

CLASS ORDER #1 (Licensed Long-term Care Facilities) re: COVID-19

NOTICE TO ALL OWNERS, OPERATORS, LICENSEES, DIRECTORS OF FACILITY AND DIRECTORS OF CARE OF LICENSED LONG-TERM CARE FACILITIES IN THE FRASER HEALTH REGION (CLASS)

**ORDER OF THE MEDICAL HEALTH OFFICER
(Pursuant to Sections 30, 31, 32, 39(3) and 54(1) *Public Health Act*, S.B.C. 2008)**

The *Public Health Act*, S.B.C. 2008, c. 28 and the regulations issued thereunder are available at:
<http://www.bclaws.ca/civix/content/complete/statreg/1922970521/08028/?xsl=/templates/browse.xsl>

TO: All owners, operators, licensees, Directors of Facility and Directors of Care of Licensed Long-Term Care Facilities ("**Facilities**") (such persons referred to collectively as "**Facility Operators**")

FACILITIES: All Facilities within the Fraser Health Authority ("**FHA**") region

WHEREAS:

- A. A communicable disease known as COVID-19 has emerged in British Columbia;
- B. SARS-CoV-2, an infectious agent, can cause outbreaks of serious illness known as COVID-19 among the public;
- C. A person infected with SARS-CoV-2 can infect other people with whom the infected person is in contact;
- D. On March 17, 2020, the Provincial Health Officer, Dr. Bonnie Henry declared the COVID-19 pandemic to be an emergency pursuant to Part 5 of the *Public Health Act*, S.B.C. 2008, c. 28;
- E. On March 17, 2020, the Provincial Health Officer, Dr. Bonnie Henry, issued a letter to all Facilities advising that the residents of Facilities, being individuals who are elderly and who may have underlying conditions that compromise the immune system, are particularly at risk of developing severe illness upon becoming infected with COVID-19, and that visitors to all Facilities should be restricted;
- F. Facilities within the FHA region have experienced or may experience an outbreak or incidence of COVID-19 infection, such that it has become necessary to implement more extensive and restrictive protective measures in order to limit the possibility of further spread of COVID-19 and to protect the residents and staff of Facilities;
- G. You belong to a class of people who are the owners, operators, licensees, Directors of Facility and Directors of Care of Facilities situated within the FHA region; and
- H. I have reason to believe and do believe that the risk of outbreaks of COVID-19 in the Facilities constitutes a health hazard under the *Public Health Act*.

I HEREBY MAKE THE FOLLOWING ORDER PURSUANT TO SECTIONS 30, 31, 32, 39(3) and 54(1) OF THE PUBLIC HEALTH ACT:

THIS ORDER SUPERSEDES MY ORDER DIRECTED AT OWNERS, OPERATORS, LICENSEES, REGISTRANTS, DIRECTORS OF FACILITY AND DIRECTORS OF CARE OF LICENSED LONG-TERM CARE FACILITIES IN THE FRASER HEALTH REGION MADE ON MARCH 22, 2020

Effective immediately on receipt of this Order, Facility Operators are directed to:

1. Comply with the Long Term Care Facility Directive issued by a FHA Medical Health Officer (MHO) from time to time (the "**LTC Directive**"). The initial LTC Directive dated March 22, 2020 is attached to this Order. If updates to the LTC Directive are made, Facility Operators will be notified and the updated LTC Directive will be posted at <https://www.fraserhealth.ca/covid19LTC>.

In exceptional circumstances, where an appropriate safety plan is in place to manage health hazard risks, a FHA MHO may grant an exemption to any provision of my Order, including any provision in the LTC Directive. Facilities must apply for the exemption by contacting a FHA Licensing Officer and setting out the exceptional circumstances in writing.

The terms of this Order are in addition to, and not in replacement of the *BCCDC Infection Prevention and Control for Novel Coronavirus (COVID-19) Interim Guidance for Long-Term Care and Assisted Living Facilities* (the "**Guidance**"). Where, however, there is a conflict or inconsistency between this Order and any LTC Directive and the Guidance, the terms of this Order and the latest LTC Directive shall take precedence.

This Order remains in effect until cancelled, suspended or varied by me. LTC Directives relating to this Order are effective as of the date of the relevant LTC Directive, and will remain in effect until such time as the most recent LTC Directive is replaced by a later dated LTC Directive.

You are required under section 42 of the *Public Health Act* to comply with this Order. Failure to comply with this Order is an offence under section 99 of the *Public Health Act*. If you fail to comply with this Order, I have the authority to take enforcement action against you under Part 4, Division 6 of the *Public Health Act*.

