

Infection Prevention and Control

DROPLET PRECAUTIONS

In addition to Routine Precautions,

Additional Precautions are sometimes necessary to protect everyone from the spread of infection.

<u>Point of Care Risk Assessment</u> is used to determine necessary Additional Precautions. Use <u>Syndromic Surveillance</u>

<u>Screening Toolkit</u> for information regarding management of a suspected condition and the type of Additional Precautions that need to be implemented.

To maintain quality of care, remember to engage with patients on Additional Precautions and use strategies to prevent social isolation.



Mode of Transmission

- Use for microorganisms or disease conditions spread via droplet transmission (e.g., N. Meningitidis, Mumps, Pertussis).
- Direct person-to-person contact with infected droplets from saliva or nasal secretions generated from the respiratory tract of the source patient during coughing, kissing, sharing food/utensils, or during procedures such as suctioning or bronchoscopy.
- These large droplets (greater than 5 microns in diameter) do not remain suspended in the air. Special ventilation is not required since true aerosolization does not occur.



Patient Placement and Accommodation

- Single room with a dedicated toilet, patient sink, and hand hygiene sink preferred.
 If single room not available, cohort patients infected with the same microorganism.
 Refer to Recommendations for Cohorting Patients
- <u>Droplet Precautions</u> sign visible on entry to room and bed space if in multibed room.
- Room door may remain open
- Close door if aerosol generating procedure (<u>AGMP</u>) in progress, visibly post <u>AGMP</u> sign, and don required PPE and follow directions accordingly.
- If sharing a room:
 - o Maintain spatial separation of at least 2 metres between patients.
 - o Roommates should be chosen on their ability to comply with precautions.
 - Assign dedicated toilet or commode, and place waste container and soiled linen bag in proximity for doffing PPE.
 - o Privacy curtains/barriers must be drawn between patients.



Hand Hygiene

- Perform hand hygiene using alcohol-based hand rub (ABHR) or plain soap and water, as described in <u>Routine Precautions</u> or on the <u>BCCDC website</u>.
- Refer to IH <u>Hand Hygiene Policy (AH0700)</u>
- Use plain soap and water when hands are visibly soiled.
- Perform hand hygiene according to the 4 moments for Hand Hygiene and:
 - o before accessing and donning personal protective equipment
 - o after doffing each piece of personal protective equipment
- Educate patients and visitors on how and when to use hand hygiene products.

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Personal Protective Equipment: Facial (medical mask and eye) Protection

Refer to <u>How to Don</u> and <u>How to Doff</u> PPE posters for details on careful removal and disposal of medical masks and eye protection.



- Perform hand hygiene before accessing PPE.
- Wear facial protection (medical mask and eye protection) when within 2 metres (6 feet) of the patient to protect mouth, nose and eyes.
- Use <u>Point of Care Risk Assessment</u> to determine level of risk of exposure to blood and bodily fluids to inform additional PPE requirements (i.e., gown, gloves, or N95 mask for AGMP).
- The same medical mask and eye protection should not be worn between patients or between patient environments.
- To doff medical mask and eye protection- if you are less than 2 metres away from the patient, exit the room/area, doff, and perform hand hygiene.
- Perform hand hygiene using ABHR or soap and water after removing each piece of PPE.
- Medical Mask:
 - If medical mask becomes damp, damaged, or soiled during care, doff as soon as possible (when more than 2 metres away from patient), perform hand hygiene, and don a new mask.
 - o Do not wear mask around your neck.
- Eye Protection:
 - Whenever a medical mask is required, also use eye protection (goggles, face shield or visor).
 - o Refer to Eye and Facial Protection.
 - o Prescription glasses do not meet WH&S regulations for eye protection.
 - o Clean and disinfect re-useable eye protection after each use.

Handling Patient Care Items and Equipment

- Use disposable patient equipment when possible
- Dedicate re-useable equipment for single patient use only, until discharge (e.g., thermometers, blood pressure equipment).
- If re-useable equipment cannot be dedicated for single patient use, <u>clean and</u> <u>disinfect</u> items between patients.
 - o Refer to manufacturer's instructions for cleaning and disinfection information.
- Droplet Precaution rooms should contain a dedicated soiled linen bag inside room, double bag only if leaking.
- Do not share toys, books, electronics that cannot be cleaned and disinfected.
- Clean and disinfect shared tubs and showers immediately after use as per <u>IH</u> procedures.

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Handling Patient Care Items and Equipment

- Used meal trays and dishes do not require special handling. Place on the dietary cart or in an area designated for used dishes. Disposable dishes and utensils are not required.
- Do not take extra supplies, patient chart, or medication carts into patient room.
- After patients are discharged, transferred, or Droplet Precautions are discontinued, clean and disinfect reusable equipment, discard single-use supplies and launder unused linens.



Patient Ambulation Outside Room or Bedspace

• Patients should leave the room or bedspace only for essential purposes.

Before patient leaves room consider and follow the **5C's**, educate, and assist the patient if necessary:

- 1. Communicate: notify the receiving department if patient is on Additional Precautions.
- 2. Co-operative: is the patient able to follow instructions.
- 3. Clean hands: assist patient if required to clean their hands.
- **4.** Clean clothes/clean sheet: patient to wear a clean gown or clothes and cover with a clean sheet.
- **5.** Cover/contain sources:
 - o Cover wounds with clean dressings
 - o Contain urine/feces or other body fluids
 - o Cover Cough: If coughing and/or on droplet or airborne precautions, place a medical mask on patient (if tolerated)



Patient Transport

- Limit transport to essential and diagnostic purposes only.
- In addition to following the **5 C's**, transport staff should assess risk of spreading
 infection and choose clean personal protective equipment (PPE) if necessary, to
 handle the patient during transport and at the transport destination, using <u>Point of</u>
 <u>Care Risk Assessment</u>. PPE is to be removed when patient handling is complete.
- Transport staff to keep medical mask and eye protection donned for the duration of transport and when within 2 metres of the patient.
- When patient handling completed, PPE to be removed when 2 metres away from patient, and hand hygiene is performed.
- <u>Clean and disinfect</u> all transport equipment e.g., wheelchair, stretcher, pumps and poles.

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Patient Hygiene

Daily access to and assistance with:

- Hand hygiene before meal, after using the washroom and frequently throughout the day.
- Clean gown/clothing and as needed.
- Linen change (sheets, pillowcase, towels, face cloth) and as needed.
- Oral (minimum is daily or based on patient's needs).
- Bathing (including use of cleaning wipes and/or bath basin).



Family and Visitors

Families and visitors should be educated on the following precautions:

- Before entering, visitors must perform hand hygiene.
- Instruct how to don and doff facial and eye protection prior to entering patient's room
- Must stay in the patient's room and not visit other patients.
- Must not use patient's dedicated bathroom or commode.
- Before leaving patient's room, visitor must take off their PPE and clean their hands.
- Provide applicable patient information sheets located on IPAC webpage



Environmental Cleaning and Disinfection

- Room surfaces and equipment cleaning and disinfection is required daily or more frequently if directed by IPAC using IH approved products and procedures.
- After discharge, transfer or Droplet Precautions are discontinued, Environmental Services to complete an Additional Precaution Discharge Clean and Disinfection of the room.
- Environmental Services to remove sign after Additional Precaution Discharge Clean and Disinfection is completed.

