

The Second Wave: Infection Prevention and Control (IPAC) for COVID-19 and People with Disabilities

Feb 26, 2021, 1:00pm-3:00pm

Presenter: Timothy Valyear, RPN, Owner, Integrity Care Consultants Inc.

Centre for Independent Living in Toronto (CILT) Workshop

Facilitators:

David Meyers, Senior Manager of Independent Living Programs

Leisa DeBono, Direct Funding Program Manager

John Mossa, Independent Living Skills Coordinator

Rebecca Wood, Peer and Parenting Program Coordinator

Land Acknowledgement

CILT would like to begin by acknowledging that the land on which we gather is the territory of the Haudenosaunee, and most recently, the territory of the Mississaugas of the Credit First Nation. The territory was the subject of the Dish With One Spoon Wampum Belt Covenant, an agreement between the Iroquois Confederacy and the Ojibwe and allied nations to peaceably share and care for the resources around the Great Lakes.

This territory is also covered by the Upper Canada Treaties.

Today, the meeting place of Toronto (from the Haudenosaunee word Tkaronto) is still the home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work in the community, on this territory.

Workshop Guidelines

- We will be recording the Zoom workshop and the questions and answers section so we can share it with people with disabilities and our allies.
- Workshop is content heavy but meant to empower you with information and resources.
- For privacy and time management, everyone will be muted and no video except for the hosts.
- If you have a specific question/comment for the facilitators, please ensure that you type it in the chat box and Rebecca Wood (CILT Staff) will ask it during questions and answers section. Your question/comment will be anonymous in the final recording.
- If you need support, please select Rebecca Wood (CILT Staff) in the chat box and they will assist you.
- We want to co-create a space that everyone will feel heard and respected.
- We reserve the right to remove anyone from the webinar who does not follow these guidelines.

Workshop Agenda

- 1) Welcome, Land Acknowledgement, Introductions 5 mins
- 2) Workshop Guidelines 5 mins
- 3) Workshop Objectives 50 mins

- 4) Question and Answers 50 mins
- 5) Resources, Evaluations & Thank Yous 10 mins

Workshop Disclaimer

- **DISCLAIMER:** This PowerPoint presentation is for general information purposes only.

- **The information is current as of November 23, 2020.** The information given is subject to change depending on possible policy, regulation and law changes in Ontario. For the most current information, participants should check the Government of Ontario websites and other websites mentioned in the presentation.

- This presentation is the **property of Timothy Valyear, RPN, Owner, Integrity Care Consultants Inc.** and neither the whole or part is to be circulated without our express consent. His contact number is 905-895-0842.

- This workshop is based on Ontario IPAC practices.

Workshop Objectives

This workshop will have following objectives:

- 1) Importance of Infection Control
- 2) Routine Practices to Prevent Infections
- 3) What Causes and How to Prevent the Flu and Covid-19

- 4) The Importance of Personal Protective Equipment (PPE) and Different Types of PPE and How to Use it Properly
- 5) Question and Answers
- 6) Resources

About Us & Brief Introductions

Centre for Independent Living in Toronto (CILT): Rooted in the “Nothing About Us Without Us” disability rights movement, **CILT is a community-based Resource Centre run by people with disabilities for people with disabilities.** We work towards building a society where people with disabilities have social and economic equity.

CILT Core Programs assist persons with disabilities to take control of their own lives and to live independently in the community. They are Information & Referral/Volunteer Program, Peer Support & Parenting with a Disability Network, Independent Living Skills Training, Attendant Service Application Centre (ASAC), & the Direct Funding Program.

CILT believes in the Independent Living Philosophy where people with disabilities are seen as **consumers** who have the right to: examine choices, make decisions, take risks, make mistakes, and take responsibility for one’s own life.

About Us & Brief Introductions

Timothy Valyear, RPN, Owner/President, Integrity Care Consultants Inc.

Timothy Valyear is an RPN who began his healthcare career in 1979. He is a healthcare educator. His experience includes development and operation of independent living and outreach programs for people with disabilities and seniors, development of a nursing and home care services agency, and sales and marketing development and implementation. Tim is also operational director for a home care branch.

Infection Prevention and Control (IPAC): Definition

Infection prevention and control prevents or reduces the risk of transmission of micro-organisms (germs) to staff, and others

The primary focus is on ***prevention***.

Operate from a *minimal risk* and *predictable outcome* philosophy based on a risk assessment.

