(Updates according to CMOH Order 29-2020 – July 16/20)

1.0 Personal Safety Practices

- All staff working in a residential home must continue to mask if physical distancing (2 meters) cannot be maintained.
- Staff must perform hand hygiene before putting on the mask and before and after removing the mask.
- Staff are encouraged to bring a change of clothes to change into at the start of their shift and change out of when they end their shift prior to going home or to their next destination.

2.0 Health Assessment and Temperature Monitoring

- Health assessment and temperature monitor is to continue at all sites utilizing the appropriate forms:
 - Staff/Visitor/Student/Vendors

Appendix A Appendix B

- o Person Served
- If "Yes" is indicated on any assessment form that individual is not permitted to enter the site/facility. If it is a staff or person served, that answers "yes" on the assessment, Outbreak Precautions will be followed.
 If it is a designated support person who answers "yes" they will be asked to rebook their visit for another time.

2.1 Person Served

- Staff must take the individual's temperature at least once daily and record on their Health Assessment Questionnaire and file it.
- Staff must continually observe and record any unusual behaviour and/or additional symptomology indicative of COVID-19 such as indicated on the attached Health Assessment Questionnaire.
- If a person served has a temperature of over 37.8 degrees or answers yes to any of the Health Assessment Questions, they will be required to self-isolate in their room if possible and wear a mask if they are able to. If the person served lives alone, they do not need to isolate to their room.
- Immediately implement procedures for "<u>Site Under Investigation or Confirmed COVID-19 Outbreak</u>" as per Chart. Appendix C
- AHS Coordinated COVID-19 Response is available to all congregate settings. They must be contacted as soon as there is a person showing symptoms of COVID-19 for additional guidance and decision-making support. Also the supervisor and Manager of the home need to be contacted. The Supervisor/Manager will then fill out the "Client Illness Tracker" on Sharevision.

2.2 Staff Members

- If YES is identified on any of the screening questions or if the temperature of the staff member is higher than 38.0, that individual will not be permitted to enter the facility. If the staff member has any symptoms of COVID-19, they will be asked to consent to testing. Testing can be facilitated by completing the AHS online assessment tool for staff see link below.
- <u>https://myhealth.alberta.ca/Journey/COVID-19/Pages/HWAssessTool.aspx#</u>
- The supervisor will ask for the staff member's contact number and will call 1-844-343-0971 and inform AHS. Following the call to AHS, the Supervisor will notify the Manager and Catholic Social Services' Disability Management.
- If staff member utilizes public transit, CSS will send staff home via taxi with a mask.

3.0 Cleaning Procedures

- All common areas must be cleaned and disinfected a minimum of 3 times a day with approved cleaning products (must contain an 8 digit Drug Identification Number-DIN and virucidal claim).
- Staff must be aware of high touch areas such as light switches, sinks, office computer, telephones, microwaves, countertops, doorknobs television remotes, etc.
- In addition, bedroom cleaning and disinfection must be performed at least 3 times a day on high touch areas at least once per day on all low touch surfaces (e.g. shelves, bedside chairs or benches, windowsills, headboard, over-bed light fixtures, message or white boards, outside of sharps containers).
- After every meal, the chairs and tables must be fully cleaned and disinfected, including the arms and legs of the chairs.
- Clean and disinfect: (Staff must ensure that hands are cleaned before touching the above mentioned equipment).
 - Health care equipment (wheelchairs, walkers, lifts) according with manufacturer's instructions.
 - Any shared person served care equipment (commodes, blood pressure cuffs, thermometers) prior to use by a different person served.
 - All equipment (computer, medication scanner, log books, computer screens, telephones, touch screens, chair arms) at least daily and when visibly soiled.

4.0 Meal Preparation and Eating Meals

- Staff and persons served must use personalized cups, mugs, plates and cutlery. Where this is not possible, disposable plates, cups and cutlery must be used.
- Eating must be done ensuring physical distancing is being maintained so this could mean in small groups at the table, in a living room) or once the food is served the person can eat in their room. Meal times can also be staggered to allow more people to eat at the table and the table and chairs must be disinfected after each person has eaten and left the table.
- It is recommended that one staff person prepares the food and serves it to the individual. If condiments are requested, the staff who prepares the food must also provide condiments to individual.
- No tablecloths are to be used on the tables.
- In residences where the person requires support with feeding and where physical distancing is not possible, staff must wash their hands before and after feeding the individual.

