

London Health Sciences Centre



Infection Prevention & Control-Safety Measures

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The information in this presentation covers additional Infection Prevention and Control (IPAC) safety measures, which are based on an IPAC risk matrix (assessment).

Volunteer Services will:

- Continue to assess the environment to assure timely responses to any changes.
- Communicate to ensure you feel informed and prepared for volunteering in the hospital environment
- Provide ongoing updates to you, as needed
- Be available to support you and answer any questions you have.
- Ensure volunteers are part of the Occupational Health and Infection Control
 contact tracing process to all patients, staff, physicians and affiliates and notify
 you if you are considered at risk of exposure. Please note: An exposure is
 considered if you were closer than 2 metres/6 feet to someone for more than 15
 minutes, without proper Personal Protective Equipment (PPE i.e. mask).

Before you Report to the Hospital

Self-screen for symptoms (new or worsening; not related to seasonal allergies or pre-existing medical conditions): fever/chills, cough (new or worsening), shortness of breath/difficulty breathing, loss of smell, taste disturbance, sore throat, extreme tiredness that is unusual, generalized muscle aches (unusual or long lasting), pink eye (conjunctivitis), runny nose/nasal congestion, headache, vomiting/nausea, diarrhea/abdominal pain.

If you have:

Respiratory symptoms

- Volunteers may return to work when fever free and symptoms have been improving for 24 hours.
- Continuous use of a level 3 medical mask (available at staff entrances) is required everywhere in the building until the end of Day 10 from the day of symptom onset.
- A two-metre distance should be maintained if the mask is removed for eating or drinking in this 10-day period.

Gastrointestinal symptoms

- Volunteers may return to work when fever free and symptoms have been improving for 48 hours.
- Continuous use of a level 3 mask (available at staff entrances) is required everywhere in the building until the end of Day 10 from the day of symptom onset.
- A two-metre distance should be maintained if the mask is removed for eating or drinking in this 10-day period.

Notify Volunteer Services regarding symptoms:

- Email: Volunteer Services@lhsc.on.ca
- Telephone: University Hospital 519-663-3134/ Victoria Hospital 519-685-8112



Before you Report to the Hospital

COVID-related

Positive COVID-19 test while asymptomatic

- Volunteers can return to work if they are asymptomatic with masking required everywhere in the building until the end of Day 10 from the positive test. Level 3 masks are available at the staff entrances.
- If symptoms develop, see symptom guidelines (slide 2). There is no requirement to contact Occupational Health and Safety Services (OHSS).

After exposure

- Volunteers who are exposed to COVID-19 no longer need to contact OHSS and should instead attend work as long as they remain symptom free.
- Masks will be required in all areas of the building until the end of Day 10 from exposure.
 Level 3 masks are available at the staff entrances.
- If symptoms develop, see symptom guidelines (slide 2).



Masking Policy

Please read about the current masking policy here

For staff/physicians/volunteers:

- Masking is based on routine practices (point of care assessment) and additional precautions.
 This means that based on risk assessment, individuals have a choice to wear a mask and additional PPE (personal protective equipment).
- Some clinical areas require staff or physicians to mask when providing direct patient care.
- Masks for staff, volunteers, and physicians are available in main entrances of the hospital in designated PPE holders.
- If you would like to wear a mask, please obtain a new mask each time you arrive for your shift. Review how to properly put masks on (donning) and remove them (doffing) (slide 7-8)

For patients/visitors:

- Masking is voluntary in the majority of clinical areas.
- Patients with a fever or respiratory symptoms are required to mask in all clinical and nonclinical settings (except if in an inpatient room or bed space).
- Masks are available in main entrances of the hospital in designated PPE holders.



Masking Procedures

Basic Extended Use Principles

- A mask can be worn for as long as possible, but once wet, damaged, or visibly soiled, it
 must be discarded in the garbage. In non-clinical areas, ask your leader for a new mask if
 you must discard.
- Do not touch the front of the mask; if you do, immediately perform hand hygiene.
- Always take adequate time when removing a mask to prevent self-contamination.
- Always perform hand hygiene after removal.

