

**Richmond
Society for
Community
Living**

COVID-19 SAFETY PLAN

Respite Caregivers

**This plan was developed with the input of RSCL staff and
the Joint Occupational Health and Safety Committee**

Revised February 2021

The COVID-19 Safety Plan

COVID-19 Safety Plans are required by the Office of the Provincial Health Officer and WorkSafe BC to ensure service agencies are meeting health guidelines and ensuring the safety of the people they serve along with their staff/contractors.

RSCL has developed 3 COVID-19 Safety Plans:

1. RSCL COVID-19 Safety Plan – applicable to all staffed programs and services
2. Respite COVID-19 Plan – applicable to Respite Contracted Caregivers
3. Home Share COVID-19 Plan – applicable to Home Share Contracted Caregivers

RSCL is committed to providing a safe and healthy environment for everyone. The RSCL COVID-19 Safety Plan helps determine the level of risk associated with COVID-19 for staff and individuals. It outlines safety measures in place to mitigate the risks associated with the COVID-19 Pandemic. The RSCL COVID-19 Safety Plan also includes guidelines to follow during the pandemic and identifies responsibilities of the various roles within the agency.

All 3 COVID-19 Safety Plans were written in conjunction with the input of RSCL Staff and the Joint Occupational Health and Safety Committee.

The RSCL COVID-19 Safety Plan is available in each RSCL location. It is made available in an accessible location for review, reference, and in case it is requested to be seen by visitors.

The Respite Manager(s) conducts training with all Respite Caregivers regarding the Respite COVID-19 Safety Plan.

In order to ensure all staff and caregivers are kept up to date when BC Public Health issues new orders, expectations, or guidelines, RSCL will release their RSCL COVID Expectations in response to new directives from BC Public Health. This is made available to all staff and caregivers electronically; it is recommended that Respite Caregivers review these documents each time they are released and keep them with this Respite COVID-19 Safety Plan.

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Respite Caregiver Responsibilities And Guidelines

RSCL is committed to the health and safety of the people we support as well as our contracted caregivers. We continue to actively monitor provincial and federal health updates and our response has mirrored the directions of the authorities on this pandemic.

Respite Caregiver Responsibilities:

- Follow the Exposure Control Plan

Respite Caregivers Recommended Guidelines:

- **Temperature Checking:** It is recommended that you take your temperature prior to providing support and someone in the home where picking up the individual takes the individuals temperature before your time together
 - See Temperature Guidelines
- **Wearing of Masks**
 - Cloth Mask Guidelines
- **Personal Protective Equipment**
 - Complete Point of Care Risk Assessments
 - Personal Protective Equipment (PPE) Use
 - Mask, goggles and gloves must be donned while providing personal care
 - If while providing respite an individual is demonstrating symptoms of COVID 19 the caregiver must take them directly home
- **Hand Hygiene**
 - See Exposure Control Plan/Training Plan
- **Sanitizing and Cleaning of Home, if applicable**
 - See Exposure Control Plan/Training Plan
- **Use of Personal Vehicles to transport Individuals:** it is recommended to disinfect your vehicle before and after transporting an individual
 - See Vehicle Transportation and Cleaning Guidelines

Exposure Control Plan

Respite Caregiver

RSCL is committed to providing a safe and healthy environment for all individuals and Home Share contractors. To prepare for and respond to a potential widespread impact from the spread of the Coronavirus, an Exposure Control Plan Committee has been established. **A combination of measures will be used to minimize exposure to infectious disease, including the most effective control technologies available. Our procedures will not only protect you and the individuals you support, but also others who come into your home. You must follow the procedures outlined in this plan to prevent or reduce exposure to infectious disease.**

SIGNS AND SYMPTOMS OF CORONAVIRUS

(similar to other respiratory illnesses)

Fever, sore throat, dry cough, sneezing, shortness of breath, breathing difficulties, nausea, vomiting, diarrhea, loss of appetite, chills, muscle aches, fatigue, runny nose, headache

