



Harm Reduction COVID-19 Staff Manual

Version 12: December 30, 2021

Update:

- PPE directions: Switch medical mask to N95 mask if client screens positive to COVID.
- Positive screen next steps
- Outreach: Use of N95 mask by outreach staff

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1. PPE: Personal Protective Equipment

PPE Directions:

Full PPE is: medical mask; gown; goggles or face shield, and gloves or sanitized hands. **When a client screens positive to COVID, the medical mask is changed to an N95 mask.**

- FULL PPE for ALL staff working with clients, regardless of program or being indoors or outdoors. For off site considerations see [Outreach & Transportation](#)
- In case of overdose, assume client has COVID-19
 - For aerosol-generating medical procedures (AGMP) like manual ventilation and high flow oxygen nasal prongs, staff should wear N-95 mask, goggles, gloves and gown.

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- For non-AGMP like nasal naloxone applications, staff should wear at least a medical mask, goggles and gloves.

PPE Outdoors:

When working outside, staff can chose to not wear gowns if:

- they are maintaining 2 metres with clients
- they are screening clients upon first contact, to put on a gown and an N95 mask if a client screens positive
- to carry a gown and an N95 mask with them in their fanny pack so that they can put it on if a client screens positive or if they have to respond to an outdoor overdose.

Staff working with clients continuously indoors must still wear gowns.

Sanitizing

- Remember **staff should sanitize every place clients touch or sit after each visit.**
- **This includes SCS, offices, and vans.**

PPE Order:

Putting On (Donning)	Taking Off (Doffing)
<ol style="list-style-type: none">1. Hand Hygiene <i>(washing or sanitizer 15 seconds, then air dry)</i>2. Gown3. Mask4. Goggles5. Gloves - extend over wrist. Do not leave exposed skin	<ol style="list-style-type: none">1. Gloves2. Gown - Roll gown into a bundle and discard into a waste container3. Exit the client's home (or room where service was provided) and perform Hand Hygiene before you touch your face.4. Goggles/Face shield - Remove goggles or face shield from the back by lifting headband or ear pieces. If the item is reusable, clean and disinfect immediately or place in a designated bag. If non-reusable, discard in waste5. Mask - Discard in a waste container outside the home (or service room) or designated bag.6. Hand Hygiene immediately after removing all PPE

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PPE Instructional Videos:

- **Putting on PPE:** <https://youtu.be/H4jQUBAlBrI>
- **Taking off PPE:** <https://youtu.be/PQxOc13DxvQ>
- **Cleaning reusable eye protection:** <https://www.youtube.com/watch?v=3RvPKkp5EJs>
- **Hand Washing:** <https://www.youtube.com/watch?v=o9hjmges72I>
- **Using Alcohol-based Hand Rub:** <https://www.youtube.com/watch?v=sDUJ4CAYhpA>

PPE Instructional Posters:

- [Putting On PPE](#)
- [Taking Off PPE](#)
- [Proper Handwashing](#)
- [Proper Hand Sanitizer Use](#)

PPE Reminders:

- **Gowns:** Please do not wear the gowns outside of our program spaces. After providing care, the gowns are contaminated and should not be worn through the rest of the building. Even if the gown is freshly put on in the Hub and is not contaminated, other staff will not be aware and may be alarmed.
- **Goggles:** Staff must wear eye protection. Sun glasses and prescription glasses unfortunately do not count. Goggles and face shields will be kept in the Hub (Old Nesi). At the end of the day, after removing your gown, clean your goggles/reusable face shield following these steps:
 - a. Perform hand hygiene,
 - b. Wear a pair of gloves and remove the goggles
 - c. Holding the goggles with one hand and a disinfectant wipe in the other hand, wipe the inside of the goggles with the wipe. Discard wipe.
 - d. Pick another wipe and wipe the outside of the goggles. Discard wipe.
 - e. Still holding the goggles in the same hand, use another disinfectant wipe to clean the surface where the goggles were placed during cleaning. Discard wipe.

Please do not put them back soiled. If soiled, wash then disinfect.

