

COVID-19 Recovery Public Health and Infection Control Key Principles & Safety Plan For Assisted Living

Updated: 17 July 2020

Please note that VCH is taking the necessary precautions to provide the best possible care in a safe environment for our tenants, visitors, staff and medical staff. Everyone needing care, regardless of COVID-19 status, is welcomed at VCH.

Please follow Public Health guidelines and Infection Prevention & Control (IPAC) principles when preparing your area of work. For more information, please visit <http://www.vch.ca/covid-19> or the [BCCDC Guidelines](#).

This guidance document is only to be followed when there is NO outbreak in the home, in the event of an outbreak follow restrictions in accordance with advice **and direction from the local Medical Health Officer**.

Please note: amendments to this document will occur as COVID-19 recovery phases evolve.

Name of Assisted Living Site:	
Address:	
Date of Creation / Last Review:	

To create your COVID-19 Key Principles & Safety Plan, please follow the instructions below:

- 1) Review each of the element in this document with a JOHSC member/safety representative or if not available with a frontline staff member.
- 2) Within the coloured box mark “Y” if the facility/department/program plan to implement the recommendation and N/A if not applicable. Complete any check boxes or blank fields as required. Provide brief comments to describe the implementation at your site. You may refer to other documents with more detail where applicable.

Examples:

Facility Staff/Medical Staff/Volunteers should be encouraged to clean and disinfect their own work space following the IPAC Guidelines .	Y
Facility Staff/Medical Staff/Volunteers should be encouraged to clean and disinfect their own work space following the IPAC Guidelines .	N/A

3) Based on the [Public Health Order](#), all employers are required to complete and communicate your safety plan to your team. This completed document must be posted in an area that is easily accessible.

- 4) For all sites, please send the completed safety plan to:
 - Your JOHSC for review and inclusion in the JOHSC minutes
 - The Rapid Response Team - rrt@vch.ca

5) For owned and operated PHC sites, please also send a copy to ohs@providencehealth.bc.ca to be stored electronically.

Quick Reference:

1. Tenants

- a. [New Tenants](#)
- b. [Recommendations for Tenants going out](#)
- c. [Daily screening process](#)
- d. [Within the Assisted Living site](#)

2. Family and Friends (Visitors)

- a. [Virtual Visits](#)
- b. [In-person Visits](#)

3. Staff

- a. Staff [providing direct care](#) (e.g., nurses, physicians, visiting professionals, allied health and social care staff, contracted services, contracted therapy services etc.)
- b. Staff [not providing direct care](#) (e.g., administrative staff, managers, contracted services etc.)

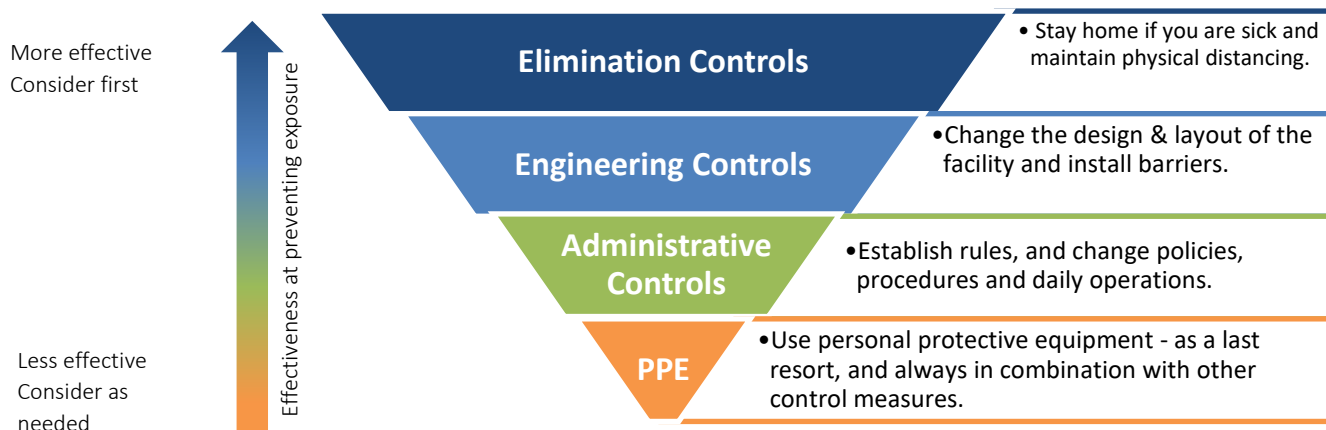
4. Equipment/Supplies/Environment

- a. [Elevators and stairwells](#)
- b. [Cleaning and disinfecting clinical, administrative and public areas](#)
- c. [Layout and Flow](#)

One part of developing your COVID-19 Safety Plan is identifying protocols to keep workers safe. Consider the elements below as you develop the plan for your workplace.