CONTROL MEASURES RESPONSIBILITIES

Respite Caregiver:

- Stay home if you are sick
- If you have symptoms of COVID-19, complete the online Self-Assessment, call 8-1-1 or your health care provider and follow the direction provided. **Call 9-1-1 if your symptoms are severe.** Contact the Respite Manager
- Contact the Respite Manager if:
 - You suspect an individual you support has symptoms of COVID -19
 - You suspect someone else in your home, a family/support network member of the individual you support has symptoms of COVID -19
- Complete the required training provided by RSCL
- Follow Universal Precautions (standard precautions, hand hygiene, PPE, cleaning and disinfection, cough and sneeze etiquette, waste disposal)
- Follow COVID-19 precautions such as social distancing, avoid touching your face, practice food safety
- Complete enhanced cleaning procedures as applicable to the support you provide
- Complete Point of Care Risk Assessments
- Follow Personal Protection Equipment (PPE) procedures
- Contact the Respite Manager if you will be travelling outside of Canada
- Follow the direction provided by the Province, Vancouver Coastal Health, WorkSafeBC etc.

FURTHER INFORMATION

- Be informed from credible health agencies such as the BC Centre for Disease Control, Vancouver Coastal Health, HealthLinkBC, World Health Organization websites.
- Be informed from credible news agencies such as CBC/Global/CTV News

COVID-19: Contact Transmission

(taken from the BC Centre for Disease Control website on November 3, 2020)

Respiratory diseases, like influenza and COVID-19, are spread by liquid droplets that come out of the mouth and nose when a person coughs, sneezes, and sometimes, when a person talks or sings. These droplets usually land one to two metres away, but they can land on another person if they are close by. Diseases can spread if droplets with the virus enter the body through the eyes, nose or throat.

COVID-19 can also spread by touch. If droplets are left on objects and surfaces after an infected person sneezes, coughs on, or touches them, other people may become infected by touching these objects or surfaces, and then touching their eyes, nose or mouth. That is why we recommend you cough or sneeze into your arm and wash your hands regularly.

Experiences of COVID-19 in hospital settings around the world, including in B.C., suggest that COVID-19 is primarily spread by droplet contact. While there is some discussion that COVID-19 can spread by staying in the air (by aerosols), there is no convincing scientific evidence to support this. An exception is aerosols produced by aerosol-generating medical procedures.

Efforts to stop the spread of COVID-19 should focus on reducing droplet contact:

- Keep practising social distancing
- Stay home if you are sick and limit your contact with others
- Wash your hands often with soap and water or an alcohol-based hand sanitizer containing at least 60% alcohol if hand washing with soap and water is not available
- Cough and sneeze into a tissue or the bend of your arm
- Avoid touching your face with unwashed hands
- Clean and disinfect surfaces and objects
- Wear a mask when needed

DROPLET CONTACT

- Some diseases are spread by infected droplets contacting surfaces of the eye, nose, or mouth. Large droplets that may or may not be visible to the naked eye are made when a person sneezes or coughs. These droplets usually spread only one to two metres and quickly fall to the ground.
- Influenza and SARS are examples of diseases that can spread by droplet contact.

The evidence suggests that COVID-19 is transmitted by droplets.

AIRBORNE TRANSMISSION

- Airborne transmission is when microorganisms travel on much smaller evaporated droplets (often called aerosols). These droplets stay in the air for many hours and often travel long distances. Transmission occurs when others breathe the microorganism into their throat or lungs.
- Examples of diseases spread by airborne transmission include measles, chickenpox, and tuberculosis.

Control Measures in Place at RSCL

It is suggested you adopt the following measures:

Exposure Control Plan – included at the beginning of this Safety Plan – is a document created by a workplace (RSCL) in response to an identified risk (COVID-19), and it documents the specific and appropriate controls that will minimize or eliminate that risk.

Health Checks – Ensure you check your health status daily. If you have any symptoms of COVID-19, call 8-1-1 or contact your physician.

