

# COVID-19 Recovery: Public Health and Infection Control Key Principles & Safety Plan For Community-Based Home Visits and Outreach

Updated: 3 June 2020

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

Please follow Public Health guidelines and Infection Prevention and Control principles when planning your recovery efforts for Community-based Home Visits and Outreach. For more information, please visit <http://www.vch.ca/covid-19> or the IPAC website at <http://ipac.vch.ca/Pages/Emerging-Issues.aspx>.

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

<b>Name of Site:</b>	
<b>Address:</b>	
<b>Name of Program:</b>	
<b>Date of Creation / Last Review:</b>	

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

- Review each of the element in this document with a JOHSC member/safety representative or if not available with a frontline staff member.
- 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 <a href="#">IPAC Guidelines</a> .	Y
Facility Staff/Medical Staff/Volunteers should be encouraged to clean and disinfect their own work space following the <a href="#">IPAC Guidelines</a> .	N/A

- Communicate your safety plan to your team and post in an area that is easily accessible. **The safety plan must be posted as per the PHO order (i.e. on the OHS Board).**
- A copy of the completed Key Principles & Safety Plan must be sent to [EmployeeSafety@vch.ca](mailto:EmployeeSafety@vch.ca) to retain as a record.

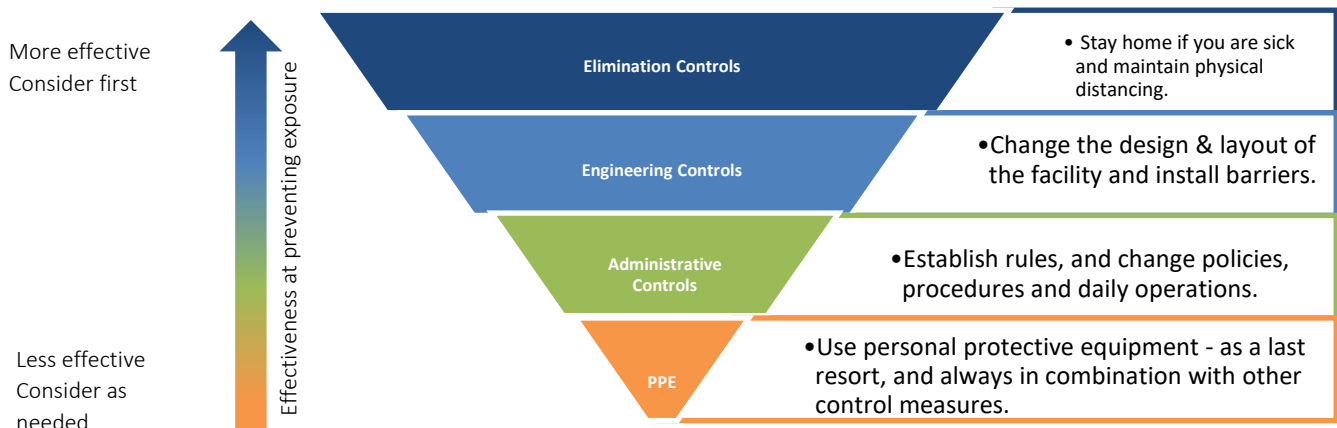
**Quick Reference:**

1. Patients/Clients
  - a. [Virtual visits](#)
  - b. [In person visits](#)
2. [Family/Visitors/Support](#)
3. Personnel/Staff/Medical Staff
  - a. Staff/Medical Staff [providing direct patient care](#) (e.g., nurses, physicians, allied, contracted services etc.)
  - b. Staff/Medical Staff [not providing direct patient care](#) (e.g., reception, nursing station, contracted services etc.)
  - c. [Staff/Medical staff not providing direct patient care \(e.g. reception, nursing station, contracted services etc.\)](#)
4. Equipment/Supplies/Environment
  - a. [Cleaning and disinfecting equipment used during home or outreach visit](#)
  - b. [Cleaning electronic devices](#)
  - 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. Patient/Clients	
<b>Virtual visits</b>	
Virtual visits and telephone-consultation will be offered on a case by case basis determined by the Most Responsible Clinician/Staff.	
<b>Action:</b> Define process and criteria for virtual visits (priority of patients/conditions, timing, storage and security, IT support, etc.)	
<b>In person visits</b>	
Where virtual visits are not appropriate, home visits and outreach visits can be conducted with appropriate <a href="#">screening procedures</a> and use of Personal protective equipment (PPE) to protect clinician/staff. For the most up-to-date PPE recommendations, refer to the IPAC document for the <a href="#">Community Setting</a> .	
<b>Preparing for home or outreach visit...</b>	
Clinician/Staff should contact patient/client by phone for screening prior to home or outreach visit.	
<ul style="list-style-type: none"> <li>- If the call goes to voicemail, the clinician/staff will leave a message advising the client to callback prior to their next planned visit.</li> <li>- If the patient/client does not call back, the clinician/staff:               <ul style="list-style-type: none"> <li>• Will reach out to internal or external team members, such as client’s family physician, as needed and determine patient/client’s health status and urgency for visit.</li> <li>• May defer the home/outreach/on site visit until they are able to reach the patient/client</li> <li>• May complete screen at time of visit.</li> </ul> </li> <li>- If the patient/client does not have a phone, screening can be done at time of visit.</li> <li>- Please refer to the Community <a href="#">Screening Standard Operating Procedure (SOP)</a> and the following <a href="#">script</a> for guidance.</li> </ul>	
Patients/clients should be asked to call the community health center to notify staff of any changes in their health prior to home or outreach visit.	
<b>Action:</b> Ensure that patients have clinic information to notify (e.g. contact information, clinician name, and extension number)	
Patients/clients should be reminded that they will undergo screening assessment at different points throughout the home or outreach visit (e.g.: Phone pre-booking, start of the home visit)	
<b>Preparing for home or outreach visit...</b>	
Clinician/Staff should contact patient/client by phone for screening prior to home or outreach visit.	
<b>During home or outreach visit...</b>	
Prior to commencing visit, perform screening at a two meter distance using appropriate PPE. For the most up-to-date PPE recommendations, refer to the IPAC document for the <a href="#">Community Setting</a> .	
<ul style="list-style-type: none"> <li>- If client cannot effectively be screened (e.g. dementia), staff should use a <a href="#">Point-of-Care Risk Assessment</a> to determine their level of risk and PPE required to provide safe care.</li> </ul>	
COVID-19-like symptomatic patients/clients require droplet and contact precautions.	
<ul style="list-style-type: none"> <li>- Please refer to the Community <a href="#">Screening Standard Operating Procedure (SOP)</a> for guidance.</li> <li>- Note: Screening questions should be directed at the client and anyone else present in the home environment.</li> <li>- Throughout the visit, other individuals in the home environment are asked to maintain a two meters distance.</li> </ul>	