These elements are not a list of requirements; however, they should be considered and implemented to the extent that they address the risks your workplace. You may need to identify and implement additional protocols if the protocols suggested here do not sufficiently address the risk to your workers.

The elements have been divided into leveled measures of precautions each having an increasing level of effectiveness. Please refer to the color legend below:



1. Tenants	
<i>New Tenants</i>	
All new tenants undergo screening prior to moving in to any long term Assisted Living site. - If the person is symptomatic for COVID-19 upon admission , please contact the local Medical Health Officer to determine action. Please refer to the Steps to Identify a COVID-19 Positive Assisted Living Tenant .	
Prior to entering the Assisted Living site, new tenants must perform hand hygiene. - If wearing procedural gloves remove, discard and explain hand hygiene recommendations.	
On moving into the Assisted Living site all tenants are screened for COVID-19 including temperature check and are required to undergo 14 days of isolation .	
During Isolation, the following measures should be implemented <input type="checkbox"/> In addition to meeting care needs a plan for 1:1, in-person, scheduled and meaningful interactions with assisted living workers is developed and implemented. <input type="checkbox"/> In-person community allied and nursing assessment and interventions may be considered on a case by case basis when deemed essential. <input type="checkbox"/> Support virtual visits	
For tenants who have having difficulties being in isolation or are unable to adhere to isolation instructions, please contact the VCH/PHC Response Coordination Group .	
Recommendations for going out of Assisted Living	
A) Going out for medical treatments or procedures at another location (no admission to hospital)	
Prior to leaving and on return home, tenants should perform hand hygiene. - There is no requirement for tenants to wear procedural gloves when going out. If a tenant returns wearing procedural gloves remove and discard prior to hand hygiene.	
On return home, perform in-person screening (including a temperature check) and assist the tenant change into another set of clothes.	
Tenants returning home with no clear exposure to a known COVID-19 positive case <u>and</u> without signs or symptoms of COVID-19 are not required to undergo 14 days of isolation .	
B) Going for medical treatments or procedures requiring admission to hospital	
Prior to leaving and on return home, tenants must perform hand hygiene. - There is no requirement for tenants to wear procedural gloves when going out. If a tenant returns wearing procedural gloves remove and discard prior to hand hygiene.	
On return home, perform in-person screening (including a temperature check) and assist the tenant change into another set of clothes.	

<p>On return home, the tenant is required to undergo 14 days of isolation.</p> <hr/> <p>During Isolation, the following measures should be implemented</p> <ul style="list-style-type: none"> <input type="checkbox"/> In addition to meeting care needs a plan for 1:1, in-person, scheduled and meaningful interactions with assisted living staff is developed and implemented. <input type="checkbox"/> . In-person community nursing and allied health assessment and interventions may be considered on a case by case basis. <input type="checkbox"/> Support virtual visits <p>For tenants who have having difficulties being in isolation or are unable to adhere to isolation instructions, please contact the VCH/PHC Response Coordination Group.</p>	
<p>C) Going Out for leisure or social activities</p>	
<p>Prior to leaving and on return home, tenants must perform hand hygiene.</p> <ul style="list-style-type: none"> - There is no requirement for tenants to wear procedural gloves when going out. If a tenant returns wearing procedural gloves remove and discard prior to hand hygiene. 	
<p>On return home, perform in-person screening (including a temperature check) and assist the tenant change into another set of clothes.</p>	
<p>Tenants with no clear exposure to a known COVID-19 positive case <u>and</u> without signs or symptoms of COVID-19 are not required to undergo 14 days of isolation.</p>	
<p>Provide resident with freshly laundered clothing prior to leaving the care home.</p>	
<p>D) Authorized temporary absence from the Assisted Living site e.g. Staying with family</p>	
<p>Prior to leaving and on return home, tenants must perform hand hygiene.</p> <ul style="list-style-type: none"> - There is no requirement for tenants to wear procedural gloves when going out. If a tenant returns wearing procedural gloves remove and discard prior to hand hygiene. 	
<p>On return home, perform in-person screening (including a temperature check) and assist the tenant change into another set of clothes.</p>	
<p>On return home, the tenant is required to undergo 14 days of isolation.</p> <hr/> <p>During Isolation, the following measures should be implemented</p> <ul style="list-style-type: none"> <input type="checkbox"/> Continue routine practices for dishes and laundry and regularly screen for symptoms. <input type="checkbox"/> In addition to meeting care needs a plan for 1:1, in-person, scheduled and meaningful interactions with assisted living workers is developed and implemented. <input type="checkbox"/> In-person community nursing and allied health assessment and interventions may be considered on a case by case basis. <p>For tenants who have having difficulties being in isolation or are unable to adhere to isolation instructions, please contact the VCH/PHC Response Coordination Group.</p>	
<p><i>Daily screening process</i></p>	
<p>Tenants are screened and assessed for symptoms on an ongoing basis.</p> <ul style="list-style-type: none"> • Refer to the screening process provided by the BCCDC. • In the event of an Outbreak in the Assisted Living site. Screening tools to be provided by the outbreak response team in coordination with Public Health. 	

