

Droplet and Contact Precautions in Long Term Care

In addition to **Routine Practices**



Accommodation

- Private room with bathroom (recommended whenever possible).
- Droplet and Contact 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:
 - 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



Hand Hygiene

- Perform <u>hand hygiene</u> using alcohol-based hand rub (ABHR) or soap and water as described in <u>Routine Practices</u>.
- Use plain soap and water when:
 - hands are visibly soiled;
 - caring for patients with diarrhea and/or vomiting.
- Perform hand hygiene:
 - before accessing and putting on a gown, gloves, mask, and eye protection;
 - after taking off gloves and gown, and again after removing 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.

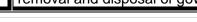


Personal Protective Equipment: Gown

- Wear a new gown to enter resident room or bed space when:
 - providing direct care (e.g., providing hands-on care, such as bathing, washing, turning the resident, changing clothing, continence care, dressing changes, care of wounds or toileting)
 - having any contact with items in resident room (including gathering and handling specimens)
 - cleaning any areas in the 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 gowns 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 resident room.
- Place used gowns in linen hamper if reusable or garbage if disposable.

Refer to: VCH How to use Personal Protective Equipment poster for details on careful removal and disposal of gowns. \











Personal Protective Equipment: Mask and Eye Protection

- If you need a mask, you also need eye protection (goggles, face shield, mask with attached visor).
- Perform hand hygiene before putting on and immediately after taking off mask and eye protection.
- Proper wearing of mask includes:
 - 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 patient 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.

Refer to: VCH <u>How to use Personal Protective Equipment</u> poster for details on careful removal and disposal of masks and eye protection.



Personal Protective Equipment: Gloves

- Wear new non-sterile gloves to enter resident room or bed space when:
 - providing direct care (e.g., bathing, washing, turning the resident, changing clothing, continence care, dressing changes, care of wounds or toileting)
 - having any contact with items in resident room (including gathering and handling specimens)
 - cleaning any areas in the 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, remove gown, and then perform hand hygiene.

Refer to: VCH How to use Personal Protective Equipment poster for details on careful removal and disposal of gloves.





N95 Respirators and Eye Protection

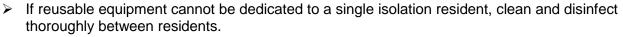
- All staff entering the room of a resident with confirmed or suspected Influenza, while aerosol generating medical procedures are being performed, must wear an N95 respirator.
 - Staff must be properly fit-tested for N95 respirators in compliance with CSA Standard Z94.4-02.
 - A seal-check must be done each time an N95 respirator is worn to ensure there is an adequate seal between the mask and the users face.
- > Perform hand hygiene before putting on and immediately after taking off N95 respirator.
- Proper wearing of an N95 respirator includes:
 - putting it on before entering the resident's room
 - molding the metal bar over the nose
 - ensuring an airtight seal on the face, over top of the nose and under the chin
 - leaving the room and changing the respirator when it becomes moist
 - removing the respirator after leaving the resident's room touching only the elastics when removing
 - not wearing respirator around the neck.

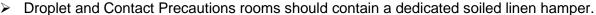
Refer to: VCH <u>How to use Personal Protective Equipment</u> poster for details on careful removal and disposal of gloves.



Handling Resident Care Items and Equipment

- > Use disposable resident care equipment when possible.
- Dedicate reusable equipment to a single isolation resident, until Droplet and Contact Precautions are discontinued (e.g., blood pressure cuff, commode). Clean and disinfect equipment between uses.





- ▶ Do not share items (e.g., puzzles, books, electronics) that cannot be cleaned & disinfected.
- When Droplet and Contact 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.



Resident Ambulation Outside Room, Bed Space or Transfer

- Notify the receiving area before departure of the need for Droplet and Contact 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:
 - perform hand hygiene
 - put on a procedure/surgical mask
 - put on clean clothing or clean housecoast
- 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.
- Medical chart covers should be wiped, and stored 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.







Family and Visitors

- Encourage family members and visitors to perform hand hygiene.
- Instruct family and visitors how to put on and take off mask and eye protection



Environmental Cleaning

- All high touch surfaces in resident rooms, including bathrooms and commodes, must be cleaned at least daily.
- Use VCH approved products and procedures.
- When Droplet and Contact Precautions are discontinued:
 - clean room as per existing facility cleaning practices
 - clean touch surfaces of resident's ambulation aides
 - change privacy curtains
- Refer to facility Environmental Services cleaning schedules and practices.
- Notify facility Environmental Services when precautions are discontinued to request a terminal cleaning of room.