




IPAC CONSIDERATIONS FOR INFECTIOUS RESPIRATORY DISEASES FOR COMMUNITY PRACTICES

JULY 2023

The level of concern from COVID-19 infection has reduced significantly since the throes of the pandemic: overall rates of infection are currently low, community level of immunity is high, and Ontario has seen strong vaccine uptake with primary serious and booster doses for high-risk individuals.

Nonetheless, infectious respiratory diseases are always present, and as the CPSO notes, “Ontario’s physicians see a variety of patients, including many high-risk individuals, throughout the course of their work” — control measures in your practice remain an important step in reducing the spread of viruses and keeping patients, staff, and yourself safe. Outlined below are measures for infection prevention and control against COVID-19 and other respiratory viruses, including screening, masking, PPE, physical distancing, cleaning, and ventilation.

 Screening	Active Screening	Passive Screening	Staff Screening
	<p>Screen patients for signs and symptoms of infectious respiratory diseases to help guide care decisions as well as in-office PPE and IPAC measures.</p> <p>Active screening is part of best practices, regardless of transmission risk.</p>	<p>Passive screening (i.e., signage posted at office/clinic and building entrance, asking staff, patients, and visitors to self-identify if ill) to augment active screening.</p>	<p>Ask all staff to self-monitor for signs and symptoms of infectious respiratory diseases.</p>
	<p>A negative COVID-19 test and/or proof of vaccination should not be required for an in-person patient visit.</p>		



Masking is not required but still recommended in clinical settings, including most community-based practices.

Given currently lower caseloads of COVID-19 and respiratory illnesses, some practices are altering their masking requirements, making masking non-mandatory while remaining “mask-friendly.” The Ministry of Health recommends doing a risk assessment based on the type of practice you have/patient population. In a sports medicine clinic, for instance, with generally younger patients without chronic conditions, masking for patients without respiratory symptoms as well as providers may not be considered a requirement at this time. In contrast, masking continues to be recommended in any community-based practice with high-risk/vulnerable patients to protect both those providing and accessing care.

In all practices, mask wearing should be mandatory for patients with signs and symptoms of infectious respiratory diseases.

You/your staff’s own personal risk should also be considered as part of the risk assessment. Also, your clinic’s masking requirements should be reviewed on a periodic basis, particularly in fall 2023 when caseloads are expected to rise.

For patients and any accompanying caregiver with signs and symptoms of infectious respiratory diseases:

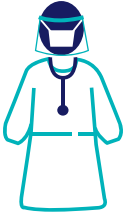
Provide a well-fitted medical mask.


If a patient refuses or is unable to wear a mask:

If a patient will not/cannot adhere to your clinic’s masking requirement, see CPSO’s [COVID-19 FAQs for Physicians](#) “What if a patient refuses to wear a mask” for options on how to proceed.

Resource: Printable [clinic sign](#) reminds patients that abusive behaviour is unacceptable.



 <p>PPE: clinic staff/ healthcare team</p>	<p>Direct care/within 2 metres of patient with signs and symptoms of infectious respiratory diseases:</p> <p>Wear a mask (e.g., fit-tested, seal-checked N95 respirator, a non-fit tested N95 or equivalent, or well-fitting medical mask).</p> <p>Perform hand hygiene.</p> <p>Full PPE (i.e., + eye protection, gloves, gown), based on your discretion/a <u>point-of-care risk assessment</u>.</p>	<p>Care of patients who screen negative/ have no signs or symptoms of infectious respiratory diseases:</p> <p>As per your clinic's masking policy — see above 'Masking' section.</p> <p>To determine if additional PPE is required, use your discretion/a <u>point-of-care risk assessment</u>.</p>
	<p>Note: PPE allocations, including N95s, are available from the provincial pandemic stockpile. If you have an existing account, please click here. If you do not have an existing account, please email SCO.Supplies@ontario.ca to create an account to order PPE supplies from the provincial pandemic stockpile.</p> <p>For more information on recent updates to the COVID-19 interim IPAC guidelines for acute care settings and considerations for community-based practices, click to watch the May 26, 2023 "Changing the Way We Work (COVID-19) Community of Practice" recording here (beginning at 6:15).</p> <p>More information on IPAC guidance for clinical office practices (last updated in 2015) can be found here.</p>	

 <p>Office flow</p>	<p>General:</p> <p>Minimize time patients spend in the waiting room/shared spaces and reduce non-essential items in patient areas.</p>	<p>Confirmed or "screen positive" i.e., patient with signs and symptoms of infectious respiratory diseases:</p> <p>Where possible, schedule symptomatic patients separately at the beginning or the end of the day.</p> <p>Seat patients with signs and symptoms of infectious respiratory diseases apart from other patients and have them wear a medical mask.</p>
	<p>Tip: Consider developing a process (e.g., colour coding in your schedule) that highlights and categorizes patients with signs and symptoms of infectious respiratory diseases (e.g., triaging patients to determine who needs to go into an examination room quickly).</p>	



Cleaning

Medical equipment that only **comes into contact** with the patient's intact skin and is **used between patients** requires cleaning and low-level disinfection after each use (e.g., armrests on chairs; examination table; BP cuff).

Clean using a hospital grade low level disinfectant (e.g., has a drug identification number).



Ventilation

Ensure ventilation system is functioning properly and optimized. If available, request report from the building owner/landlord.

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.

Resource: [Public Health Ontario HVAC guide](#) (not specific to health care); [FAQs on portable air cleaners](#); [CDC's strategies and tools for improving building ventilation](#) in the context of virus transmission.