



# Communicable Disease Emergency Plan Response Guide

## Communicable Disease Emergency Plan (CDE Plan)

A communicable disease is an illness caused by an infectious agent or its toxic product that can be transmitted in the community or workplace from one person to another. Examples of communicable disease that may circulate in a workplace include COVID-19, norovirus, chicken pox, and seasonal influenza.

Bonaventure's communicable disease emergency plan (CDE) helps identify resource-specific considerations. This plan is consulted when determining how to respond to communicable disease outbreaks. These plans take ongoing measures to reduce the risk for communicable disease transmission in the workplace and form part of Bonaventure Support's Pandemic Plan. All plans are reviewed with front line workers, Managers, directors, administration and the Joint Health and Safety Committee.

A CDE may present as an outbreak, epidemic or a pandemic. At the start of a CDE event, the CDE plan helps to guide response activities during the event. As more information becomes known or the level of risk increases, this plan may need to be revised.

Our employees are considered essential workers, providing an essential service – therefore are required to work as scheduled. To reduce the risk of communicable disease transmission in the workplace, Bonaventure is implementing protocols to protect against identified risks recommended by WorkSafe BC, Provincial and Community Health Authority, MCFD and CLBC.

Refer to Section 4.6 Communicable Disease in Bonaventure Support Services Policy & Procedure Manual and Bonaventure's Pandemic Response Plan found in the EDERP.

## Precautionary Measures to Reduce the Spread of Communicable Disease

Communicable disease prevention focuses on basic risk reduction principles to reduce the risk of workplace transmission of communicable diseases.

The fundamental components of communicable disease prevention include both ongoing measures to maintain at all times and additional measures to be implemented as advised by Public Health.

These ongoing measures are maintained at all times:

- Policies and procedures implemented to support employees who have symptoms of a communicable disease (for example, fever and/or chills, recent onset of coughing, diarrhea, vomiting), to avoid being at the workplace when sick.
- Promotion of hand hygiene by providing hand hygiene facilities with appropriate supplies and reminding employees through policies and signage to wash their hands regularly and to use appropriate hygiene practices.
- Face masks are readily available for employees to wear voluntarily.
- Maintaining a clean environment through routine cleaning processes and as a prevention measure and/or if an outbreak occurs, implement the communicable disease shift cleaning checklist (specific to each program and must be documented).
- Ensuring building ventilation is properly maintained and functioning as designed.



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- Supporting employees in receiving vaccinations for vaccine-preventable conditions to the extent that you are able.
- Additional measures implemented as advised by Public Health: Be prepared to implement additional prevention measures as required by a medical health officer or the provincial health officer to deal with communicable diseases in their workplace or region, should those be necessary.

## Modifications to Services

Resource activities may need to be modified to reduce the risk of the spread of a communicable disease. This will include but is not limited to:

- Surveillance- reporting symptoms of communicable disease maybe implemented to survey the spread of disease and establish patterns of progression.
- PPE: Hand sanitizer, gloves and face masks will be provided to each program.
- Mandatory requirements may be implemented for employees to wear face masks in indoor and/or outdoor settings.
- Environment- limiting the amount of people in each program at one time. Each program will be different and could section off their spaces to allow for more people. This will need to be done with the approval of your Director.
- Using outdoor activities more with support time. Its always safer outdoors.
- Avoiding areas where there are large crowds (50 or more people) and/or crowded areas, including public facilities, events and public transit.
- Mental health status will be taken into account. Individuals with anxiety or depression may require a different look to their support.
- Taking special precautions for those vulnerable population groups: (>65 years of age), those with pre-existing chronic conditions and immunocompromised systems
- Following all public safety community closures of spaces, building and programs.
- Respecting personal space and avoiding any unnecessary contact, including handshakes and hugs.
- Canceling activities that may risk exposure.
- Coaching and/or education self-advocates and families on risks.
- Any other precautions outlines in your Resource Pandemic Preparedness Plan.

## Infection Control

All employees should exercise enhanced universal precautions, including proper handwashing, using personal protective equipment when needed (e.g. Gloves and face masks), and following sneezing and coughing etiquette. Individuals in care should be supported with infection control as much as possible. Posters have been provided for each resource to post on hand washing and coughing/sneezing etiquette. If you are supporting an Individual who is exhibiting communicable disease symptoms, consult your Manager or Director and your local health unit around additional precautions.

