

**Prince George Native Friendship Centre
Adult Services Department Communicable
Disease Prevention Plan**



Worksite Location in Prince George:

140 Quebec Street

1145 2nd Avenue

1656 Queensway Blvd

1151 2nd Ave

138 George Street

650 Dominion Street

1965 17th Ave

“in the power of Friendship, be safe, be kind..”

- Background

The purpose of this plan is to provide clear communication and instructions to all staff, regarding the communicable disease prevention plan, with the understanding this document is a living document and future edits will be made. Any changes will be forwarded to all team members via email and posted at the worksite.

Research suggests it is vital to have an advanced plan, that is considerate of the needs of persons experiencing homelessness, yet flexible enough to adapt to changing conditions communicable diseases can be anxiety-provoking for staff and for clients. The best way to deal with the fear and uncertainty is to have a plan, and be prepared to adapt.

Please provide any feedback to your direct supervisor for areas of this plan that need attention or if anything that has been missed that needs to be included.

- Know when not to come to work
- Should you become ill at work, please leave the worksite immediately and report to a supervisor. Should this not be possible, it is recommended to don (put on) Personal Protective Equipment (PPE) ie: Mask and gloves and report immediately to a supervisor for further direction. Area that you have been in contact will have to be disinfected immediately and must be reported to a supervisor.
- Know what is required in the worksite
- **Hand hygiene (Appendix F)**

Wash hands as you enter and leave worksite and during as needed.

- **Hand Hygiene:** Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before preparing food, eating; medication distribution; and after blowing your nose, coughing, or sneezing. **If soap and water are not readily available**, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.

Hand sanitizer is in limited supply, and we are relentlessly pursuing our current and provincial supply chains to ensure our access to this for all sites and everyone (staff and clients) is maintained.

- **Respiratory Etiquette:** cough or sneeze in to a tissue or elbow.

- **Personal Protective Equipment (PPE)**
 - Staff must know when to use:
 - see Disinfecting/Cleaning
 - see Transportation
 - See Pre-screening
 - See First Aid
 - See Naloxone
 - Staff must know how to put on (See Appendix A & B)

- **Physical Distancing**

Ensure Physical Distancing (2 meters) while in your worksite, this includes office, kitchen, any open spaces (Indoor/outdoor) and adjust your worksite as needed in conjunction with your supervisor (ie: removing chairs, tape prompts, adjusting entrance/exits, single occupancy in fleet and elevator).

 - **Occupancy Limits:** Occupancy limits must be adhered to and are posted on doors.
 - **Office Etiquette:** Please ensure that you are designating a pen for your own use and disinfecting common use items after your use (Phones, computer, photocopier, stapler, etc)

- **Prevention for Clients/Professional Visitors**
 - All staff/clients/professional visitors are recommended to WASH HANDS or use HAND SANITIZER as they enter the premise or vehicle.

- **Disinfecting/cleaning**

Routine disinfecting and sanitizing of worksite must occur on an enhanced cleaning schedule and as required.

- **Site Disinfection:** On going as needed with disinfectant; all surfaces (Desks, Table and Chairs), doorknobs, handrails, computers,

telephones, etc. Please log cleaning and submit as per directions on the Daily Log Book.

- **Kitchens/faucets** must be disinfected after every use.
- **Fleet:** Must occur prior and after every use and record on pre-trip.
- **Bathrooms:** must be disinfected on a regular basis.