If you are doffing your mask to eat or drink:

- Mask should be carefully removed and may be folded so that the inner surface is facing inward,
- Masks should be stored in a way that keeps them clean, dry, and protected- e.g. clean space, on a tissue or placed in a paper bag
- If the mask becomes contaminated, remove and discard it
- Always clean your hands before putting on a mask and after removal.

Masking reminders

- Replace mask if it is wet or soiled
- Do not pull mask under your chin, hang it off one ear, hang it off your neck, or wear it off your nose
- If you need to cough, cough into your mask. The purpose of the mask is to help contain/collect droplets. Remember to also cough into the fold of your arm.



Masking Procedures

How to wear a mask

Steps on putting on the mask safely:



Perform hand hygiene – wash your hands or use hand sanitizer.



Pick up mask using ear loops.



Expand the mask. (Blue side faces out).



Place mask on your face by securing loops around your ears.



Adjust mask to cover your chin and pinch metal nose piece to give a secure fit.

Masking Procedures

Steps on removing the mask safely:



Perform hand hygiene – wash your hands or use hand sanitizer.



Remove the mask using the ear loops only.



Place the mask on a clean surface or a paper towel with the inner mask facing upwards to avoid contamination (white side facing up).



Perform hand hygiene – wash your hands or use hand sanitizer.

For re-applying the mask:



Pick up the mask from the clean surface using the ear loops.



Adjust the mask to your face as indicated in the above steps.



Perform hand hygiene (hand washing or sanitizer) after you're done.



When you're ready to dispose of your mask, please place the mask in the garbage by the exit door and sanitize your hands.



LHSC thanks Holland Bloorview Rehabilitation Hospital for permission to adapt its original work.

Hand Hygiene

Alcohol-Based Hand Sanitizer

- Hand hygiene is an important means of preventing the spread of infection
- Alcohol-based hand sanitizer is the preferred method when in a health care setting and hands are not visibly soiled.
- After cleaning, make sure your hands are dry before you touch anything. This
 is very important when you use the hand rub.

When to perform hand hygiene with alcohol-based hand sanitizer?

- Upon entry to and exit from:
 - Hospital
 - Each unit
- Before & after entering each patient space
- Before touching any clean supplies
- After touching your mask, any patient materials, or common spaces
- After escorting patients.



Hand Hygiene

How to use hand rub:

- Apply hand rub gel or foam
- Spread over both sides of hands and between fingers
- 3. Rub hands together for at least 15 seconds or until dry
- Once dry, your hands are safe





Hand Hygiene

Washing your hands

When washing with soap and water, including when visibly soiled, follow these best practices.





Cleaning and Disinfecting

- Cleaning and disinfecting procedures within our facilities have increased
- Standardized cleaning protocols for patient exam rooms are completed by staff
- Volunteers will participate in disinfecting of their work space.
- Disinfect when you arrive to your work station and at the end of your shift.
- Use the unit/program provided Accel Intervention Wipes as per <u>LHSC</u> <u>Standard Wiping Protocol</u>.
- Clean frequently touched and shared surfaces or materials. Frequently touched surfaces by others should be disinfected more often.
- Sanitize hands after disinfecting procedure is complete



Volunteer Expectations

As a volunteer, you are expected to:

- Follow all LHSC policies and procedures, including processes and protocols outlined in this presentation.
- As staff and volunteers in health care, we have an added responsibility to lead by example to keep our patients and our community safe.

We ask that you please:

- Consult your family physician if you, or a family member, have health related questions.
- Understand that you may be asked to change your assignment or discontinue service based on the hospital's situation.
- Notify your area leader and Volunteer Services, then proceed home, if you start to feel unwell while on duty. Follow the return to work guidelines for symptoms (slide 2).