

November 25, 2020

To: Directors of Care, Licensed Long Term Care Facilities in the Vancouver Coastal region

Re: Preventing the Introduction and Spread of COVID-19 in Long Term Care – 5 Critical Actions

With recent increases of COVID-19 cases in the community, Licensing is reminding long term care operators of the importance of focusing on the following **five critical actions** to prevent the introduction and spread of virus into facilities:

1. Clinical Leadership

The Director of Care has overall accountability for ensuring all processes are in place as outlined in this letter. Facilities must also ensure that a **Nursing Supervisor (DC2 Level)** provides on-site clinical leadership on days, evenings and weekends, ideally 12 hours per day, 7 days per week. Critical functions include ensuring staff symptom screening before each shift, monitoring staff compliance with infection prevention and control practices including consistent and appropriate use of personal protective equipment (PPE), and active surveillance and swabbing of residents as appropriate.

2. Maintaining Appropriate Staffing Levels

All facilities must **maintain adequate staffing levels** as per the approved hours per resident day allocation that support care needs being met and the operation of the facility. Care should be paid to ensuring **all** shifts are appropriately staffed and that there is one Registered Nurse per 100 patients on night shifts, 7 days per week. If working short, staff are more likely to have lapses in their infection prevention and control practices, which is why staffing levels are critical to preventing the introduction and spread of COVID-19.

3. Screening of Staff Before Every Shift

All staff (clinical and non-clinical) must be **screened and assessed for signs and symptoms of COVID-19** at the start of each shift using the latest VCH approved tools. A screener with clinical expertise should be available at all times for screening and assessment; staff should not be self-assessing for symptoms. The screening station should be located at the front of the facility and in such a way that staff are not able to bypass the screener or station. Screening forms must be retained and made available if needed for the purposes of public health contact tracing.

4. Active Surveillance of Residents

All residents must be **monitored daily** (twice daily during outbreaks) for signs and symptoms of COVID-19, or any change in their clinical status, and swabbed accordingly. Use the VCH LTC resident

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assessment tool for surveillance purposes and document results in each resident's chart. Facilities must maintain appropriate PCR swabs for resident testing.

5. Appropriate Use of Personal Protective Equipment (PPE)

Maintain an adequate supply of medical grade, Health Canada-approved masks, gowns, gloves and eye protection. Supplies must be readily accessible to staff and visitors as per current provincial guidelines and should not be rationed e.g. new masks must be available and donned by staff after eating. Ensure all staff are **trained in the appropriate use of PPE**, and are monitored throughout their shift by their supervisor to ensure appropriate practices. Staff should wear medical masks at all times, including in break rooms and change areas, except when eating or drinking. While eating or drinking, staff should maintain 2 metres distance from others.

In addition to these five critical actions, facilities are reminded of the importance of maintaining environmental services/housekeeping during day, evening and night shifts, and of ensuring access to alcohol-based hand rub or hand hygiene sinks at all nursing stations and in all resident rooms.

Finally, a reminder that facilities must report any new cases of COVID-19 amongst residents or staff to the Medical Health Officer at 604-675-3900, or after-hours 604-527-4893.

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