



Giving Hope Today

**THE SALVATION ARMY  
SUNSET LODGE**  
952 Arm St Victoria, BC  
V9A 4G7

## POLICY & PROCEDURE MANUAL

Department: **ADMINISTRATION - 02**

Title: <b>COVID-19 Exposure Control Plan</b>	Effective: <b>05/2020</b>	Policy Number: <b>02.36b</b>	Pages: <b>1</b>
Department: <b>Administration - 02</b>	Updated:	Approved by: <b>Executive Team/Director</b>	
The Salvation Army Title: Administration Department P & P		Policy: <b>Section 1.8.</b>	
HEABC/BCNU/Facility/HSA CA Title: n/a		Article: <b>n/a</b>	

### Policy

Sunset Lodge is aware of and follows evidence-based international, federal, provincial and the Salvation Army territorial COVID-19 Exposure Control Plan.

This is adopted version of the Island Health COVID-19 Exposure Control Plan

### Purpose

Sunset Lodge is committed to providing a safe and healthy workplace for all workers. A combination of preventative measures will be used to minimize worker exposure to COVID-19. All employees must follow the procedures outlined in this plan to prevent or reduce exposure.

The purpose of this ECP is to protect all workers from harmful exposures to COVID-19, to reduce the risk of infection in the event of an exposure, and to comply with the Biological Agents section in the Occupational Health and Safety Regulation.

Sunset Lodge will follow direction and controls as specified by the BCCDC, the Ministry of Health, and the Provincial or Island Health Medical Health Officer.

### Procedure

This island wide exposure control plan applies to all Sunset Lodge staff in all care environments who could be exposed to COVID-19 while completing assigned work.

### Disclaimer

This ECP may change when Island Health activates its Emergency Operations Centre or when directed by Ministry of Health and/or Provincial Medical Health Officer.

## **1 RESPONSIBILITIES**

### **1.1 Sunset Lodge:**

- Ensure Personal Protective Equipment (PPE), washing facilities and other resources (such as worker training materials required to implement and maintain the plan) are readily available where and when they are required. If due to supply chain disruption, Sunset Lodge becomes unable to obtain the necessary resources, Sunset Lodge will advise the appropriate emergency agency and re-evaluate this plan.
- Maintain records as necessary.



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

- Through the Administration, modify service models and levels, using a risk based approach, unless otherwise ordered by national, provincial or local health authority.
- Ensure Managers/Supervisors follow the direction of the Administration.
- All Sunset Lodge staff are directed to stay home if sick.

**1.2 Managers:**

- Assess the risks related to COVID-19 for the positions under your management with appropriate stakeholders (e.g. Professional Practice, IPC, OHS).
- Share awareness and informational resources all workers.
- Provide training, Safe Work Procedures (SWP's), PPE and other equipment, as needed.
- Provide workers training on the selection, care, maintenance and use of any PPE, including fit testing for those employees who may be issued a respirator.
- Ensure all workers follow SWPs, use PPE appropriately.
- Ensure all workers use appropriate PPE, e.g. gloves, gowns, eye protection, masks/N95 respirators when required.
- Direct work in a manner that eliminates and if not possible, minimizes the risk to workers.
- Share information regarding worker concerns with Director, Occupational Health & Safety (OH&S), and Infection Prevention & Control (IPC).

**1.3 Workers:**

- Read awareness and information resources, ask questions and follow-up with supervisor to ensure understanding and adherence.
- Take part in training and instruction.
- Review and follow SWPs.
- Select, care, maintain and use PPE as trained and instructed.
- Take part in fit testing, where required.
- Rely on information from trusted sources including Island Health, BCCDC, PHAC and WHO.
- Understand how exposure can occur and when/how to report exposure incidents.

**1.4 Occupational Health and Safety**

- Ensure a copy of the exposure control plan is available to managers, and workers.
- Ensure the exposure control plan for COVID-19 response is reviewed annually and updated as necessary.
- Support the development of supporting resources, as needed.
- Ensure a system for documenting instruction, training and fit testing is in place.
- Assist with the risk assessment process and consult on risk controls, as needed.

**1.5 Infection Prevention and Control:**

- Select, implement and document the appropriate site or scenario specific control measures.
- Ensure leaders and workers are educated and trained to an acceptable level of competency.
- Assist with the risk assessment process and consult on risk controls, as needed.



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

**2 Risk Identification, Assessment and Control**

**2.1 COVID-19**

The novel coronavirus, COVID-19, is spread from an infected person through droplets and contact with contaminated surfaces, such as:

- respiratory droplets generated when they cough or sneeze.
- close, prolonged personal contact, such as touching or shaking hands.
- touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands.

