

Summary of COVID-19 measures and restrictions for New Brunswick Adult Residential Facilities and Nursing Homes currently in outbreak

Purpose: provide quick reference table for long term care facility operators to use during an outbreak. Please note the following:

- An outbreak is declared by the Medical Officer of Health following risk assessment of a laboratory confirmed case in a resident or staff member.
- Associated measures/restrictions listed below have been approved by the NB Pandemic Task Force.
- This table is intended as a framework only, the Medical Officer of Health may adjust any restrictions due to increased risk for vulnerable populations based on risk assessment.
- During an outbreak the Regional MOH, Public Health (PH) and the Provincial Rapid Outbreak Management Team will provide guidance and directives on applying outbreak measures.

November 5, 2020

Outbreak Facility

OUTCOME		Control and prevent further disease spread within the facility.
FACILITY ACCESS		All access to be restricted to single entry, which must be monitored, log must be kept of all individuals entering facility, including contact information. A single point of exit should also be established.
SCREENING	staff (including essential health service providers)	Active.
	visitors (including volunteers, non-essential service providers, designated support person etc.)	No visitors permitted during an outbreak.
MASKS	staff (direct care)	Medical mask mandatory.
	staff (non-direct care)	Medical mask mandatory.
PHYSICAL DISTANCING	staff	Keep 2m apart all times (does not apply needed for essential care).
	residents	Keep 2m apart all times (does not apply needed for essential care).
	general visitors	N/A (not open to ANY visitors).
NEW ADMISSIONS		No admissions during an outbreak (unless otherwise allowed by RMOH).
READMISSIONS		Avoid readmitting a COVID-19 negative resident into a facility where there are active COVID-19 cases. Consult with RMOH for COVID-19 positive residents who can be discharged back to facility.
TRANSFERS		Residents with confirmed or suspected cases of COVID-19 should remain in their room unless there is essential need for movement and/or transport.
DISCHARGES & TEMPORARY LEAVES		Under guidance of RMOH.
STAFF MOBILITY		Restricted to one facility.
RESIDENT ASSESSMENTS		Twice daily, more if clinically indicated.
REPORTING		Submit to Public Health daily : <ul style="list-style-type: none"> • List of staff/others entering facility during an outbreak (Appendix L for ARF, Appendix N for NH) • COVID-19 Investigation Line List (Appendix C) for NH only.
VISITATION		Virtual only, no other visitation permitted, including palliative, unless indicated by MOH.
GIFTS/FOOD		No gifts, flowers or homemade food from visitors/family members will be permitted during an outbreak.
COMMUNAL / SOCIAL ACTIVITIES		Cancel or re-schedule all social/group activities.
MEALS		Serve residents individual meals in their rooms while ensuring adequate monitoring and supervision.

Outbreak Facility

CARE OF DECEASED BODIES	Droplet and Contact precautions should be used for known and suspect cases of COVID-19.
ROOM CLEANING	<p>Twice (2) daily cleaning and disinfection of all high touch surfaces (minimum).</p> <p>Terminal clean (discharge, transfer, death): facility policy, discard all magazines, personal care supplies, disposable supplies, etc. Any resident-owned items (e.g. clothing, photos, televisions, furniture, cards and ornaments) should be removed, any items with hard surfaces cleaned, and placed in a bag for family or representative.</p> <p><i>While risk of transmission of COVID-19 via these items is likely low, at this time best practice may be for families to store for 5 days prior to handling. If the family wishes to donate any of the resident's items to the NH/ARF or another resident, they must first be thoroughly cleaned and disinfected.</i></p>
WASTE	Regularly empty waste/garbage, tie bag and place outside room for pickup. No further special handling is required for waste.
LAUNDRY	<p>Tie off the laundry before leaving the room, notify laundry service provider of droplet/contact precautions, as per your facilities procedures.</p> <p>If laundry of a confirmed case is done <u>within the home</u>:</p> <ul style="list-style-type: none"> • Gloves and a medical/procedure mask should be worn when in direct contact with contaminated laundry. • Contaminated laundry should be placed into a laundry bag or basket with a plastic liner and should not be shaken. • Clothing and linens belonging to the ill person can be washed together with other laundry, using regular laundry soap and hot water (60-90°C). • Laundry should be thoroughly dried. • Hand hygiene should be performed after handling contaminated laundry and after removing gloves. • If the laundry container comes in contact with contaminated laundry, it should be disinfected.
PORTABLE FANS	Not permitted in resident room while Droplet/Contact precautions in place.
CHARTING	<p>Do not take any part of the resident chart into the room to transfer information from the resident room:</p> <ul style="list-style-type: none"> • Keep dedicated pen and post-it notes inside resident room • Write information on post-it and stick on window/door of resident room • Exit the resident room following the Enter/Exit Room Procedure <p>Use another pen outside the room to record information on chart/paper.</p>