooms: Spatial separation of patients and visitors. Minimum of 1 metre for unscreened/asymptomatic patients and 2 metres for symptomatic patients	X		X	
	Designated area for separation or segregation of potentially infectious patients	X		X	
	12 ACH with airflow negative compared to adjacent areas	X		X	
	Patient washroom in waiting area. Plan sufficient washrooms to accommodate occupancy	X			
	Patient area: Allow enough space, or plan an alternate space, to separate patients with symptoms of communicable disease from other patients (i.e. Minimum of 1 metre for unscreened/asymptomatic patients and 2 metres is required for symptomatic patients)	X			
	Partitions to separate patients or provide single rooms	X			
	Consider requirements for medication and vaccine storage	X		X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	At least 1 toilet for every 8 treatment rooms	X			
	Staff have a separate washroom in area	X		X	See “staff washroom” recommendations
	Storage near treatment area for med/surgical supplies and other patient-care equipment. Storage area is away from public traffic and has controlled access	X			
	Children’s play area: If design incorporates a child play area, allow for spatial separation and design to reduce transmission of organisms. It is not recommended to provide toys and books. Parents/patients should bring their own	X		X	
	Decontamination area: Decontamination area with access from the outside and adjacent to the ambulance garage. Allows for easy movement of patient to an airborne isolation room if needed. Area contains: <ul style="list-style-type: none"> ▪ Shower area ▪ Negative air flow exhausted to outside Plan storage space and access to chemical, biological, radiological and nuclear (CBRN) equipment and supplies	X		*	<i>* A CHC should perform a risk assessment to determine if a shower room for patient use is required. It could also be used as a decontamination room</i>
Exam / Procedure / Treatment Rooms	Wall-mounted sink in each exam room for hand-hygiene follows sink specifications	X*	X**	X***	<i>* Hand-hygiene sink is recommended for every 3 patients, no further than 6 meters from each patient station</i> <i>** Long- term care facilities may not have procedure/treatment specific rooms</i> <i>*** For CHC, the requirement is for the hand-hygiene sink to be near the latch side of the door</i>