Infection Control: Statistics

Of the nearly 56.9 million deaths worldwide in 2016, infectious diseases account for more than 17 million – or one in three
3 million died from respiratory infections alone

Flu causes about 12,200 **hospitalizations** and 3,500 deaths in **Canada** each year.

According to John Hopkins Medicine, there have been approximately 54,495,858 Covid-19 cases world wide as of Nov. 16/20

According to the World Health Organization there are 1 billion people annually who get the flu world wide

<https://www.who.int/news-room/fact-sheets/detail/the-top-10-causes-of-death>

https://www.who.int/whr/1996/media_centre/press_release/en/

<https://hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/coronavirus-disease-2019-vs-the-flu>

Infection Control

Infection prevention and control helps to reduce the risk of transmitting micro-organisms to:

Yourself

Your attendants

Your family and friends

Others in your community

Others in the world

Micro-organisms

A micro-organism (microbe) is a small living plant or animal seen only with a microscope.

Microbes are everywhere.

Some microbes are harmful and can cause infections.

They are called pathogens.

Non-pathogens are microbes that do not usually cause an infection.

Micro-organisms (Cont'd)

There are 4 major types of microbes:

Bacteria are one-celled microbes

Viruses invade living cells in order to grow and multiply

Fungi are microbes that live on organic matter, such as plants or animals

Parasites are organisms that derive nourishment and protection from other living organisms, known as hosts

Micro-organisms

A typical person's hand can carry 10,000 to 10 million microorganisms, some resident and some transient –

Resident microorganisms live and grow normally on the skin. They protect the skin and are more difficult to remove.

Transient microorganisms do not normally live on the skin and are acquired by contact with other objects or people. They are easy to remove by hand hygiene.

Some people may have no symptoms (are in incubation period of a disease or are a carrier of a disease) and yet they can spread microorganisms that make others ill.

Virus – Bacteria –Skin Cell

Baseball = Virus

Pitchers Mound = Bacteria

Entire baseball field = your own immune system Infections

Common Healthcare Acquired (HAI) infections are:

Urinary tract infections

Respiratory system (colds, pneumonia, bronchitis, flu)

Gastrointestinal system (nausea, diarrhea)

Skin (wound or IV site infections)

Infection Control

There is now a renewed emphasis on infection prevention and control due to a number of recent events such as:

Hepatitis C being spread through the use of contaminated blood products

AIDS

Avian flu H1N1 Virus

SARS and Covid-19

Increase in antibiotic resistant microorganisms which are commonly called AROs (e.g. MRSA, VRE). For more information

on antibiotic resistance go to www.hc-sc.gc.ca/iyh-vsv/med/antibio_e.html

CHAIN OF TRANSMISSION

The Chain of Transmission illustrates how:

Infections are spread

Infections can be prevented

Image of six links in the chain: Infectious Agent, Reservoirs, Portals of Exit, Modes of Transmission, Portals of Entry, Susceptible Host

Transmission only occurs when all six links in the chain are present and connected

By eliminating any of the six links through effective infection prevention and control measures, transmission will not occur

INFECTIOUS AGENT

Infectious Agents Include;

Bacteria: TB, Strep, Food Poisoning

Viruses: Flu, Cold, HIV, SARS, Covid-19

Fungi: Thrush

Chain is broken by;

Antibiotics

Disinfection

Sterilization

RESERVOIRS

Reservoirs Include;

People

Water

Food

Chain is broken by;

Control of the environment

Proper food storage

Water treatment

PORTALS OF EXIT

Portals of Exit include;

Blood, secretions, excretions, and skin

Chain is broken by;

Hand hygiene

Disposal of waste

Control of excretions and secretions

MODES OF TRANSMISSION

Modes of transmission include;

Contact (hands or objects)

Droplet (coughing or sneezing)

Airborne

Chain is broken by;

Spatial separation
Control of the environment
Hand hygiene
Personal Protective Equipment

PORTALS OF ENTRY

Portals of Entry include;
Eyes, nose and mouth
Respiratory tract
Gastrointestinal (GI) tract
Broken skin
Chain is broken by;
Hand hygiene
PPE

SUSCEPTIBLE HOST

Susceptible Hosts include;
Compromised immunity, diabetes, surgery, burns, age

Chain is broken by;
Immunization
Nutrition
Recognition of high-risk Clients
Treatment

What are Routine Practices?