- **Masks**

- **Staff may still choose to wear a mask**

- Any in person meeting requests including client contacts must be pre-approved by a direct supervisor with a proposed plan for physical distancing.
- Staff will work with their supervisors to find creative plans to continue to provide service, i.e. delivery of groceries/goods, screening and meeting 1-1 with appropriate physical distancing, etc. for continuity of service.
- Non-symptomatic clients in residential services will only be provided with rides for essential appointments (groceries, medical and safe rides home) only, unless otherwise directed by a supervisor.
- Symptomatic clients in residential services will only be provided with rides when they wear a surgical mask and gloves and only to their home destination or to a medical appointment. Staff must wear full PPE (Surgical mask, goggles, gloves)
- Transportation using a taxi will only occur when we are unable to transport due to health protocols listed in this document not being able to be followed or we are not able to facilitate due to availability.
- Staff meetings may be by teleconference, Zoom or in person with a pre-approved physical distance plan.
- We are prioritizing the use of technology to provide continuity of services.
- **Transportation in Fleet**
- Handwashing prior to use is required.
- Disinfecting/sanitizing of fleet must occur after every use and documented.

- Pre-screened Clients will only be provided transportation for **ESSENTIAL SERVICES ONLY**. Grocery shopping/medical and rides home, other requests need approval of supervisor.

Food

- All staff involved in food preparation must maintain highest standards of food safety, as per certified Food Safe practise.
- Any food preparation by youth, must be supervised by staff.

8. Pre-Screening Clients

- Client screening Residential (Appendix E) - upon intake or entry ask if clients have any symptoms, the main symptoms feel like the flu or a really bad cold: Fever, Cough, Shortness of breath/difficulty breathing, please document this on Intake Forms.

If or when a client gets ill/ reports being ill while in program:

- Request Client to wear mask and physically isolate within resource
 - Staff must wear full PPE (Surgical mask, goggles, gloves)
 - Connect with their regular health practitioner or HealthLink BC 811 or 1-844-645-7811 Northern Health COVID-19 Line for further instruction.
 - Staff must report directly to your supervisor or Contact PGNFC After-Hours on call for support/direction.
-
- Staff to use Personal Protective Equipment (face mask, eye goggles and gloves) during direct care of client with suspected communicable disease.
 - Ask client to use Personal Protective Equipment (face mask, eye goggles and gloves)
 - Any person that may have symptoms of communicable disease should have a surgical mask given to them, self-isolate and do the following:
 - 1) Call 811, BC Nurses Line 1-844-645-7811 Northern Health COVID-19 Line for further instruction, explain the circumstances and seek advice.
 - 2) Monitor client, and seek emergency services if deemed necessary for their health.
 - 3) Staff must report directly to your supervisor or Contact PGNFC After-Hours on call for support/direction.

First Aid

- to call 911 for more serious injuries/illnesses, wear full PPE (N95 Mask, goggles, gloves) in preparation for further direction from 911 operator.
- Naloxone (as per policy April 28, 2020)

Rationale:

Naloxone/Narcan is indicated for the reversal of opioid overdose induced by natural or synthetic opioids in the setting of respiratory depression or unresponsiveness. Opioids include: morphine, codeine, heroin, oxycodone, methadone and fentanyl.

Operators of licensed community care facilities that provide care to persons who are at risk of an opioid drug overdose must obtain and maintain a supply of Naloxone for emergency use in the event that a person in care suffers from a drug overdose.

Section 70 (1) of the Residential Care Regulation, which requires that "...only medications that have been prescribed or ordered by a medical practitioner or nurse practitioner are administered to persons in care" ***must not be interpreted as a barrier*** to administering Naloxone to a person who is suffering from an opioid overdose. Naloxone may be provided under a Standing Order in collaboration with an operator's Medication Safety and Advisory Committee and facility physician, as Naloxone is no longer a prescription medication in a non-hospital setting.

PGNFC must report any administration of Naloxone as a reportable incident under the category of Poisoning which is defined as "... the ingestion of a poison or toxic substance by a person in care".

PGNFC will ensure that all staff completes required training in the administration of Naloxone from the designated clinical pharmacist on the Rexall Team, and that their staff also receives provide first aid appropriate to the situation. PGNFC must also ensure that trained staff are available at all times to administer Naloxone to persons in care when persons in care are on the premises of the licensed facility or away from the premises and remain under the care of facility staff.