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	Method for sharps disposal at point of use in the exam rooms	X	X*	X	* Long- term care facilities may not have procedure/treatment specific rooms
	Space for soiled-linen hamper and garbage container in the room	X	X	X	
	Designated patient washroom, clean supply room and soiled utility room available near overall exam / treatment area	X	X	X	
	One exam space /patient. Patients are not to be placed in open bays	X	X	X	
	Exam room has a clean area or space for staff to don PPE before entering the room. Space may be shared for up to 4 rooms, as long as there is not more than 3.6 m between the room and the space	X			
Exam / Treatment Rooms for Airborne Isolation	Clean area identified for staff to don PPE before entering room	X		X*	* A CHC must perform a risk assessment to determine if an airborne isolation room is required
	Risk assessment to determine need for AIR in diagnostic imaging and ambulatory care areas	X			
	Rooms for airborne isolation require negative pressure: <ul style="list-style-type: none"> ▪ With airflow from hall into examination room ▪ Exhaust vented to the outside ▪ Exhausted air does not re-enter building ▪ If it is recirculated or if the exhausted air can re-enter the building, it must pass through a HEPA filter before being exhausted outside ▪ Negative pressure airflow and air exchanges follow the Z317.2 document (airflow should be inward from adjacent spaces) 	X		X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	System to monitor: <ul style="list-style-type: none"> ▪ Air supply and exhaust function ▪ Pressure differential and alarm system located outside each room, monitored daily ▪ Measurements taken at the door between the patient room/anteroom 	X		X	
	AIR rooms well sealed to minimize air leakage	X		X	
	Anteroom in areas such as emergency department and bronchoscopy-recovery areas	X			
	Doors with direct access to the corridor for patient transport	X		X	
	Area for staff to safely remove PPE outside procedure/exam room, and hand-hygiene sink in that area (anteroom)	X		X	
	Hand-hygiene sink for staff and patient use: <ul style="list-style-type: none"> ▪ In the room ▪ In the anteroom 	X		X	
	Patient washroom adjacent to airborne isolation room	X		X*	* In a CHC setting, a dedicated washroom may not be required
	If patient washroom is provided, a hand-hygiene sink is in that space	X		X	
	Patient visibility maintained. Position windows to allow visibility of the patient	X		X	
Gym	Hand-hygiene sinks in gym for staff	X	N/A *	N/A*	* CHC and LTC facilities may not have a gym area
	Sinks meet accessibility requirements for patients (i.e., can be accessed by people in wheelchairs)	X			
Housekeeping Closets	Hand-hygiene sink, paper-towel dispenser and waste container	X	X	X	
	Enough space to store housekeeping equipment (e.g., mops, pails), chemicals, cleaning supplies, and chemical dispensing units	X	X	X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	Shelving for supplies: <ul style="list-style-type: none"> ▪ Non-fixed for supplies such as paper towel, toilet paper ▪ Fixed for cleaning products 	X	X	X	
	Floor sink for dumping dirty water from pails/buckets	X	X	X	
	Hot and cold running water				
In-Patient / Resident Bedrooms	Hand-hygiene stations (ABHR dispensers): <ul style="list-style-type: none"> ▪ At point of care in each bed area ▪ In corridor outside each bedroom ▪ Anywhere staff feel ABHR is required 	X	X		
	Hand- hygiene sinks: <ul style="list-style-type: none"> ▪ Inside bedroom ▪ Near entrance to room ▪ Minimum of one sink for every 3 patients ▪ No more than 6 metre distance between a patient and sink 	X	X		
	Space for soiled-linen hamper and waste container	X	X		
	Space for storing patient’s personal items	X	X		
	Enough room around bed space for privacy curtains	X	X		
	Patients have direct access to washroom	X	X		
In-Patient Washrooms / Resident Washrooms	Toilet tanks should not be installed due to issues with condensation	X	X		
	Toilets are not to be used to dispose of waste from bedpans, etc. Do not install bedpan cleaning wands or other spray and toilet taps mechanisms. A separate waste disposal method or equipment is required	X	X		
	Storage provided for: <ul style="list-style-type: none"> ▪ Clean bedpans in patient washroom or at bedside ▪ Patient wash basin in washroom or at bedside 	X	X		

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	<ul style="list-style-type: none"> ▪ Store bedpan or urinal above toilet on shelf 				
	Hand-washing sink in the washroom for patient's use only	X	X		
	Space for patient's personal items when using washroom	X	X		<i>In long-term care, if the washroom is shared, there must be separate storage space for each resident in the washroom</i>
	Shower floor is sloped to the drain. It should not have a floor lip	X	X		
In-Patient Airborne Isolation Rooms (AIR) AIR (Airborne isolation Room)	Risk assessment performed to determine the number of AIRs**: <ul style="list-style-type: none"> ▪ Minimum of 1 per in-patient unit ▪ One AIR in the emergency department, dialysis, oncology and transplant units ▪ AIR in areas where specialty care cannot be provided elsewhere (e.g., maternal/child, critical care, bronchoscopy) ▪ Risk assessment determines the need for AIR in diagnostic imaging and ambulatory-care areas 	X			
	Anteroom required	X			
	Space for: <ul style="list-style-type: none"> ▪ Soiled-linen hamper ▪ Waste container 	X			
	AIR has a patient's washroom with a patient's hand-hygiene sink in the washroom	X			
	Staff hand-hygiene sink: <ul style="list-style-type: none"> ▪ In the bed room area ▪ In the anteroom 	X		X	

