

LTC Fall 2022 Preparedness Checklist

The Ministry of Long-Term Care has updated this self-assessment tool (non-exhaustive) to help long-term care (LTC) homes assess pandemic preparedness, inform outbreak response planning, and prepare for potential future waves of COVID-19 as well as the upcoming respiratory season.

The checklist contains specific measures recommended and/or required by the Ministry of Long-Term Care, the Ministry of Health, the Office of the Chief Medical Officer of Health, and Public Health Ontario as set out through multiple sources:

- [Fixing Long-Term Care Act, 2021](#) and [O. Reg 246/22](#)
- [Minister's Directive: COVID-19 response measures for long-term care homes](#)
- [COVID-19 Guidance Document for Long-Term Care Homes in Ontario](#)
- [COVID-19 Guidance: Long-Term Care Homes and Retirement Homes for Public Health Units](#)
- [IPAC Standard](#)
- [Long-Term Care Emergency Preparedness Manual](#)
- [Memo: 10-Point Heating, Ventilation, and Air Conditioning Plan \(November 16, 2020\)](#)
- [Memo: High Efficiency Particulate Air \(HEPA\) Filters for Shared Spaces and Rooms with Three or More Residents \(January 7, 2022\)](#)

Leaders, managers, direct health care workers, and resident/family partners are encouraged to familiarize themselves with all guidance and directives and refer to them for clarification as appropriate.

This tool can help to identify strengths and areas for improvement to inform preparedness planning efforts ahead of future waves of COVID-19 and the fall respiratory season. It can be complementary to COVID-19-specific checklists that may be regionally or provincially available. Long-term care (LTC) homes are strongly encouraged to use the readiness checklist to surface any gaps that need to be addressed and identify key risks and related mitigation strategies to minimize COVID-19 introduction and spread in the home during broader respiratory outbreak seasons or aggressive pandemic waves.

The *Fixing Long-Term Care Act, 2021* (FLTCA) came into force on April 11, 2022. The regulation brought forth new Emergency Planning requirements to ensure that long-term care homes develop effective emergency and evacuation plans. As per O. Reg. 246/22 s.268 and s. 269, long-term care homes are to have, in writing, an emergency plan to respond to outbreaks of communicable diseases, outbreaks of a disease of public health significance, epidemics and pandemics. Emergency planning requirements will help guide and inform long-term care homes with a stronger

foundation in looking ahead to fall preparedness planning this year.

The checklist below provides a comprehensive (but not exhaustive) list of factors to consider for fall pandemic preparedness planning. This includes broader emergency response planning in the LTC home, resident supports, staffing requirements, outbreak preparedness planning, case management, admissions and transfers, absences, testing policy and procedures, vaccination, infection prevention and control (IPAC) protocols and plans, home visitor policy, supplies, education and training, ventilation, and communications. Each item on the checklist is grounded in evidence, best practice, and/or a regulatory framework requirement.

Reference	OVERALL RESPONSE PLANNING	Complete	In Progress	Not Started
FLTCA s. 90 (1) (a), IPAC Standard 1.1, Minister's Directive 1.1	A pandemic plan established that is tailored to the needs of the home while following Ontario guidelines, and FLTCA and its regulations. The plan is broadly shared with staff, student placements, volunteers, and visitors as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s.268 (5)1, IPAC Standard 2.1-2.7	Leadership roles have been identified that are specific to a pandemic response plan. Persons involved may include a Director of Care/Manager, Medical Director, Infection Control Practitioner, Public Health Liaison, Occupational Health and Safety experts, and any other home-specific leadership roles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 268 (5), O. Reg. 246/22 s. 269 (1) (f), IPAC Standard 4.1-4.2, 7.1	Roles and responsibilities of health care workers and staff are clearly stated and understood including any shifts/transitions in roles and responsibilities, lines of authority and a communication plan during an outbreak, pandemic, and epidemic. Identify Outbreak Management Team and their roles and responsibilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22s. 268 (10), IPAC Standard 4.2 (f), 7.3 (b)	"Tabletop" or drill exercises completed on an annual basis to practice implementing emergency management plans/protocols, including those for outbreaks, epidemic and pandemics.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg 269(1) (a), IPAC Standard 5.1, 5.4 (k), Minister's	Rooms/areas for isolating residents, including for new admissions and transfers, are identified, and taken into consideration when scheduling staff, cleaning, meal delivery, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Directive 5.2				
O. Reg. 246/22s.26 9 (1) (b) Minister's Directive 3 MLTC GD (6)	Include a process to divide both staff and residents into cohorts as required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUPPORTING RESIDENTS		Complete	In Progress	Not Started
O. Reg. 246/22 s. 269 (1) (e), IPAC Standard 9.1 (a), MLTC GD (7)	Plans and protocols for resident symptom monitoring including screening requirements as set out in the current LTC Guidance Document are in place.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 29	All residents have an up-to-date Plan of Care, including the goals the care is intended to achieve and up-to-date advance directives (i.e., written direction for future care in the event a resident will not be able to communicate).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice/ Recommendation	Advanced planning for therapeutics / antivirals, including for COVID-19 and influenza, considering goals of care, medication review for drug interactions (e.g., residents eligibility for Paxlovid identified in advance) and consent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice/Recommendation	All residents have access to high quality primary health care that does not require them to leave the home including during an outbreak if care can be managed from the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HUMAN RESOURCES/STAFFING		Complete	In Progress	Not Started
O. Reg. 246/22 s. 269 (c)	Confirm appropriate level and capacity of leadership and management in place, develop contingency plans in the event a person is not able to work, identify those responsible for staffing/scheduling and address leadership recruitment, development, retention, and support as relevant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice/Recommendation	Review and update home's incident commander/incident management system (IMS) structure should there be a need to implement.			
Best practice/recommendation	Prepare staff schedules to ensure appropriate coverage of shifts, in accordance with all applicable laws/policies and any prescribed restrictions (e.g., related to working in multiple locations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