Universal Safe Work Procedures/ Prevention – continue to follow routine practices, which include hand hygiene (hand washing is the simplest, most effective means of controlling the spread of COVID-19), cough and sneeze etiquette and the use of PPE such as gloves, eye protection and gowns (where appropriate).

Point of Care Risk Assessments – these are completed to determine PPE use.

Social Distancing – Social distancing is one of the best ways to minimize the risk of infection. Wherever possible, ensure to maintain 2 metres (6 feet) from others.

Infection Control – If an individual is exhibiting the signs of the virus the following steps must be completed:

- **Call 9-1-1 if symptoms are severe** then call the family/caregiver to meet them at the hospital.
- If applicable, call the identified contact person of the sick individual and ask them to pick that person up as soon as possible
- Inform the supported individual and/or the identified contact person to complete the online Self-Assessment, call 8-1-1 or their health care provider if their symptoms are not severe and to follow the direction provided
- Ensure disinfecting cleaning in all areas is completed once the individual has left
- Inform the Program Manager

Hand Hygiene – Hand washing is one of the best ways to minimize the risk of infection by helping you avoid transferring infectious material from your hands to other parts of your body (particularly your eyes, nose, and mouth) or to other surfaces that you touch (contact exposure). Ensure this is for 20 seconds (ABC song, Happy Birthday twice).

- Wash your hands with warm water and soap:
 - At the beginning of your shift
 - Whenever hands are visibly soiled
 - After using the washroom
 - Practice food safety, including washing all produce, avoiding consumption and cross-contamination of raw or undercooked animal products
 - Before and after eating, drinking, smoking, handling personal care products or contact lenses
 - Following injury where skin is broken
 - Before and after providing first aid

If soap and water are not available, hand sanitizer or another available disinfectant is required. Hand sanitizer is not as effective as washing your hands with soap and water.

[Enhanced Cleaning](#) – If applicable, extra precautions must be taken, i.e. twice daily (at minimum) cleaning of light switches, door handles, telephone, keyboards, general surfaces etc. Disinfecting products which are active against COVID-19 must be used. See [Disinfection Products Effective Against Coronaviruses](#).

[Cough/sneeze etiquette](#) – Cough/sneeze etiquette is a combination of measures designed to minimize the transmission of diseases via droplet or airborne routes. The components are:

- Education for supported individuals, including hand washing
- Covering the mouth and nose with a sleeve or with a tissue during coughing and sneezing
- Using tissues that contain secretions with prompt disposal into the garbage
- Turning the head away from others

[Vehicle Cleaning](#) - See the recommended [Vehicle Transportation And Cleaning Guidelines](#)

[COVID-19 Safety Plan and PPE Training](#) – all caregivers must complete the COVID-19 Safety Plan training which includes donning and doffing of PPE. For those where English is a second language, there are supporting links within the training in other languages.

Donning PPE = putting on PPE

Doffing PPE = taking off PPE

[Personal Protective Equipment \(PPE\)](#) – Caregivers are responsible for sourcing their own PPE and should contact the Program Manager if they are not able to.

[Disposing of garbage and other potentially infected materials \(used PPE\)](#) – Follow these guidelines for handling and disposing PPE:

- Handle garbage as little as possible
- Use waterproof garbage bags or other appropriate containers
- Never reach into garbage or disposal containers with your bare hands
- Don't compress garbage bags
- Don't overfill garbage bags. Leave enough free space at the top so the bag is light and easy to grab
- Use disposable gloves to pick up bags or to support them from underneath
- Hold bags by their tops, away from your body, not against your body.