Routine practices are based on the premise that all blood, body fluids, secretions, excretions, mucous membranes, non-intact skin or soiled items are potentially infectious.

These practices describe prevention and control strategies to be used with **all** clients during **all** client care.

These include:

Hand hygiene (hand washing and use of alcohol-based hand rubs)

The use of **personal protective equipment** /barrier precautions to prevent contact with a client's blood, body fluids, secretions, excretions, non intact skin or mucous membranes

Routine Practices

If you have an illness, you **must** act responsibly to prevent spreading it to others. Examples include:

Cover your mouth and nose if coughing (e.g. use a tissue, cough into your elbow). Discard tissue into a waste basket and perform hand hygiene.

Do not sneeze or cough towards any person in front of you
Stay at least 1metre/3 feet away from others if you are coughing and sneezing

Visit your doctor if your symptoms do not disappear or if they become worse

Wash your hands frequently

Wear gloves if you have a rash or cut on your hands

Stay home from work or volunteering if you feel sick

It is also recommended by the Infection Control and Surveillance Standards Task Force that you should have an annual influenza immunization.

Risk Assessment

The risk assessment takes into account the following:

- √ The likelihood of exposure to bodily fluids
- √ Type of bodily fluids that the attendant may come into contact with
- √ The route of potential exposure to infections/microorganisms
- √ The level of risk to the consumer/attendant
- √ The time it takes to complete an activity that involves potential exposure
- √ Environment in which the activity is being carried out

What causes influenza? How is it spread?

Influenza (the flu) is caused by a virus. The virus can live in your nose, mouth, and eyes, and on your skin. It spreads very easily. Two types of viruses mainly cause the flu: influenza A and B.

When someone who has the flu sneezes, coughs or talks, they release tiny droplets into the air. These droplets contain the flu

virus. If they get into your mouth, nose or eyes, you can get infected – 2 Metres.

The droplets can also land on things like doorknobs, phones, tissues or kitchen utensils. If you touch them and then touch your own eyes, nose or mouth, the virus can pass to you and make you sick.

Covid-19

“COVID-19 is transmitted via droplets during close, unprotected contact. Airborne spread has not been documented for COVID-19, but aerosols may be generated during aerosol generating medical procedures which could theoretically lead to transmission through this route”.

NOTE: due to the early stage of Covid-19, readers are encouraged to routinely review agency policy and procedures and/or Public Health and Health Canada websites for the current infection control best practices.

<https://www.publichealthontario.ca/-/media/documents/ncov/wwksf-routes-transmission-mar-06-2020.pdf?la=en>

Covid-19: What we can do

Physical (social) distancing

Together, we can slow the spread of COVID-19 by making a conscious effort to keep a physical distance between each other. Physical (social) distancing is proven to be one of the most effective ways to reduce the spread of illness during an outbreak.

This means making changes in your everyday routines to minimize close contact with others, including:

avoiding crowded places and non-essential gatherings

avoiding common greetings, such as handshakes

limiting contact with people at higher risk like older adults and those in poor health

keeping a distance of at least 2 metres from others”

Covid-19: What we can do

Hygiene

Proper hygiene can help reduce the risk of infection or spreading infection to others:

wash your hands often with soap and water for at least 20

seconds, especially after using the washroom and when preparing

food use alcohol-based hand sanitizer if soap and water are not available”

Covid-19: What we can do

Cleaning

Coronaviruses are one of the easiest types of viruses to kill with the appropriate disinfectant product when used according to the label directions. Health Canada has published a [list of hard surface disinfectants](#) that are likely to be effective for use against COVID-19.

Although they do not claim to kill COVID-19, cleaners can play a role in limiting the transfer of microorganisms. Health Canada recommends cleaning high-touch hard surfaces often, *using either regular household cleaners or diluted bleach according to the label directions*. This bleach solution should be prepared according to the instructions on the label or in a ratio of 250 mL (1 cup) of water per 5 mL (1 teaspoon) of bleach. Directions are based on bleach that is 5% sodium hypochlorite, to give a 0.1% sodium hypochlorite solution. Never mix bleach with other chemical products and use it in a well-ventilated area. Special precautions must be used when cleaning with bleach to avoid serious incidents.

These surfaces include: Toilets, phones, electronics, door handles, bedside tables, television remotes

Covid-19: What we can do

Wearing masks or face coverings

Medical masks, including surgical, medical procedure face masks and respirators (like N95 masks), must be kept for health care workers and others providing direct care to COVID-19 patients.