O. Reg. 246/22 s. 269 (1)(b), MLTC GD (15)	Review and update staff cohorting plans and workstation use, including assignments during outbreak situations and for providing care for residents who are isolating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 269 (c)	Contingency staffing plan has been developed that identifies the minimum staffing needs for the home and prioritizes critical and non-essential services based on residents' health status, functional limitations, disabilities, and essential home/building operations. This plan should address surge capacity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice/recommendation	Ensure staff, student placements, volunteers, and visitors are regularly reminded (e.g., email alerts, signage, newsletters, etc.) of their obligation to stay home if ill, to advise if they have had close contact with someone with COVID-19, and to report any signs/symptoms of illness to their supervisor/manager.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COVID-19 OUTBREAK PREPAREDNESS PLAN		Complete	In Progress	Not Started
O. Reg. 246/22 s. 269 (f)	Members of the outbreak team, including the outbreak lead and backup for the home are identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 4.2 MLTC GD (5) O. Reg. 246/22 s. 269 (3)	Ensure IPAC lead has supports and processes in place to execute the following required functions of the role: <ul style="list-style-type: none"> a) Advise on IPAC practices to manage the outbreak and minimize risk(s) to residents and staff; b) Assist with securing IPAC-related resources needed to support the outbreak management response (e.g., secure needed PPE and other supplies as required); c) Track and document accurate and required disease-related information for monitoring and reporting; d) Engage with the local public health unit on the outbreak response (when relevant) including when an outbreak has been declared; e) Implement changes to IPAC practices as needed to support the outbreak response; and f) Provide IPAC-related education and training to staff and others to support the outbreak response. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLCTA s. 102 (11a-b)	Ensure risk assessment, policies, processes, and procedures are in place related to outbreak preparedness management in the home. This includes: <ul style="list-style-type: none"> a) an outbreak management system for detecting, managing, and controlling infectious disease outbreaks, b) defined staff responsibilities, 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	<ul style="list-style-type: none"> c) reporting protocols based on requirements under the Health Protection and Promotion Act, d) communication plans, and protocols for receiving and responding to health alerts; and e) a written plan for responding to infectious disease outbreaks. 			
MLTC GD (5), O. Reg. 246/22 s. 269 (2-3), O. Reg. 246/22 s. 268 (3)(c)	Ensure involvement of outbreak emergency plans from joint health and safety committees, the local medical officer of health, and the infection prevention and control lead in developing, updating, evaluating, testing, and reviewing any matters of public health significance. Additionally, Residents' and Family Councils should be consulted where appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 4.1 (h)	Establish a clear agreement/understanding with the IPAC Hub lead about how the home and Hub can work together, particularly if extra support is needed during an outbreak.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Ensure testing kits are available and plans are in place for taking specimens.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 4.2, 6.1-6.5, MLTC GD (5)	Develop a plan/process for securing resources to ensure sufficient PPE is available for outbreak management, and that appropriate stewardship of PPE is followed to preserve supplies. All staff, temporary staff, students, and volunteers are trained on said plan/process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. (1) (d), MLTC GD (7)	Ensure a written and clearly communicated policy to manage staff who may have been exposed to COVID-19 is available and accessible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5), IPAC Standard 2.3, Appendix 2 (7)	Complete a process to ensure IPAC audits every 2 weeks and weekly if in outbreak. Results must be kept for 30 days and be available to share to public health units, local public hospitals, Ontario Health, Home and Community Care Support Services, and MLTC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 268(6)	Ensure a process for frequent and ongoing communication during outbreaks to keep staff, residents, and families informed about the status of COVID-19 in the homes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CASE MANAGEMENT		Complete	In Progress	Not Started
MLTC GD (15), GD for Public Health Units	Review and update as necessary the home's case management procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADMISSIONS/TRANSFERS		Complete	In Progress	Not Started