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	Rooms for airborne isolation have negative pressure: <ul style="list-style-type: none"> ▪ With airflow from hall into examination room. Exhaust vented to the outside. Exhausted air should not re-enter the building ▪ If it is recirculated or if the exhausted air can re-enter the building, it must pass through a HEPA filter before being exhausted outside ▪ Negative pressure airflow and air exchanges follow the Z317.2 document (airflow should be inward from adjacent spaces) 	X		X	
	AIRs well sealed to minimize air leakage	X			
	Monitoring devices and alarms installed outside each room to monitor pressure differentials (>7.5Pa or 0.03"wg): <ul style="list-style-type: none"> ▪ Between inpatient bedroom and anteroom ▪ Between corridor and room 	X			
	Patients transported through anteroom into bedroom	X			
	Patient visibility maintained. Position windows to allow visibility of patient	X			
Laboratory Spaces	When planning, determine if space is a staff workspace or if patients will also be tested in area	X		X	
	Separate, dedicated room for laboratory testing	X		X	
	Lab testing room requires <ul style="list-style-type: none"> ▪ Dedicated hand-hygiene sink ▪ Method for safe disposal of sharps ▪ Method for safe disposal of waste liquids and bio medical waste 	X		X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	<p>Clinical laboratory space: Clothing changes and hand- hygiene stations at exit from laboratory area Airflow direction to flow from clean to less clean Traffic flow of staff as well as supply and waste removal activities at lab perimeters Appropriate space for managing and disposing of biomedical waste Appropriate mechanical systems in place for biosafety cabinets Clean space for preparing trays and storing phlebotomy carts:</p> <ul style="list-style-type: none"> ▪ Includes a hand-hygiene sink <p>All surfaces washable and able to withstand chemicals</p>	X			<p><i>This space must meet design and ventilation requirements as found in CSA Z314.8 and CSA Z317.2</i></p>
	<p>Central processing for specimen receiving/referral: Designated hand-hygiene sink should be conveniently located for staff/patient use in the central processing area Space for specimen refrigerator</p>	X			
	<p>Microbiology and histology: Designated hand-hygiene sink should be conveniently located for staff at entrances, exits and short distances within the lab setting Eyewash and emergency stations close to work stations</p>	X			
	<p>Morgue/autopsy: Dedicated cleaning supply storage Drains</p>	X			
	<p>Transfusion services: Designated hand-hygiene sink conveniently located for staff Eyewash station</p>	X			

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments	
Laundry	Designated hand-hygiene sink conveniently located for staff use	X	X			
	If laundry service is offsite, there is a separate space for receiving clean laundry and storing soiled laundry	X	X			
Lounges for Patients / Visitors	Lounges should not be used for eating meals	X	X		<i>A CHC would likely not have a patient/visitor lounge</i>	
	Hand-hygiene station for patients/visitors	X	X			
Lounges for Staff	Hand-hygiene sink is located within 6 metres	X		X		
Maternal Programs	Hand-hygiene sink located: <ul style="list-style-type: none"> ▪ At each infant station ▪ In the triage / labour area ▪ In the intrapartum birthing suite ▪ In the infant resuscitation area ▪ At preparation area for infant nutrition ▪ In teaching areas 	X				
	Plan for secure/restricted fridges/freezers for storing breastmilk	X				
	Whirlpool tubs may be installed for labouring mothers and requires clear cleaning and disinfection instructions for all parts: <ul style="list-style-type: none"> ▪ Tub ▪ Nozzles ▪ Parts of the circulation system that come into contact with water 	X				
	Waste-management plan for placental material including storage and transfer. It considers transport to family members for cultural reasons	X				
	Space for storing equipment and supplies in: <ul style="list-style-type: none"> ▪ The intrapartum birthing room ▪ Infant resuscitation area 	X				