For more detail on cleaning, see eyewear cleaning procedure below:

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Eyewear Cleaning Procedure

Additional Guidance for the Use of Protective Eyewear

- Ensure eye protection and respirator or medical mask compatibility so that there is no interference with the proper positioning of the eye protection or with the fit or seal of the respirator or mask.
- Remove eye protection after the client has left, unless implementing extended use.
- Use of eye protection can be extended. Eye protection should be cleaned, prior to changing medical mask or N95 respirator, when going to breaks or meals, and at end of shift. As needed, replaced it when soiled or damaged.
- All eye protection must be **cleaned and disinfected** between uses – see below.

Cleaning Protective Eyewear

1. Ensure hospital grade disinfectant wipes are within reach.
2. Perform hand hygiene prior to removing eye protection
3. When removing eye protection, reach up behind head or side of head; do not touch the front of contaminated eye protection
4. Place eye protection on a non-porous surface
5. Perform hand hygiene and don gloves
6. Using a hospital grade disinfectant wipe in one hand and the other hand to pick up eye protection, carefully **wipe the inside** surface of eye protection. Discard wipe.
7. Still holding eye protection in the same hand, use the other hand and take a second hospital grade disinfectant, and **wipe the outside** surface of the eye protection. Discard wipe.
8. Still holding eye protection in the same hand, use the other hand and take a third hospital grade disinfectant wipe to clean the surface where contaminated eye wear was placed during cleaning. Discard wipe.
9. Place clean eye protection on clean surface.
10. Remove gloves and perform hand hygiene.
11. If visibility is compromised by residual disinfectant, eye protection can be rinsed with tap water.
12. Allow eye protection to dry prior to next use. When dry, store in labelled paper or plastic bag.
13. Store in a designated clean area in a manner to prevent contamination.

Sources: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html>

Champlain Health Region Incident Command. (2020.10.30) Recommendations for PPE Use including universal mask and eye protection during the COVID-19 Pandemic.

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613-580-6744
TTY/ATS : 613-580-9656



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Note: single-use face shields should NOT be reused: they must be discarded after each use (at end of shift or previously if soiled)

- **Gloves:** Staff must use gloves when providing direct client care. Gloves need to be changed between each client interaction. Hand hygiene must be performed before putting gloves on and after taking them off. Change gloves when torn or heavily soiled.

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2. PPE: Supply Chain & Distribution

- PPE used while working must be obtained on site to ensure medical supplies are used
- PPE should only be obtained from the Elmdale Room for re-stocking
- PPE should only be obtained from the Harm Reduction HUB or front reception for daily use
- Clients must also be provided with a medical mask upon entry to the building

3. Active Screening & Thermometer Use

Screening Guidelines

- Active Screening Guidelines here:
 - [COVID-19 Screening Guidelines - 55 Eccles](#)
 - [COVID-19 Screening Guidelines - Outreach](#)
- Active screening instructions are available at the front entrance from PHC, because they are updated frequently.

Positive Screen Next Steps ONSITE:

- If someone screens positive, you have them wait there - they may not enter the SCS or go elsewhere in the building.
- Staff should radio to ensure an isolation booth is available and they should change their medical mask to an N95 mask if they are yet to do so.
- Staff should then escort the client to the available isolation booth/space and handover to a specific staff in the isolation space.
- The client then must use exclusively in the isolation space.
- The client must be escorted directly to/from these spaces by the assigned staff, taking the most direct route with no detours, and staff must sanitize anything the client touches on the way.
- **Clients who do not comply with Active Screening at any stage will not be permitted to enter the building or continue to use services.**

Screening Questions Quick Reference:

YES to any of questions 2-5 = Positive screen.

Check temperature (must not be >38°C) and ask:

1. Has it been more than 14 days that you received the final (or second) vaccination dose?

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2. In the last 24 hours have you had:
 - a. Fever/Chills; **OR**
 - b. New or worsening cough or shortness of breath; **OR**
 - c. New sore throat, runny nose, sneezing, nasal congestion, hoarse voice, difficulty swallowing, change in smell or taste, nausea, vomiting, abdominal pain, diarrhea
3. In the past 10 days, have you tested positive to COVID or been told to isolate?
4. Have you travelled outside of Canada in the past 14 days?
5. Have you been in contact with someone who has been diagnosed with COVID-19?