Minister's Directive 5.1, MLTC GD (9)	Review and update as necessary the home's COVID-19 admissions and transfers operational policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minister's Directive 5.2, Minister's Directive 5.3	Review and update as necessary the home's plan to ensure all new residents are placed in a single or semi-private room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	ABSENCES	Complete	In Progress	Not Started
Minister's Directive 6, MLTC GD (10)	Review and update as necessary the home's COVID-19 absences operational policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	ASYMPTOMATIC SCREEN TESTING POLICY	Complete	In Progress	Not Started
Minister's Directive 8, MLTC GD (13)	Review and update as necessary the home's asymptomatic screen testing operational policy and procedures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	VACCINATION	Complete	In Progress	Not Started
Best practice/recommendation	Identify vaccination lead and backup for the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (4)	Review home's COVID-19 vaccination policy to ensure it is compliant with the current LTC Guidance Document .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 11 MLTC GD (4)	Review and update the home's vaccine strategy including addressing how/when dosages of COVID-19 vaccines and influenza vaccines to residents will be administered.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 11.1 MLTC GD (4)	Collaborate with public health units to receive vaccine doses and supplies (and to support administration if home is not onboarded to independent administration).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg 246/22 ss. 102(12-14), IPAC Standard 11.1, MLTC GD (4)	Ensure a plan is in place to continue promoting the benefits of being vaccinated against COVID-19 and other respiratory pathogens, such as influenza and pneumococcus.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	IPAC PROTOCOLS & PLANS	Complete	In Progress	Not Started
IPAC Standard 5	Include evidence-based policies and procedures in the IPAC program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 1.1, 1.2	Ensure there is a plan regarding dedicated capacity, planning, partnerships, and clear internal accountability for oversight, reinforcement, and support of proper IPAC responsibilities, protocols, and practices for all staff in the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Complete the Public Health Ontario COVID-19: Infection Prevention and Control Checklist for Long-Term Care and Retirement Homes .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minister's Directive 1.1	Ensure health and safety control measures within the Organizational Risk Assessment mitigate the transmission of infections, including engineering, administrative, and PPE measures. Communicate any changes to these measures to the Joint Health and Safety Committee.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minister's Directive 5.2	Review and update as necessary plans and protocols related to isolating residents (e.g., where residents needing to self-isolate should be placed, identification of isolation rooms, access to a single room with a private washroom where possible).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 5.3, MLTC GD (5)	Ensure policies and procedures are available and accessible for the implementation of Routine Practices and Additional Precautions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s.102(2)(a), s.102(9), MLTC GD (7, 13), IPAC Standard 3, 5.3, 9.1	Homes should ensure processes are in place to support surveillance activities including: <ul style="list-style-type: none"> • Training staff on how to identify and monitor for the presence of infection in residents, and how to record and report this information, • Monitoring and recording of symptoms indicating the presence of infection in residents every shift for healthcare acquired infections (HAIs), device-associated infections, and antibiotic resistant organisms (AROs), • Taking immediate action to implement Additional Precautions and isolate residents as required, • Developing and using a surveillance database and reporting tool for use in the home and updating the interdisciplinary IPAC team on surveillance findings. 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	HOME VISITOR POLICY (Please see Communications section regarding communications of the visitor's policy)	Complete	In Progress	Not Started
Minister's Directive 7 MLTC GD (11)	Review home's visitor policy to ensure it is consistent with the current LTC Guidance Document and direction from the local public health unit (if applicable.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MLTC GD (11)	Ensure protocol to fill out visitor logs and maintain records of logs, ensuring they are readily available to ministry inspectors and public health units (e.g., if an electronic log is being used and is password protected, ensure at all times that someone on-site has access to the password).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (11)	Ensure a plan is in place to adjust visiting in case of outbreak, for situations when a resident is isolating, and when local circumstances and/or direction from the local public health unit changes (e.g., plans/protocols for scheduling and holding virtual visits for residents).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SUPPLIES		Complete	In Progress	Not Started
Best Practice/recommendation	Ensure supply chain is secure and contact information for vendors is up to date.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Hand hygiene and respiratory etiquette supplies are available <ul style="list-style-type: none"> • alcohol-based hand sanitizer (60-90% alcohol) • soap and paper towels for all sinks • facial tissue 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	PPE is available <ul style="list-style-type: none"> • medical masks and N95 respirators • gowns • gloves • face shields/goggles 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLT GD (5)	Trash disposal bins and bags are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minister's Directive 1.4, MLTC GD (5)	Disinfectants for cleaning and disinfection of high-touch surfaces and equipment are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Diagnostic materials (for example, swabs) are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Bed linens, incontinence products, and towels are available.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MLTC GD (5)	Posted signage/posters for workers and others about: <ul style="list-style-type: none"> • physical distance (including decals, arrows etc.) • capacity limits • screening and self-assessment • wearing masks • breaks • hand hygiene 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice	Ensure that Paxlovid will be available to residents in case of a surge in demand, by connecting with pharmacies. Homes in remote areas are encouraged to speak with pharmacies about including Paxlovid in their emergency box.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IPAC 7.1	EDUCATION/TRAINING	Complete	In Progress	Not Started
O. Reg. 246/22 s. 272	Ensure licensees, leadership/management (existing, new, and incoming) have reviewed applicable COVID-19 guidance/policies/requirements including the current LTC Guidance Document and Minister's Directive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health Protection and Promotion Act, R.S.O. 1990, c. H.7, s. 25(1), 27(2)	Remind all existing staff and inform new staff about the reporting requirements related to communicable diseases, including COVID-19, and critical incident reporting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLTCA 23(2), IPAC Standard 6.2	Provide training to all health care workers, other staff, and any essential visitors who are required to wear PPE with information on the safe utilization of all PPE, including training on proper donning and doffing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 268(14), FLTCA 23(2)	Provide training for new staff and refresher training for existing staff regarding: <ul style="list-style-type: none"> • government/ministry and home policies regarding COVID-19 including the home's visitor policy, COVID-19 immunization policy, etc. • the home's sick leave policy • outbreak management 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLTCA 23(2)	Ensure screeners are appropriately trained and aware of current rules/requirements regarding active screening.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLTCA 23(2), O. Reg. 246/22 s. 102, s. 258	Ensure all staff, students, and volunteers – existing, new, and returning – in the home have core IPAC training and access to on-demand training on IPAC and PPE. Identify education/training lead and backup to retain responsibility for coordinating education and training on COVID-19, sourcing education/training materials, and maintaining records related to persons accessing and completing education/training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	VENTILATION	Complete	In Progress	Not Started
Memo: 10-Point Heating, Ventilation, and Air Conditioning Plan (November 16, 2020)	Review the ministry's 10-Point Heating, Ventilation, and Air Conditioning Plan .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

