

What We Know

Coronaviruses are a large family of viruses that generally originate from an animal source and therefore humans have limited immunity footprints to respond to the virus. These viruses are more prevalent during the fall and winter months.

COVID-19 is the newest Coronavirus to infect the world's population resulting in our present pandemic. The knowledge of the virus evolves daily and with that comes new insights, opportunities and changes to existing practises. It is important that we all practise and respond to those opportunities and changes.

Transmission is generally from close contact to an infected person. Symptoms range from mild – like the flu and other common respiratory infections – to severe. The most common symptoms include:

- fever
- cough
- difficulty breathing
- muscle aches
- fatigue
- headache
- sore throat
- runny nose

Complications from the 2019 novel coronavirus can include serious conditions, like pneumonia or kidney failure, and in some cases, death.

Protocols for when/what Personal Protective Equipment (PPE) to use:

When caring for individuals with suspected or confirmed COVID-19 healthcare workers should follow droplet/contact precautions (surgical/procedure mask, isolation gown, gloves and eye protection).

Healthcare workers providing CPAP and BiPAP (for obstructive sleep apnea) and/or open suctioning to suspected or confirmed COVID-19 resident should don an N95 respirator, gown, gloves and eye protection responsible use of PPE or overuse of PPE when not warranted can result in a false sense of security. Habits such as not changing gloves or wearing a N95 mask too long or over multiple uses can create greater risk. N95 masks are to be used when droplet procedures may be required such as intubation and/or the specific Home or healthcare provider protocols require same. Use of masks with facial shields, gloves and gowns are needed for identified infectious conditions if warranted by the defined precautions relevant to the diagnosis. A quick reminder of On & Off sequences for PPE:

ON:

- Perform Hand Hygiene
- Put on Gown
- Put on Mask or N95 Respirator
- Put on Eye Protection
- Put on Gloves

OFF:

- Remove Gloves
- Remove Gown
- Perform Hand Hygiene
- Remove Eye Protection
- Remove Mask Or N95 Respirator

- Performa Hand Hygiene

The greatest defence and protection for all is attentive hand cleaning and avoidance of face touching, avoidance of cohorting, conscious physical distancing and proper application and removal of PPE when used.

All Healthcare providers are mandated to follow Ministry of Health infection control protocols and standards in line with Public Health and Infection Control of Canada best practices. These include but are not limited to:

- Proper use of Personal Protective Equipment (PPE)
- Daily infection control practises
- Outbreak case definitions, protocols and surveillance
- Mandatory Infection Reporting and Testing
- Occupational Health & Safety Standards

Frequently Asked Questions:

Why can't I visit my family member if I am not sick and take precautions?

Although the goal is always to limit transmission of an infectious agent during any outbreak in any Home, the goal with regards to COVID-19 is to eradicate or break the chain of infection while assuring care and services remain in place. It is in the best interest of the person living in the Home, their family members and the staff providing care and services that the Home is able to control the potential exposure rate that may occur even with the use of protective equipment.

Why can't I take my family member home and then bring back when I feel everything is okay?

It is very difficult to imagine not seeing or hugging your family member. Taking your family member home may expose them to more potential infectious scenarios. They are safest remaining where they are, knowing that infection control is a daily exercise for the staff providing care. They are experts when it comes to knowing how to respond in these times.

Why can't we just swab everyone or at least everyone who presents with cold symptoms?

The test itself can be intrusive and is not necessary unless there are presumptive positive symptoms present. Using swabs responsibly in those cases that clearly fit the case definition of symptoms assures opportunity and resources are available for future cases without overstepping or introducing intrusive testing where it is not required.

Will my family member automatically get sent to the hospital if they test positive for COVID-19?

Each case will be reviewed as it presents. Many positive cases have been successfully supported at home with close symptom monitoring. If a condition changes and/or the health team feel that a transfer to hospital is warranted, your family member will be sent to hospital following Ministry of Health guidelines for COVID-19 transfers. If you are the Power of Attorney or legally appointed contact for the Resident, you will be notified of same.

If someone in the Home does test positive, will I be told who and where that person is?

Every person has the right to privacy. The Power of Attorney or legally appointed contact for the effected Resident will be notified. Public Health and the Ministry of Health will also be notified. The Home will determine how or when they will communicate positive results while following mandated infection control guidelines.

How can I be sure that enough infection control protocols are in place?

Every Home is mandated even in the absence of any infectious disease to practice routine daily infection control practices. This ranges from environmental cleaning to staff protocols to food handling and more. Annual training on infection control guidelines are mandatory and all staff must participate. Handwashing is by far the greatest gift to breaking the chain of infection. Hand sanitizer and handwashing stations abound through the Homes. Personal Protective Equipment is available and used efficiently.

If my family member becomes sick with something else and requires medical attention at the hospital can they still be sent?

Regardless of how all encompassing this virus has become in everyone's life, it is daily business as usual at the Home. This includes assessing Residents who present with any changes in their condition and responding appropriately.

Myth Busters:

COVID – 19 can not be transmitted in hot weather or can be killed in very cold weather.

The virus can be transmitted in many climates. Regardless of the temperature or the weather, frequently clean your hands and avoid touching your face.

Taking a hot bath can prevent you from getting the virus

The hot temperature of the water will only potentially cause trauma to your skin. Again, frequently clean your hands and avoid touching your face.

Using hand dryers can prevent COVID – 19

Frequently clean your hands and avoid touching your face. After washing your hands, use a paper towel to dry or a warm hand dryer

Using an ultraviolet disinfection light will kill the virus

UV lights may cause skin irritation and should not be used as a source of hand sanitizing.

Regularly rinsing your nose with saline will prevent the virus.

It has not been shown to prevent the virus rather useful when experiencing a cold and helps with nasal congestion.

The virus only effects older people or those with pre-existing conditions.

The virus can affect anyone. Older people and those with pre-existing conditions are more at risk and as such more attention to hand cleaning and physical distancing is important.

The one certainty that we have in this uncertain time, is the strength, professionalism and commitment of our Team members. We are working through this in a collective and methodical manner. Their amazing knowledge and stamina are making the difference. We will keep you updated, optimistic and supported. We are so proud to have our Residents and Family members as part of that team.