This policy has been updated and is compliance with BC Centre for Disease Control on responding to opioid overdoses during COVID -19; <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/vulnerable-populations/people-who-use-substances>

PGNFC Adult Services Opioid Overdose Intervention Protocol

Naloxone kits on site include:

- 2 x 0.4mg ampules of naloxone,
- syringes,
- gloves,
- N95 Mask,
- Eye protection,
- alcohol swabs,
- cotton swabs; and,
- a breathing mask for client.
- Nasal Naloxone kits may be available and used

Naloxone kits will be stored:

- With first aid kit.
- Replacement kits will be ordered from the main centre

INDICATORS OF AN OPIOID OVERDOSE

- Person cannot stay awake.
- Can't talk or walk.
- Slow or no pulse.
- Slow or no breathing, gurgling.

- Skin looks pale or blue, feels cold.
- Lips or nails are blue.
- Pupils are pinned or eyes roll back.
- Body is limp.
- No response to noise or knuckles being rubbed hard on breast bone.

RESPONDING TO AN OPIOID OVERDOSE

- **UNRESPONSIVE**

- Stimulate with noise (shout, use their name)
- Immediately put on PPE (personal protective equipment):
 - Wash hands or sanitize with hand sanitizer
 - Place Gloves on
 - Place N95 Mask on, ensure that it is securely behind ears to ensure fit
 - Place Protective Eye Wear on face
- Anyone not responding to the overdose should leave the room or immediate area to ensure physical distancing (2 meters)
- Touch (sternal rub), remember to tell the person what you are doing before you touch them.

- **CALL 911**

- Put person in the recovery position if you have to leave them alone.
- Give address and directions to where in the building you are, if possible send someone to meet paramedics at door.

- **NALOXONE ADMINISTRATION**

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- Swirl ampule first.
- Snap top off ampoule; draw up all of the naloxone.
- Inject into large muscle (thigh, upper arm, or buttock).
- Inject at 90°, push plunger until you hear a click (needle will retract).
- **Note the time** of administration.

- **CLEAR AIRWAY & VENTILATE**
 - Clear airway (removing anything from their mouth), tilt head, lift chin
 - Put the pocket mask over the individual's nose/mouth. The mask with a "one-way valve and large impermeable area (should) protect the responder from respiratory secretions
 - Give 2 chest compressions
 - Evaluate.

- **EVALUATE & GIVE Additional DOSE IF NEEDED**
 - **After 3-5 minutes**, if still unresponsive, give an additional or follow instruction of 911 operator;
 - Ambulance transport to hospital, if able to accompany or follow in fleet. We must establish communication with client and/or hospital for progress and updates, which must be shared with coordinator or on-call coordinator for further direction.

- **AFTERCARE**

- Important the order that PPE be removed.
 - Gloves are removed first.
 - Hands Washed.
 - Goggles/face shield/mask removed
 - Goggles placed in a Ziploc bag for disinfecting
 - Hands washed.
 - All single use PPE (Gloves and masks, must be discarded in its own garbage bag for immediate disposal)
 - Area needs to be disinfected, put on clean gloves and clean surgical mask. Disinfect. Remove PPE (personal protective equipment) in order outlined above, and placed in its own bag for immediate disposal.
- Naloxone wears off in 20-90 minutes.
- Person may not remember overdosing (explain what happened).
- Monitor the person for at least 2 hours and do NOT allow them to take more opioids (could overdose again).

- **REPORTING**

- Contact Supervisor or if after hours, connect with on-call Coordinator to update regarding situation and follow any directives given by On-Call Manager.
- Complete Serious Incident Report.
- Document in client's daily tracking.
- Follow-up with debriefing with Supervisor.

