News Release

For Immediate Release

December 7, 2009

INFECTION-CONTROL PROCESSES AT LONG-TERM-CARE HOMES NEED TO IMPROVE: AUDITOR GENERAL

(TORONTO) Ontario's long-term-care homes have met some of the challenges of dealing with health-care-associated infections (HAIs), but there is still room for improvement, Auditor General Jim McCarter says in his *2009 Annual Report*, released today.

"We found areas where the homes could be taking more effective measures to protect some of Ontario's most vulnerable citizens, such as screening all new residents for respiratory illnesses such as influenza and tuberculosis, drawing curtains around the beds of residents with such illnesses, cleaning the rooms of residents who have *C. difficile* twice a day, and ensuring their Infection Prevention and Control Professional has specific training," McCarter said. "With more effective infection-prevention-and-control processes in place in certain areas, these homes could be further limiting the spread of these infections.

"Infection challenges in long-term-care homes differ somewhat from hospitals," McCarter added. "For instance, homes have a very limited ability to isolate residents with an infectious disease and, often, staff have limited training in the area of HAIs."

Audit staff visited three homes and found each had a number of formal and informal processes to prevent and control these infections; most residents, for example, were immunized annually against influenza, and the homes had recognized the importance of hand hygiene in combating infections.

However, the Auditor also found:

- The Ministry of Health and Long-Term Care introduced initiatives to help prevent and control HAIs in long-term-care homes but has no information on the total number of cases of most infections in such institutions. The information collected at the homes visited was generally not comparable because the homes defined and counted HAIs in different ways.
- Although the three homes all had policies to screen new residents for respiratory illnesses such as influenza, documentation at two of the homes indicated that just 60% to 80% of new residents in a sample were screened. At the third home, there was no evidence at all of formal screening.
- Each home had a policy to test new residents for tuberculosis within 14 days of admission, as required by law. In a sample of new residents, one home tested all of the residents, but the other two tested only 70% and 80% of the residents, respectively. In some cases, testing took place 60 to 125 days after a resident's admission.

-30-

For more information, please contact:

Jim McCarter Andréa Vanasse/Joel Ruimy

Auditor General Communications (416) 327-1326 (416) 327-2336