Wearing a non-medical mask or face covering while out in public is **recommended** for periods of time when it is not possible to consistently maintain a 2-metre physical distance from others, particularly in crowded public settings, such as:
Stores shopping areas and public transportation
Public health officials will make recommendations based on a number of factors, including the rates of infection and/or transmission in the community. Recommendations may vary from location to location.

Hand Hygiene

Hand hygiene includes hand washing and use of alcohol-based hand rubs.

It is the **most** important method for preventing the spread of microorganisms.

Hands of the staff/volunteers are continuously in contact with clients and their environment and are therefore most at risk for contamination and transferring to other people and other objects. The fingernail area has the potential of containing the majority of agents – artificial nails, nail extensions and chipped nail polish may further increase the risk. **DON'T FORGET THE THUMBS!**

Hand Hygiene

The components of good hand washing include:

Turn tap on to comfortable temperature

Wet hands

Use one pump of soap.

Rub the hands together covering all surfaces to create some friction.

Rub hands for a minimum of 20 seconds and longer if you can see your hands are soiled

Rinse hands thoroughly under running water.

Pat hands dry with a paper towel (Do not use client's towel or reusable towels. If no paper towels, ask the client for a clean tea towel or towel)

Turn taps off with paper towel

Dispose of paper towel in waste basket

Use moisturizer

Hand Hygiene

Waterless Alcohol Based Hand Rubs

An alcohol-based hand rub is “an alcohol-containing preparation designed for application to the hands to reduce the number of microorganisms on the hands.

The criteria for selection is that it is 60% to 90% alcohol (isopropanol or ethanol)

Their use also results in less skin irritation and dryness.

Hand Hygiene

The Hand Hygiene Resource Center suggests the following steps: Apply 1.5 to 3 ml. of an alcohol gel to the palm of one hand, and rub your hands together

Cover all surfaces of your hands and fingers, including areas around/under fingernails

Continue rubbing hands together until alcohol dries – it should take at least 10 to 15 seconds of rubbing before your hands feel dry.

Also remember with waterless alcohol based handrubs

They are Flammable

Hands must be dry so as not to dilute the hand rub.

You must wash your hands with soap and water if your hands are visibly soiled

Hand Hygiene

When an Attendant/Service Provider should Use Hand Hygiene

At the beginning of each visit

Before direct contact with a consumer (e.g. your hands touch a client's skin, mucous membranes) especially those at increased risk (e.g. a person on chemotherapy, person with diabetes)

After you have direct contact with a consumer especially before you have direct contact with anyone else

Hand Hygiene

When hands have touched or might have touched objects (e.g. garbage, laundry, bedpans) that might have been contaminated

with another person's blood, body fluids (e.g. urine, feces), secretions (e.g. tissue from client blowing his/her nose) or excretions (e.g. from a wound)

After using the toilet

Hand Hygiene

After blowing your nose or coughing into your hands

After sneezing into your hands

Before touching your face

After removing gloves and other protective equipment

Before leaving a person's home

Do not share hand lotion and do not refill lotion containers as microorganisms can grow in them.

Personal Protective Equipment (PPE)

Personal Protective Equipment examples:

Gloves – proper procedure

Gowns - proper procedure

Face protection- masks and protective eye-wear

Video Reviews from www.youtube.com:

Public Health Ontario

Hand Hygiene: How to Hand Wash and Hand Rub 3 minutes total-

<https://www.publichealthontario.ca/en/health-topics/infection-prevention-control/hand-hygiene/jcyh-videos>

Putting on Full Personal Protective Equipment 2 minutes total -
<https://www.publichealthontario.ca/en/videos/ipac-fullppe-on>

Taking off Full Personal Protective Equipment 1 minute total -
<https://www.publichealthontario.ca/en/videos/ipac-fullppe-off>

PPE

The appropriate equipment should be used when blood, secretions, excretions or body fluids are likely to come in contact with the staff's/volunteer's skin, mucous membranes or could penetrate clothing.

If your skin is broken (cracked, cut, scraped) wear gloves to protect your client. Consult with your physician on how to improve your skin condition if you have dermatitis or eczema.

