

**Ministry of Health
and Long-Term Care**

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Dear Colleagues:

Subject: Provincial Infectious Diseases Advisory Committee, *Best Practices for Infection Prevention and Control in Ontario in All Health Care Settings*

I am pleased to announce that the Provincial Infectious Diseases Advisory Committee's (PIDAC), *Best Practices for Infection Prevention and Control in Ontario in All Health Care Settings* ("Best Practices") is now available for your review and use. I want to thank PIDAC for their hard work and dedication in producing this valuable tool and I encourage everyone to share the Best Practices document with your colleagues and staff members and take this opportunity to review and renew your infection prevention and control programs.

The Best Practices document is available on the PIDAC website at <http://www.pidac.ca>.

Health care-associated infections are an important patient safety issue and represent a significant adverse outcome of the health care system. Infection prevention and control (IPAC) programs have been shown to be clinically effective, reducing morbidity and mortality, as well as cost effective, providing important cost savings in terms of fewer health care-associated infections, reduced length of hospital stay, less antibiotic resistance and decreased costs of treatment for infections.

The Best Practices document provides a framework for infection prevention and control programs, including recommendations for appropriate resource allocation and specific activities for IPAC programs across the continuum of health care delivery. The document is targeted at senior administrators in health care institutions, medical officers of health and others in a management role in all health care settings. These best practices will be useful for developing and prioritizing IPAC programs and engaging in strategic planning activities for the future.

The recommendations in this Best Practices document reflect the best evidence and expert opinion available at the time of writing. In addition, the recommendations reflect many best practices that are currently practiced in the field and they should be seen as an enhancement to existing practices.

Furthermore, the recommendations serve as best practice standards that health care settings should strive to achieve. Some recommendations may present a challenge for implementation given current resource levels. However, it should be noted that these recommendations are not mandatory and while health care settings are encouraged to work towards these recommendations, the timeframe for implementation is flexible and should be reflective of the facility's overall infection prevention and control plan.

In the coming months, the Ministry of Health and Long-Term Care (MOHLTC) will work closely with health care settings and health care providers to develop strategies and other approaches to assist with implementing the Best Practice recommendations. In October 2008, the MOHLTC, in partnership with the Ontario Hospital Association, will host a video conference/webcast that will provide an overview of the Best Practice document and an opportunity for questions and answers.

Thank you for your continued support in reducing the spread of infectious diseases in Ontario.

Yours truly,

David C. Williams, MD, MHSc, FRCPC
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