Proper use of Thermometers

We will be providing thermometers to our outreach teams/workers.
Please note DIFFERENT BRANDS have DIFFERENT INSTRUCTIONS

Please note all staff using thermometers must **read the instruction booklets**.
Please note the following quick reference reminders about thermometer use:

Front reception thermometer:

Instructions: are with front reception.

Brand: Physiologic Non-contact Infrared Thermometer

Usage: "Aim at the MIDDLE OF FOREHEAD, from a distance of about 3cm-5cm (...) The reliability of the measurement cannot be guaranteed if the temperature is measured over another part of the body (e.g. arm, torso...)"

Outreach thermometers:

Instructions:

- DOPE: in the safe
- NESI: issued to individual workers
- Other outreach services TBD

Brand: Physiologic PROSCAN Non-Contact Infrared Thermometer

Usage: "Aim at the forehead, over the RIGHT TEMPORAL REGION [aka the temples on the side of the head], from a distance of about 3cm - 5cm, press the thermometer's measure key and the temperature will be instantly displayed....Allow 3-5 second intervals between two readings"

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4. Outreach & Transportation

PPE when Driving

Pairs of staff driving Centre vehicles (i.e. 2 staff in the vehicle at once) must:

- All staff driving together without mask AND eye protection are now at risk of being deemed a 'high risk contact' if one becomes COVID positive.
- When 2 staff are driving together WITHOUT clients, one staff must **sit BEHIND the plexiglass barrier** (in minivans)
- When 2 staff are driving together and both must be in the front (ex NESI van, client transportation, staff **must wear eye protection (visor or goggles)**
 - All staff who drive centre vehicles **should please contact leadership to receive a pair of fog-resistant goggles**
- Staff are encouraged to drive with the window down whenever possible/tolerable

Community Outreach

If partner services are involved in patient care and conducting home visits, contact partner service to avoid service duplication and assess who would be better suited to visit the client. If a joint visit is necessary, consider one provider joining virtually.

Active Screening must be done before each patient encounter

- See Active Screening Information here: [COVID-19 Screening Guidelines - Outreach](#)
- Outreach staff will conduct Active Screening over the phone
- **Outreach staff doing foot outreach should always wear an N95 mask and goggles and will maintain 2 metres distance from clients.**
- Clients who screen positive should be given instructions as per the Active Screening guidelines above

Staff must have the following active screening supplies on hand when doing outreach

- PPE: N95 mask, medical mask, gown; goggles or face shield, and gloves
- Hand sanitizer
- Surface disinfectant
- Handouts for positive screens:
 - Directions to Assessment Centre
 - How to prepare for a pandemic- OPH Fact Sheet
 - [How to self-isolate- PHO Fact Sheet](#)
 - [How to self-monitor- PHO Fact Sheet](#)

All outreach staff should wear an N95 mask and goggles within the community. When a home visit is needed, staff should perform a point of care risk assessment (PCRA) before coming in

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contact with every client. These PPE recommendations apply to home visits, shelters and general community visits. **All outreach staff should wear N95 masks and eye protection when in apartment building hallways and ensure they are the only occupant in an elevator.**

Note - Recommended PPE should be worn before entering a client's home or coming in contact with a client. Perform hand hygiene before putting on or after removing PPE.

