





# IPAC GUIDANCE FOR COMMUNITY PRACTICES

OCTOBER 2022


With the rates of respiratory illness on the rise in Ontario, control measures in your practice continue to be key to reducing transmission and keeping patients, staff, and yourself safe, and meeting clinical needs.

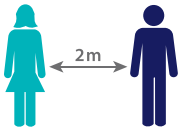
Outlined below are measures for infection prevention and control against COVID-19 and respiratory viruses, including **screening, masking, PPE, physical distancing, cleaning, and ventilation.**

 <b>Screening</b>	<p><b>Active Screening</b></p> <p>Screen patients for respiratory symptoms to help guide care decisions as well as in-office PPE and IPAC measures.</p> <p><u><a href="#">OCFP tip sheet for screening and seeing symptomatic patients</a></u></p>	<p><b>Passive Screening</b></p> <p>Passive screening (i.e., signage posted at office/clinic and building entrance, asking staff, patients and visitors to self-identify if ill) may augment active screening.</p>	<p><b>Staff Screening</b></p> <p>All staff to daily self-monitor for symptoms of COVID.</p>
	<p>A negative COVID test and/or proof of vaccination are <b>not required</b> for an in-person patient visit.</p>		


 <b>Masking</b>	<p><b>Masking</b> is not required but continues to be recommended in community-based practices.</p> <ul style="list-style-type: none"> <li>• Encourage patients and visitors to wear a mask – <u><a href="#">printable posters developed by OMA</a></u> (log in to access)</li> <li>• You may establish your own masking policy for all staff, patients and other visitors to wear a mask when in the office.                     <ul style="list-style-type: none"> <li>– <u><a href="#">OMA adaptable policy template</a></u> (log in to access)</li> </ul> </li> </ul> <p><i>More information on next page regarding masks as part of PPE.</i></p>		
	<p><b>For patients with respiratory symptoms, including symptoms of COVID, and any accompanying caregiver</b></p> <p>Provide a medical mask or a non-fit tested N95 respirator.</p>	<p><b>If a patient – with or without respiratory symptoms – refuses or is unable to wear a mask</b></p> <p>Take measures to protect other patients and staff – based on patient’s health, may include scheduling at the end of day or another dedicated time or considering a virtual visit. See CPSO’s <u><a href="#">COVID-19 FAQs for Physicians</a></u>.</p> <p><b>Resource:</b> Printable <u><a href="#">clinic sign</a></u> reminds patients that abusive behaviour is unacceptable</p>	




 <p><b>PPE: clinic staff   healthcare team</b></p>	<p><b>Direct care/within 2 metres of confirmed or “screen positive” patient/ patient with respiratory symptoms</b></p> <p>Fit-tested, seal-checked <u>N95 respirator</u> (or equivalent) or a non-fit tested N95, KN95 or well-fitting medical mask, isolation gown, gloves and eye protection (goggles, face shield or safety glasses with side protection).</p>	<p><b>All other patient interactions   care of patients who screen negative/ have no respiratory symptoms</b></p> <p>Well-fitting medical mask or N95 respirator; based on a risk assessment (e.g., patient is unmasked, high community prevalence), also wear eye protection.</p>	<p><b>Staff receiving patients/ conducting screening</b></p> <p>If can maintain physical distance of at least 2 metres or have an impermeable barrier (such as plexiglass): medical mask</p> <p>If not: Mask as above plus eye protection; if direct physical contact, also wear isolation gown and gloves.</p>
	<p><b>Tips</b></p> <ul style="list-style-type: none"> <li>• PPE allocations, including N95s, are available from the <u>provincial pandemic stockpile</u>.</li> <li>• Steps can be taken to safely extend the use and/or re-use your N95 respirator. If a respirator must be re-used, keep it from being contaminated by carefully storing it in a clean paper bag, or in a cleanable container with a lid. Wash your hands before and after handling your mask.</li> </ul>		
	<p><b>Resource:</b> <u>Poster: PPE in community practice – OMA (gated access)</u>  <b>Summary:</b> <u>PPE Selection for Suspect or Confirmed COVID-19 – PHO</u></p>		

 <p><b>Physical distancing   Office flow</b></p>	<p><b>General</b></p> <p>Physical distancing, when feasible, is still recommended.</p> <p>Minimize time patients spend in the waiting room, and non-essential items in patient areas.</p>	<p><b>COVID confirmed or “screen positive”   patient with respiratory symptoms</b></p> <p>Move patient to exam room immediately or to a separate area; if not feasible, keep as much distance as possible from other patients, in addition to masking. See above for masking step.</p> <p>Continue scheduling symptomatic patients separately, where possible, at beginning or end of day.</p>	<p><b>Staff</b></p> <p>As much as possible, schedule staff breaks to avoid crowded eating rooms and other staff areas.</p> <p>If more than one staff in break room, masks should be removed for as little time as possible, as required for eating and drinking.</p>
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 <p><b>Cleaning</b></p>	<p><b>COVID confirmed or “screen positive”   patient with respiratory symptoms</b></p> <p>After patient leaves, use routine cleaning processes: Clean and disinfect medical equipment and surfaces that the patient contacted (e.g., examination table, chair) with a low-level disinfectant.</p>	<p><b>Patient who screens negative   with no respiratory symptoms</b></p> <p>Use <u>standard cleaning processes</u> (i.e., as would normally be done pre-pandemic for IPAC).</p>
	<p>PHO’s <u>Interim Guidance for Infection Prevention and Control of SARS-CoV-2 Variants of Concern for Health Care Settings</u></p> <p>PHO’s <u>Checklist: Infection Prevention and Control Key Principles for Clinical Office Practice During the COVID-19 Pandemic</u></p>	

 <p><b>Ventilation</b></p>	<ul style="list-style-type: none"> <li>• Ensure ventilation system is functioning properly and optimized. If available, request report from the building owner/landlord.</li> <li>• Keep doors and windows open when possible.</li> <li>• Consider an air cleaner with a HEPA (high-efficiency particulate air) filter if HVAC is very poor or non-existent, or there is no outdoor air exchange. Select a portable air cleaner with clean air delivery rate (CADR) large enough for the size of the room or area.</li> </ul>
	<p><b>Resource:</b> <u>Five elements of an air quality check</u> (Dr. Jeya Nadarajah), <u>Public Health Ontario HVAC guide</u> (not specific to health care); <u>FAQs on portable air cleaners</u>; <u>CDC’s strategies and tools for improving building ventilation</u> in the context of virus transmission.</p>