









Droplet Precautions in Long Term Care

In addition to [Routine Practices](#)

	<h3>Accommodation</h3> <ul style="list-style-type: none"> ➤ Private room with bathroom (recommended whenever possible). ➤ Droplet Precautions sign visible on entry to room or bed space. ➤ Room door may remain open (close door if an aerosol generating medical procedure [AGMP] is in progress and use Airborne and Contact Precautions for AGMP). ➤ If room-sharing: <ul style="list-style-type: none"> • ensure separation of at least 2 metres between residents • dedicate a bathroom or commode for each resident • pull privacy curtains between residents • monitor roommates for symptoms
	<h3>Hand Hygiene</h3> <ul style="list-style-type: none"> ➤ Perform hand hygiene using alcohol-based hand rub (ABHR) or soap and water as described in Routine Practices. ➤ Use plain soap and water when: <ul style="list-style-type: none"> • hands are visibly soiled; • caring for residents with diarrhea and/or vomiting. ➤ Perform hand hygiene: <ul style="list-style-type: none"> • before accessing and putting on a mask, and eye protection; • after taking off eye protection and mask. ➤ 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: Mask and Eye Protection</h3> <ul style="list-style-type: none"> ➤ Wear facial protection to protect your mouth, nose, and eyes. ➤ If you need a mask, you also need eye protection (goggles, face shield, mask with attached visor). ➤ Perform hand hygiene before accessing and putting on and immediately before and after taking off mask and eye protection. ➤ Proper wearing of mask includes: <ul style="list-style-type: none"> • ensuring a snug fit over the nose and under the chin; • molding the metal bar over the nose; • wearing the mask with the moisture-absorbent side closest to the face; • removing mask when leaving resident room or bed space (at least 2 meters away from patient); • changing the mask when it becomes moist; • touching only the elastic straps or ties when removing the mask; • not wearing masks around the neck. ➤ Prescription glasses do not meet Workplace Health regulations for eye protection. ➤ Clean and disinfect reusable eye protection after each use. ➤ Discard single-use masks and eye protection in regular waste container. <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>Personal Protective Equipment: Gown and Gloves</h3> <ul style="list-style-type: none"> ➤ Wear a gown and/or gloves according to the Point of Care Risk Assessment when there is a risk of contact with mucous membranes, non-intact skin, blood or body fluids or when contamination of clothing is anticipated, as described in Routine Practices.
	<h3>Handling Resident Care Items and Equipment</h3> <ul style="list-style-type: none"> ➤ Use disposable resident care equipment when possible. ➤ Dedicate reusable equipment to a single isolation resident until Droplet Precautions are discontinued (e.g., blood pressure cuff, commode). Clean and disinfect between uses. ➤ If reusable equipment cannot be dedicated to a single isolation resident, clean and disinfect thoroughly between residents. ➤ Droplet Precautions rooms should contain a dedicated soiled linen hamper. ➤ Do not share items (e.g., puzzles, books, electronics) that cannot be cleaned/disinfected. ➤ When Droplet Precautions are discontinued; discard single-use care equipment, reprocess reusable care items, change bed linens and cubicle curtains. Launder soiled resident clothing and any unused linens in the resident room. ➤ 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 Droplet 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 a procedure/surgical mask ● put on clean clothing or clean housecoat ➤ Transport staff should assess the risk of resident contact using the Point of care Risk Assessment, and choose clean personal protective equipment (PPE) as necessary during transport, or put on PPE at transport destination if assisting resident on transfer. ➤ Wipe hard surface medical chart covers and store to prevent soiling during transport. ➤ On arrival at destination, after turning over resident, transport staff perform hand hygiene and remove eye protection and mask at least 2 meters away from resident (if worn), and then repeat hand hygiene.
	<h3>Family and Visitors</h3> <ul style="list-style-type: none"> ➤ Encourage family members and visitors to perform hand hygiene. ➤ Instruct family and visitors how to put on and take off mask and eye protection
	<h3>Environmental Cleaning</h3> <ul style="list-style-type: none"> ➤ All high touch surfaces in the resident's room, including bathrooms and commodes, must be cleaned at least daily. ➤ Use VCH approved products and procedures. ➤ When Droplet Precautions are discontinued: <ul style="list-style-type: none"> ● clean room as per existing facility cleaning practices ● clean touch surfaces of resident's ambulation aides ● change privacy curtains. ➤ Refer to Environmental Services cleaning schedules and practices.