Hand Hygiene

“Adherence to hand hygiene recommendations is the single most important practice for preventing the transmission of microorganisms in health care and directly contributes to patient safety.” [Public Health Agency of Canada]

Hand Washing

This information is also presented visually in a “How to handwash” poster by Ontario Public Health

"Good" hand washing techniques include:

Using an adequate amount of soap,

Rubbing the hands together to create friction

Lather for 15 seconds

Rinsing under running water

Drying your hands with a single use towel or air dryer

Turning off the taps/faucets with a paper towel

Protecting your hands from touching dirty surfaces as you leave the bathroom or prior to putting on gloves

DO NOT use alcohol based hand rub immediately after washing hands, as skin irritation will be increased.

The use of gloves is not a substitute for hand washing.

Hand Hygiene – more tips

Cover cuts with bandages and wear gloves for added protection (cuts are very vulnerable to infections).

Artificial nails and chipped nail polish have been associated with an increase in the number of bacteria on the fingernails. Be sure to clean the nails properly.

Keep your hands away from your eyes, nose or mouth.

Assume that contact with any human body fluids is infectious

Choosing your method

ALCOHOL-BASED HAND RUB vs. SOAP AND WATER

(Public Health Ontario)

Alcohol-based hand rub (ABHR):

preferred when hands are not visibly soiled
should contain 70 – 90% alcohol
takes less time than hand washing
more effective than hand washing with soap and water when hands are not visibly soiled
mechanical rubbing action is important to kill transient bacteria
less drying to hands than soap and water

How to Handrub Poster from Ontario Public Health image description:

1. Apply 1-2 pumps of product to palms of dry hands
2. Rub hands palm to palm
3. Rub in between and around fingers
4. Rub back of each hand with palm of other hand
5. Rub fingertips of each hand in opposite palm
6. Rub thumb clasped in opposite hand
7. Rub hands until product is dry. Do not use paper towels
8. Once dry your hands are safe

Hand washing with soap and running water: preferred when hands are visibly soiled because alcohol is inhibited by organic matter mechanical action of washing, rinsing and drying removes most transient bacteria

4 moments of hand hygiene

The 4 Moments for Hand Hygiene in All Health Care Settings:

- BEFORE initial consumer environment contact
- BEFORE any procedure where there may be a risk of exposure to body fluids and before putting on gloves
- AFTER body fluid exposure risk and after removing gloves
- AFTER consumer environment contact

Hand hygiene is needed on entry to, and exit from, the home as well as according to the *4 Moments*.

Personal Protective Equipment

All of the PPE listed here prevent contact with the infectious agent, or body fluid that may contain the infectious agent, by creating a barrier between the worker and the infectious material.

Gloves, protect the hands

Gowns or aprons protect the skin and/or clothing

Masks and respirators protect the mouth and nose

Goggles protect the eyes

Face shields protect the entire face

Key Points About PPE

Don before contact with consumer

Use carefully – don't spread contamination

Remove and discard properly

Immediately perform hand hygiene

Sequence for Donning PPE

Gown first

Mask or respirator

Goggles or face shield

Gloves

***Combination of PPE will affect sequence – be practical**

During Covid-19 Public Health recommends gown, procedure mask and gloves during all direct consumer care.

How to Don a Gown

(Image description, line drawing of a person putting on a gown and tying at neck)

Select appropriate type and size

Opening is in the back

Secure at neck and waist

If gown is too small, use two gowns

Gown #1 ties in front

Gown #2 ties in back

Reusable Gowns: Public Health Ontario Guidelines

“A review of current guidance from Public Health Ontario (PHO), Health Canada (HC), the Public Health Agency of Canada (PHAC), the Canadian Standards Association Group (CSA), the US Center for Disease Control and Prevention (CDC), the World Health Organization (WHO) and a limited literature scan was completed to summarize information regarding the appropriate usage and conservation of gowns in health care, worn as part of PPE”.

“Reusable (multiuse) isolation gowns are laundered after each use and typically made of tightly woven 100% cotton, 100% polyester, or polyester-cotton blends.¹¹ They are usually chemically finished and may be pressed through rollers to enhance the liquid barrier properties.¹⁴ It is important to remember that Medical Isolation Gowns for COVID-19 in Health Care Settings reusable isolation gowns must be removed after care of a client/patient/resident and placed into an appropriate container for laundering, between client/patient/resident”.

<https://www.publichealthontario.ca/-/media/documents/ncov/ipac/2020/08/covid-19-medical-isolation-gowns-healthcare.pdf?la=en>

Face Protection

Disposable masks and eye protection should be worn to protect the mucous membranes of the eyes, nose and mouth during activities likely to generate splashes or sprays of bodily fluids.

