



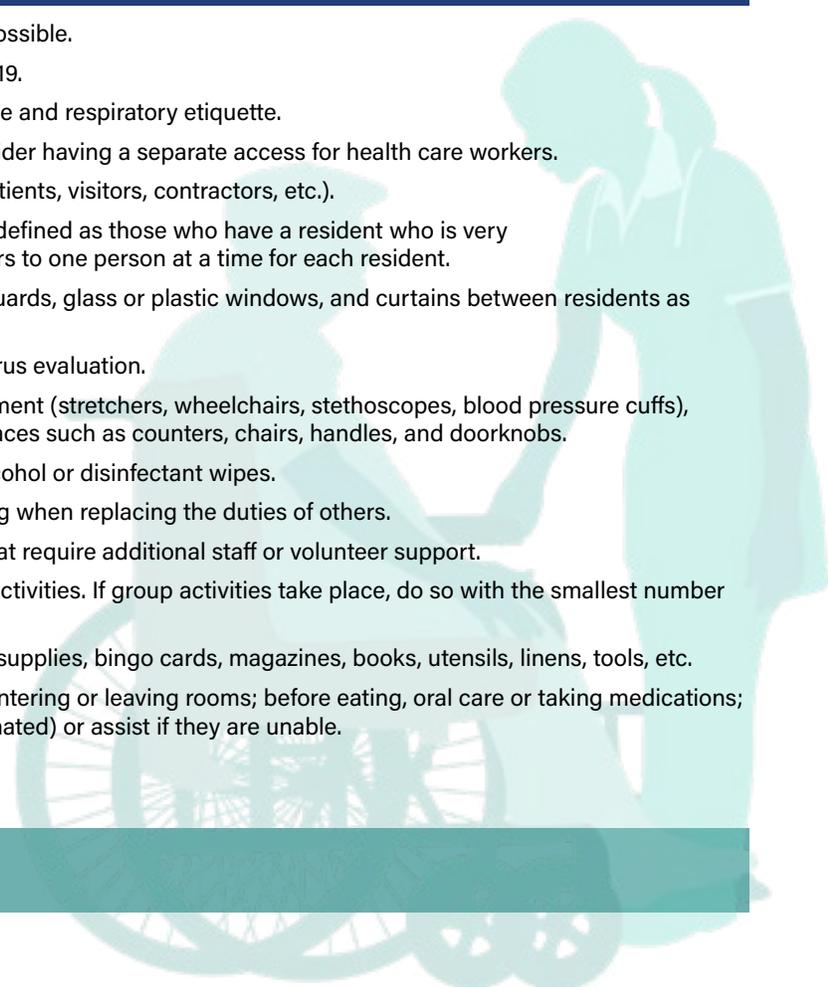
Long Term Care

Protecting Yourself and Others

- Continue to follow all safe work procedures. If it is unsafe to work, talk to your supervisor, health and safety committee or representative, and/or union.
- Stay home if you are sick or might be sick. Follow the Public Health Agency of Canada's steps for self-assessment: <https://www.canada.ca/coronavirus>
- Wear required personal protective equipment and follow routine precautions. Do not touch your face.
- Wash your hands at the start of your shift, before eating or drinking, after touching shared items, after using the washroom, after working with each resident, and at the end of your shift. Remove jewellery while washing.
- Follow all droplet and contact precautions, as well as routine practices, when caring for residents with suspected or confirmed COVID-19.
- Do not share communication devices, personal protective equipment, cigarettes or vaping equipment.
- Remove work clothing immediately upon arriving at home, and shower if possible.

Facility Management

- Increase ventilation rates and fresh air return where possible.
- Monitor all people for signs and symptoms of COVID-19.
- Post signs to remind all persons to follow hand hygiene and respiratory etiquette.
- Limit the number of access points to the facility. Consider having a separate access for health care workers.
- Screen all persons who enter (health care workers, patients, visitors, contractors, etc.).
- Only allow essential visitors. Essential visitors can be defined as those who have a resident who is very ill or requiring personal or end-of-life care. Limit visitors to one person at a time for each resident.
- Install physical barriers such as clear plastic sneeze guards, glass or plastic windows, and curtains between residents as appropriate.
- Use a separate area for those needing a respiratory virus evaluation.
- Be aware of cross-contamination through staff, equipment (stretchers, wheelchairs, stethoscopes, blood pressure cuffs), resident belongings, records, linens, clothes, and surfaces such as counters, chairs, handles, and doorknobs.
- Clean shared equipment, phones, tablets, etc. with alcohol or disinfectant wipes.
- Make sure workers are trained to work safely, including when replacing the duties of others.
- Suspend non-essential activities and programming that require additional staff or volunteer support.
- Cancel all non-essential outings and reassess group activities. If group activities take place, do so with the smallest number of residents possible and maintain 2 metre distances.
- Clean any shared item between users, including craft supplies, bingo cards, magazines, books, utensils, linens, tools, etc.
- Encourage residents to clean their hands often (e.g., entering or leaving rooms; before eating, oral care or taking medications; using the washroom; or when hands may be contaminated) or assist if they are unable.