Patients/clients should perform hand hygiene at the start of the visit. <u>How this is achieved:</u>	
Throughout the visit, respiratory etiquette should be followed, such as coughing and sneezing into the elbow, avoid touching the face, mouth, nose and eyes.	
<b>After home or outreach visit...</b>	
Staff should find a safe place to doff their PPE. - Doffed PPE is discarded in the patient/client's home waste streams.	
Staff should clean and disinfect reusable equipment that was used during the visit.	
Staff perform hand hygiene upon leaving the home or at the close of the outreach visit.	

<b>2. Family/Visitors/Support</b>	
Virtual visits and telephone-consultation will be offered on a case by case basis determined by the Most Responsible Clinician/Staff. <b>Action:</b> Define process and criteria for virtual visits (priority of patients/conditions, timing, storage and security, IT support, etc.)	
<b>In person visits</b>	
Where virtual visits are not appropriate, home visits and outreach visits can be conducted with appropriate <a href="#">screening procedures</a> and use of Personal protective equipment (PPE) to protect clinician/staff. For the most up-to-date PPE recommendations, refer to the IPAC document for the <a href="#">Community Setting</a> .	

<b>3. Personnel/Staff/Medical Staff</b>	
<b>Staff/Medical Staff providing direct patient care (e.g. nurses, physicians, allied, contracted services etc.)</b>	
Personnel should be minimized where feasible to reduce the number of interactions in the workplace	
Staff/Medical staff should not come to work with COVID-19-like symptoms. - 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.	
Staff/Medical staff must practice effective hand hygiene before, during and after each patient - washing their hands with soap and water or an alcohol-based hand sanitizer. <u>How this is achieved:</u>	
Respiratory etiquette should be followed, such as coughing and sneezing into the elbow, avoid touching the face, mouth, nose, eyes and if applicable, mask.	

Staff/Medical staff should avoid handshakes and any other physical contact with others in the workplace. Where feasible, maintain 2 meters of distance between others.	
No sharing food and snacks.	
Staff/Medical Staff should follow the most up-to-date PPE recommendations for the <a href="#">Community Setting</a> .	
Staff/Medical Staff should follow the most up-to-date <a href="#">Community dress code</a> .	
<b>Staff/Medical staff not providing direct patient care (e.g. reception)</b>	
Personnel should be minimized where feasible to reduce the number of interactions in the workplace	
Staff/Medical staff should not come to work with COVID-19-like symptoms. <ul style="list-style-type: none"> <li>- 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.</li> <li>- Staff/medical staff are to also call the Provincial Workplace Call Centre (1-866-922-9464).</li> <li>- Testing is strongly recommended, and timing for return to work will be determined by Public Health.</li> </ul>	
Staff/Medical staff must perform frequent hand hygiene. <u>How this is achieved:</u>	
Respiratory etiquette should be followed, such as coughing and sneezing into the elbow, avoid touching the face, mouth, nose and eyes.	
Staff/Medical staff should be encouraged to clean and disinfect their own work space following the <a href="#">IPAC Guidelines</a> .	
Staff/Medical staff should avoid handshakes and any other physical contact with others in the workplace. Where feasible, maintain 2 meters of distance between others.	
No sharing food and snacks.	
For the most up-to-date PPE recommendations for the <a href="#">Community Setting</a> .	

#### 4. Equipment/Supplies/Environment

##### ***Cleaning and disinfecting equipment used during home or outreach visit***

During the examination, any medical/clinic equipment used (e.g. blood pressure cuffs, clipboard) should be cleaned and disinfected by the direct provider, using the routine department practices for cleaning and disinfecting.	
When possible, single use equipment and supplies are recommended. <u>How this is achieved:</u>	
Work surface areas should be cleaned and disinfected prior to use. <ul style="list-style-type: none"> <li>- For cleaning instructions, disinfecting and frequency of equipment, refer to the <a href="#">Infection Prevention and Control Master Equipment Cleaning and Disinfection Manual</a>.</li> </ul>	

<b>Cleaning Electronic Devices</b>	
For cleaning and disinfecting electronic devices, follow the <a href="#">VCH Guidelines for Cleaning and Disinfecting Devices</a> .	
<b>Layout and flow</b>	
For home and outreach visits it is recommended to follow a clean to dirty pathway. - Note: If possible, staff should place the appointment at the end of the day if possible for patient/clients with COVID-19-like symptoms.	
Products (e.g. creams, lotions) are dedicated to a single user when possible. <u>How this is achieved:</u>	

<b>5. Other elements implemented (as applicable)</b>