Disposable masks are not to be shared or washed, and are disposed of at the end of each day of use.

Masks – protect nose and mouth

Should fully cover nose and mouth and prevent fluid penetration

Goggles/Face Shield – protect eyes

Should fit snugly over and around eyes

Personal glasses not a substitute for goggles

Anti-fog feature improves clarity

Types of Masks

(Chart transcribed here)

Type of Mask:

Standard Face Mask (procedure or isolation mask)

Use:

Protection for minimal exposure to infectious droplets, short duration tasks, tasks that do not involve exposure to blood/body fluids, protection from client/patient/resident during transportation outside of room.

Advantages:

Inexpensive

Disadvantages:

Not fluid or water resistant

Type of mask:

Fluid resistant Mask

Use:

Protection for heavy exposure to infectious droplets or blood/body fluids

Advantages:

Good comfort and fit, fluid resistant

Disadvantages:

Expensive

Type of Mask:

Surgical Mask

Use:

Protection for Exposure to infectious droplets or blood/body fluids, long duration tasks

Advantages:

Good comfort and fit, fluid resistant, inexpensive

Disadvantages:

None

Type of Mask:

NIOSH Certified N95 respirator

Use: Protection for airborne pathogens

Advantages:

Provides protection from small particle aerosols, better face seal prevents leakage around mask

Disadvantages

Requires fit-testing, training and seal-checking, expensive, uncomfortable for long periods of use

Types of Masks cont'd

Procedure or isolation masks are worn for short duration when there is little exposure to infectious droplets.

Fluid Resistant Masks are worn when there is a significant risk of exposure to infectious droplets or blood/body fluids.

3 Types - Low, moderate and high levels expose

N95 Masks are worn for protection where airborne pathogens are a risk. The wearer must be mask fit tested for the appropriate N95 mask.

Public Health recommends a procedural mask be worn for direct consumer care.

How to Don a Mask

Place over nose, mouth and chin

Fit flexible nose piece over nose bridge

Secure on head with ties or elastic over ears

Adjust to fit

Procedure Mask: When to change them

Procedure Masks must be changed when they have become soiled, damp or damaged.

Glove use

When is the appropriate time to wear gloves?

•When there is a risk of exposure to Blood, Body Fluids, and when you have non-intact skin or performing the following ADL supports:

- Incontinence
- Mouth care
- Catheter care
- Bowel routine
- Suctioning

Do's and Don'ts of Glove Use

Work from “clean to dirty”

High touch risk:

Don't touch your face or adjust PPE with contaminated gloves

Don't touch environmental surfaces except as necessary during client care

Change gloves

During use if torn and when heavily soiled (even during use on the same client)

After use

Discard in appropriate garbage

Never wash or reuse disposable gloves

How to Don Gloves

Perform hand hygiene

Don gloves last

Select correct type and size

Insert hands into gloves

Extend gloves over isolation gown cuffs (if gown worn)

How to Safely Remove PPE

“Contaminated” and “Clean” Areas of PPE

Contaminated – outside front

Areas of PPE that have or are likely to have been in contact with body sites, materials, or environmental surfaces where the infectious organism may reside

Clean – inside, outside back, ties on head and back

Areas of PPE that are not likely to have been in contact with the infectious organism

Sequence for Removing PPE

Remove gloves

Remove gown

Perform hand hygiene

Remove eye protection/face shield

Remove mask

Perform hand hygiene

How to Remove Gloves (1)

Grasp outside glove at the palm away from wrist (closer to palm)

Peel away from hand, turning glove inside-out

Hold in opposite gloved hand

Removing Isolation Gown

image description: line drawing demonstrating the following steps

Unfasten ties

Peel gown away from neck and shoulder

Turn contaminated outside toward the inside

Fold or roll into a bundle

Discard

Hand Hygiene

Perform hand hygiene immediately after removing PPE.