[Cleaning and Disinfecting During an Outbreak](#)

Vomit and diarrhea

Steps to follow when cleaning up vomit or feces, or cleaning the home during and after illness:

- Wear disposable gloves, surgical mask, eye protection and gown
- Use paper towels to soak up excess liquid. Transfer these and any solid material directly into a plastic garbage bag
- Clean the soiled area with detergent and hot water, and rinse. Do not use the cleaning cloth or sponge to clean other areas of the house as this may lead to further spread of the virus
- Wipe area with the designated cleaner for COVID-19. Keep the area wet with sanitizer for 2 minutes
- Dispose of all cleaning cloths and gloves into a garbage bag
- Wash hands thoroughly using soap and running water for at least 30 seconds

Cleaning dishes, carpets, towels, bedding, and other laundry

- Dishes or utensils should be washed in a dishwasher, on the hot cycle, or with hot water and detergent
- Soiled carpets should be cleaned with detergent and hot water if possible

- Do not share towels, and quickly machine-wash any towels used by an ill person
- Wash any soiled bedding as soon as possible on a “hot cycle/sterilize mode”

Follow these guidelines for handling soiled or contaminated laundry

- Handle laundry carefully. Don’t hold close to your body. Use disposable gloves
- Isolate contaminated laundry from other linen, and bag it separately
- Place wet laundry in leak-proof bags or containers
- Wash contaminated laundry and laundry bags in hot water (minimum 70°C) with detergent for 25 minutes. If using lower water temperatures, use an appropriate concentration of cold water and low temperature detergents, which may include bleach.

[Relevant information sources](#) –Be informed from credible health agencies such as the BC Centre for Disease Control, Vancouver Coastal Health, HealthLinkBC, World Health Organization websites. Be informed from credible news agencies such as CBC/Global/CTV News.

Point of Care Risk Assessment

Definition and Context

In the case of a pandemic or outbreak of infectious disease, specific precautions and procedures will be identified. Caregivers will be educated and trained on these specifics at the time they are identified.

Prior to any interaction with a potentially contagious individual, it is imperative to assess the infection risk posed to yourself. A risk assessment is based on professional judgement about the situation and up-to-date information on how the specific location has designed and implemented various controls, along with the availability and use of Personal Protective Equipment (PPE).

When should I conduct a Point of Care Risk Assessment?

The Point of Care Risk Assessment (PCRA) is an assessment that must be performed before every interaction with the individuals.

The PCRA is designed to help decide what level of risk you are exposed to by the tasks done throughout the day. It is also used to determine what actions or precautions you should take in order to reduce the risk of exposure to infectious disease.

The Respite Manager is responsible to ensure you are trained in how to conduct a PCRA. You will be provided with a copy of this.

It is suggested this form be completed when you contact the family to schedule respite, including hourly and overnight care. This form does not need to be completed for every interaction however you do need to answer the 5 questions mentally and take note of each answer to make the right decision for next steps.

RSCL | POINT OF CARE RISK ASSESSMENT (PCRA) FOR COVID-19

INDIVIDUAL'S NAME: _____ STAFF/CAREGIVER: _____
 DATE: _____ TIME: _____ TEMPERATURE: _____

Fever = 38°C degrees/100.4°F or higher.
Average body temperature is 37°C/98.6°F

Instructions: Answer questions in the white boxes. Then follow the arrows for direction.