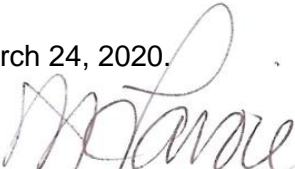
Pursuant to section 54(1)(h) of the *Public Health Act*, and in accordance with the emergency powers set out in part 5 of the *Public Health Act*, no FHA MHO will be accepting requests for reconsideration, requests for review, or requests for reassessment of this Order.

You may contact me at:

Martin Lavoie, MD, FRCPC
Chief Medical Health Officer, Fraser Health Authority
400 - 13450 - 102nd Avenue
Surrey, BC V3T 0H1
Telephone: 604-587-3828

EFFECTIVE DATE: March 24, 2020.

SIGNED:



Martin Lavoie, MD, FRCPC
Chief Medical Health Officer
Fraser Health Authority

DELIVERED BY email to all Facility Operators.

Enclosures:

Long Term Care Facility Directive re: COVID-19 effective March 22, 2020

Excerpts of *Public Health Act* and Regulations

Enclosure

Long Term Care Facility Directive re: COVID-19 effective March 22, 2020

1. Screening of persons coming into the Facility

- 1.1. Facilities must carry out screening for respiratory symptoms (including a fever) of persons (i.e. staff, residents, contractors and visitors), in accordance with the guidance issued by FHA Medical Health Officers (MHO) which may be updated at any time (“**Screening or Screened**”).

2. Visitors

- 2.1. Restrict visitors to essential visits only. Essential visits include: visits for compassionate care (e.g., end of life and critical illness); visits considered paramount to patient/client care and well being, such as assistance with feeding or mobility; and existing registered volunteers providing services as described above only.
- 2.2. Visitors must access the Facility through a single controlled entrance point.
- 2.3. Visitors will only be permitted when a visitor screening person is present.
- 2.4. Visitors whose Screening indicates any degree of respiratory symptoms (including a fever) must not be permitted to visit, unless an exemption is granted and: infection control has been consulted, the visit is arranged in advance, the visitor wears any recommended personal protective equipment and the visitor complies with all directions regarding infection control measures.

3. Screening of staff in the Facility

- 3.1. All staff must be Screened at least twice during their shift (before shift starts and at end of shift).
- 3.2. Staff must self-monitor for respiratory symptoms (including a fever) during their shift.
- 3.3. If staff exhibit respiratory symptoms (including a fever), they must immediately stop work, report any symptoms to the Facility supervisor, seek testing for COVID-19, promptly leave the Facility, and self-isolate.

4. Screening and testing of residents in the Facility

- 4.1. Residents must be Screened twice a day following the existing resident screening algorithm, as updated from time to time (currently: *Fraser Health COVID-19 Screening Process for Long-Term Care, MHSU, Assisted Living (March 15) FINAL*).
- 4.2. Immediately isolate any resident with new or worsening respiratory symptoms (including fever).
- 4.3. Swab any resident with new or worsening upper or lower respiratory symptoms (including fever), even if there is just a single resident who is ill. Follow the processes for collecting and sending specimens to the BCCDC Lab for testing as directed by Fraser Health.
- 4.4. If there are two or more ill residents, contact Public Health immediately (604-587-3828 Monday to Friday 0830-1630h or 604-527-4806 after-hours) for advice on next steps.

5. Community Activities

- 5.1. All group activities into the community must immediately cease.
- 5.2. No community organizations/groups may enter the Facility.
- 5.3. Individual residents must not go into the community except for urgent medical needs (for example: dialysis).

6. Cleaning

- 6.1. Facilities must perform enhanced cleaning of high touch surfaces (examples: door knobs, faucets, etc.), at least 2 times per day in accordance with the Fraser Health Viral Respiratory Illness Outbreak Protocol and Toolkit.

6.2. Facilities must use 0.5% accelerated hydrogen peroxide wipes or bleach wipes for enhanced cleaning.

7. Physical distancing / separation

7.1. Facilities must maximize physical separation between residents as much as possible within the confines of the physical environment. For example: increased physical separation while dining, additional meal times if possible, tray service as much as possible.

7.2. Cease group social activities within the Facility unless at least 2 metres of physical distance between residents can be maintained.

8. Transfers between Facilities

8.1. Suspend all inter-Facility transfers.

8.2. Exceptions may be made by the Regional Medical Director for Long Term Care in consultation with the Facility Medical Director.

9. Transfers to Acute Care / Emergency Department

9.1. Transfers to acute care must be approved through the regional triage intensivist group, reached through Fraser Health switchboard.

