



College of Occupational  
Therapists of Ontario

# STANDARDS FOR INFECTION CONTROL







# STANDARDS FOR INFECTION CONTROL

*Store at Tab #2 of your Registrant Resource Binder*

## Introduction

Regulated health professionals must be aware that appropriate infection control is an integral part of practice. It plays a critical role in the health and safety of everyone involved, including health care providers, clients and their families.

Knowledge of infection control practice is continually growing and thus specific clinical advice continues to evolve. However, the basic principles that underlie appropriate infection control practice, and which define professional expectations in this area, remain constant.

This Standard describes the College's expectation of its registrants to ensure that occupational therapists must incorporate appropriate infection control measures into their professional practices.

## Definitions

### Infection Control

Measures practiced by healthcare personnel intended to prevent spread, transmission and acquisition of infection between clients, from occupational therapists to clients, and from clients to occupational therapists in the healthcare setting. Infection control measures are based on how an infectious agent is transmitted and include standard and additional precautions.

### Standard Precautions

Also called routine precautions, these activities are to be used with all clients at all times. As a minimum, these measures include proper hand hygiene, appropriate work practices, and use of personal protective equipment where required. (The World Health Organization (WHO) uses the terms *Standard Precautions and Additional (transmission based) Precautions* to describe infection control practices. These terms are also currently acceptable and replace the terms *Universal Precautions* or *Body Substance Precautions*.)

## STANDARDS FOR INFECTION CONTROL

### **Additional Precautions**

Use of personal protective equipment in situations where there is risk of droplet or airborne transmission of infection.

### **Authoritative Source**

Government (e.g. Ontario's Ministry of Health and Long Term Care or Health Canada) recommendations or requirements for health professionals' use of infection control measures. Includes health alerts, surveillance, screening and reporting of suspected Febrile Respiratory Illness (FRI) and Influenza-Like Illness (ILI).

### **Co-workers**

All other members of the staff or health care team (including students) that are in contact, or share workspace, with the therapist or the client.

### **External Environment**

Beyond the immediate clinical environment. Includes the local community and extends to the region where service delivery is provided.

### **Application of the Standards**

- The Standards for Infection Control follow a three-step process whereby the therapist needs to **inform himself or herself** of the current information about the transmission, control protocols and prevention of infection; **assess** the risk of transmission of infection; and **apply** infection control measures to control or prevent such transmission.
- The **Standards** describe the minimum expectation for occupational therapists.
- The **Performance Indicators** listed below each Standard describe more specific behaviours that demonstrate the Standard has been met.
- It is not expected that all performance indicators will be evident all the time, but could be demonstrated if requested.
- There may be some situations where the therapist determines that a particular performance indicator is not relevant due to client factors and/or environmental factors.
- It is expected that therapists will always use their clinical judgement to determine how to best meet the client's needs in accordance with the standards of the profession.
- It is also expected that therapists will be able to provide the rationale for any variations from the Standard.

## INFECTION CONTROL STANDARDS AND PERFORMANCE INDICATORS

### 1. Standard

An occupational therapist will **inform him or herself** of:

- (a) the current evidenced based infection control protocols relevant to his or her professional practice and;
- (b) the risk factors for infection and transmission of infectious agents in a changing environment.

#### Performance Indicators

An occupational therapist will:

1. Be able to identify and access the authoritative sources of infection control protocols that are relevant to his or her practice circumstances;
2. Be aware of the significant changes to the infection control protocols relevant to his or her practice circumstances;
3. Be able to identify the infection control risks associated with the treatment interventions and clients associated with his or her professional practice;
4. Demonstrate current knowledge of infection control risks, concerns, and expectations in the external environment that may have implications upon his or her practice circumstances;

### 2. Standard

An occupational therapist will **assess** the degree of risk of infection and transmission of infection among clients, their families and co-workers through the application of his or her knowledge, skills and judgement, and/or in consultation with others, in the environment in which he or she conducts his or her professional practice.

#### Performance Indicators

An occupational therapist will:

1. Assess the degree of risk based on the type of assessments or treatment interventions planned or conducted;
2. Assess the degree of risk related to the disclosed health condition of the client being assessed or treated;
3. Assess the degree of risk associated with infection transmission to the internal and external practice environment;
4. Refer clients for consultation with other health care providers as necessary;

## STANDARDS FOR INFECTION CONTROL

5. Consider the health status of other clients in relation to the risk of infection transmission;
6. Consider the health status of co-workers;
7. Consider the health status and immunization status of self;

### 3. Standard

An occupational therapist will **promote and apply standard and additional precautions** to minimize the risk of infection and transmission to others, using the results of the assessment of risk.

#### Performance Indicators

An occupational therapist will:

1. Establish and/or apply policies and procedures relevant to infection control in his or her practice that are intended to minimize the risk of transmission of infection;
2. Incorporate appropriate infection control protocols into his or her professional practice that include, as a minimum, requirements for:
  - (a) Hand washing;
  - (b) Use of protective barriers;
  - (c) Cleaning and/or sterilization of equipment;
  - (d) Managing wastes, including sharps;
3. Incorporate appropriate infection control protocols to minimize risks associated with infection transmission. This would include transmission between:
  - (a) clients;
  - (b) health practitioners;
  - (c) self;
  - (d) co-workers;
  - (e) others;
4. Provide, or advocate for adequate resources to support the appropriate infection control protocol;
5. Educate clients/families and colleagues, when required about the need for infection control and the minimum requirements for it, as it pertains to practice;
6. Advocate for safe practices in infection control;
7. Develop, communicate and document alternate plans of care, if there are no reasonable measures that can be taken to prevent transmission of infection;

## References

College of Occupational Therapists of Ontario.  
*A Guide on Infection Control for Regulated Professionals.*  
[www.coto.org](http://www.coto.org)

Association for Professionals in Infection Control and Epidemiology (APIC).  
[www.apic.org](http://www.apic.org)

Community and Hospital Infection Control Association (CHICA).  
[www.chica.org](http://www.chica.org)

Health Canada.  
*Communicable Disease Report. Infection Control Guidelines: Supplement: Hand Washing, Cleaning, Disinfection and Sterilization in Health Care*, December 1998.  
[www.hc-sc.gc.ca](http://www.hc-sc.gc.ca)

Health Canada.  
*Communicable Disease Report. Supplement—Infection Control Guidelines*, July 1999.  
[www.phac-aspc.gc.ca](http://www.phac-aspc.gc.ca)

Infection Control Nurses Association.  
[www.icna.co.uk](http://www.icna.co.uk)

National Institute for Health and Clinical Excellence (NICE).  
[www.nice.org.uk](http://www.nice.org.uk)

Ontario Ministry of Health and Long-Term Care—Health Providers.  
[www.health.gov.on.ca](http://www.health.gov.on.ca)

Public Health Agency of Canada.  
[www.phac-aspc.gc.ca](http://www.phac-aspc.gc.ca)

United Nations World Health Organization (WHO).  
[www.who.int](http://www.who.int)

United States Department of Health and Human Services—Centres for Disease Control and Prevention (CDC).  
[www.cdc.gov](http://www.cdc.gov)

United States Department of Health and Human Services—Centres for Disease Control and Prevention (CDC).  
*Guidelines for Environmental Infection Control in Health-Care Facilities—Recommendations of CDC and the Healthcare Infection Control Practices Advisory Committee (HICPAC).*  
[www.cdc.gov](http://www.cdc.gov)