1	IS THE HAZARD PRESENT? WHAT IS THE INDIVIDUAL'S HEALTH STATUS?	DOES THE INDIVIDUAL REPORT OR HAVE ONE OR MORE OF THE FOLLOWING SYMPTOMS? <input type="checkbox"/> Fever <input type="checkbox"/> Difficulty breathing or shortness of breath <input type="checkbox"/> Loss of sense of smell/taste <input type="checkbox"/> Loss of appetite <input type="checkbox"/> Chills <input type="checkbox"/> Muscle Aches <input type="checkbox"/> Fatigue <input type="checkbox"/> Sneezing <input type="checkbox"/> Dry Cough (new onset or worsening chronic cough) <input type="checkbox"/> Diarrhea <input type="checkbox"/> Nausea/Vomiting <input type="checkbox"/> Sore Throat <input type="checkbox"/> Runny Nose <input type="checkbox"/> Headache
		NO Individual is healthy
2	DIRECT or INDIRECT CARE WHERE AM I DOING CARE?	CAN SOCIAL DISTANCING BE MAINTAINED? (min 2meters) <input type="checkbox"/> Yes <input type="checkbox"/> No
		YES INDIRECT CARE: General Support
		NO DIRECT CARE: Hands on support. Personal Care. Feeding. Assisting to walk. Etc.
3	PERSONAL PROTECTIVE EQUIPMENT REQUIRED (PPE)	YES INDIRECT CARE: General Support NON-CONFIRMED CASE PPE: • Hand Hygiene • Cough/Sneeze etiquette • Surgical Mask • Eye Protection • Gloves CONFIRMED CASE PPE: • Hand Hygiene • Cough/Sneeze etiquette • Surgical Mask • Gloves • If possible, individual is separated into their bedroom
		NO DIRECT CARE: Hands on support. Personal Care. Feeding. Assisting to walk. Etc. CONFIRMED or NON-CONFIRMED CASE PPE: • Hand Hygiene • Cough/Sneeze etiquette • Surgical Mask • Eye Protection • Gloves • Gown • If possible, individual is separated into their bedroom N95 mask needed only when supporting an individual using a C-PAP machine

How To Conduct A Point Of Care Risk Assessment

Before every interaction with an individual, ask yourself the following questions:

- 1. Is the hazard (virus) present in the situation?** Determine possible exposure to the hazard (virus)
- 2. What is the health status of the individual(s)?** Is the individual symptom-free and healthy, or does the individual have symptoms associated with the virus?
- 3. What task am I doing with the individual?** Classify task as either direct care or indirect care.

Direct care: Most hands-on support would be considered *direct care*. Direct care would increase the risk of exposure to COVID-19 or any infectious disease to you. For example, personal care including feeding would be direct care. Transporting an individual may be classified as direct care also, depending on the level of support required and space distancing in the vehicle.

Indirect care: Social distancing can be maintained.

- 4. Where am I performing the tasks and are there any other people with symptoms present?**

Determine proximity to potentially infectious items/people. Is social distancing able to be maintained?

For example, if you are performing the tasks in a more confined space (e.g. bedroom, bathroom) or in a space with poor ventilation, the risk of exposure to the virus would be increased.

If you are providing care outside or in a larger, well-ventilated area, the risk of exposure to the virus would be less.

Based on the answers to the above 4 questions, you must determine:

- 5. What actions do I need to take to keep myself and others safe?**

What (if any) Personal Protective Equipment (PPE) should I use?

NOTE: There is a worldwide shortage for PPE. RSCL is doing its best to ensure there are enough for all our services. There may be a need to improvise, for example:

- Masks may be surgical rather than N95 or even hand made
- Glasses may be used if there are no eye protection (goggles/face shields). Eye protection must be sanitized after each use
- Gowns – you may need to change your clothes after each interaction or garbage bags could be worn over their clothes

Risk and Safety Measures

If an individual in the Respite Program is sick, no respite care is to be provided.

SAFETY MEASURES FOR INDIVIDUALS

Follow the instructions of the family and/or individual for safety measures. The following are considerations.

Safety Measures	Considerations/Strategies
Physical distancing measures – measures to reduce the density (intensity and number of contacts) of people in your location	<ul style="list-style-type: none"> *Regular encouragement to maintain physical distance from others Limiting close contact with others, e.g. family members and few friends etc. *Location of community outings that limits contact with others, e.g. parks, beaches, walking trails, etc. *Timing of community outings that limits exposure with other, e.g. early morning visits to stores, during the week as opposed to weekend visits to restaurants, etc. *Spaces in community, i.e. spaces that are large and spacious
Engineering controls – physical barriers	Limit of 2 persons per vehicle
Administrative controls – rules and guidelines to help reduce the risk of transmission	<ul style="list-style-type: none"> *Regular hand washing *Social distancing *Point of Care Risk Assessment completed *Measures to foster learning about social distancing, hand hygiene, cough, and sneeze etiquette, e.g. games, videos, social stories, etc.
Use of Personal Protective Equipment	<ul style="list-style-type: none"> *Point of Care Risk Assessment *PPE Training

RISK FOR WEARING A MASK

Risk: possible suffocation from wearing cloth or other mask during COVID-19 (ensure individual does not have any breathing or medical conditions that may prevent them from wearing a mask safely).