Airborne transmission of COVID-19 occurs when an AGMP is performed on a suspected/confirmed case. When performing an AGMP strict hand hygiene (Appendix A) and PPE requirements (below) must be followed.

**2.2 Risk Assessment**

The following risk assessment table is informed by the Ministry of Health, Provincial Medical Health Officer, Island Health Infection Prevention and Control and the Occupational Health and Safety Regulation 5.54 Controlling Exposure - Exposure Control Plan, 6.34 Biological Agents - Exposure Control Plan, and Guideline G6.34-6 Exposure Control Plan - Pandemic Influenza.

Table 1: COVID-19 Risk Level Identification

	COVID-19 positive/ under investigation <b>with</b> AGMP	COVID-19 positive/under investigation for patient care <b>no</b> AGMP	Patient/client/resident no-symptoms of COVID-19
All Inpatient Care Areas (including MHSU, Pediatric, Long Term Care, Porters and Lab Techs)	High Risk	Moderate Risk	Low Risk
Emergency Department Staff & Physicians	High Risk	Moderate Risk	Low Risk
Operating Rooms	High Risk	Moderate Risk	Low Risk
Community Health Services/Public Health	n/a	Moderate Risk	Low Risk

If the area is identified as having a high or moderate risk (based on the table above), complete the Infection Control Risk Assessment: COVID-19 (Appendix B).

**2.3 Risk Control**

Controls instituted by Island Health will follow the standard hierarchy of controls; substitution, engineering controls, administrative controls, and use of personal protective equipment.

**Elimination** of face-to-face contact is the preferred control.

**Engineering controls** include the following: negative pressure room, barriers at triage, cleaning contaminated equipment and mechanisms to control social distancing.



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

**Administrative controls** include hand washing and cough/sneeze etiquette. Cover your mouth and nose with a sleeve or tissue when coughing or sneezing. Allow a reasonable personal distance space to reduce human-to-human transmission. An increase in cleaning frequencies for shared work surfaces and equipment. Cohorting patients with like symptoms, staff working from home, staff who become symptomatic with Influenza-like symptoms need to remain off work for the prescribed period of time. Informational and directional signage.

**Personal Protective Equipment (PPE)** is the last resort of mitigation such, as wearing of masks, respirators, coveralls/turnout gear, gloves, goggles and/or face-shields. Island Health has a variety of PPE available for staff dealing with patients. Information on what types of PPE is required with contact, droplet, or airborne transmission can be found in the IPAC Reference Guide.

- **Surgical masks** - are effective at capturing droplets and must be used in combination with eye protection, frequent hand-cleaning with soap and water or alcohol-based hand rub, gloves and a gown.
- **N95 Respirators** - are used to contain large droplets generated during an AGMP on a person under investigation for or diagnosed with COVID-19 to minimize the spread of potentially infectious material. Workers must wear an N95 when directly involved in an AGMP. ***An N95 masks must be fit tested.***

If it is determined that alternative respiratory protection (elastomeric half-facepiece respirators) is required refer to the Recommendation for the Use of Elastomeric Half-Facepiece Respirators (EHFR's) During COVID-19 document.

Sunset Lodge is taking measures, as directed by the Provincial Health Officer, to preserve PPE. We are implementing PPE prioritization measures and conservation protocols to ensure adequate supplies to protect healthcare workers and their residents. Please speak with your team leader to determine how these measures will be applied in your unit.

PPE recommendation tables have been developed by Learning and Performance Support in collaboration with Infection Prevention and Control, Professional Practice, Occupational Health and Safety, and Medical Affairs with guidance taken from BCCDC and Ministry of Health to provide clear guidance to care providers on appropriate PPE. Updates to the tables below can be found in the PPE for Healthcare Personnel During COVID-19 document.