9.2. Acute site must be informed of the transfer prior to arrival of the resident.

9.3. Exceptions may be made in emergent situations where the medical situation of the resident requires 911 to be called, provided acute site is notified as soon as possible (prior to the patient's arrival at the acute site).

10. Returns from Temporary Absences

10.1. Residents who have been temporarily removed from the Facility to live elsewhere in the community (e.g. with family members) must not be permitted to return to the Facility for the duration of any COVID-19 outbreak at the Facility (as determined by a FHA MHO).

10.2. Family members seeking to temporarily re-home residents must be informed that residents will not be permitted to return in the event of an outbreak at the Facility, and agree to an alternate care plan for the resident prior to the resident's removal from the Facility.

11. Infection Control

11.1. Ensure staff adhere to contact and droplet precautions for all residents that are suspect or confirmed COVID-19.

11.2. Staff must be re-trained on infection control procedures, including hand hygiene and donning and doffing personal protective equipment.

11.3. Ensure staff follow provincial infection control guidance on BCCDC's website, including the appropriate personal protective equipment when caring for a person with COVID-19 or a person under investigation for COVID-19: [www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-\(covid-19\)](http://www.bccdc.ca/health-professionals/clinical-resources/novel-coronavirus-(covid-19)).

11.4. Provide continuous guidance to residents on respiratory hygiene/cough etiquette.

12. Supplies

12.1. Facilities must work with existing suppliers to identify supply needs for the Facility for the coming months.

12.2. Facilities must develop a plan to ensure adequate supplies of personal protective equipment and other relevant items.

Excerpts of the PUBLIC HEALTH ACT and Regulations

Definitions

1 In this Act:

"health hazard" means

- (a) a condition, a thing or an activity that
 - (i) endangers, or is likely to endanger, public health, or
 - (ii) interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or
- (b) a prescribed condition, thing or activity, including a prescribed condition, thing or activity that
 - (i) is associated with injury or illness, or
 - (ii) fails to meet a prescribed standard in relation to health, injury or illness;

Division 4 — Orders Respecting Health Hazards and Contraventions

When orders respecting health hazards and contraventions may be made

30 (1) A health officer may issue an order under this Division only if the health officer reasonably believes that

- (a) a health hazard exists,
- (b) a condition, a thing or an activity presents a significant risk of causing a health hazard,
- (c) a person has contravened a provision of the Act or a regulation made under it, or
- (d) a person has contravened a term or condition of a licence or permit held by the person under this Act.

(2) For greater certainty, subsection (1) (a) to (c) applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

General powers respecting health hazards and contraventions

31 (1) If the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, a health officer may order a person to do anything that the health officer reasonably believes is necessary for any of the following purposes:

- (a) to determine whether a health hazard exists;
- (b) to prevent or stop a health hazard, or mitigate the harm or prevent further harm from a health hazard;
- (c) to bring the person into compliance with the Act or a regulation made under it;

(d) to bring the person into compliance with a term or condition of a licence or permit held by that person under this Act.

(2) A health officer may issue an order under subsection (1) to any of the following persons:

(a) a person whose action or omission

(i) is causing or has caused a health hazard, or

(ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;

(b) a person who has custody or control of a thing, or control of a condition, that

(i) is a health hazard or is causing or has caused a health hazard, or

(ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;

(c) the owner or occupier of a place where

(i) a health hazard is located, or

(ii) an activity is occurring that is not in compliance with the Act or a regulation made under it, or a term or condition of the licence or permit of the person doing the activity.

Specific powers respecting health hazards and contraventions

32 (1) An order may be made under this section only

(a) if the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, and

(b) for the purposes set out in section 31 (1) [*general powers respecting health hazards and contraventions*].

(2) Without limiting section 31, a health officer may order a person to do one or more of the following:

(a) have a thing examined, disinfected, decontaminated, altered or destroyed, including

(i) by a specified person, or under the supervision or instructions of a specified person,

(ii) moving the thing to a specified place, and

(iii) taking samples of the thing, or permitting samples of the thing to be taken;

(b) in respect of a place,

(i) leave the place,

(ii) not enter the place,

(iii) do specific work, including removing or altering things found in the place, and altering or locking the place to restrict or prevent entry to the place,

(iv) neither deal with a thing in or on the place nor dispose of a thing from the place, or deal with or dispose of the thing only in accordance with a specified procedure, and

(v) if the person has control of the place, assist in evacuating the place or examining persons found in the place, or taking preventive measures in respect of the place or persons found in the place;

- (c) stop operating, or not operate, a thing;
- (d) keep a thing in a specified place or in accordance with a specified procedure;
- (e) prevent persons from accessing a thing;
- (f) not dispose of, alter or destroy a thing, or dispose of, alter or destroy a thing only in accordance with a specified procedure;
- (g) provide to the health officer or a specified person information, records, samples or other matters relevant to a thing's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent by the thing;
- (h) wear a type of clothing or personal protective equipment, or change, remove or alter clothing or personal protective equipment, to protect the health and safety of persons;
- (i) use a type of equipment or implement a process, or remove equipment or alter equipment or processes, to protect the health and safety of persons;
- (j) provide evidence of complying with the order, including
 - (i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and
 - (ii) providing to a health officer any relevant record;
- (k) take a prescribed action.