Follow the protocol to Identify a COVID-19 Positive Assisted Living Tenant .	
<ul style="list-style-type: none"> - Place on droplet and contact precautions and alert staff. <ul style="list-style-type: none"> • <u>If positive</u>, follow the direction of your local Medical Health Officer. • <u>If negative</u>, tenant should be evaluated by their physician or nurse practitioner to determine alternative diagnosis and whether further work-up for COVID-19 is required despite negative test. 	
Only tenants positive for COVID-19 or on isolation are to wear a surgical/procedure mask when leaving their suite.	
<i>Within the Assisted Living site</i>	
Engage family and tenants in education on physical distancing, infection prevention and control, hand hygiene, respiratory etiquette and maintaining social connection with tenants in the Assisted Living site safely.	
When accessing common spaces (e.g., dining room, shared activity areas, media lounges, outdoor smoking areas), tenants must perform hand hygiene and try to maintain 2 metres of physical distance or ensure appropriate environmental controls are in place.	
Respiratory etiquette must be followed, including cover cough and sneeze and avoid touching the face, mouth, nose and eyes. <ul style="list-style-type: none"> - For tenants who are having difficulties being in isolation or are unable to adhere to isolation instructions, please contact the VCH/PHC Response Coordination Group for support and advice. 	

2. Family and Friends (Visitors)	
Please note: Any Public Health Orders that reference Assisted Living currently in place supersedes all recommendations below.	
<i>Virtual visits</i>	
Family/friends should be provided with alternatives to in-person visits, where possible.	
<input type="checkbox"/> Action: Assisted Living site to define a process and criteria for virtual visits (priority of tenants/conditions, timing, and storage etc.)	
If needed, information on “Guidelines for Cleaning and Disinfection of Tablets” can be accessed here .	
<i>In-person visits</i>	
To reduce risks of COVID-19 for patients, clients, family, tenants and staff, virtual visits should be prioritized over in-person visits. Exceptions can be made for compassionate reasons. Please refer to the PHO Letter for Assisted Living Facilities . <i>Should the restrictions be lifted, the remainder of this section applies.</i>	
Public access to Assisted Living sites must be controlled and staffed to ensure risk mitigation measures can be safely adhered to. <ul style="list-style-type: none"> - Action: Assisted Living sites to maintain a list of all visitors (7 days a week, 24 hours a day). - Action: Provide all visitors with an information handout about COVID-19. 	
Risk mitigation measures for all visitors: <ol style="list-style-type: none"> 1. All visitors are encouraged to self-assess prior to visiting the Assisted Living site. If symptomatic visitors should not visit in person and follow public health guidance. 	