Strategy:

- Staff will always monitor the individual when they are wearing a mask
- The individual will never wear a mask unattended, if they are at a greater risk of suffocation
- If the individual is showing signs of distress or has difficulty breathing their mask will be removed immediately
- The individual will consent (be asked) each time they wear a mask
- The individual and/or any legal representative have given consent for the use of the mask
- Staff will ensure the individual has the support needed to don and doff the mask as they choose/need to ensure there is no risk of suffocation from the use of the mask.

MASK GUIDELINES

Masks can be worn as a general face protection and barrier to touching your face or spreading droplets from your own body, such as from coughing and/or sneezing.

If a mask needs to be removed during the day for eating or other reasons, it is important to wash hands or use hand sanitizer prior to touching it then carefully remove it by the straps.

Forms and Resources

PERSONAL PROTECTIVE EQUIPMENT TRAINING & INFORMATION

Visit the Vancouver Coastal Health Infection Prevention & Control website for information regarding Personal Protective Equipment: <http://ipac.vch.ca/routine-practices>

Donning PPE = putting on PPE

Doffing PPE = taking off PPE

Training Videos:

Donning - <https://youtu.be/eJsKmcblkiA>

Doffing - <https://youtu.be/ooZqZdehBCg>

PPE Posters in other languages:

LANGUAGE	DONNING	DOFFING
Chinese Simplified	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/CHINESE_SIMPLIFIED_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/CHINESE_SIMPLIFIED_Doffing%20PPE_Apr152020.pdf
Chinese Traditional	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/CHINESE_TRADITIONAL_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/CHINESE_TRADITIONAL_Doffing%20PPE_Apr152020.pdf
Farsi	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/FARSI_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/FARSI_Doffing%20PPE_Apr152020.pdf
French	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/FRENCH_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/FRENCH_Doffing%20PPE_Apr152020.pdf
Hindi	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/HINDI_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/HINDI_Doffing%20PPE_Apr152020.pdf
Punjabi	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/PUNJABI_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/PUNJABI_Doffing%20PPE_Apr152020.pdf
Spanish	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/SPANISH_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/SPANISH_Doffing%20PPE_Apr152020.pdf
Tagalog	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/TAGALOG_Donning%20PPE_Apr152020.pdf	http://ipac.vch.ca/Documents/COVID-19/Dress%20Codes%20and%20PPE/TAGALOG_Doffing%20PPE_Apr152020.pdf



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



CLEANING AND DISINFECTANTS FOR PUBLIC SETTINGS

Good cleaning and disinfection are essential to prevent the spread of COVID-19 in BC.

This document provides advice to public groups, transit, schools, universities, child care and other institutions in BC on cleaning for non-health care settings.

Make sure to wash hands with plain soap and water after cleaning or use an alcohol-based hand sanitizer.


OR


Cleaning: the physical removal of visible soiling (e.g. dust, soil, blood, mucus). Cleaning removes, rather than kills, viruses and bacteria. It is done with water, detergents, and steady friction from cleaning cloth.

Disinfection: the killing of viruses and bacteria. A disinfectant is only applied to objects; never on the human body.

All visibly soiled surfaces should be cleaned before disinfection.

Cleaning for the COVID-19 virus is the same as for other common viruses. Cleaning products and disinfectants that are regularly used in households are strong enough to deactivate coronaviruses and prevent their spread.