Posters that are to be posted around the program will be:

- Hand Hygiene
- How to wear a face mask
- Prevent the spread of communicable disease-cover coughs and sneezes
- Prevent the spread of communicable disease- hand washing.

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See [Infection Control Plan](#) for more details and [Appendix B Cleaning and Disinfecting during an Outbreak](#)

## Program Response Plans

To ensure all essential services are maintained, each resource will prepare a program response plan consisting of the following:

- Identification of essential service activities
- Determination of essential service levels required
- Plan for modification of service provision to mitigate risk, including both precautionary and responsive measures
- Plan to ensure supplies required for essential services are available
- Communication plan with stakeholders
- Assessment of potential employee barriers
- Consideration of alternate options for employees and/or care provision
- Plan for training and /or cross-training of new employees/caregivers
- Program specific issues.

## Universal Safe Work Procedures/Prevention

Continue to follow universal precautions which include hand hygiene (hand washing is the simplest, most effective means of controlling the spread of communicable disease) and the use of PPE such as gloves or masks as indicated.

Hand washing – washing your hands, not only prevents you from getting sick, but it also reduces the risk of infecting others. If you don't wash your hands properly before coming into contact with others, you can infect them with the germs on your hands. Other people can also get sick from the germs unwashed hands leave on shared objects like doorknobs, keyboards and other equipment in the home or work place. ALL Individuals should be taught how to perform proper hand washing and when unable, they should be assisted.

### When to wash your hands:

- Upon entering the program
- After using the washroom or helping a supported Individual use the washroom
- After sneezing, coughing or using a tissue
- After helping supported Individual with a runny nose
- Touching your face
- Before and after caring for supported Individual who is sick
- Before and after providing personal care
- Before performing first aid or applying a Band-aid
- After cleaning or handling garbage
- After handling shared objects
- Before and after eating or feeding supported Individual else
- Before preparing food
- After handling raw meat
- After handling pets or other animals



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- Before and after putting on and taking off any PPE.

## Cleaning and Sanitizing

Ensure that thorough cleaning and disinfecting happens of all surfaces being touched/exposed to germs (e.g. door knobs, fridge and stove handles, cupboard handles, counters, faucets, phones, keyboards, equipment, toilet seat handle, light switches, remotes, car handles and knobs, etc.) as follows:

- Community Housing – enhanced cleaning/disinfection at least once per shift (morning, afternoon, evening, overnight)
- Other sites – enhanced cleaning/disinfecting at least twice per day
- All sites – spot clean/disinfect more often as needed.

Each program will remove any unnecessary tools or equipment, etc. that are not needed in our daily activities to simplify the cleaning process. Each program will document (checklists) all cleaning completed daily.

*See Cleaning and Disinfection during an Outbreak for more details- Appendix B*

## Ventilation

At this time, there is no evidence that a building's ventilation system, in good operating condition, contributes to the spread of communicable disease. Bonaventure program/office buildings are assessed on an individual basis as each has their own ventilation system type.

Bonaventure's maintenance program includes regular filter changes, inspections of ventilation and air circulation systems and ensuring outdoor air dampers operate properly.

Reduce air recirculation and increase the outdoor air intake as much as possible while maintaining comfortable indoor temperature and humidity. Do not turn off the ventilation system while the building is occupied. After working hours or on weekends, consider turning the system down, rather than turning it off.

To increase ventilation if the building does not have a HVAC system, open windows and doors to promote air circulation. When advised by Public Health, post occupancy limits to allow for adequate physical distancing in every room. Don't allow overcrowding. Air cleaning devices that have a HEPA filter are provided to reduce particles in the air (great for rooms with poor air circulation).

If you're using portable fans or air conditioning units, make sure they're set up to avoid blowing air directly from one person's breathing zone to other occupants of a room. Avoid horizontal cross breezes. Instead, set up devices so air flow moves downward from the ceiling.

Workers using company vehicles should turn the vents or air conditioning controls to allow outdoor air to flow in. Do not set the vents to recirculate. If safe to do so, leave windows partially open to allow as much outdoor air as possible into the vehicle.