<p>2. On arrival all visitors are subject to symptom screening, if showing symptoms compatible with COVID-19 or a recent history of un-protected exposure to COVID-19 (within last 14 days) are advised to self-isolate and seek medical advice regarding testing. Offer virtual methods of visiting.</p> <p>3. All visitors will be provided with a surgical/procedure mask that is to be worn for the duration of the visit.</p> <p>4. Visits can occur in the tenant's room or outdoors in patio or garden spaces.</p>	
<p>On arrival, visitors must perform hand hygiene. Procedural gloves must be removed and discarded prior to performing hand hygiene.</p>	
<p>Throughout the visit, respiratory etiquette must be followed, including cover cough and sneeze and avoid touching the face, mouth, nose, eyes and masks.</p>	
<p>For tenants with active or suspected COVID-19 receiving end of life care:</p> <ul style="list-style-type: none"> - Visitors must don appropriate PPE supplied by the Assisted Living site (contingent on accessibility and availability). - Assisted Living site to consult with the local Medical Health Officer prior to visit. - Frontline staff will provide education on how to safely put on and remove PPE. 	

3. Staff

Staff providing direct care (e.g., assisted living workers, nurses, physicians, visiting professionals, allied health care staff, contracted services, contracted allied health care staff etc.)

Please note: Any Public Health Orders that reference Assisted Living currently in place supersedes all recommendations below.

<p>Staff should not come to work with COVID-19-like symptoms.</p> <ul style="list-style-type: none"> - If staff/medical staff develop symptoms consistent with COVID-19 while at work, they should don a surgical/procedure mask, complete any essential tasks, notify manager if appropriate, then leave work. - Staff/medical staff are to also call the Provincial Workplace Call Centre (1-866-922-9464). - Testing is strongly recommended, and timing for return to work will be determined by Public Health. 	
<p>Team meetings and in-person interactions should be replaced with virtual options, as much as possible. If not possible, maintain physical distancing.</p>	
<p>Staff are encourage to be mindful and plan interactions with other staff members and tenants throughout day.</p>	
<p>At the beginning of their shift, all staff are to undergo a daily screening questionnaire and temperature check.</p> <ul style="list-style-type: none"> - If staff have been away from work for more than 14 days, an enhanced screening questionnaire must be completed 72 hours prior to their first shift. The completed questionnaire should be submitted to their Director of Care or Manager. <input type="checkbox"/> Action: Assisted Living site to record staff/medical staff temperatures. <input type="checkbox"/> Action: Assisted Living site to maintain a list of all staff/medical staff (7 days a week, 24 hours a day). - Management must ensure staff who have a long period of absence are provided an update of current recommendations review the IPAC website. 	

<p>All staff are to undergo a second temperature check during their shift.</p> <ul style="list-style-type: none"> - While there is not prescribed time for when the temperature check is to occur, we suggest half way through or at the end of the shift. - Action: Assisted Living site to record staff/medical staff temperatures. 	
<p>Recommend continuing controlled access with specific staffed entry points for public access.</p> <ul style="list-style-type: none"> - Action: Assisted Living site to maintain a list of all visitors (7 days a week, 24 hours a day). - Action: Provide all visitors with an information handout about COVID-19. 	
<p>Staff must practice effective hand hygiene before, during and after each episode or provision of care – cleaning their hands with soap and water or an alcohol-based hand sanitizer.</p>	
<p>Staff must follow respiratory etiquette, including cover cough and sneeze and avoid touching the face, mouth, nose, eyes and mask. Perform hand hygiene if mask is touched/removed/adjusted.</p>	
<p>Staff should avoid unnecessary travel between rooms/areas for assessment and/or treatment. Assigned rooms and areas to be implemented to reduce travel.</p>	
<p>Staff must clean and disinfect their own work space following the IPAC Guidelines. For shared work spaces, staff should clean and disinfect space before and after use.</p>	
<p>Staff should limit the exchange of papers. If documents must be exchanged, leave them on a clean surface.</p>	
<p>No sharing of pens and other office equipment.</p>	
<p>No handshakes and any other physical contact with others. Where feasible, maintain 2 meters of distance between others.</p>	
<p>No sharing of food</p>	
<p>Staff should come to work in clean clothing.</p>	
<p>Staff not providing direct care (e.g., administrative staff, contracted services, and other suppliers)</p>	
<p>Please note: Any Public Health Orders that reference Assisted Living currently in place supersedes all recommendations below.</p>	
<p>Staff should not come to work with COVID-19-like symptoms.</p> <ul style="list-style-type: none"> - If staff/medical staff develop symptoms consistent with COVID-19 while at work, they should don a surgical/procedure mask, complete any essential tasks, notify manager if appropriate, then leave work. - Staff/medical staff are to also call the Provincial Workplace Call Centre (1-866-922-9464). - Testing is strongly recommended, and timing for return to work will be determined by Public Health. 	
<p>Team meetings and in-person interactions should be replaced with virtual options, as much as possible. If not possible, maintain physical distancing.</p>	
<p>Staff must perform frequent hand hygiene.</p>	
<p>Staff must follow respiratory etiquette, including cover cough and sneeze and avoid touching the face, mouth, nose, and eyes. Perform hand hygiene if mask is touched/removed/adjusted.</p>	
<p>Staff must clean and disinfect their own work space following the IPAC Guidelines.</p>	
<p>Staff should limit the exchange of papers. If documents must be exchanged, leave them on a clean surface.</p>	
<p>No sharing pens and other office equipment.</p>	
<p>No handshakes and any other physical contact with others. Where feasible, maintain 2 meters of distance between others.</p>	
<p>No sharing food</p>	