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Medication Rooms / Spaces	Sink for hand-hygiene follows sink specifications	X	X	X	
	Sink located away from medication prep area to avoid splashing	X	X	X	
	Waste liquids cannot be disposed of in the hand-hygiene sink. Consider a disposal system or area for disposing of waste liquids	X	X	X	
	If vaccines are provided, space for a vaccine-safe refrigerator following vaccine-storage requirements Plans for backup power for a vaccine fridge	X	X	X	
	Counter for preparing medications	X	X	X	
	IPAC issues related to storing and preparing medications has been addressed (e.g., use for biological-safety cabinets in certain areas, space for sharps disposal)	X	X	X	
	Separate bio-medical and general waste	X	X	X	
Nourishment Centres / Kitchen	Double sink: one sink for cleaning dishes and utensils, the other dedicated to hand-hygiene	X	X	X*	
	Ice machine	X	X		
	Cupboards for storage and sufficient counter space	X	X	X*	* For a CHC, the plan for a nourishment centre should meet as per public health guidelines
	If food is prepared for patients or visitors, consult with your local public health unit and existing legislation	X	X	X	
Nursing Stations	Hand-hygiene sink located within 6 m of a nursing station/reception area	X	X	X	

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Operating Rooms	If there is an anteroom, it must be negatively pressurized in relation to the operating room	X			
	Scrub sink located adjacent to room entry, in an alcove	X			
	Space for staff to remove PPE and wash up before entering public areas Access to a patient- only washroom	X X			
Pharmacy	Sink for hand-hygiene follows sink specifications: <ul style="list-style-type: none"> ▪ In any room where medications are open and prepared for distribution ▪ Medications are protected from splashing related to the hand-hygiene sink 	X			
	Air handling and exchange systems: <ul style="list-style-type: none"> ▪ Localized to the pharmacy area ▪ Comply with CSA Z317.2 ▪ Laminar flow system with HEPA filtration provided at the work station where IV(intravenous) medications are prepared 	X			
	Items selected for medication distribution (e.g., carts, cassettes or other delivery systems) are easy to clean and disinfect with products that are safe and appropriate to use in the pharmacy setting	X			
	Adequate space for storing carts and space for sharps disposal	X			
	Sterile prep areas (include chemotherapy prep anteroom, chemo-therapy prep room, sterile- prep anteroom and prep room, packaging room) have access to: <ul style="list-style-type: none"> ▪ Emergency eye-wash and hand-hygiene sinks ▪ Emergency shower without floor drain 	X			

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	The compounding area requires : <ul style="list-style-type: none"> ▪ Emergency eye-wash and hand-hygiene sinks ▪ Utility sink and area for drying 	X			
Pre / Post-Anesthetic Care Areas	Stage one recovery: Sink for hand-hygiene follows sink specifications (minimum of 1 hand-hygiene sink for every 4 patients) <ul style="list-style-type: none"> ▪ Clinical sink ▪ Method for disposing of human-waste ▪ Staff washroom located within work area ▪ Adequate space for storing supplies ▪ Plan for managing an airborne isolation case 	X			
	Stage two recovery: Sink for hand-hygiene follows sink specifications (minimum of 1 hand-hygiene sink for every 4 patients) <ul style="list-style-type: none"> ▪ Clinical sink ▪ Method for disposing of human waste ▪ Staff washroom located within work area ▪ Patient washroom ▪ Adequate space for storing supplies ▪ Plan for managing an airborne isolation case 	X			
Receiving Space	Separate areas for storing and picking up garbage in the receiving /storage space	X	X	X	
	Refrigerated area for storing waste	X	X	X	
	Space for cleaning and disinfecting equipment (e.g., garbage cans and floor drain)	X	X	X	
Reception Areas	Transparent partition provides barrier between staff and patient/visitors	X	X	X	