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## Communication

Head office will communicate essential updates and notices through official Bonaventure memos to employees, supported Individuals and their caregivers as deemed necessary. Directors will communicate with Managers through Manager meetings in person or by Go To Meetings/Zoom, emails, phone conversations, etc. Managers are responsible to communicate directly with the supported Individuals and caregivers on a regular basis with information, directions and updates.

Communication may include, but is not limited to:

- Sharing communicable disease related information issued by the regional medical health officer or the provincial health officer that is related to our industry. This includes orders, guidance, notices, and recommendations issued by a medical health officer or the provincial health officer.
- Infection control measures
- Bonaventure prevention, policies and procedures.

Each program will communicate on the buildings entrance door's if they are in a locked stage. The notice will communicate if visitors are or are not allowed to enter, or any other pertinent information that is relevant to Individuals, employees and visitors. If a supported Individual has a confirmed diagnosis of a communicable disease, within the program, a notice will be posted on their bedroom door.

**Housing Program Managers** will communicate with their Individual(s) parents if visitors are allowed at community housing programs. Program Managers will communicate with their Individuals and family members about how their support will be provided to them as we move through the stages of closure to re-opening. There could be a few stages in between.

## Vehicles

All vehicles will be wiped down after each use. Turn the vents or air conditioning controls to allow outdoor air to flow in. Do not set the vents to recirculate. Leave windows partially open to allow as much outdoor air as possible into vehicles. See poster – Communicable Disease Prevention Vehicle Safety Guidelines.