If hands become visibly contaminated during PPE removal, wash hands before continuing to remove PPE

Wash hands with soap and water or use an alcohol-based hand rub

Environmental Controls

- Employees clean or sanitize common areas and equipment.
- Use appropriate hand washing products and dedicated hand washing sinks (i.e. bathroom or laundry sinks).
- General Cleaning Guidelines:
 - Cleaning products can cause harm if not used and stored properly – always read labels carefully and do not mix cleaning products as some contain harmful chemicals.
 - Clean from higher to lower
 - Work from far to near
 - Work from dry to wet
 - Work from cleanest to dirtiest
 - Change cleaning cloths and water frequently
 - Damp cloth for dusting
 - Rinse and dry washed surfaces

Environmental Controls: Covid 19

According to Public Health they recommend the following for environmental cleaning during self-isolation:

- *Clean and disinfect all frequently touched surfaces in your home, including bathroom and toilet surfaces at least once per day and when contaminated with respiratory secretions. Clean with soap and water and then wipe with an over the counter disinfectant.*

- *Use cleaning products provided by consumers and be aware of those who have sensitivity to scents.*

Vaccinations

Proven to prevent serious communicable illnesses

Health care agencies require workers to have their routine vaccinations up to date before they start work

COVID-19 Vaccine Information for Ontario, Canada, World Health Organization

Ontario: Getting a COVID-19 vaccine

<https://covid-19.ontario.ca/covid-19-vaccines-ontario>

Canada: Vaccines and treatments for COVID-19: Vaccine rollout

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/covid-19-vaccine-treatment/vaccine-rollout.html#a3>

World Health Organization (WHO) Science in 5 is conversation in science

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/media-resources/science-in-5>

Summary

Summary of Key Points

The use of good hand hygiene is the **most** important method for preventing the spread of microorganisms

Stay home if you are ill. And receive notification from consumer/employer

Use Routine Practices : These practices describe prevention and control strategies to be used with **all** clients during **all** visits and include hand hygiene and personal protective equipment/barrier precautions.

Keep yourself healthy (good nutrition, exercise, enough sleep etc.. Immunization and control stress)

Keep your immunization up-to-date.

Get an annual influenza vaccination.

Summary Cont'd

Infection Prevention and Control includes all actions used to prevent or reduce the risk of transmission of microorganisms to others. The primary focus is on prevention.

Microorganisms are very small organisms that are invisible to the naked eye - Titanic

They include bacteria, viruses and fungi.

Some microorganisms can cause infections while others do not and are essential to our environment and wellbeing.

Some people may have no symptoms (are in incubation period of a disease or are a carrier of a disease) and yet they can spread microorganisms that make others ill.

Some people may be in contact with microorganisms and not become ill while others do become ill.

The spread of microorganisms (i.e. the Chain of Transmission – agent / microorganisms, mode of transmission, point of entry and susceptible person).

If one of the links in the Chain of Transmission is interrupted, an infection will **not** occur.

The importance of keeping up to date with the latest practices for infection prevention and control.

Question and Answer Period

IPAC Webinar Resources

Infection Control Websites for further information:

Health Canada. *Routine Practices and Additional Precautions for Preventing Transmission of Infection in Health Care Settings 2017*

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/routine-practices-precautions-healthcare-associated-infections.html>

Health Canada. *Canada Communicable Disease Report Supplement: Infection Control Guidelines Hand Washing, Cleaning, Disinfection and Sterilization in Health Care*, Dec 1998

<https://www.simcoemuskokahealth.org/docs/default-source/jfy-health-care->

[professionals/CCDR Hand Washing Cleaning Disinfection and Sterilization in HC](#)

Provincial Infectious Diseases Advisory Committee. *Preventing Febrile Respiratory Illnesses: Protecting Patients and Staff*.
September 2005

<https://collections.ola.org/mon/11000/256200.pdf>

Medical Isolation Gowns for Covid19 in Healthcare Settings

<https://www.publichealthontario.ca/-/media/documents/ncov/factsheet/2020/07/factsheet-covid-19-medical-gowns.pdf?la=en>

Resources: References

Public Health Agency of Canada

<https://www.canada.ca/en/public-health/services/health-promotion.html>

Public Health Ontario

<https://www.publichealthontario.ca/>

**Public Health Ontario Infection Prevention and Control (IPAC) –
Online Learning**

<https://www.publichealthontario.ca/en/education-and-events/online-learning/ipac-courses>

IPAC Canada

<http://www.ipac-canada.org/>

CDC Guidance for the Selection and Use of Personal Protective Equipment in Healthcare Settings

<http://www.cdc.gov/HAI/pdfs/ppe/PPEslides6-29-04.pdf>

Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Best Practices for Hand Hygiene in All Health Care Settings. 4th ed. Toronto, ON: Queen's Printer for Ontario; April 2014.