- **Door-to-door visit** with no direct contact with the client environment OR Direct contact with the client environment but a 2-metre distance can be maintained.
 - Wear N95 mask and eye protection
 - Maintain a 2-metre distance
 - There is no need to change the mask or eye protection unless wet, damaged or soiled.
- Providing **direct home care (Care given within 2 metres) to client. Home care should only be provided to clients who screen negative.**
 - Preliminary screening at a 2-metre distance before entering into the client's unit or rooming house. Staff should already have an N95 mask and eye protection on before performing the preliminary screening.
 - Wear Full PPE (N95 mask, gown, eye protection, gloves)
- Meeting in an **open, well-ventilated space e.g lobby or reception area**
 - Able to maintain a 2-metre distance - Wear N95 mask and eye protection
 - Client should also wear a face mask (cloth or medical)
 - If 2-metre distance is maintained and no physical contact is made with the client, there is no need to change the mask or eye protection unless wet, damaged or soiled.
 - If 2-metre distance can not be maintained, wear additional PPE based on risk assessment.
- **Closely handling items clients have interacted with**
 - Medical masks, eye protection, gloves and gown
Note - If you lend a client a personal property (e.g your phone), use a disinfectant wipe to sanitize the object the way you would sanitize your goggles.
- **Naloxone administration**
 - Full PPE
 - Not advisable to perform CPR (including rescue breaths).

PPE Disposal

- If possible, remove all PPE except the mask and eye protection with as little travel after leaving a client's home as possible and put PPE into a designated bag. Remove PPE in the [recommended sequence](#). After exiting the client's home, remove face covering(s) if soiled or contaminated and discard in a waste container outside the home or in a designated bag. Disinfect reusable eye protection and wear a new N95 mask.

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After visit

Wipe all equipment used - medical equipment, picture id, digital device, writing devices etc.
Perform hand hygiene; before entering the van, if using.

Staff using Centre Vans

All outreach staff will have [Active Screening supplies](#) available in whatever van they are using.

The Bins:

One bin is labelled "Clean" - contains clean PPE (i.e. gowns, gloves, masks, and goggles);
A second bin is labelled "Dirty" - meant for driver's to store dirty PPE until they return on site and are able to properly dispose of it

Driver's Responsibility:

- It is the driver's responsibility to replenish the PPE in the van that they were utilizing;
- If the driver is unable to replenish, for whatever reason, it is the driver's responsibility to inform the Client Engagement Worker the bins need to be replenished;
- It is the driver's responsibility to dispose of all dirty PPE and garbage.

Client Engagement Responsibility:

The front desk will have a small stock of PPE available for when it is not possible for the driver to go to the Riverside Room (2nd floor-you will need master key) to replenish PPE. The PPE stock behind the front desk should only be accessed by the Client Engagement Worker to replenish the vans, not for regular staff use.

Van Transportation Procedures:

1. Re-stock IPAC & PPE supplies before use.
2. Sanitize pre/post-shift: all surfaces including seatbelts, seats, dash, door handles, outside handles, drawer handles and anywhere else we may touch. Including phone and tablet.
3. Staff must screen clients before transportation ([using active screening tool](#))
4. Staff should avoid transporting clients who have screened positive. When it is necessary to transport clients who are suspected or confirmed COVID positive, staff should wear full PPE.
5. Staff must keep windows down when driving for air circulation.
6. Clients must sit **behind plexiglass divider**
7. Clients must **stay masked in the van**
8. Clients must stay 2 metres away from the van

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9. Driver should wear an N95 mask and eye protection. Additional PPE can be worn based on [risk assessment](#) or when transporting suspect/confirmed COVID positive clients.
10. Same mask and eye protection can be used between rides unless wet, damaged or soiled. However, after transporting a suspect/confirmed COVID positive client, all PPE should be discarded and areas touched by the client should be disinfected. Reusable eye protection should be disinfected following previously outlined steps.
11. Gloves should be changed between clients and hand hygiene performed after doffing and before donning new gloves.

NESI Van Procedures:

1. Re-stock IPAC & PPE supplies before use.
2. Sanitize pre/post-shift: all surfaces including seatbelts, seats, dash, door handles, outside handles, drawer handles and anywhere else we may touch. Including phone and tablet.
3. Staff must screen clients over the phone ([using active screening tool](#))
4. Staff must keep windows down when driving for air circulation.
5. Clients may not enter or approach the van.
6. Staff must keep doors locked. Staff should not exit the van until clients are over 2 metres away.
7. Clients must stay 2 metres away from the van.
8. Staff can drop site off at a 2 metre distance from the clients
9. Staff must wear an N95 mask and eye protection, sanitize hands & wear gloves before handling gear
10. The same mask and eye protection can be worn throughout the shift unless wet, damaged or soiled.