- Information Links

Health Link BC: <https://www.healthlinkbc.ca/health-feature/coronavirus-disease-covid-19>

BC Centre for Disease Control: <http://covid-19.bccdc.ca/>

Health Canada: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>

Government of BC:

- BC's Restart Plan: <https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support/bc-restart-plan>

- COVID-19 Orders, Notices & Guidance: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>

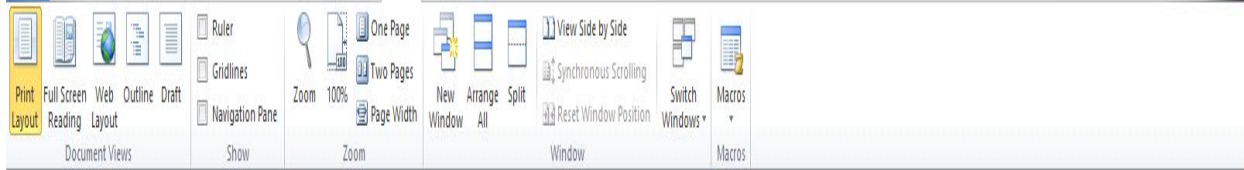
- Managing COVID-19 Stress, Anxiety & Depression: <https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/managing-covid-stress>

Other:

- Canadian Mental Health Association Stay Well in Uncertain Times: <https://cmha.bc.ca/covid-19/>

Appendix A Donning PPE

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Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health

The 5 steps to Don (put on) Personal protective equipment (PPE)

- 1 Hand hygiene**
Clean all surfaces of hands and wrists.
- 2 Gown**
Cover torso and arms and back. ~~Back~~ back of neck and wrist.
- 3 Surgical/procedure mask**
Secure ties or ribbons behind head and neck. ~~Place~~ Place band behind your ears and pull ~~down~~ down to completely cover chin.
- 4 Eye protection**
Place goggles or face shield over forehead, eyes and adjust to fit.
- 5 Gloves**
Extend to cover wrist of gown.

Appendix B Doffing PPE

Revised **December 3, 2022**



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health

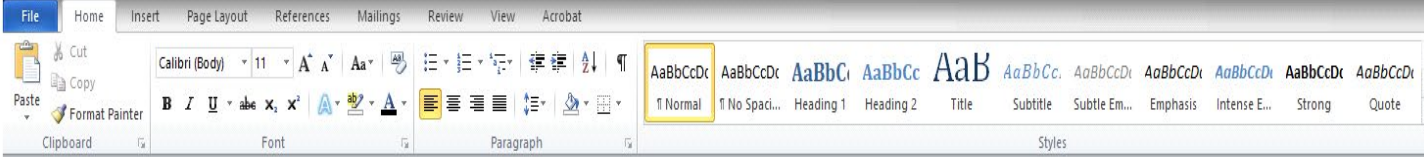
9 Steps to Doff (Take Off) Personal Protective Equipment (PPE) For Droplet and Contact Precautions

- 1. Gloves**
The outside of gloves is contaminated. Grasp the wrist of one glove and peel off first glove. Slide fingers of hand under other glove wrist and peel off. Discard in regular waste bin.
- 2. Perform Hand Hygiene**
Clean all surfaces of hands and wrists.
- 3. Gown**
Unfasten ties, pull gown away from waist and shoulders, touching ONLY the inside of the gown. Goggles remain do not touch and roll into bundle. Place in a leak-proof container (if reusable) or in regular waste bin (if disposable).
- 4. Perform Hand Hygiene**
Clean all surfaces of hands and wrists.
- 5. Goggles or Face Shield**
Do NOT touch the front of the eye piece. Place in receptacle for reprocessing (if reusable) or in regular waste bin (if disposable).
- 6. Perform Hand Hygiene**
Clean all surfaces of hands and wrists.
- 7. Surgical or Procedure Mask**
Grip the ties or elastic at the back and **DO NOT** touch the front. Place in receptacle for reprocessing (if reusable) or in regular waste bin.
- 8. Perform Hand Hygiene**
Clean all surfaces of hands and wrists.
- 9. Exit Room**
Exit room and pass the hand hygiene.