COVID-19 medical masks and respirators: Information for health professionals

<https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/personal-protective-equipment/medical-masks-respirators/health-professionals.html#a2>

The '4 Fs' of medical mask selection

<https://www.beckershospitalreview.com/quality/the-4-fs-of-medical-mask-selection.html>

World Health Organization: Coronavirus disease pandemic

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

Resources: References cont'd

Government of Canada (2020, July 24). *Coronavirus disease (COVID-19): Prevention and risks*. Date modified 2020-07-17.

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html?utm_campaign=gc-hc-sc-coronavirus2021-ao-2021-0005-9834796012&utm_medium=search&utm_source=google_grant-ads-107802327544&utm_content=text-en-434601690167&utm_term=covid#h

Public Health Ontario: What we know so far about Covid19

<https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/what-we-know>

Resources: References Cont'd

COVID-19 Routes of Transmission – What We Know So Far

<https://www.publichealthontario.ca/-/media/documents/ncov/wwksf-routes-transmission-mar-06-2020.pdf?la=en>

2019-nCoV - What We Know So Far About...the Incubation Period

<https://www.publichealthontario.ca/-/media/documents/ncov/what-we-know-feb-04-2020.pdf?la=en>

COVID-19 - What We Know So Far About ... The Period of Communicability

<https://www.publichealthontario.ca/-/media/documents/ncov/covid-wwksf/what-we-know-communicable-period-mar-27-2020.pdf?la=en>

Wearing Masks in Public and COVID-19 – What We Know So Far

https://www.publichealthontario.ca/-/media/documents/ncov/covid-wwksf/what-we-know-public-masks-apr-7-2020.pdf?la=en&_cldee=cHJvdWx4YUBwaHNkLmNh&recipientid=contact-185c2fb5b4a2e611837d0050569e0009-4b80838e14374b7eaf0d7a8d1c4e04f2&esid=72f92c13-60c0-ea11-bfb4-0050569e118f

Recommended Steps for Putting On and Taking Off Personal Protective Equipment Nov 2012

<https://www.publichealthontario.ca/-/media/documents/r/2012/rpap-recommended-ppe-steps.pdf?la=en>

Routine Practices and Additional Precautions, Third Revision: November 2012

<https://www.publichealthontario.ca/-/media/documents/B/2012/bp-rpap-healthcare-settings.pdf?la=en>

PPE Supplier Directory

Disclaimer: This listing is compiled by CILT for information purposes only. CILT does not recommend or endorse the companies listed.

Workplace PPE Supplier Directory

Review a list of companies that sell personal protective equipment (PPE) and other supplies to keep your employees and customers safe from COVID-19.

<https://covid-19.ontario.ca/workplace-ppe-supplier-directory>

Consumer Validated PPE Suppliers

Personal protective equipment (PPE) and other supplies (list updated as of June 5, 2020)

[https://www.dfontario.ca/df_public/Personal%20Protective%20Equipment%20\(PPE\)%20Options%20across%20the%20province%20-%20June%205%202020.pdf](https://www.dfontario.ca/df_public/Personal%20Protective%20Equipment%20(PPE)%20Options%20across%20the%20province%20-%20June%205%202020.pdf)

Starkmans Medical Supplies

416-534-8411 or 800-387-0330

info@starkmans.com

orders@starkmans.com

<https://starkmans.com/>

Maxill Express

1-800-268-8633

info@maxill.com

<https://www.maxillexpress.com/ca/>

Great Canadian Supplies

905-331-1180

info@gcs.supplies

<https://greatcanadiansupplies.ca/en/>

Northern Surgical Medical Supplies

1-877-348-0493

Resources, Evaluations & Thank Yous

- Resources: PowerPoint, PPE Resources and Zoom Recording
- 5 Zoom Poll Evaluation Questions
- Thank you for your time & participation

**CILT & Timothy Valyear
Contact Information**

Centre For Independent Living in Toronto

365 Bloor Street East, Suite 902, Toronto, Ontario M4W 3L4

Tel: (416) 599-2458, TTY: 711

DF Hotline: 1-800-354-9950

Fax: (416) 599-3555

E-mail: cilt@cilt.ca

Website: www.cilt.ca

Twitter: @CIL_Toronto Facebook: @CILTToronto

Timothy Valyear, RPN,

Owner, Integrity Care Consultants Inc.

558 Goodyear Crescent

Newmarket, Ontario L3Y 8L2

Telephone: 905-895-0842

Telefax: 905-895-3422

Mobile: 647-929-9428

E-mail: timicc@rogers.com