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Rehab / Therapy Rooms	Convenient access to patient/resident washroom where therapeutic programs provided	N/ A*	X		* <i>If an ADL room is being provided, a standard bathroom should be included</i>
	Sink for hand-hygiene follows sink specifications and is located at entrance to individual therapy rooms (e.g., speech, recreation)	X	X		
Respiratory Therapy	Medical equipment/devices reprocessed centrally. If equipment is to be reprocessed in the department, consider space needs for proper cleaning, decontaminating, reprocessing and storing	X			
	Space for storing clean equipment and supplies is physically separate from space to receive and clean soiled materials	X			
Reprocessing Department <i>Pre-clean and decontamination area</i>	Area for reprocessing is segregated from areas where client / patient care is provided	X		X	
	Area for pre-cleaning and decontaminating equipment has adequate space for processing and storage of required equipment and supplies	X		X	
	Area is separate from where clean/disinfected/sterile equipment is handled or stored	X		X	
	Hand-hygiene sink at entrance and exit to the decontamination area: <ul style="list-style-type: none"> ▪ Sinks in this area should be hands free 	X		X	
	Work surface that is flat, cut resistant, seamless, non-porous and easily cleaned/disinfected. Stainless steel surfaces	X		X	
	Access to area restricted and allows one-way movement of staff	X		X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	Reprocessing areas within procedure areas include: <ul style="list-style-type: none"> ▪ Free-standing sink for hand-hygiene that follows sink specifications ▪ Utility sink for cleaning equipment ▪ Work counter ▪ Appropriate ventilation systems and fume hoods ▪ Space and connections for automatic equipment used for reprocessing (e.g., ultrasonic cleansers, automated endoscopic reprocessor, sterilizers) 	X	X	X	
Respiratory Therapy / Anaesthesia Support Areas	Sink for hand-hygiene follows sink specifications	X	*	*	* <i>Space may not be applicable in a community health clinic or long-term care facility</i>
	Utility sink for cleaning equipment. (Note: The space is often used for storing clean equipment and gas cylinders)	X	X	X	
Satellite Pharmacy	Sink for hand-hygiene follows sink specifications	X	X*		* <i>May not be included in a long-term care facility</i>
	Emergency eye wash	X	*		
	Refrigerator for medication. Consider requirements for storing vaccines	X	*		
	Determine if a sterile prep area is required	X	*		
Soiled Utility	Area for temporary storage of items that require cleaning, reprocessing or removal and separation as waste	X	X	X	
	Area that is separate from the clean utility room with separate access	X	X	X	
	Dedicated sink for hand-hygiene follows sink specifications	X	X	X	
	Utility/cleaning sink for disposing of waste liquids (separate from hand-hygiene sink). Waste liquids must not be disposed of in the hand-hygiene sink	X	X	X	

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	Access to process for a disposable waste container device or a closed human waste container (e.g., macerator, clinical flushing rim sink, washer disinfectant)	X	X	X	
	When disposing of patient waste: <ul style="list-style-type: none"> ▪ Splash protection should be provided to walls and nearby water supply, sinks or human- waste management systems ▪ Spray wands are not to be used for rinsing of items ▪ Equipment used to remove gross soil should minimize aerosolization of waste ▪ If a hopper is installed, it must contain any splashes and the control should be located in a manner that does not expose staff to contaminants 	X	X	X	
	Space for storing and separating: <ul style="list-style-type: none"> ▪ Soiled linen ▪ General waste ▪ Biomedical/hazardous waste ▪ Confidential waste ▪ Recycling ▪ Carts used to move soiled materials from the room (i.e. items for reprocessing) 	X	X	X	
	Consider using stainless steel counters and shelves	X	X	X	
	Consider two (2) soiled utility rooms depending on unit design and staff travel distances	X	X		
	Room may be accessed from two (2) sides provided it is not used as an entrance to care spaces	X	X	X	
	Documented travel route for waste disposal and pick up included in design	X	X	X	
	Waste chutes are not recommended	X	X	X	
	Floor drains required		X		