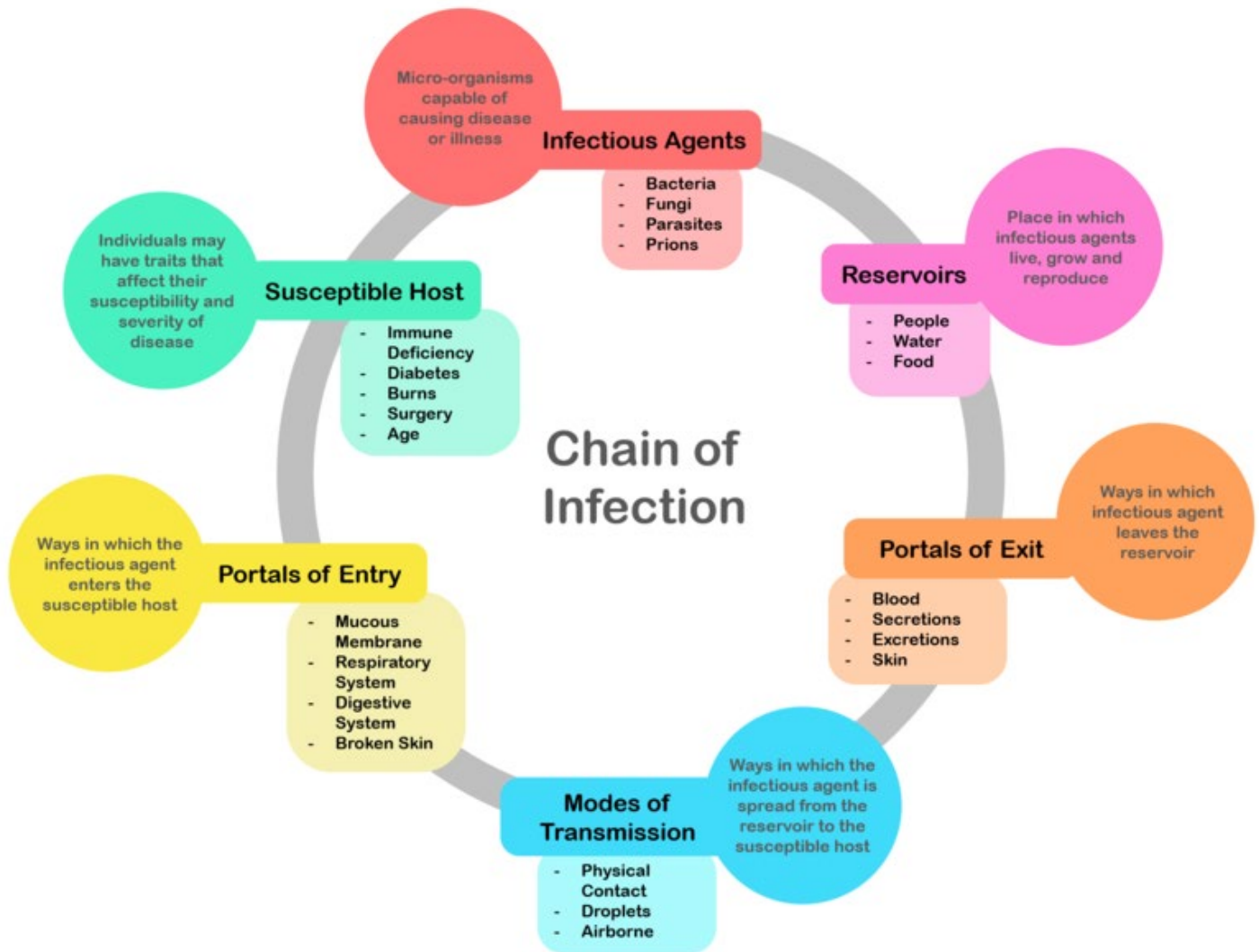
## PPE

Gloves, masks, face shields and gowns are available in each program. Gloves will be worn for all cleaning and personal care tasks. Face masks can help slow the spread of communicable disease. Face covering limit the volume and travel distance of expiratory droplets when talking, breathing, and coughing. See “How to wear a face mask” – CDC poster.



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## Chain of Infection Chart



## Visitors and Exposure of Individuals Supported

Immediately enhancing screening measures will be taken for all visitors to the program. Ill visitors, including visitors with any degree of respiratory symptoms, **should not be permitted to visit**. If there is urgency to a visit (e.g. due to rapidly declining health status of a supported Individual), and sick visitors must be present, please arrange for PPE (e.g. mask, gloves) in advance to protect the health of others. Post the visitor poster on each exterior door of the resource.

If an Individual receiving supports has had contact with a person who is in self-isolation, exhibits symptoms of a communicable disease and/or a confirmed diagnosis, contact 8-1-1 and/or your local health authority for advice prior to them returning to the resource and /or further service provision. If a visit is being considered (e.g. with a family member), planning should occur to ensure that the person is not exposed to someone in self-isolation or who is symptomatic prior to returning to the program.

MCFD may restrict all visits to program homes throughout the province. Bonaventure Support will follow guidelines set out by the Ministry.



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## What to do if a Supported Individual becomes ill?

### Housing Program

An outbreak occurs where there are two or more influenza-type illness detected in Individuals supported or employees in a 12 day period, with at least one case identified as an Individual supported OR any Individual supported or employee is diagnosed with a communicable disease.

Planning in the event of an outbreak is critical for providing teams the guidance necessary for sheltering in place, and isolation strategies. Plans will be submitted to the CEO, ED and the Director overseeing each resource, and will include the information in this section.

Testing: If it is determined that an Individual requires testing, the housing program will do the following:

- ✓ Follow the Droplet and Contact Protocol – Appendix A immediately.
- ✓ Schedule a test appointment as soon as possible
- ✓ Report the test results to the program Manager
- ✓ Everyone in the program will wear masks, provided by company- 3 ply Medical Grade
- ✓ The Individual who is being tested will isolate as much as possible
- ✓ Hand hygiene will be increased
- ✓ Cleaning of the housing program will be increased
- ✓ Monitor others for symptoms

Results:

- a. Negative test: The housing program will return to normal.
- b. Positive test: The housing program will follow the guidelines below.

Once an outbreak has been determined, Island Health and CLBC/MCFD will be notified immediately. Symptomatic Individuals supported will be isolated and employees will use routine droplet and contact precautions when providing care. PPE signage will be posted outside the rooms of symptomatic Individuals supported indicating the necessary precautions. Teams will record details of Individuals supported and employees experiencing symptoms. Control measures will be continued until the outbreak is declared over by the Island Health Officer. The length of time to conclude an outbreak may be reduced or extended at the direction of Island Health.

- If a supported Individual within a housing program becomes ill, follow the steps below and consult your Pandemic Preparedness Plan for resource-specific considerations.
  1. Immediately isolate all Individuals with new or worsening respiratory symptoms. They can be self-isolating in their bedroom. If the Individual cannot be isolated without using restricted practices, isolate other Individuals in the program as much as possible and support each Individual to maintain social distance (minimum 2 meters).
  2. If tolerated, the Individual is to wear a mask when a support worker is in their room or providing direct support. When the Individual will not tolerate wearing a mask, employees will wear PPE as guided by management.
  3. REPORTING: Immediately inform your Manager or Director.
    - a. Managers, under the direction of their Directors, will complete a critical incident report for the following situations

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- i. Is symptomatic, presumed to have a Communicable Disease and/or a Parasitic Outbreak
    - ii. Has been diagnosed with a Communicable Disease/Parasitic Outbreak
    - iii. Has been hospitalized due to a Communicable Disease or has an Unexpected Illness/Food Poisoning (Note: the hospitalization incident report is in addition to the critical incident report)
    - iv. Has passed away due to a Communicable Disease
  - b. Public Health Contact Reporting: If there are two or more ill Individuals displaying Communicable Disease symptoms, the Manager, Director or a delegated employee should contact 8-1-1 HealthLink BC or Public Health immediately at 604-507-5471 (Monday to Friday 0830-1630) or for afterhours call 604-527-4806 identifying yourself as an essential worker.
  - c. MCFD Contact Reporting: The Manager, Director or a delegated employee should call Provincial Centralized Screening Emergency line at 1-800-663- 9122 to report Communicable Disease related situations.
  - d. CLBC Contact Reporting: The Manager, Director or a delegated employee should call Provincial Centralized Screening Emergency line at 1-800-663- 9122 to report Communicable Disease related situations. The Provincial Centralized Screening Emergency line will notify the CLBC Director of Regional Operations who will liaise with the CLBC Manager and Health Authority to provide support and guidance.
  - e. Service Providers Reporting: Service providers must also notify their CLBC/MCFD/VIHA designate of any Communicable Disease case involving an employee, contractor, or household member.
4. If possible, designate bathroom facilities, which are to be used by symptomatic Individual only. Where this is not possible, ensure thorough cleaning and disinfecting after use by a symptomatic Individual occurs.
  5. Wherever possible, employees working with symptomatic Individuals supported should avoid working with Individuals supported who are well. When this is not possible, employees should work with the well Individuals supported prior to working with symptomatic Individuals supported (providing medications, meal delivery, etc).
  6. Wherever possible, employees working at a program with an outbreak are not to work at other programs.
  7. Wherever possible, employees will be designated to one specific role at each site (i.e. meal prep, personal care, cleaning, shopping).
  8. Employees to practice strict hand hygiene between Individuals supported at all times.
  9. In consultation with your local health unit, Public Health (if applicable) and Director, develop a plan for further support and follow-up to mitigate risks of spread.
  10. Post signage on the door of the Individual's room and outside points of entry indicating full PPE is to be worn (shields, masks, gloves, gowns).
  11. All outbreak control measures shall take priority over routine operations until the outbreak is declared over.





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## Hospital Transfer

If symptoms become severe and transfer to hospital becomes medically necessary, indicate to the 911 operator the Individual has suspected/confirmed communicable disease so that First Responders can arrive prepared. When tolerated the Individual should wear a mask. Employees assisting in the transfer should also wear PPE as directed. Once the Individual has been transferred to hospital, the entire room should be thoroughly cleaned and disinfected.

- If an Individual you support is diagnosed with a communicable disease:
  - Immediately inform your Manager, if not available, notify your Director.
  - Notify Public Health, identifying yourself as an essential worker. Public Health will follow up immediately to assist in management and contact tracing.
  - The Manager will notify your Director.
  - The Manager and Director will work with the health authority to determine a response plan and ensure appropriate communications.
  - Current guidelines indicate that no Individuals need to be moved to acute care with a diagnosis of a communicable disease unless their clinical status requires it.

## Community Inclusion Services- Individual(s) who Exhibit Symptoms

(Community Inclusion/Day Services, Supported Living, Outreach, Employment, Youth Programs)

- If a supported Individual has flu like symptoms such as fever and/or chills, recent onset of coughing, diarrhea or vomiting, they should be advised to stay home and away from others. They can call 8-1-1 HealthLink BC at any time to speak with a registered nurse. (People who are deaf and hearing impaired, call: 711).
- If a supported Individual displays symptoms during their service time:
  1. Immediately isolate all Individuals supported with symptoms. If the Individual cannot be isolated without using restricted practices, isolate other Individuals in the program as much as possible and support each Individual to maintain social distance (minimum 2 meters).
  2. Contact the Individuals primary caregiver and request that they be picked up immediately. Continue to implement isolation until the Individual is picked up. If the Individual doesn't have a primary caregiver or transportation cannot be arranged, drive the Individual home. The Individual will sit in the back of the car and wear a mask behind the plexi-safety guard. Thoroughly clean and disinfect the vehicle immediately once the car is parked back at the program.
  3. Immediately inform your Manager. The Manager will notify their Director.
  4. The Manager, Director or a delegated employee should contact 8-1-1 HealthLink BC or your local health unit for further direction.
  5. In consultation with your local health authority and Director, develop a plan for further support and follow-up to mitigate risk of spread.
  6. Once the Individual has left the program, full cleaning procedures will be immediately implemented.
- If a supported Individual has tested positive for a communicable disease and was in contact with other Individuals or employee(s) in the program:
  1. Immediately inform your Manager. The Manager will notify the Director.

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2. The Manager and Director will work with the local health authority and seek direction from them on who may be at risk and who should be notified. Your local health authority is the primary authority for how to respond to people who may have a communicable disease.
3. In consultation with your local health authority and Director, develop a plan for further support and follow-up to mitigate risks of spread.

## Employee Measures

### Employees Who Have Symptoms of a Communicable Disease

Employees who have symptoms of a communicable disease (for example exhibiting: fever and/or chills, recent onset of coughing, diarrhea, vomiting), should avoid being at the workplace when sick.

If you are unable to work a shift as scheduled, due to being sick, you must call the Manager and let them know you cannot be at work as scheduled. *Please refer to Bonaventure's Policy and Procedure Manual in regards to Sick Leave.*

### Employee Coverage

While we understand that employees may experience concern around exposure to communicable diseases, it is important to follow all guidelines from provincial health authorities around work attendance. Employees who are not showing symptoms of illness or who do not actively secure direction from a qualified medical professional to self-isolate are expected to attend, and remain at work as scheduled, despite understandable personal concerns about potential exposure in the community or in the workplace.

Our workers are considered essential workers, providing an essential services – therefore are required to work as scheduled. The schedule will continue as normal but may require small tweaks depending on the type of support provided.

Vacation Requests: This approval will be determined company-wide depending on the stage of response we are in. In order to ensure that employee coverage is available, and depending on developments, it may also be necessary in the future to consider the cancelling of vacations already granted.

### Self-Isolation/Quarantine

Bonaventure will take direction and follow the guidelines set by the Provincial Health Officer in regards to employee isolation or quarantine or travel guidelines mandated in response to a communicable disease outbreak.

### Vaccine's or Medications to Reduce the Spread of Disease

In response to a Communicable Disease Emergency there may be vaccines, antivirals or other treatments that become available to protect Individuals and reduce disease spread.



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Bonaventure supports employees in receiving vaccinations for vaccine-preventable conditions. Employees who voluntarily choose to be vaccinated are asked to schedule their vaccination appointment outside of scheduled work hours whenever possible or submit a request for time off to be approved by their Manager.

Bonaventure will not be asking employees to share, disclose or provide copies of their vaccination records for COVID-19. However, Bonaventure will continue to receive and hold confidential immunization records for employees who voluntarily submit them.

## Monitoring Programs

All programs will be monitoring risks associated with communicable diseases. If a new concern is identified or something is not working, please contact your program Manager right away. As a company, we will need to identify if this is a program specific or company wide concern. Then it will be addressed and communicated to the required workers and programs.

## After a Communicable Disease Emergency

An outbreak or pandemic is over when the local, provincial, and federal public health authorities formally declare it being over:

- Deactivate the plan.
- In a timely manner, the Directors and Administrative team will assess the effectiveness of this plan, and revise the plan as necessary.
- Communicate any applicable revisions to employees.

## Additional Resources

BC Centre for Disease Control: <http://www.bccdc.ca/about/news-stories/stories/2020/information-on-novel-coronavirus>

Worksafe BC: <https://www.worksafebc.com/en/covid-19/bcs-four-step-restart>

HealthLink BC: <https://www.healthlinkbc.ca/public-health-alerts>

Public Health Agency of Canada: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/know-facts-about-coronavirus-disease-covid-19.html>

Bonaventure – COVID -19 Workplace Prevention Guide  
Bonaventure – COVID-19 Pandemic Plan Response Guide  
Bonaventure – Pandemic Plan  
Bonaventure – Cleaning and Disinfecting During an Outbreak  
Bonaventure – Infection Control Protocol

## Posters

- WorkSafe BC Prevent the Spread of Communicable Disease- Hand Hygiene
- WorkSafe BC Prevent the Spread of Communicable Disease- Cover coughs and Sneezes
- Cover your Cough – Alberta Health Services



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- Vehicle Safety Guidelines Poster – Bonaventure Communicable Disease Prevention
- WorkSafe BC's Restart- Golden Rules for Everyday Life
- WorkSafe BC Cough Etiquette
- Upon Entering Building Poster-Bonaventure Communicable Disease Prevention
- How to wear a face mask – CDC poster.

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## APPENDIX A:

### Droplet and Contact Protocol

Droplet and Contact Protocol is put in place as soon as an Individual in your housing program is suspected to have a Communicable Disease and has been directed by Island Health to go for testing. If a test comes back positive, continue under the direction of island health.

- Encourage Individuals with a Communicable Disease symptoms and their roommates and close contacts to self-isolate – limit their use of shared spaces as much as possible. The Individuals and roommates are isolated from external activities outside the house; this includes attending Community Inclusion programs, until a negative test result returns, or until Island Health deems it safe to do so.
- Consider reducing cleaning frequency in bedrooms and bathrooms dedicated to persons with Communicable Disease symptoms to as-needed cleaning (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill persons.
- Enhance cleaning in common areas and touch points. Implement the communicable disease shift cleaning checklist.
- Post signage on the door of the Individual’s room and outside points of entry indicating that droplet and contact precautions must be followed.
- Minimize the number of employees who have face-to-face interactions with Individuals who have suspected or confirmed a Communicable Disease diagnosis.
- Encourage employees, other Individuals, caregivers such as community inclusion workers, and others who visit persons with Communicable Disease symptoms to follow recommended precautions to prevent the spread.
- Employees at higher risk of severe illness from Communicable Disease should not have close contact with supported Individuals who have suspected or confirmed Communicable Disease diagnosis, if possible.
- Those who have been in close contact (i.e., less than 6 feet (2 meters) with an Individual who has suspected a Communicable Disease should monitor their health and call their healthcare provider if they develop symptoms suggestive of Communicable Disease.
- Be prepared for the potential need to transport Individuals with suspected or confirmed Communicable Disease for testing or non-urgent medical care. The Individual must sit in the back seat with a plexi-safety guard in place and wear a mask. Avoid using public transportation, ride sharing, or taxis. Follow guidelines for cleaning and disinfecting any transport vehicles.
- Enforce a minimum of two meters of safe physical distance between employees, Individuals including in hallways and all communal areas.
- Maintain hand hygiene protocol.
- Maintain coughing etiquette.

### PPE Droplet Contact Precautions

If an Individual is suspected to have a Communicable Disease, full PPE droplet protocol is put in place. PPE stations will be set up at points of entry in the home and Individual’s room.

Put on PPE as follows:

1. Clean your hands. Use soap and water or hand sanitizer (alcohol-based hand rub).



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2. Put on a gown if you are helping with Individual care. Tie the gown at your neck and waist.
3. Put on a mask. Fit the metal bar at the top of the mask over your nose. Put the elastic loops behind your ears or secure the ties. The bottom of the mask goes under your chin.
4. Put on eye protection—prescription glasses will not protect your eyes.
5. Put on gloves if you will be helping with Individuals care. Put the cuffs of the gloves over the cuffs of the gown.
6. Enter the Individual's room or house.

Take off PPE as follows:

1. Take off the gloves by holding the outside edge near your wrist. Put the gloves in the garbage in the Individuals room. Do not wear the gloves in other areas of the home.
2. Clean your hands. Use soap and water or hand sanitizer (alcohol-based hand rub).
3. Untie the gown at your neck and waist and take it off. Put the gown in the linen hamper or garbage in the Individual's room. Don't wear the gown in other areas of the house
4. Clean your hands. Use soap and water or hand sanitizer (alcohol-based hand rub).
5. Leave the Individuals room. You can leave the door open or close it.
6. Take off the mask using the elastic loops or ties and put it in the garbage. **Don't** touch the front of the mask.
7. Take off your eye protection and sanitize it.
8. Clean your hands. Use soap and water or hand sanitizer (alcohol-based hand rub).

***Do not wear the same PPE while interacting with other supported Individuals of the house.***

***PPE must be changed if there are close interactions with Individuals and upon entry and exit of an Individual's room.***

Disposing of contaminated PPE:

- Used a lined trash can.
- Place used disposable gloves and other contaminated items in a lined trash can.
- Use gloves when removing garbage bags, and handling and disposing of trash. Wash hands afterwards.
- Place all used disposable gloves, masks, and other contaminated items in a lined trash can.
- If possible, dedicate a lined trash can for the Individual who is sick.

Meals:

- If possible, all Individuals should have their meals in their rooms. If Individuals cannot eat in their room, they can eat in the dining area in sequence from low risk to high risk with breaks in-between followed by disinfecting.
- Shared items like salt and pepper shakers and food containers (e.g., condiment bottles, water pitchers, coffee and cream dispensers) should be removed and replaced with single use items.

Bathroom:

- If possible, designate a separate bathroom for Individuals with Communicable Disease symptoms. If not possible, the bathroom should be used in sequence from low risk to high risk with breaks in-between followed by disinfecting.



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## Laundry:

- Clothing, linens and non-medical cloth masks and facial coverings belonging to the ill Individual cannot be washed with other laundry. Do not shake laundry. Follow PPE protocol while handling contaminated laundry.

## APPENDIX B:

### Cleaning and Disinfecting During an Outbreak

An outbreak could consist of the flu, a pandemic, or other illness that affects a program or community.

Employees should develop schedules to ensure disinfection of contaminated surfaces. Pay attention to bathrooms and any commonly touched area. Bathrooms and toilets need special care and they should be disinfected often with a diluted bleach solution or other approved cleaner.

As a prevention measure and when an outbreak occurs, implement the communicable disease shift cleaning checklist (specific to each program and must be documented).

### Regular household maintenance

Ensure regular, daily, cleaning of the following:

- Door knobs – all rooms and front doors, sliding doors, and cabinets
- Window frames – if windows are opened and closes
- Kitchen: Fridge, freezer, dishwasher, faucets, microwave, cupboard door handles
- Bathroom: faucets, cupboard door handles, toilet seat and handles
- Countertops in kitchen, bathroom, office desk, living room tables, kitchen tables
- Light switches in main rooms and bedroom spaces
- Washing and drying machines, buttons, knobs and doors handles
- Office: Phones, cell phones, remotes, keyboard, mouse, printer, filing cabinet handles, freezer handles
- Vehicles: Doors handles, knobs and buttons, keys, seat belt buckles.

*Community Housing programs will need to develop a schedule on each shift.*

*Remember to remove any unnecessary tools or equipment, etc. that are not needed in the daily activities to simplify the cleaning process*

### **Cleaning up after a vomiting or diarrhea accident: (Spill Kit)**

- Cleaning up after a vomiting accident, using hot water and detergent is important. Surfaces should be wiped down with a diluted bleach solution to kill the virus. Any food that has been handled by an ill person, or food that could have been exposed when a person vomits, should be discarded.
- It is recommended that the person cleaning up vomit or diarrhea wear surgical masks, disposable, waterproof gloves and clothes that can be changed and washed in hot water and/or a disposable gown. Gloves are essential. The spill kit has these items.



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### **Steps to follow when cleaning up vomit or feces, or just cleaning around the house during and after illness: (Spill Kit)**

- Wear disposable gloves, surgical mask and gown.
- Use paper towel 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 freshly made bleach solution. Keep the area wet and sanitize 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”.

### **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 separately if necessary.
- Place wet laundry in leak-proof bags or containers
- Wash contaminated laundry and laundry bags in hot water (minimum 70 Celsius) 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.

Bleach solution should be mixed to the following ratio:

- 1:100 for disinfecting
- 1:50 for cleaning up fluids