5.0 Outings & Visits

• According to **CMOH 23-2020**, persons served who are not required to isolate are <u>still</u> encouraged but not required to stay on the facility property, except in case of necessity (eg. Medical appointments, groceries, pharmacy, spending time outdoors, employment, etc.) while observing physical distancing requirements.

Refer to the appropriate Safe Visiting Practice document for your service area.

CSS Safe Visit Practice Edmonton/North Central PDD Homes

CSS Safe Visit Practice – Non-Licensed Homes

- It is recommended that persons served do not participate in unnecessary outings, however, they may choose to do so as activities open up. Should the persons served choose to leave for reasons other than necessity, the staff must advise them of their responsibility to:
 - o Maintain physical distancing;
 - Wear a mask at all times and ask anyone that you might be with to also wear a mask;
 - Ensure safe transportation.
 - Maintain good hand hygiene; and

- Inform the person served that they are subject to health assessment screening upon reentering.
- As per **the current order from the Minister of Health,** persons' served, who are <u>not</u> required to isolate may spend time outdoors with visitors while observing physical/social distancing requirements.
- Designated support people must pre-arrange visits with the supervisor in order to accommodate scheduling (see above). Outdoor visits may also be arranged.

6.0 Outbreak Requirements

- Staff or people served with symptoms listed on the screening forms or a temperature above the
 recommended level, must be isolated and asked to consent for COVID-19 testing which is available to all
 congregate settings. AHS must be contacted as soon as there is a person showing symptoms, for
 additional guidance and decision-making support at a site that does not already have an outbreak of
 COVID-19.
- If there is a new confirmed outbreak of COVID-19, all persons served and staff in the affected site should be asked to consent to testing for COVID-19. Testing asymptomatic individuals within the licenses group homes is at the discretion of the Zone MOH/designate.
- In a confirmed COVID-19 outbreak, staff must increase the active screening to twice daily (day shift and evening shift).
- Additional PPE will be needed for those staff providing care to an isolated person. This includes gowns, masks, eye protection (see Appendix E for cleaning instructions) and gloves. To the greatest extent possible, the same staff should provide care to persons' who are isolated.
- In the case of a confirmed COVID-19 outbreak; staff must work at only one congregate living setting for the duration of the outbreak.

Appendix A

STA	TAFF / VISITOR / STUDENT / VENDOR SCREENING DATE DATE						
STA	STAFF / STUDENT ID # VISITOR / VENDOR NAME						
1.	Do you have any of the	ie below symptoms:					
	• Fever (38.0	°C or higher) or chills		YES	NO		
	Any new or worsening symptoms :						
	o C	ough		YES	NO		
	0 S	hortness of Breath/Difficulty breathing		YES	NO		
	0 S	ore throat/Painful Swallowing		YES	NO		
	0 S	tuffy/Runny nose		YES	NO		
	o H	eadache		YES	NO		
	o M	luscle/Joint Ache		YES	NO		
	o F	eeling Unwell /Fatigue/Severe Exhaustion		YES	NO		
	o N	ausea/Vomiting/Diarrhea/Unexplained Loss of Appetite		YES	NO		
	o Le	oss of Sense of Smell or Taste		YES	NO		
		onjunctivitis (commonly known as pink eye)		YES YES	NO		
2.	Have you travelled outside of Canada in the last 14 days OR have you had close contact with anyone showing symptoms who has travelled outside of Canada in the last 14 days?						
3.	Have you had close contact (face-to-face contact within 2 metres/6 feet) with someone who is ill with cough and/or fever in the last 14 days without the use of appropriate PPE?						
4.	Have you had close contact (face-to-face contact within 2 metres/6 feet) in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19 without the use of appropriate PPE?						
5.	Have you had lab exp	osure to biological material known to contain COVID-19?		YES	NO		
and Not <u>day</u> The	be directed to complet e: If you have a fever , os <u>s</u> from the start of your only exception to staff	nt / vendor answers YES to any of the screening questions, they will not be permitted e the <u>AHS online assessment tool for staff</u> to determine if they require testing. cough, shortness of breath, runny nose or sore throat, you are <u>legally required to</u> symptoms or until they resolve, whichever is longer. being screened is in the case of an emergency where the stopping to be screened w ire, police, medical emergency).) isolate for at least 1	10			

Appendix B

Doy	 ou have any of the below symptoms: Fever (37.8°C or higher) 					
	• Fovor (27.8°C or higher)					
		YES	NO			
	Any new or worsening respiratory symptoms:					
	o Cough	YES	NO			
	o Shortness of breath/difficulty breathing	YES	NO			
	o Runny nose or sneezing	YES	NO			
	o Nasal congestion/ Stuffy Nose	YES	NO			
	o Hoarse voice	YES	NO			
	o Sore Throat/Painful Swallowing	YES	NO			
	o Difficulty Swallowing	YES	NO			
	Any new symptoms including but not limited to:					
	o Chills	YES	NO			
	o Muscle/Joint Aches	YES	NO			
	o Nausea/Vomiting/Diarrhea/Unexplained Loss of Appetite	YES	NO			
	o Feeling Unwell/Fatigue/Severe Exhaustion	YES	NO			
	o Headache	YES	NO			
	o Loss of Sense of Smell or Taste	YES	NO			
	o Conjunctivitis (commonly known as pink eye)	YES	NO			
	o Altered Mental Status	YES	NO			
	Have you travelled outside of Canada in the last 14 days OR have you had close contact with anyone showing symptoms who has travelled outside of Canada in the last 14 days?					
	Have you had close contact (face-to-face contact within 2 metres/6 feet) with someone who is ill with cough and/or fever in the last 14 days without the use of appropriate PPE?					
	Have you had close contact (face-to-face contact within 2 metres/6 feet) in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19 without the use of appropriate PPE?					

COVID-19 OUTBREAK CONGREGATE LIVING MANAGEMENT CHART

Appendix C

1 st STEP First call AHS Coordinated Response Line - 1-844-343-0971 AHS Coordinated COVID-19 Response must be contacted as soon as there is a case suspected. If no response within 24 hours, call the appropriate zone # as outlined below.								
			EGULAR HOURS - Business hours typically 8:30am to 4:30 pm		AFTER HOURS			
2 nd STEP		Comm	unicable Disease Control (CDC) Intake	403-356-6420	403-391-8027 MOH On-Call			
2 nd STEP			nmunicable Disease Control (CDC) Intake 1-855-513-7530		1-800-732-8981 Public Health On-Call			
	A site in Outbreak Prevention		A site under Investigation		Confirmed COVID-19 Outbreak			
No residents or staff showing any symptoms of COVID-19 Expectations of Staff Staff are to follow all AHS protocols: physical distancing (if able), disinfecting, health screening, and PPE utilization.			At least one resident or staff member who ex- symptoms of COVID-19. Step 1 Notify Supervisor of which symptoms the your Supervisor will reach out to the Mana notify AHS and arrange for testing for COVID If it is a staff member, the Supervisor wi number from the staff for AHS and the Su AHS via phone and CSS Disability Manager staff member utilizes public transit, CSS will taxi with a mask. disabilitymanagementcentral@cssalberta.ca disabilitymanagement@cssalberta.ca AHS Co-ordinated Response Line: Central: 403-356-6420 After Hrs Edmonton: 1-855-513-7530 After Hrs Step 2 Isolate the person showing symptoms to the them with a mask if able to wear. Staff mer appropriate PPE for their safety and following on) and doffing (remove) procedures in the showing symptoms must receive meals in are tested for COVID-19. The staff working a close eye on them for additional symptoms Step 3 The Manager will coordinate with the team who work in the home about the suspected C	resident is showing, ager of the Home to 0 19. ill request a contact upervisor will contact nent via email. If the 1 send staff home via 1-844-343-0971 403-391-8027 1-800-732-8981 eir room and provide mbers must be using g proper donning (put e home. The person their room until they with them must keep	Any one individual (person served or staff) laboratory confirmed to have COVID-19. *Note that sites with two or more individuals with confirmed COID-19 will be included in <u>public reporting</u> . Once in a confirmed outbreak, for the duration of that outbreak, all sites must restrict staff to working only at the outbreak site. Step 1 The Manager will coordinate informing all persons served, family members and staff that there is a confirmed case of COVID-19. AHS Co-ordinated Response Line: 1-844-343-0971 Central: 403-356-6420 After Hrs. 403-391-8027 Edmonton: 1-855-513-7530 After Hrs 1-800-732-8981 Step 2 If it is a person served with COVID -19, they will be required to isolate in their room, provide them with a mask if they are able to wear and eat all their meals in their room. If there is more than one bathroom in the home, identify one for this person to use. Staff will ensure they are keeping a close eye on this person to check on their symptoms and physical well-being. Staff will wear masks and safety glasses at all times and add gloves and gowns when providing personal care for the duration of time that they are working with the person. Staff will also ensure they are following proper donning (put on) and doffing (remove) procedures so COVID 19 doesn't spread throughout the home. If it is a staff member with COVID -19, they will be required to isolate at home until they are cleared by AHS.			

CMOH 23-2020 Insert - Safe Transportation

Any transportation must be done as safely as possible. Operators must communicate the following Safe Transportation expectations to residents and families as appropriate. Residents, families and visitors are responsible for contributing both to their own safety and to the safety of the other residents and staff at the site to which the resident will return.

- Transportation within private vehicles (e.g., if resident drives self or when a visitor or family member picks up a resident):
 - The resident or visitor/family member will ensure that the vehicle has been cleaned and disinfected prior to the resident entering, with focus on high touch surfaces (e.g. handles, steering wheel, window controls, armrests, seat belts, etc.).
 - Driver and all passengers must be masked.
 - The driver and resident/passengers will sit as far apart as possible, minimizing the number of passengers in the vehicle (e.g. one driver with resident sitting as far away as possible).
- Public Transit (including city busses, LRT, handi-bus, etc.):
 - Follow guidelines set out by municipal transit operators to maintain safety.
 - Maintain safe physical distancing.
 - Wear a mask.
 - Frequently use hand sanitizer and especially after having contact with high touch surfaces (e.g. armrests, doors and railings, handles, etc.).
 - Refer to physical distancing tips for public transportation AB Government Site: <u>https://open.alberta.ca/dataset/80c3fda3-7bd8-41c2-8724-c476c1b54a5b/resource/76ae4870-5dc1-4ae4-</u> b89c-b4377d045d3d/download/covid-19-public-transportation-tips-poster-11x17-colour.pdf
- Transportation within facility operated vehicles (shuttle buses, vans, etc.):
 - Ensure vehicle has been cleaned and disinfected prior to residents entering, with a focus on high touch surfaces (e.g. handles, steering wheel, window controls, armrests, seat belts, etc.).
 - The driver and passengers must be masked (residents, staff, driver).
 - Sit as far apart as possible, minimizing the number of passengers in the vehicle.
 - Frequently use hand sanitizer and especially after having contact with high touch surfaces (e.g. armrests, vehicle doors and handles, etc.).

1.0 Cleaning of Safety Glasses Procedure

1.1 Safety glasses are a piece of Personal Protective Equipment that can be used repeatedly. If they are taken care of, they should last for years in our industry.

- 1.2 To disinfect safety glasses, soak them for 10 minutes in any disinfectant solution such as bleach (1 part bleach to 1000 parts water). Alternately, soak them in any other disinfectant and water solution such as Mr. Clean or any other household disinfectant. Remember the solution does not have to be strong to be effective.
- 1.3 Once the glasses are disinfected, rinse them under water to remove any haze or film that may be on them from the disinfectant.
- 1.4 Then dry them preferably with a lint free cloth.
- 1.5 If they still have a bit of a film on them, clean them using any glasses cleaner (if you don't have specific glasses cleaner you could use Windex).
- 1.6 If you have someone that is very sensitive/allergic to the smell of cleaning product, they should speak to their supervisor for alternative products to use.

2020 04 16 Approved by Director Health and Safety

References:

The most current AHS resources are available on the Agency Portal – COVID-19 webpage.

Appendix E