5. Outbreak & Contact Tracing

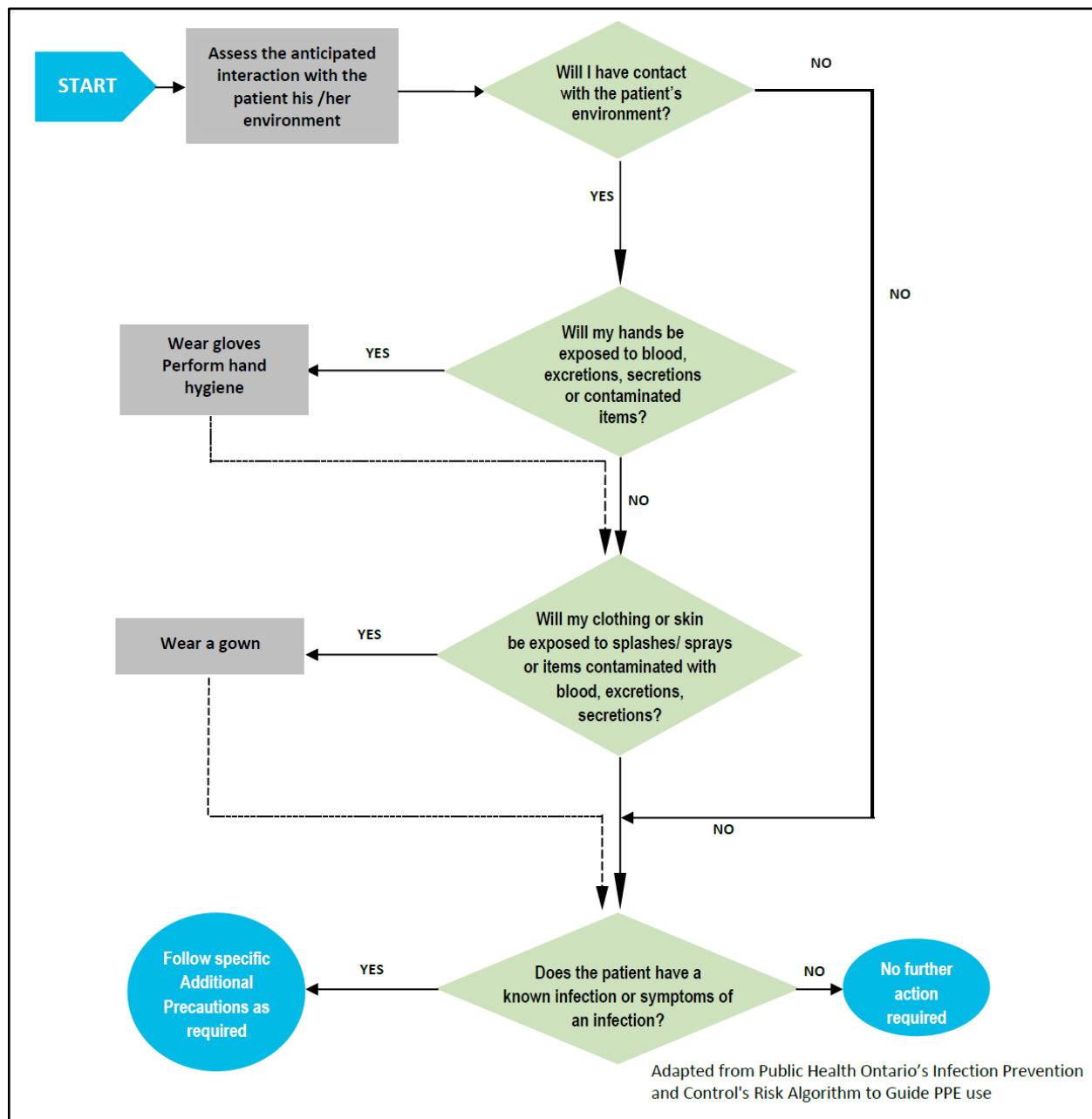
Relevant Documents:

- Rooming House [RHWG Outbreak Management](#) plan
- [COVID-19 SWCHC Client Status Tracking](#)
- Contact Tracing is also embedded in the SCS Huddle Notes

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Risk Algorithm to guide PPE use



6. Harm Reduction Staff Covid-19 Checklist

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HARM REDUCTION STAFF	
Getting Ready	
<ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	<p>Complete OPH self-assessment prior to starting your shift</p> <p>Don full PPE following the appropriate steps</p> <p>Consider tying long hair up and/or wear your own scrub cap</p> <p>Appropriate signages in place - Physical distancing, hand hygiene, respiratory etiquette</p> <p>Perform active screening for all new or returning clients for symptoms compatible with COVID-19 or any travel history in the past 14 days or other exposures to individuals with probable or confirmed COVID-19</p>
During Service	
<ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	<p>Encourage client to wear mask if they are able and perform hand hygiene on entering the facility</p> <p>Maintain physical distancing throughout service duration</p> <p>Remain in service area throughout to avoid exposing other staff to contaminated gown</p> <p>Change gloves between client interaction</p> <p>Use hand sanitizer when appropriate (after client contact, surface contact, if mask is touched, etc.)</p> <p>If signing papers, client and staff should each have their own pen</p>
After Service	
<ul style="list-style-type: none"> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	<p>Disinfect all high touch surfaces</p> <p>Remove PPE in accordance with proper removal techniques and place in touchless waste container</p> <p>Hand hygiene</p> <p>Clean reusable PPE (goggles/face shield) following proper procedure: https://www.youtube.com/watch?v=3RvPKkp5EJs</p> <p>Clean any equipment that was used during the SCS (plastic clipboard, pens, etc.) with disinfectant wipes</p> <p>Hand hygiene</p> <p>Dispose of remaining PPE when appropriate</p>


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7. Employee Self Assessment


For most up to date guidelines staff should use:

Link to the: [Ottawa Public Health Workplace Assessment](#)




COVID-19


Do you have any of the following new or worsening symptoms?




Fever/Chills




Cough




Difficulty breathing/
Shortness of breath




Sore throat/
Difficulty swallowing




Pink Eye/Conjunctivitis




Stuffy/Runny nose
(unrelated to
seasonal allergies)



Loss of taste
or smell



Headache, extreme tiredness,
muscle aches/ joint pain
(not related to getting a COVID-19
vaccine in the last 48 hours)



Nausea, vomiting,
diarrhea,
stomach pain

In the last 10 days, have you

1. tested positive for COVID-19 or been advised by a doctor, health care provider or public health unit that you should currently be isolating or staying home?
2. tested positive on a rapid antigen/home-based test and not completed a follow up test at an assessment centre
3. had close physical contact (and you are not fully vaccinated**):
 - with someone you live with who is experiencing any new COVID-19 symptoms and/or waiting for a test result
 - with someone who tested positive for COVID-19 or who is considered a probable case?
4. received a COVID Alert exposure notification on your cell phone?
5. travelled outside of Canada and been told to quarantine (per the federal quarantine requirements?)


In the last 14 days, have you

If you answered **YES** to any of these questions, **please return home and self-isolate.** Visit [OttawaPublicHealth.ca/COVIDCentre](#) for more information about getting tested.
If you are feeling unwell, contact your health care provider or call **Telehealth Ontario** at **1-866-797-0000** to speak to a registered nurse.

**** Fully vaccinated means that it has been at least 14 days since receiving:**

- Your second dose of an accepted two-dose COVID-19 vaccine or a combination of accepted vaccines (Moderna, Pfizer-BioNTech or AstraZeneca) OR
- your only dose of the single-dose COVID-19 vaccine series of Janssen (Johnson & Johnson)

Adapted with permission from Toronto Public Health 18/08/2021

OttawaPublicHealth.ca/Coronavirus 

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8. References

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