IPC v2.0

Appendix C PGNFC PPE Poster

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PGNFC PPE (PERSONAL PROTECTIVE EQUIPMENT)

3 PLY MEDICAL MASK

To be used by staff/client when symptomatic

As per resource protocol.



N95 Mask

To be used by STAFF ONLY, for the

Administration of Naloxone ONLY



Revised **December 3, 2022**

Appendix D PGNFC Screening Form Non Residents



PGNFC Adult COVID- 19 Screening Form Non-residential

Program:

Name: _____ **Client**

Visitor

Staff: _____ Date: _____

At PGNFC we take the safety of our clients, our staff and our communities very seriously. Please help us provide the safest possible services to you by completing this screening with us.

- Are you experiencing any of the following:
 - Severe difficulty breathing (struggling to breathe or speaking in single words)
 - Severe chest pain
 - Having a very hard time waking up
 - Feeling confused
 - Losing consciousness

If yes to any of the above, no need to screen further. These symptoms require immediate attention. Please call 811 for further instruction regarding health concerns.

Professional Visitor/Client excluded from services until cleared medically.

- Are you experiencing any of the following:
 - Mild to moderate shortness of breath at rest
 - Inability to lie down because of difficulty breathing
 - Chronic health conditions that you are having difficulty managing because of difficulty breathing.

If yes to any of the above, no need to screen further. Please call 811 to speak with HealthLink BC. A nurse at HealthLink BC will need to speak to you about your symptoms in more detail.

Professional Visitor/Client excluded from services until cleared medically.

- Are you experiencing any of the following:
 - Fever
 - Cough
 - Sneezing
 - Sore throat

If yes to any of the above, no need to screen further. As a precaution the Ministry of Health is asking anyone with symptoms (fever, cough, sneezing, sore throat, or difficulty breathing) to stay home for 14 days.

Professional Visitor excluded from services until cleared medically

Client to be provided with Personal Protective Equipment and then contact your supervisor for direction and support.

- Have you travelled to any country outside Canada, including the US, within the last 14 days:
 - Yes
 - No

If yes, no need to screen further. Please self-isolate. You do not need testing for COVID-19.

Client excluded from services until 14 day isolation is completed.

- Do you provide care or have close (less than 2 metres) contact with a person with COVID-19 (probable or confirmed) while they were ill (cough, fever, sneezing or sore throat):
 - Yes
 - No

If yes, no need to screen further. Since you don't have any symptoms, you do not need to be tested for COVID-19. However if it's less than 14 days since your expose, you should self-monitor for any symptoms. If symptoms develop you should self-isolate and reassess.

Remind client to self-monitor for symptoms and reassess if symptoms begin.

- Do you have close (Less than 2 metres) contact with a person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing or sore throat):
 - Yes
 - No

If yes, no need to screen further. Since you don't have any symptoms, you do not need to be tested for COVID-19. However if it's less than 14 days since your expose, you should self-monitor for any symptoms. If symptoms develop you should self-isolate and reassess.

Remind client to self-monitor for symptoms and reassess if symptoms begin.

If no to all the above:

Since you do not have any symptoms of COVID-19, you do not need to be tested for COVID-19. You should continue to self-monitor. If you develop any symptoms (fever, cough, sneezing, sore throat, or difficulty breathing) or become aware of any potential exposures to cases of COVID-19, take this self-assessment again. Available online at: <https://covid19.thrive.health/>

To protect yourself, while out in public, wash your hands frequently and maintain a distance of about 2 metres from others.

Appendix E PGNFC Screening Form Residential

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PGNFC Adult Services COVID- 19 Residential Screening Form

Program:

Name: _____

Client

Staff: _____

Date: _____

At PGNFC we take the safety of our clients, our staff and our communities very seriously. Please help us provide the safest possible services to you by completing this screening with us.

- Are you experiencing any of the following:
 - Severe difficulty breathing (struggling to breathe or speaking in single words)
 - Severe chest pain
 - Having a very hard time waking up
 - Feeling confused
 - Losing consciousness

For a residential client contact 811 HealthLink BC and ensure client safety, then contact your supervisor immediately for direction and support.