Recommendations:

- General cleaning and disinfecting of surfaces should occur at least once a day.
- Clean and disinfect highly touched surfaces at least twice a day and when visibly dirty (e.g. door knobs, light switches, cupboard handles, grab bars, hand rails, tables, phones, bathrooms, keyboards).
- Remove items that cannot be easily cleaned (e.g. plush toys).

Cleaning

For cleaning, water and detergent (e.g. liquid dishwashing soap), or common, commercially available cleaning wipes should be used, along with good physical cleaning practices (i.e. using strong action on surfaces).

Disinfection

For disinfection, common, commercially available disinfectants such as ready-to-use disinfecting wipes and pre-made solutions (no dilution needed) can be used. Use the figure and table below for guidance. Always follow the manufacturer's instructions printed on the bottle.




If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Non-medical inquiries (ex. travel, physical distancing): 1-888-COVID19 (1888-268-4319) or text 604-630-0300





Coronavirus COVID-19

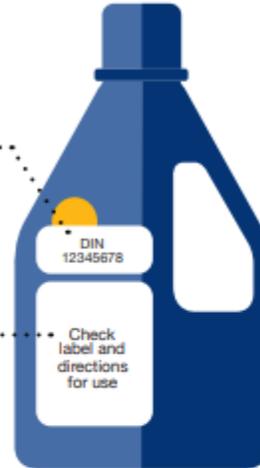
BC Centre for Disease Control | BC Ministry of Health



CLEANING AND DISINFECTANTS FOR PUBLIC SETTINGS

See Health Canada's **List of hard-surface disinfectants for use against coronavirus (COVID-19)** for specific brands and disinfectant products.

Drug Identification Number (DIN):
A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada.



IMPORTANT NOTES:

- Ensure disinfectant product has a Drug Identification Number (DIN) on its label.
- Follow product instructions for dilution, contact time and safe use.
- All visibly dirty surfaces should be cleaned **BEFORE** disinfecting (unless otherwise stated on the product).

Agents effective against coronavirus:

- Bleach: sodium hypochlorite (5.25%)
- Hydrogen peroxide (0.5%)
- Alkyl dimethyl benzyl ammonium chlorides (QUATs)

List of disinfecting agents and their working concentrations known to be effective against coronaviruses^{1,2}:

Agent and concentration	Uses
1. 1:100 dilution Chlorine: household bleach – sodium hypochlorite (5.25%)* 10 ml bleach to 990 ml water	Used for disinfecting surfaces (e.g. hand railings, grab handles, door knobs, cupboard handles). Make fresh daily and allow surface to air dry naturally.
2. 1:50 dilution Chlorine: household bleach - sodium hypochlorite (5.25%)* 20 ml bleach to 980 ml water	Used for disinfecting surfaces contaminated with bodily fluids and waste like vomit, diarrhea, mucus, or feces (after cleaning with soap and water first). Make fresh daily and allow surface to air dry naturally.
3. Hydrogen Peroxide 0.5% Do not dilute your own.	Used for cleaning and disinfecting surfaces (e.g. counters, hand rails, door knobs).
4. Quaternary Ammonium Compounds (QUATs): noted as 'alkyl dimethyl benzyl ammonium chlorides' on the product label Do not dilute your own.	Used for disinfecting surfaces (e.g. floors, walls, furnishings).

¹ Dellanno, Christine, Quinn Vega, and Diane Boesenberg. "The antiviral action of common household disinfectants and antiseptics against murine hepatitis virus, a potential surrogate for SARS coronavirus." *American journal of infection control* 37.8 (2008): 649-652.

² Provincial Infection Prevention Control Network of British Columbia. "Infection Prevention and Control Guidelines for Providing Healthcare to Clients Living in the Community." (2014). https://www.picnet.ca/wp-content/uploads/PICNet_Home_and_Community_Care_Guidelines_2014.pdf

The BC Ministry of Health does not endorse or promote any specific brands of disinfectant products.