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Sterile Core Supply Area	Adequate space for: <ul style="list-style-type: none"> ▪ Case carts for OR rooms ▪ Supplies ▪ Flash sterilizer ▪ Additional anesthetic supplies ▪ Emergency cart and supplies ▪ Blood fridge ▪ Medication dispensing system ▪ Work station 	X			
	Direct access to medical- device reprocessing area	X			
Storage Rooms	Plan enough storage space for large and small equipment, and to allow for unexpected storage situations	X	X	X	
	Storage spaces for medical equipment and supplies are secure	X	X	X	
Surgical Suite	Anaesthesia workroom: <ul style="list-style-type: none"> ▪ Requires a work counter and sink ▪ Storage for cylinders ▪ Storage for clean items ▪ Separate storage areas for soiled items ▪ Fume hood if using cleaning/reprocessing chemicals or agents 	X			
	Sub-sterile supply (case-cart area): <ul style="list-style-type: none"> ▪ Shelving in the area should be: <ul style="list-style-type: none"> ○ Adjustable ○ Easy to maintain ▪ Include a sink for hand-hygiene that follows sink specifications 	X			
	Clean utility/work rooms: <ul style="list-style-type: none"> ▪ Separate from soiled area ▪ Work counter and sink for hand-hygiene that follows sink specifications (do not include if this area is for storage only) ▪ Sufficient storage for clean supplies 	X			

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Space	IPAC Recommendations	Acute	Long-Term Care (LTC)	Community Health Centre (CHC)	Comments
	Soiled work room: <ul style="list-style-type: none"> ▪ Sink for hand-hygiene follows sink specifications ▪ Flushing rim sink or method for body-fluid disposal ▪ Space for case-cart system, if being implemented ▪ Space for waste and linen receptacles 	X			
	Staff toilets and hand-hygiene sinks located conveniently in the work area of the operation room	X			
	Scrub sinks for hand-hygiene outside each procedure/operating room, with hands-free operation and controls	X			
Traffic Patterns	Clean items should not move through dirty areas.	X	X	X	
	Dedicated route for transporting clean/sterile supplies from storage and central reprocessing departments: <ul style="list-style-type: none"> ▪ Routes should not allow contact or temporary storage near contaminated materials 	X	X	X	
	Visitor routes provide minimal contact with patient / clinical areas or supply transportation routes	X	X	X	
	Safe transport routes determined for waste and waste storage	X	X	X	
Treatment Chairs <i>e.g., dialysis / chemotherapy</i>	Minimum of 4 ft. between lounge / treatment chairs	X			
Tub / Shower Rooms Waiting Rooms	Sink for hand-hygiene follows sink specifications	X	X	X*	<i>CHC and emergency departments to review decontamination shower room requirements</i> <i>* A CHC may need a shower room for patients to use prior to an exam or treatment. Determine need through risk assessment</i>

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	Toilet for patient	X	X	X*	<i>If a shower room is installed in a CHC, a toilet is required in the space</i>
	One hair-washing sink in at least one resident tub/shower room		X		
	Storage space for: <ul style="list-style-type: none"> ▪ Supplies ▪ PPE for cleaning the tub after each patient's use 	X	X		
	Shelf and/or hooks for patient supplies and grooming items	X	X		
	Floor and wall materials should be mildew/mould resistant	X	X		
	Tubs should not have recirculating water jets	X			
	Shower rooms have separate drain in entryway and shower area	X	X		
	Area created to allow separation of infectious persons from non-infectious persons. A minimum of 2 meters separation in patient waiting areas	X		X	<i>Ideally separation of 2 meters between patients with respiratory infections</i>
	Waiting area visible to the reception/nursing station	X		X	
	Airflow should be negative compared to adjacent areas	X			
Washrooms (public)	Sink for hand-hygiene follows sink specifications Consider hands-free sink	X	X	X	<i>Must also consider accessibility requirements In long-term care, may use lever-handled taps that clearly distinguish hot and cold water</i>
	Hands-free paper-towel dispensers	X	X	X	
	Toilets should not have a tank due to risk of condensation	X	X	X	
	Urinals should not be installed, only a toilet	X	X	X	
	Public washrooms installed outside program area	X	X	X	

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Washroom (staff)	Washrooms dedicated to staff provided within program area		X		
	Hand-hygiene sink in washroom	X	X	X	
Work Area (staff / student)	Hand-hygiene sink near the staff work area	X	X	X	

*ABHR=Alcohol based hand rub **AIIR=Airborne- infection isolation room

References

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