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

Long-term Care									
Patient Description	Excellent Hand Hygiene	Isolation Gown (Level 2 reusable or disposable)	Gloves	Surgical Mask	Face Shield/Visor or Goggles	N95 Mask	Head and Neck Covers	Doffing	Provincial Guideline Adherence?
No respiratory symptoms or fever reported by patient or detected by assessment.	✓	Not required	Not required	✓	Not required, however eye protection is available if you choose to wear it	Not required	Not required	Change mask when it is visibly dirty, damp or too damaged for safe use. Hand hygiene required when touching or removing mask. If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area (see below). <u>Clean and disinfect</u> eye protection between use	Meets guidelines
Patient reports/develops respiratory symptoms or fever.	✓	✓	✓	✓	✓	Not required	Not required	If HCP already wearing a procedure mask, mask can remain on. Face shields require cleaning. Masks must not be stored in a pocket or bag after use with the intention of reusing.	Meets guidelines
Known or highly suspected COVID (i.e., awaiting testing) patient.	✓	✓	✓	✓	✓	Not required	Not required	If HCP already wearing a procedure mask, mask can remain on. Face shields require cleaning. Masks must not be stored in a pocket or bag after use with the intention of reusing.	Meets guidelines
COVID Cohorted Unit. (Designated sites only).	✓	✓	✓	✓	✓	Not required	Not required	If HCP already wearing a procedure mask, mask can remain on. Face shields require cleaning. Masks must not be stored in a pocket or bag after use with the intention of reusing.	Meets guidelines
Aerosol generating procedures for any resident with confirmed influenza, suspect or confirmed COVID-19 (CPAP or open airway suctioning, nebulization).*	✓	✓	✓	Not required	✓	✓	Not required	Face shields require cleaning and disinfection after use.	Meets PHAC guidelines; no Provincial guideline available.
Aerosol generating procedures for asymptomatic residents not suspicious for COVID-19 (CPAP or open airway suctioning, nebulization).*	✓	Not required	Not required	Not required	Not required	Not required	Not required		Meets guidelines.

\*AGMPs should only be performed if medically necessary. All persons in the room are wearing a fit-tested, seal-checked N95 respirator, gloves, gown and face or eye protection. If no negative pressure room available, patient must be in a single room with the door closed for duration of procedure and associated time to clear air.

**3 SAFE WORK PRACTICES**

**3.1 Hand Hygiene**

All healthcare providers and staff at Sunset Lodge must follow the Sunset Lodge Hand Hygiene Policy. Proper hand hygiene helps prevent the transfer of infectious material from the hands to other parts of the body – particularly the eyes, nose and mouth – or to other surfaces that are touched.

Hand Hygiene must be performed:

- Before putting on and after removing any type of gloves.
- Before putting on and after removing personal protective equipment (Putting on PPE and Removing PPE).
- At each of the “4 Moments for hand hygiene” as defined by the World Health Organization.
- Before contact with a resident or resident’s zone which is the area surrounding a resident.
- Before carrying out an aseptic procedure.
- After contact with blood or body fluids.
- After contact with a resident or resident’s zone.

For proper hand hygiene techniques, refer to the following two posters:

- I. How to Clean Your Hands with Soap and Water - [https://intranet.viha.ca/departments/infection\\_prevention/Documents/how-clean-hands-soap-water-landscape.pdf](https://intranet.viha.ca/departments/infection_prevention/Documents/how-clean-hands-soap-water-landscape.pdf)
- II. How to Clean Your Hands with Alcohol Based Hand Rub - [https://intranet.viha.ca/departments/infection\\_prevention/Documents/how-clean-hands-alcohol-based-hand-rub-landscape.pdf](https://intranet.viha.ca/departments/infection_prevention/Documents/how-clean-hands-alcohol-based-hand-rub-landscape.pdf)



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

- **Note:**
  - Avoid touching your eyes, nose or mouth with unwashed hands
  - Use utensils: consider using forks, spoons or tooth picks when eating and serving foods

### **3.2 Cough/Sneeze Etiquette**

All staff are expected to follow cough/sneeze etiquettes, which are a combination of preventative measures that minimizes the transmission of diseases via droplet routes. Cough/sneeze etiquette includes the following components:

- Cover your mouth and nose with a sleeve or tissue when coughing or sneezing to reduce the spread of germs
- Use tissues to contain secretions, and immediately dispose of any tissues you have used into the garbage as soon as possible and wash your hands afterwards
- Turn your head away from others when coughing or sneezing

### **3.3 Decontamination Procedures**

For guidance see unit specific procedures and Infection Control Manual.

### **3.4 Additional Safe Work Practices**

Additional safe work practices will be adapted, refined and developed in response to COVID-19. This includes unit specific guidelines, work practices and protocols.

## **4 EDUCATION AND TRAINING**

All staff must follow Clinical Practice Guidelines and Required Organizational Practices for their occupation. Sunset Lodge has established the following means of sharing information across the organization:

- All Sunset Lodge employee - daily update
- COVID-19 related bulletin posts on the Sunset Lodge website
- COVID-19 webpage, BCCDC - sources of truth
- Infection Control Manual
- Fit testing as defined by PPE Requirements
- Hand Hygiene and cough/sneeze etiquette
- Unit specific orientation

## **5 REPORTING AND HEALTH MONITORING**

Whenever Island Health confirms a positive case of COVID-19 within our facilities (or places of work), a risk assessment is completed to determine who may have been exposed. If after this contact tracing occurs, it is determined that a staff member may have been at risk of exposure, the staff member will be contacted by an Employee Health Advisor who will ask questions to assess the risk level of the exposure, and provide immediate direction. Employee Health Advisors will send a list with the names of staff who have been exposed (after completing an initial assessment), to the Provincial Workplace Health Call Centre, and our Public Health partners for appropriate follow up.

