

Infection Prevention and Control COVID-19 Recovery Checklist For Community-based Home Visits and Outreach

Updated: 3 June 2020

Site:	
Date:	

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 protocols 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.

To be completed by: Site Leadership Team (Manager, Clinical Coordinator and Medical Lead/Coordinator).

Instructions

1. Assemble an assessment team that includes department leadership and worker representation from the Joint Occupational Health and Safety Committee (JOHSC). For sites without a JOHSC, the applicable safety representative should be part of the assessment team.
2. Review COVID-19 [Key Principles & Safety Plan for Community-Based Home Visits and Outreach](#) and update to reflect the Safety Plan for your area.
3. Review workflows and COVID-19 appropriate [screening procedures](#) to ensure team members are aware of their roles and responsibilities.
4. Review checklist and check elements that have been implemented. Provide brief comments to describe the implementation at your site. (You may refer to other documents with more detail where applicable.)
 - Mandatory IPAC elements are marked with a red star (*)
5. If there are any concerns, identify further actions.
 - If need extra support, consult with [IPAC Team](#) for further guidance.
6. Send the completed checklist to your JOHSC for review and inclusion in the JOHSC minutes.
7. A copy of the complete checklist must be sent to EmployeeSafety@vch.ca to be stored electronically.

Element		Status		Comments
		Yes	N/A	
1) Policies and Procedures				
1.1	The team's capacity to accommodate appropriate patient flow is assessed on a regular basis.			
1.2 (*)	1.2.2 Staff are aware of routine cleaning and disinfection procedures to be used in home and outreach environments.			
	1.2.3 Staff have access to VCH approved cleaning and disinfection wipes that can be easily carried to home environments.			
	1.2.4 Re-usable equipment is cleaned and disinfected after use with each client.			
	1.2.5 Management is aware of policies and procedures required to clean and disinfect items used in the home environment.			
	1.2.6 Site specific workflows are established for staff to follow with regard to cleaning and disinfection of equipment and surfaces in the home environment.			
	1.3	1.3.1 The following recommendations for medical and non-medical staff are in place, including:		
1.3.2 (*) Not coming to work sick.				
1.3.3 Staggered start times.				
1.3.4 Staggered break times.				
1.3.5 (*) No sharing of food.				
1.4 (*)	1.4.1 There is a process in place for staff to conduct virtual visits or telephone consultations.			
	1.4.2 There is a process in place for staff to screen patients prior to home visits. Please refer to the Screening SOP and the following script for guidance.			
	1.4.3 There is a process in place for staff to screen patients at the start of the home visit. Please refer to the Screening SOP for guidance.			
1.5 (*)	There is a process in place for booking high-risk patients at the end of the day, if possible (e.g. non-COVID, symptomatic for COVID but undiagnosed, COVID-19+).			
1.6 (*)	Personal protective equipment (PPE) is available for staff as outlined in the PPE Recommendations for Community Care Settings .			
1.7 (*)	Alcohol-based hand rub (ABHR) is available in portable sizes that can be easily carried by staff to home or outreach visits			
1.8	Staff bring minimal equipment with them to the home or outreach visit.			
1.9 (*)	Supply bags are made of materials that are easily cleaned and disinfected.			
2) Education				
2.1	Point-of-care Risk Assessment has been reviewed with staff providing direct patient care.			
2.2	Medical and non-medical staff have received education on appropriate use of personal protective equipment, based on guidelines .			

2.3	Medical and non-medical staff training and education has been documented (e.g. educational logs or sign in sheets).			
2.4 (*)	Medical and non-medical staff are aware of appropriate donning and doffing procedures.			
2.5	Medical and non-medical staff have been provided information relating to COVID-19 and the measures in place to ensure safety			
3) Routine Practices				
3.1 (*)	PPE supplies are readily available and accessible in appropriate sizes.			
3.2	Single use, disposable equipment used if possible.			
3.3	During the pre-visit screening and start of the home or outreach visit, staff should remind and ask family/visitor/support present in home, to maintain two meters distance from patient and staff during care. Note: Family that is a primary care giver may need to be involved with client care.			
4) Environment				
4.1	Staff provide client and family education on cleaning and disinfection of common surfaces throughout the home.			
4.2	Products (e.g. creams, lotions) are dedicated to the client.			
4.3 (*)	Any medical/clinic equipment used (e.g. blood pressure cuffs, clipboard) should be cleaned and disinfected using the routine practices for cleaning and disinfecting between patients.			
5) Other				
Other elements not otherwise mentioned				

Additional comments:

Decision for recovery: