

Communicable Disease Prevention Plan

POLICY: MACL is committed to providing a safe and healthy workplaces and services. A combination of measures will be used to minimize employee exposure to communicable diseases in the workplace, including those recommended by public health. Our work procedures will protect not only MACL employees but also those it serves, other workers and visitors. All employees must follow all procedures outlined in this plan to prevent or reduce exposure to infectious disease.

PURPOSE: The purpose of this guidance document is to provide MACL staff with important information that is required to help prevent the spread of communicable diseases.

NOTE: Please see appendixes for additional specific guidelines which may be in place during times of elevated risk such as during a pandemic.

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WHAT IS A COMMUNICABLE DISEASE?

A communicable disease is an illness that can be spread from one person to another and cause a large number of people to get sick. Communicable diseases are spread through contact with a human or animal, their blood or bodily fluid, or contaminated items carrying the virus or bacteria.

Examples of communicable disease include COVID-19, norovirus and seasonal influenza. The level of risk of certain communicable diseases, including COVID-19, may increase from time to time on a seasonal basis.

EMPLOYEE ROLE IN MINIMIZING RISK OF TRANSMISSION

Each MACL employee has a role to play in ensuring the health of their location and those it serves. Recognizing that our choices and actions impact those around us, it is critical that each staff follow this plan, any site-specific safety protocols, and all directions from Public Health Officers. An important way to reduce the spread of communicable diseases is to keep sick people away from those who are not sick.

- **Do Not Attend Work If You Are Sick:**

Employees who are exhibiting symptoms of a communicable disease (e.g. fever, coughing, prolonged or uncontrolled diarrhea) are prohibited from attending work and must notify their supervisor that they are unable to attend work.

- **If You Become Sick at Work:**

Should an employee become ill when at work, he/she should separate themselves from

others, contact the supervisor and make arrangements to go home.

- **Return to Work after Symptoms of Communicable Disease:**

All employees should stay home if they are sick until at least 24 hours after their fever (temperature of 100 degrees Fahrenheit or 37.8 degrees Celsius or higher) is gone. Temperature should be measured without the use of fever-reducing medicines (medicines that contains ibuprofen or acetaminophen).

- **Hazard Assessment and Recognition:**

Before interacting with supported individuals staff should assess the point of care risk to determine what precautions are needed. Where hazards are present in the situation (e.g. close contact with surfaces or items contaminated with bodily fluids, close contact required with a person who is symptomatic, coughing or sneezing) staff should take action to minimize the risk (e.g. hand hygiene, use of PPE, physical distancing).

Employees who see a person served or co-worker exhibiting symptoms of symptoms of a communicable disease (e.g. fever, coughing, diarrhea) in the workplace must report immediately to the supervisor or on-call supervisor.

- **Reporting a Communicable Disease:**

The Communicable Disease Regulations of the Health Act of British Columbia requires “that any person knowing or suspecting that another person is suffering from a communicable disease shall without delay make a report to the medical health officer”. Depending on the disease and how it is spread, health officials *may* require notification of others who may have come into contact with the disease. Visit the website of the BC Centre for Disease Control for an updated list: www.bccdc.ca

- **Additional Measures During Periods of Elevated Risk:**

The risk of certain communicable diseases may increase from time to time or on a seasonal basis. This may occur at a local or regional level, or within a certain workplace. Public Health Officers may declare elevated risks due to outbreak or pandemic. Employees must follow all MACL directives as well as orders, guidance, recommendations and notices issued by the provincial health officer as they pertain to MACL services, local region and work sites. During times of pandemic, this plan will be expanded to include appendices that outline additional control measures (e.g. isolation protocols, expanded personal protective equipment requirements, physical distancing expectations, daily health checks, testing etc.)

- **Critical Staffing Levels during an Outbreak or Pandemic:**

MACL considers staffed Residential Homes, Supported Living, Homeshare Services and certain administrative positions to be critical services, and will prioritize these to maintain service delivery and staffing during pandemic outbreaks.

Where reasonably possible, MACL will work to maintain all programs during a pandemic threat,

however service suspensions, and/or reductions, relocations of sites and transferring/cross-training of staff may be necessary. The support, well-being and health of people receiving services will be paramount in these decisions. Information about the pandemic status from Fraser Health or Health Canada, and about program or staffing changes will be provided to employees as quickly as possible from the CEO in cooperation with the Program Directors.

Programs that are most subject to service suspension and/or reductions include Sandcastle Preschool, Employment Services, Bridge Training Services, Community Development Program, Individual Support Services, Supported Child Development, and Child and Youth Activity. The decision to suspend or otherwise adapt programs or services, either proactively (including anticipation of disease or outbreaks), or more typically reactively (in response to disease or outbreaks), lies at the discretion of the Association and appropriate local authorities and would typically be based on considerations such as local public health concerns, local community concerns, and/or staffing shortages. MACL will remain vigilant and follow instructions from local authorities while maintaining essential service levels. Should a change in non-essential service delivery occur, staff from the affected program(s) may be deployed/temporarily transferred to an essential service. In such cases, deployed staff will support the residential staff with cooking, cleaning, and other duties that do not require additional training. They will not be required to complete personal care or administer medications unless they have been trained to do so.

Directors will determine staffing levels necessary to ensure safety of persons served under emergency conditions, and have authority to refer or transfer an individual to a medical care facility if warranted.

Should a pandemic outbreak impact the administrative staff the CEO will determine whether administrative office closure is warranted. Staff payroll and scheduling will not be interrupted in the event of an office closure.

STANDARD PRECAUTIONS PROCEDURES:

“Standard Precautions” are steps that all employees must take to protect themselves when coming into contact with the blood or body fluids of other people. Standard precautions are intended to stop the spread of germs to others.

We cannot always tell if another person is infected with a disease, so it is best to treat the blood and body fluids of every person as potentially infectious. Potentially infectious body fluids include blood, feces, saliva, vomitus, semen, nasal and vaginal secretions. MACL and its staff will follow the five steps of Standard precautions:

1. Education
2. Hand Washing
3. Cough and Sneeze Etiquette
4. Wearing Protective Barriers
5. Cleaning and Disinfecting
6. Disposal of Contaminated Articles

1. Education:

As part of the initial orientation and at least annually thereafter, MACL staff will complete training on infection control and Standard precautions. MACL will also educate and strongly encourage vaccination and will maintain a record of immunizations as instructed by the public health.

2. Hand Washing:

Hands play a significant role in acquiring and in transmitting a virus from one person to another and is accepted as the single most important practice to prevent the spread of communicable disease. Liquid soap and paper towels will be provided at each MACL site. All staff and/or persons served must ensure they wash their hands regularly, thoroughly, and with warm soap and water:

- Before, during, and after preparing food
- Before preparing medication
- Before eating
- After using the washroom
- After sneezing, coughing or blowing/wiping one's nose
- After smoking
- Assisting another person who has sneezed, coughed or blow/wiped his nose
- Assisting another person with personal hygiene
- After handling animals or animal waste
- When hands are dirty or whenever in doubt
- More frequently when someone in your workplace or home is sick.

Staff should use a paper towel to turn off the tap at the sink after they have washed their hands so that they do not contaminate their hands again. The same paper towel can be used to open the door of the washroom and other doors that you may have to open to get back to your work area.

3. Respiratory Hygiene:

When staff feel the urge to cough or sneeze they must ensure they Turn their head and cough or sneeze inside of the elbow or into a disposable tissue. Disposable tissues should be used only once and thrown away immediately so that they do not contaminate surfaces.

Tissues will be made available in high-traffic staff areas. Staff should avoid touching eyes, nose or mouth.

4. MACL Support for good hand and respiratory hygiene:

MACL sites will post reminders to wash hands, use proper cough and sneeze etiquette and avoid touching eyes, nose or mouth. Additionally:

- Each site supervisor will ensure the site has the necessary resources to enable people to properly clean their hands by providing access to soap and water and, if that is not possible, alcohol-based hand sanitizer.

- As possible, Supervisor will ensure tissues are available in high traffic areas.
- Supervisors will ensure that workers can clean their hands frequently and whenever needed.
- Supervisors will ensure that all staff, persons served and visitors properly clean their hands before entering the site and after contact with possibly contaminated objects and surfaces.

5. Wearing Personal Protective Equipment: (PPE)

Personal protective equipment, commonly referred to as "PPE", is equipment worn to minimize exposure to illnesses. Personal protective equipment may include items such as gloves, masks, gowns and safety glasses. Correct use of PPE can help prevent some communicable disease exposures, but it should not take the place of other control measures such as handwashing, cough and sneeze etiquette.

It's important that any PPE workers use is appropriate for the purpose. The effectiveness of PPE depends on every person wearing it correctly and consistently.

Gloves:

The use of gloves does not replace the need for hand hygiene. Gloves often create a moist environment that facilitates the growth of microorganisms. Hands should be properly washed before the gloves are put on and after the gloves are removed. Hand hygiene is also needed before and after the replacement of gloves during a procedure or in between tasks. The recommended medical gloves include those marketed as sterile surgical or non-sterile examination gloves made of latex or vinyl. The following general guidelines are recommended:

- a) Use gloves for procedures involving contact with areas of the body that may carry blood borne diseases or infection.
- b) Use gloves when in contact with mucous membranes.
- c) Change gloves between contacts.
- d) Gloves must be removed and replaced when they become heavily soiled and when working between tasks.
- e) Gloves should always be removed using a glove-to-glove or skin-to-skin technique which will prevent contaminating the hands.
- f) Do not wash or disinfect gloves for reuse. Disinfecting agents cause deterioration.