At this time, the Provincial Workplace Health Call Centre is asking that staff who have confirmed exposures not call them directly, but wait to be contacted by the Call Centre. We understand at this time,



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

that the Call Centre is monitoring Form 7s that are submitted and closing those (without further action) that relate to employees who were not symptomatic or tested negative for COVID-19.

Refer to Potential Exposure to COVID-19 in the Workplace - Directions for Island Health Leaders

**NOTE:** Currently, an exposure guide (versions for employees) is being created, both versions will be included as Appendices in this exposure control plan.

**5.1 Employee Resources**

If you're feeling stressed or worried, the following resources are available:

- The Employee Assistance Program 1-800-268-5211
- The Enhanced Disability Management Program EDMP 1-855-999-ANII (2644)

**6 RECORD KEEPING**

Records shall be kept as per Island Health's established processes.

**7 DEFINITIONS**

- BCCDC – British Columbia Centre for Disease Control
- ECP – Exposure Control Plan
- EOC – Emergency Operations Centre
- MHO - Medical Health Officer
- PHAC – Public Health Agency of Canada
- PPE – personal protective equipment
- SWP – safe work practice
- WHO – World Health Authority
- AGMP – Aerosol Generating Medical Procedure
- RELATED ISLAND HEALTH STANDARDS:
  - IPAC Reference Guide
  - Infection Prevention and Control Best Practices Guidelines for Droplet Precautions
  - Island Health Infection Prevention and Control - Point of Care Risk Assessment  
[https://intranet.viha.ca/departments/infection\\_prevention/Documents/posters\\_and\\_brochures/precautions\\_table.pdf](https://intranet.viha.ca/departments/infection_prevention/Documents/posters_and_brochures/precautions_table.pdf)

**8 REFERENCES**

- Occupational Health and Safety Regulation Guideline, G6.34-6 Exposure control plan - Pandemic influenza
- BCCDC COVID-19 screening guide
- PICNet 2019 Novel Coronavirus: Aerosol Generating Medical Procedures in Healthcare

**9 RESOURCES**

- Island Health Intranet – <https://intranet.viha.ca>
- BCCDC – <http://www.bccdc.ca/>
- WorkSafeBC- <https://worksafebc.com>
- PHAC - <https://www.canada.ca/en/public-health.html>



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**POLICY & PROCEDURE MANUAL**

Department: **ADMINISTRATION - 02**

- WHO - <https://www.who.int/>
- PICNet - <https://www.picnet.ca/>
- The Salvation Army Specific Guidelines
- Sunset Lodge Specific Guidelines

**Appendix A: Infection Control Risk Assessment: COVID 19**

	<b>Minor</b> Could require first aid 1	<b>Major</b> Could require medical treatment (more than first aid) 2	<b>Permanent Injury or Death</b> Could result in permanent injury or death 3
<b>Unlikely 1</b>	<b>Low</b> 1	<b>Low</b> 2	<b>Medium</b> 3
<b>Might happen 2</b>	<b>Low</b> 2	<b>Medium</b> 3	<b>High</b> 6
<b>Highly likely 3</b>	<b>Medium</b> 3	<b>High</b> 6	<b>Very High</b> 9

*Based on CSA Z1002-12, the Work Safe Alberta matrix, and modifications for clarity*

Action items should describe changes to the work practice or instructions to reduce risk of injury/illness. Action items should be **SMART**: specific, measurable, achievable, results-oriented and time-bound. Copy and paste additional rows to accommodate new tasks as necessary. Use the following priority matrix table to apply a priority level for identified risks.

<b>Context / Environment of Risk</b>	<b>Yes, No, N/A</b>	<b>Observation/ Existing Controls</b>	<b>Priority 1, 2, 3</b>	<b>Action Items</b>
Are there COVID screening precautions in place for staff, residents and public who may enter building?				
Are supports for social distancing of 2 meters in place?				
In situations where social distancing is not possible, are other controls in place to reduce risk of exposure?				
Are appropriate hand hygiene options readily available?				
Are enhanced cleaning practices in place? (E.g. for high contact items such as door handles, faucet handles, etc.)				
Is an adequate supply of PPE available to staff who require it?				
Have staff been trained/educated in use of personal protective equipment? (when required, what to use, etc.)				
Have safe work procedures and processes/protocols been developed where needed?				