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- Keep teams of workers together in the same area or ward where possible, and so that they are comfortable working in close proximity when absolutely necessary.
- Identify staff who work in more than one facility only and take steps to limit spread between facilities.

Early Recognition

- Use routine practices and follow contact and droplet precautions.
- Triage for risk factors as soon as possible.
- Monitor residents, staff, and volunteers for risk factors associated with COVID-19, such as fever, acute respiratory illness or new/worsening cough.
- Isolate those with high risk and provide care using droplet and contact precautions.
- When transfer is required, transfer residents with severe illnesses by ambulance and notify if COVID-19 is confirmed or suspected. Notify the receiving hospital. Do not use patient transfer services.

If a Person is Suspected of Having COVID-19

- Follow any isolation protocol in place.
- Place the patient in a designated separate area or space and use droplet and contact precautions.
- Encourage any person with signs and symptoms of an acute respiratory infection to wear a mask and cough in their elbow. Provide tissues, alcohol-based hand sanitizer, and a plastic lined waste receptacle.
- Do not group with other patients unless necessary, and then only group with confirmed COVID-19 patients.
- If you are providing an aerosol-generating medical procedure (AGMP) such as continuous positive airway pressure (CPAP) and/or open suctioning to a resident with suspected or confirmed COVID-19, wear all appropriate personal protective equipment, including an N95 respirator and work in a single room with the door closed.
- If you are providing continuous positive airway pressure (CPAP) and/or open suctioning to a resident with suspect or confirmed COVID-19, wear all appropriate personal protective equipment, including an N95 respirator and work in a single room with the door closed.
- Report any individual who may have contracted COVID-19, as required by your jurisdiction.

Personal Protective Equipment (PPE)

- Train workers on how to work with and care for PPE, and to understand its limitations.
- Put on and remove PPE in the correct order according to safe work procedures to reduce exposure.
- Use all of these PPE measures:
 - Gloves
 - Long-sleeved gown
 - Face protection, such as surgical/procedural mask and eye protection, face shield, or surgical/procedural mask with visor attachment
 - N95 respirator (plus eye protection) should be used when performing aerosol-generating medical procedures
- Reusable respirators, including powered air purifying respirators (PAPRs), must be cleaned and disinfected according to manufacturer's instructions before re-use.
- Clean hands with soap and water or an alcohol-based hand sanitizer, especially during and after removal of PPE, and after leaving the resident care area.
- If there are shortages, PPE should be prioritized for aerosol-generating procedures, care activities where splashes and sprays



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are anticipated, and high-contact resident care activities. Consider if continuous wear of the same PPE is appropriate when working with residents with the same diagnosis.

- Improvised or home-made masks are not PPE. Caution should be used. Discuss options with your supervisor, and/or your health and safety committee or representative, and/or union if present.

Environmental Hygiene

- Make sure contact areas are disinfected, especially all surfaces within 2 metres of a person who has screened positive.
- Use cleaners to break down grease and remove organic material, or when heavily soiled.
- Disinfect commonly touched surfaces and shared items, including residents' rooms:
 - Sanitize utensils and food contact equipment using clean water at 77°C or higher, clean chloride solution of at least 100 parts per million available chlorine at 24°C or higher, or a clean solution of at least 25 parts per million available iodine at 24°C or higher, for at least 45 seconds. Other approved methods are also appropriate.
 - For hard surfaces, use a household or commercial disinfectant cleaning product, or a mixture of 1:9 dilution of bleach (5% sodium hypochlorite) and water. Make sure the solution is in contact with the surface for 1 minute.
 - Disinfect high-touch electronic devices such as keyboards and tablets with alcohol prep wipes, if possible.
- Use disposable cleaning cloths and gloves.
- Regularly wash blankets, face cloths, towels, smocks, and bibs on the warmest possible setting.
- Wash materials belonging to someone with suspected COVID-19 separately. Wear gloves and a gown when handling contaminated laundry, and use a plastic bag for transport.
- Dedicate equipment to the use of a single resident with suspect or confirmed COVID-19, or clean and disinfect between residents.
- Remove personal items when a resident is discharged, transferred, or dies. Items with hard surfaces must be cleaned, and other items can be placed in a bag for the family. While risk of transmission is likely low, store the items for 5 days before handling. Items being donated must be thoroughly cleaned and disinfected.

Provide mental health support to all workers, including access to an employee assistance program (EAP) if available.



For further information on COVID-19, refer to the Public Health Agency of Canada

<https://www.canada.ca/coronavirus>

Note that this guidance is just some of the adjustments organizations can make during a pandemic. Adapt this list by adding your own good practices and policies to meet your organization's specific needs.