Ministry of Health



BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Non-medical inquiries 1-888-COVID19 (1888-268-4319)
(ex. travel, physical distancing) or text 604-630-0300



VEHICLE TRANSPORTATION AND CLEANING GUIDELINES

We recommend Respite Caregivers follow these guidelines for the purposes of transporting supported individuals in their vehicles.

Vehicle Transportation Risk Assessment

Risks	Control Measures
<p>Proximity: From person to person through coughing or sneezing; through close personal contact such as touching or shaking hands; through touching an object or surface with the virus on it.</p>	<p>Proximity:</p> <p>Practice social distancing when possible</p> <p>Passengers in the vehicle should be limited to those who live in the home</p> <p>Open the windows if the weather allows</p> <p>Wearing a mask is a good idea (enclosed area)</p>
<p>Physical Contact: Physical transmission is the result of touching one's mouth, eyes, nose, or open lesion after coming into contact with a source contaminated by COVID-19.</p>	<p>Physical Contact: Make sure any scratches etc. are properly covered</p> <p>Wash your hands before you enter and after you exit the vehicle. Using hand sanitizer is acceptable if it is not possible to properly wash your hands</p> <p>If you need to fill up with gas, use a barrier like a paper towel to interact with the pump handle and keypad</p> <p>Follow all vehicle touchpoint cleaning practices</p>

Some viruses can live for a short time on inorganic objects, so it is important to follow enhanced cleaning procedures. This involves disinfecting all touchpoint surfaces around the entire vehicle before and after each trip. Ensure to open vehicle doors and/or windows to allow for natural ventilation. Use a new pair of disposable gloves or a pair of reusable rubber gloves dedicated for COVID-19 disinfecting purposes only.

Use cleaning products approved by Health Canada. Lysol wipes are a convenient option but if these are not available, additional options can be found here: www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html#tbl

Ensure that there are adequate cleaning supplies stored within the vehicle for the outing in case they are needed. This includes hand sanitizer for the driver and passengers.

Remember, if you've adjusted it, you've touched it

- All keys or fobs
- All door handles (inside and outside)
- All manual door-lock buttons
- All manual window crank handles
- All seat belts (male/female buckle ends)
- All radio controls and touchscreens
- All control panel buttons for electronic devices (windows, door-locks, AC, etc.)
- Steering wheel
- Dashboard
- Gear shifter
- Glovebox handle

TRANSIT SAFETY GUIDELINES (INFO FROM TRANSLINK)

Safety Tips

Tip #1 – Transit etiquette



Stay home when unwell, avoid touching your face, and cough/sneeze into your elbow.

Tip #2 - Wear a mask



Starting August 24, masks or face coverings will be mandatory on board transit vehicles. Non-medical masks, bandanas, scarves and cloth can all be used. [Some exemptions apply.](#)

Tip #3 - Plan your trip



Use the [Trip Planner](#) to plan your trips in advance and allow for extra travel time.

Tip #4 - Physical distance



Please maintain physical distance from other passengers and transit staff when possible and follow our physical distancing markers where outlined.

Tip #5 - Sanitize your hands



Use sanitizer before and after riding transit. We're rolling out additional hand-sanitizer dispensers across the system which can currently be found at many SkyTrain Stations.

Tip #6 - Active transportation



Walking or cycling are great for your health, the environment, and help reduce congestion in transit and on the road. Visit the [Active Transportation Options](#) page for more.

Tip #7 - News and updates



Sign up for [Transit Alerts](#) and Follow [TransLink News](#) on Twitter. For health updates, visit gov.bc.ca/covid19.

Tip #8 - Submit feedback and suggestions



Use the [Feedback Form](#) or call Customer Information at 604.953.3333.

Tip #9 - Please be patient



If all bus seats are taken, please wait for the next bus. If you can't maintain physical distancing on SkyTrain, West Coast Express or SeaBus, please wait until safe space is available.

For more in depth information about what Translink is doing go to:

<https://new.translink.ca/rider-guide/coronavirus-precautions>