Masks and other Personal Protective Equipment (PPE):

Masks and other PPE (e.g. eye protection, gowns) should be worn by staff as directed by public health, MACL policy and procedure including directives found in appendixes to this plan, and as indicated in Care Plans of persons served.

Staff who are providing support within 6 feet of an individual who is coughing should wear a mask.

Please see appendixes for additional specific guidelines which may be in place during times of elevated risk such as during a pandemic.

6. CLEANING CONTAMINATED SURFACES

Communicable Diseases are inactivated by alcohol and by chlorine. Cleaning of environmental surfaces with a neutral detergent followed by a disinfectant solution is recommended. Surfaces which are frequently touched with hands should be cleaned often, a minimum of twice daily during a period of pandemic or as directed by the Program Director. Every shift should have a designated staff to carry out general hygiene/sanitation.

Surfaces visibly soiled with blood, body fluids or excrement must be cleaned and sanitized immediately when safe to so do. The person doing the cleaning should wear disposable gloves to avoid exposure to blood or body fluids.

The below are disinfectant approved for use at MACL sites:

Disinfectants	Recommended Use	Precautions
<p>CHLORINE: Household Bleach (5.25%) 1:10 (5,000 ppm solution) 100mL bleach to 900mL water MUST BE MIXED FRESH DAILY</p>	<p>Ensure surface remains wet for 10 minutes. Air Dry, wipe surfaces to dry and remove any residue, or rinse with potable water as necessary.</p>	<p>As per Safety Data Sheet (SDS)</p>
<p>Canadian Disinfectant drugs with a DIN (e.g. Lysol, EcoSure, Vanguard) A DIN (Drug Identification Number) given by Health Canada that confirms it is approved as a disinfectant.</p>	<p>Wipe surfaces with wipe or spray until surface is visibly wet. Allow surface to remain wet for 10 minutes. Let air dry. If surfaces are extremely dirty, clean first with another wipe before disinfecting.</p>	<p>As per Safety Data Sheet (SDS)</p>

Hard Surfaces:

- a) Wipe up blood or other body fluids with a disposable cloth/paper towel and discard it appropriately (see 5. Disposal of contaminated articles)
- b) Soiled surfaces should be disinfected thoroughly after cleaning. Clean the area using a solution of household bleach and water (1 part bleach to 10 parts water). This solution should be freshly made up or it may lose its strength.
- c) Allow this solution to sit on the contaminated surface for 10 minutes, then wipe clean and discard the cloth.
- d) Soak mops or brushes used for cleaning in the bleach solution for 20 minutes.

Dishes and Cutlery:

- a) Wash and sanitize all utensils, cutting boards and counters to prevent raw foods from contaminating ready-to-eat foods. Use squirt bottle or cloth dipped in a solution of household bleach and water (1 part bleach to 9 parts water). This solution should be freshly made up or it may lose its strength.
- b) Wash all dishes in an automatic dishwasher or use a three step dishwashing technique

which includes a final sanitizing stage.

- c) Ensure that hands are washed well after loading soiled dishes, and before unloading clean dishes.

Soiled Laundry:

- a) Linen and clothing that has been contaminated with blood or body fluids should be handled as little as possible.
- b) These articles should be transported directly to the washing machine and laundered in hot soapy water.
- c) Disposable gloves should be worn when handling soiled laundry.

Disposable items which are contaminated with blood or body fluids should be immediately placed in a plastic bag which is tied and placed into the garbage.

After completing any clean-up of contaminated objects and surfaces, staff must wash their hands thoroughly.

7. DISPOSAL OF CONTAMINATED ARTICLES

- a) Dispose of biological waste in a puncture-resistant container lined with a leak-proof plastic bag.
- b) Consider all biological waste as infectious.
- c) Wear gloves and handle all contaminated wastes carefully to prevent body contact.
- d) Hold only the outside of the container when emptying it. Never reach into the container.
- e) Do not load the container beyond its capacity or compact the contents.
- f) Do not "toss" garbage bags down the stairs.
- g) Compaction may lead to additional contamination of the work area.
- h) Any object that could cut or puncture the skin such as needles or broken glass may carry infectious material and should be handled with caution. Dispose of 'sharps' in unbreakable, non-pierce able containers that have a lid. Never place 'sharps' in the regular trash. Dispose of razors carefully.

8. OTHER PRECAUTIONS

- a) Food should not be shared.
- b) Straws and beverages should not be shared.
- c) Never share toothbrushes or razors. Small amounts of blood can be transmitted from one user to another.
- d) Wrap sanitary napkins before disposing.
- e) A mouth shield (for use in mouth to mouth resuscitation) and disposable gloves should be available in the site's first aid kit.
- f) It is recommended that staff wear a disposable mask in addition to gloves when cleaning a vomiting or fecal accident caused by someone who may have a gastrointestinal infection.