- Are you experiencing any of the following:
 - Mild to moderate shortness of breath at rest
 - Inability to lie down because of difficulty breathing
 - Chronic health conditions that you are having difficulty managing because of difficulty breathing.

For a residential client contact 811 HealthLink BC and follow all directions, then your supervisor immediately for direction and support.

- Are you experiencing any of the following:

- Fever
- Cough
- Sneezing
- Sore throat
- Difficulty breathing

If yes to any of the above, no need to screen further. As a precaution the Ministry of Health is asking anyone with symptoms (fever, cough, sneezing, sore throat, or difficulty breathing) to stay home for 14 days.

For a residential client, ask the client to isolate in their room, provide them with Personal Protective Equipment and then contact your supervisor for direction and support.

- Have you travelled to any country outside Canada, including the US, within the last 14 days:
 - Yes
 - No

If yes, no need to screen further. Please self-isolate. You do not need testing for COVID-19.

For a residential client, ask the client to isolate in their room, provide them with Personal Protective Equipment and then contact your supervisor for direction and support

- Do you provide care or have close (less than 2 metres) contact with a person with COVID-19 (probable or confirmed) while they were ill (cough, fever, sneezing or sore throat):
 - Yes
 - No

If yes, no need to screen further. Since you don't have any symptoms, you do not need to be tested for COVID-19. However if it's less than 14 days since your expose, you should self-monitor for any symptoms. If symptoms develop you should self-isolate and reassess.

For a residential client, remind client to self-monitor for symptoms and reassess if symptoms begin.

- Do you have close (less than 2 metres) contact with a person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing or sore throat):
 - Yes
 - No

If yes, no need to screen further. Since you don't have any symptoms, you do not need to be tested for COVID-19. However if it's less than 14 days since your expose, you should self-monitor for any symptoms. If symptoms develop you should self-isolate and reassess.

For a residential client, remind client to self-monitor for symptoms and reassess if symptoms begin.

If no to all the above:

Since you do not have any symptoms of COVID-19, you do not need to be tested for COVID-19. You should continue to self-monitor. If you develop any symptoms (fever, cough, sneezing, sore throat, or difficulty breathing) or become aware of any potential exposures to cases of COVID-19, take this self-assessment again. Available online at: <https://covid19.thrive.health/>

To protect yourself, while out in public, wash your hands frequently and maintain a distance of about 2 metres from others.

Appendix F Hand Hygiene

COVID19_Handwashing Poster_MD offices (Read-Only) [Compatibility Mode] - Microsoft Word

File Home Insert Page Layout References Mailings Review View Acrobat

Print Layout Full Screen Reading Web Layout Outline Draft Gridlines Navigation Pane Zoom 100% One Page Two Pages Page Width New Window Arrange All Split Synchronous Scrolling Switch Windows Macros

Document Views Show Zoom Window Macros

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



Hand Hygiene

SOAP OR ALCOHOL-BASED HAND RUB: Which is best? ▶ Either will clean your hands: use soap and water if hands are visibly soiled.



Remove hand and wrist jewellery

HOW TO HAND WASH	HOW TO USE HAND RUB
<p>1. Wet hands with warm (not hot or cold) running water.</p> 	<p>1. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 
<p>2. Apply Rub: or foam soap.</p> 	<p>2. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 
<p>3. Rub for 20-30 seconds.</p> 	<p>3. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 
<p>4. Rinse thoroughly under running water.</p> 	<p>3. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 
<p>5. Shake hands thoroughly with paper towel.</p> 	<p>3. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 
<p>6. Dry paper towel to one side of the top.</p> 	<p>3. Rub hands together to cover all surfaces (palm to palm, back of hand to palm, wrist to wrist).</p> 

2020-10-08





If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



Page: 1 of 1 | Words: 151

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Revised December 3, 2022