(3) If a health officer orders a thing to be destroyed, the health officer must give the person having custody or control of the thing reasonable time to request reconsideration and review of the order under sections 43 and 44 unless

- (a) the person consents in writing to the destruction of the thing, or
- (b) Part 5 [*Emergency Powers*] applies.

Contents of orders

39 (3) An order may be made in respect of a class of persons.

Duty to comply with orders

42 (1) A person named or described in an order made under this Part must comply with the order.

(2) Subsection (1) applies regardless of whether the person leaves the geographic area for which the health officer who made the order is designated.

Part 5 — Emergency Powers

Division 1 — Application of this Part

Definitions for this Part

51 In this Part:

"emergency" means a localized event or regional event that meets the conditions set out in section 52 (1) or (2) [*conditions to be met before this Part applies*], respectively;

"localized event" means an immediate and significant risk to public health in a localized area;

"regional event" means an immediate and significant risk to public health throughout a region or the province.

Conditions to be met before this Part applies

52 (1) A person must not exercise powers under this Part in respect of a localized event unless the person reasonably believes that

- (a) the action is immediately necessary to protect public health from significant harm, and
- (b) compliance with this Act, other than this Part, or a regulation made under this Act would hinder that person from acting in a manner that would avoid or mitigate an immediate and significant risk to public health.

(2) Subject to subsection (3), a person must not exercise powers under this Part in respect of a regional event unless the provincial health officer provides notice that the provincial health officer reasonably believes that at least 2 of the following criteria exist:

- (a) the regional event could have a serious impact on public health;
- (b) the regional event is unusual or unexpected;
- (c) there is a significant risk of the spread of an infectious agent or a hazardous agent;
- (d) there is a significant risk of travel or trade restrictions as a result of the regional event.

(3) If the provincial health officer is not immediately available to give notice under subsection (2), a person may exercise powers under this Part until the provincial health officer becomes available.

Part applies despite other enactments

53 During an emergency, this Part applies despite any provision of this or any other enactment, including

- (a) in respect of the collection, use or disclosure of personal information, the *Freedom of Information and Protection of Privacy Act* and the *Personal Information Protection Act*, and
- (b) a provision that would impose a specific duty, limit or procedural requirement in respect of a specific person or thing,

to the extent there is any inconsistency or conflict with the provision or other enactment.

Division 2 — Emergency Powers

General emergency powers

- 54** (1) A health officer may, in an emergency, do one or more of the following:
- (a) act in a shorter or longer time period than is otherwise required;
 - (b) not provide a notice that is otherwise required;
 - (c) do orally what must otherwise be done in writing;
 - (d) in respect of a licence or permit over which the health officer has authority under section 55 [*acting outside designated terms during emergencies*] or the regulations, suspend or vary the licence or permit without providing an opportunity to dispute the action;
 - (e) specify in an order a facility, place, person or procedure other than as required under section 63 [*power to establish directives and standards*], unless an order under that section specifies that the order applies in an emergency;
 - (f) omit from an order things that are otherwise required;
 - (g) serve an order in any manner;
 - (h) not reconsider an order under section 43 [*reconsideration of orders*], not review an order under section 44 [*review of orders*] or not reassess an order under section 45 [*mandatory reassessment of orders*];
 - (i) exempt an examiner from providing examination results to an examined person;
 - (j) conduct an inspection at any time, with or without a warrant, including of a private dwelling;
 - (k) collect, use or disclose information, including personal information,
 - (i) that could not otherwise be collected, used or disclosed, or
 - (ii) in a form or manner other than the form or manner required.
- (2) An order that may be made under this Part may be made in respect of a class of persons or things, and may make different requirements for different persons or things or classes of persons or things or for different geographic areas.

Offences

- 99** (1) A person who contravenes any of the following provisions commits an offence:
- (k) section 42 [*failure to comply with an order of a health officer*], except in respect of an order made under section 29 (2) (e) to (g) [*orders respecting examinations, diagnostic examinations or preventive measures*];