For the most up-to-date PPE recommendations, refer to the IPAC document for [Community Settings](#) (includes LTC).

- Other considerations: A surgical/procedure mask is not required when preparing meals in the kitchen. A surgical/procedure mask is required when serving meals in tenant care area.

4. Equipment/Supplies/Environment

Only Certified Guide or Service animals to be brought into Assisted Living sites when required.

HVAC systems should be examined to reduce recirculation of air in both clinical and non-clinical areas.

Elevators and stairwells

Encourage staff who are able to use stairwells while maintaining physical distance reduce elevator crowding.

Physical distancing is encouraged in elevators.

- Elevator occupancy number will vary according to size of the elevator and physical distancing requirements. Use of masks may allow for increased occupancy.
 - Recommendations to consider:
 - Small Elevator – 2 people maximum
 - Large Elevator – 4- 6 people maximum
 - Post signs outside of elevators with recommended occupancy
 - Place signage e.g. footprints on floor of elevator to guide distancing.

Cleaning and disinfecting clinical, administrative and public areas

De-clutter and minimize equipment and supplies so effective environmental cleaning can be achieved.

Cleaning clinical areas.

- The units within the Assisted Living site require daily enhanced cleaning. Cleaning and disinfecting practices should increase if an outbreak is declared.
- Dedicate equipment and supplies to a single client/tenant, where possible; and clean and disinfect equipment upon removal from room.
- When possible, single use equipment and supplies are recommended.
- Common areas and high-touch surface areas should be cleaned and disinfected a minimum of twice a day (6-8 hours following the daily enhanced cleaning), with a focus on high touch points such as seating areas, doors, handrails, light switches, door handles, toilets, taps, handrails, phones, keyboards, and counter tops.
- For cleaning, disinfecting and frequency of equipment instructions, refer to the [Infection Prevention and Control Master Equipment Cleaning and Disinfection Manual](#) and/or refer to the facilities manual for specific equipment/supplies cleaning recommendations.

Cleaning other clinical areas

- Other clinical areas such as lunch rooms, lounges, and offices on the unit should be cleaned and disinfected on a daily basis, and when needed.

Cleaning Administrative Offices

- Continue routine department practices for cleaning and disinfection.

Cleaning Public Areas

- Public areas, such as hallways and stairways (including hand railings), should be cleaned and disinfected on a daily basis, and when needed.

All staff are recommended to clean and disinfect their own or shared work space following the [IPAC Guidelines](#).

Layout and flow	
Recommend using automatic door plates, where available.	
Hand hygiene stations should be available and easily accessible at doorway entrances and exits including stairwells. <input type="checkbox"/> Action: Ensure appropriate hand hygiene are in place and hand hygiene products are maintained	
Staff shared spaces, common areas, shared activity areas, media lounges and dining room seats should be spaced to maintain a physical distancing. - Shared activities in the same space and activities with shared objects should be avoided. - If staff lounge not large enough to accommodate physical separation, consider staggered breaks or alternative break areas. - Recommendations to consider: <ul style="list-style-type: none"> o All seating should be a minimum of one metre apart (least ideal) to two or more metres apart (most ideal). If this is not possible, tape off enough seating to maintain appropriate distancing. o Please reference VCH/PHC's Guidance on Physical Distancing in LTC and Assisted Living Facilities for more details. 	
Products (e.g., creams, lotions) are dedicated to a single user, when possible.	
Reception area, common areas and hallways should have visual cues to assist in physical distancing (two metres) and if possible, one way directional flow.	
Wherever possible, relocation of tenants should be minimized.	

5. Other elements implemented (as applicable)