

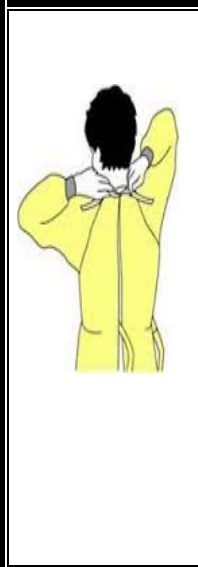









Contact Plus Precautions in Long Term Care

In addition to [Routine Practices](#)

(Note: diarrhea and/or vomiting **AND** gastroenteritis suspected)

	<h3>Accommodation</h3> <ul style="list-style-type: none"> ➤ Private room with bathroom whenever possible. ➤ Contact Plus Precautions sign visible on entry to room or bed space. ➤ Room door may remain open. ➤ Resident to receive meal tray in room and not go to common dining areas. ➤ If room sharing: <ul style="list-style-type: none"> • ensure separation of at least 2 metres between residents and between beds • dedicate a bathroom or commode for each resident • pull privacy curtains between residents • closely monitor roommates for symptoms
	<h3>Hand Hygiene</h3> <ul style="list-style-type: none"> ➤ Perform hand hygiene using soap and water when <ul style="list-style-type: none"> • hands are visibly soiled; • caring for patients with diarrhea and/or vomiting. ➤ If soap and water is not readily available, clean hands with ABHR and wash with soap and water at first opportunity. ➤ Perform hand hygiene: <ul style="list-style-type: none"> • before accessing and putting on a gown and gloves; • after taking off gloves and gown; • before and after removing facial protection, if worn. ➤ Educate residents and visitors on how and when to use hand hygiene products. Assist residents with hand hygiene before eating and after toileting as needed.
	<h3>Personal Protective Equipment: Gown</h3> <ul style="list-style-type: none"> ➤ Put on a new gown before entering the resident room or bed space when: <ul style="list-style-type: none"> • providing direct care (<i>e.g., bathing, washing, turning the resident, changing clothing, continence care, dressing changes, care of open wounds/lesion or toileting</i>) • having any contact with items in resident room (<i>including gathering and handling specimens</i>) • cleaning any areas in resident room ➤ Fasten tie strings at the neck and the waist. ➤ Make sure the sleeves cover your wrists. ➤ Put on gown before putting on gloves; gloves should cover the gown cuffs. ➤ Do not wear gown outside of the resident room/bed space unless transporting contaminated items. ➤ Take off gloves and gown, and perform hand hygiene. ➤ Remove soiled gown as soon as possible before leaving the resident room. ➤ Place used gowns in linen hamper if reusable or garbage if disposable.

	<p>Refer to: VCH How to use Personal Protective Equipment poster for details on careful removal and disposal of gowns.</p>
	<h3>Personal Protective Equipment: Gloves</h3> <ul style="list-style-type: none"> ➤ Wear non-sterile gloves to enter resident room or bed space when: <ul style="list-style-type: none"> • providing direct care (<i>e.g., bathing, washing, turning the resident, changing clothing, continence care, dressing changes, care of open wounds/lesion or toileting</i>) • having any contact with items in resident room (<i>including handling specimens</i>) • cleaning any areas in resident room ➤ Put on gown first and gloves after; gloves should cover gown cuffs. ➤ Gloves are single use. Use only once, then dispose of them immediately after use. ➤ Change gloves between care activities for the same resident (work from clean to dirty sites; change gloves after working on a contaminated body site). ➤ Sterile gloves are for sterile procedures. ➤ Never wear gloves outside a resident room or bed space unless transporting contaminated items. ➤ Remove damaged gloves and perform hand hygiene. ➤ Never wash gloves or use ABHR while wearing gloves. ➤ Take off gloves and discard in waste container, remove gown, and then perform hand hygiene. <p>Refer to: VCH How to use Personal Protective Equipment poster for details on careful removal and disposal of gloves.</p>
 	<h3>Personal Protective Equipment: Mask and Eye Protection</h3> <ul style="list-style-type: none"> ➤ Wear a mask and eye protection according to the Point of Care Risk Assessment when there is a risk of splash or spray as described in Routine Practices, including when: <ul style="list-style-type: none"> • resident has active vomiting; • flushing diarrheal stools. ➤ If resident has active vomiting and gastroenteritis is suspected, add Droplet Precautions sign and follow guidelines for both Contact Plus and Droplet Precautions. <p>Refer to: VCH How to use Personal Protective Equipment poster for details on careful removal and disposal of masks and eye protection.</p>
	<h3>Handling Resident Care Items and Equipment</h3> <ul style="list-style-type: none"> ➤ Use disposable resident equipment when possible. Change bed linens daily while isolated. ➤ Dedicate reusable equipment to a single isolation resident, until Contact Plus Precautions are discontinued (<i>e.g., commode, BP cuff</i>); clean and disinfect equipment between uses.

	<ul style="list-style-type: none"> ➤ If reusable equipment cannot be dedicated to a single isolation resident, clean and disinfect thoroughly between residents. ➤ Contact Plus Precautions rooms should contain a dedicated soiled linen hamper. ➤ Do not share items (e.g., puzzles, books, electronics) that cannot be cleaned/disinfected. ➤ Clean shared tubs and showers immediately after use as per facility procedures. Schedule residents on precautions at the end of the days' bath schedule when possible. Use hospital approved cleaning and disinfection products. ➤ When Contact Plus Precautions are discontinued; discard single-use care equipment, reprocess reusable care items, change bed linens and cubicle curtains. Place soiled resident clothing and any unused linens into the soiled linen bag to be laundered. ➤ Meal trays and beverage dishes do not require special handling.
	<h3>Resident Ambulation Outside Room, Bed Space or Transfer</h3> <ul style="list-style-type: none"> ➤ Notify the receiving area before departure of the need for Contact Plus Precautions. ➤ Residents should leave the room or bed space for essential and diagnostic purposes only. ➤ Before resident leaves their room, educate or assist them to: <ul style="list-style-type: none"> ● perform hand hygiene; ● put on clean clothing or hospital gown/housecoat, or cover with clean blanket; ● ensure incontinence products contain drainage. Patients who are incontinent of stool or vomiting should not leave their room, consult with IPAC as needed. ➤ Transport staff should assess the risk of resident contact using the Point of Care Risk Assessment, and choose clean personal protective equipment (PPE) if hands on care may be necessary during transport, or put on PPE at transport destination if assisting resident on transfer. PPE is to be removed when resident handling is complete. ➤ Hard surface medical chart covers should be wiped and stored to prevent soiling during transport. ➤ On arrival at destination, after turning over resident, transport staff remove gloves and gown (if worn), and perform hand hygiene.
	<h3>Family and Visitors</h3> <ul style="list-style-type: none"> ➤ Encourage family and visitors to perform hand hygiene. ➤ Instruct family and visitors to: <ul style="list-style-type: none"> ● Put on and take off gown and gloves, and perform hand hygiene if participating in the care of the resident.



Environmental Cleaning

- Room surfaces and equipment cleaning/disinfection is required on a twice daily basis or more frequently if directed by Infection Prevention and Control using VCH approved cleaning and disinfection products and procedures.
- After Contact Plus Precautions are discontinued, clean room as per existing environmental services cleaning guidelines and procedures for Contact Plus Precautions.
 - Do not remove Contact Plus Precautions sign until cleaning is complete.
 - Replace privacy curtains.