O. Reg. 246/22 s. 96(2)(c)	Schedule ventilation systems maintenance as appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. Reg. 246/22 s. 24	Where possible, and with the guidance of a licensed heating, ventilation and air conditioning contractor, available systems be adjusted for summertime conditions to ensure adequate fresh air, comfortable temperature and humidity levels for residents, staff and others who attend/visit the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Memo: HEPA Filters for Shared Spaces and Rooms with Three or More Residents (January 7, 2022)	Installation of High Efficiency Particulate Air (HEPA) filters as recommended in all ward rooms with more than 3 residents or more, shared spaces where staff and/or residents may congregate, especially where masks are removed such as break rooms and resident dining rooms or where crowding may occur.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMMUNICATIONS		Complete	In Progress	Not Started
O. Reg. 246/22 s. 273	<p>Ensure that the home has access to reliable communications equipment.</p> <p>Internal communications protocols in place for residents, substitute decision-makers, families, staff on/offsite, caregivers, volunteers, student placements, visitors, Family Councils, and Resident Councils.</p> <p>Internal communication protocol should be activated when there is a change in:</p> <ul style="list-style-type: none"> • outbreak status • home, provincial, or ministry policies • home's schedule of activities including dining <p>Where possible, include information in the updates as well as including clarity about who is making the decisions (public health unit vs home vs Province).</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best Practice/ recommendation	Ensure staff assigned as lead for internal communications, as well as back up staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IPAC Standard 10 (10.1-10.4), FLTCA (23)2	<p>Ensure regular communications to residents including (but not limited too):</p> <ul style="list-style-type: none"> • sharing with residents' changes in the home that directly impacts residents, particularly related to outbreaks, cohorting, isolation requirements, visitors, absences, activities, and staffing 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	<ul style="list-style-type: none"> reminding residents of importance of public health measures including hand hygiene, physical distancing, and masking (if tolerated) 			
O. Reg. 246/22 s. 268(3)	Ensure external communications protocols are in place including to contact public health unit and the ministry and others as appropriate (e.g., supply vendors, building and ground maintenance, etc.) and a media relations plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLTCA s. 102(19)	Ensure that contact information, including telephone number and email address, of all infection prevention and control leads are provided: (a) to the appointed local medical officer of health and (b) the designated IPAC hub for the home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best practice/recommendation	Confirm all designated caregiver information for each resident is up to date in the event the home is required to contact the resident's caregiver.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Best Practice/recommendation	Review and update as necessary contact information lists: <ul style="list-style-type: none"> For all staff, student placements, volunteers, and residents For key individuals within the home, local public health unit, regulated health professionals serving the home, local COVID-19 assessment centre 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>