

Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



HOW YOU CAN SLOW THE SPREAD OF COVID-19

Take care of others by taking care of yourself.

Wash your hands, don't touch your face, and stay home if you are sick.

Stay at Home and Physically Distance

Stay at home whenever you can. Maintain 2 meters distance from those outside of your household.

COVID-19 Information Sheet for Environmental Service Providers in Health Care Settings

Updated: July 7, 2020

How is COVID-19 Spread?

- COVID-19 is transmitted via liquid droplets when a person infected with COVID-19 coughs or sneezes.
- The virus in these droplets can enter through the eyes, nose or mouth if you are in close contact with the person who coughed or sneezed.
- The virus can also enter a person's body from touching eyes, mouth or nose with unwashed hands after touching something with the virus on it.

How can you protect yourself and limit the spread of COVID-19?

General Precautions



Practice diligent hand hygiene at all times. Appropriate hand hygiene is one of the most effective measures to protect yourself against all infections, including COVID-19.

Wash your hands often with plain **SOAP and WATER** for at least 20 seconds. Antibacterial soap is NOT required for COVID-19. Alternatively, use **ALCOHOL-BASED HAND SANITIZER** with at least 70% alcohol content if your hands are NOT visibly soiled.

This includes, but is not limited to, washing your hands before and after touching the patient environment, before preparing or handling food, after handling waste, after using the toilet, after blowing your nose, sneezing or coughing, before and after eating, drinking or smoking.



DO NOT touch your eyes, nose or mouth with unwashed hands.

DO NOT share food, drinks, unwashed utensils, cigarettes, vaping devices, joints or bongs.



Maintain a safe distance of **at least 2 metres (about 2 arms lengths)** from clients and colleagues whenever possible, including during breaks and meals when you are not masked.



Practice respiratory (cough) etiquette. **Cough or sneeze into your elbow or a tissue.** Immediately dispose of used tissues in a waste bin and wash your hands right away.



Stay home if you are sick to avoid spreading illness to others.



Launder work clothes after each shift. Shower immediately upon returning home after every shift. Use dedicated foot wear while at work.



Personal Protective Equipment (PPE) for Environmental Service Staff

PPE, cough etiquette and diligent hand hygiene are all important infection prevention tools for preventing the spread of respiratory pathogens, including COVID-19.

- Use PPE as per the facility's routine protocols when not working in patient care areas.
- During the COVID-19 pandemic, all persons working in or visiting a **Long-Term Care and Seniors Assisted Living** facility should wear a surgical or procedure mask for the full duration of their shift or visit.
 - Surgical or procedure masks should be removed just prior to breaks or when leaving the facility.
 - Surgical or procedure masks should be changed if the masks become wet, damaged or visibly soiled.
 - Practice hand hygiene after removing the mask, and before putting on new mask.
 - If you see a colleague touch or adjust their mask, remind them to wash their hands.
 - Once removed, the mask should be disposed of. Do not put the mask back on.
- **Environmental service staff should wear the following PPE on entry to dedicated COVID-19 cohort units or rooms on droplet and contact precautions** (i.e., cohort units or rooms where patients diagnosed with COVID-19 or patients with COVID-19 symptoms have been admitted):
 - Gloves,
 - Gown,
 - Eye protection: goggles, face shield, a mask with a visor, or safety glasses,
 - Mask: surgical/procedure mask or one suited to the cleaning products being used,
 - Closed work shoes.
- Change **gloves** between patient rooms. Perform hand hygiene between glove changes.
- **Practice hand hygiene after removing each individual piece of PPE & before putting on new PPE.**
- **Practice diligent hand hygiene when entering and leaving each unit.**
- If you see a colleague touch or adjust their PPE, remind them to clean their hands.
- If environmental cleaning and disinfection of the area is required following an Aerosol Generating Medical Procedure (AGMP), the area should be cleaned and disinfected **after** the required air clearance time has passed. If unable to delay cleaning, then use a fit-tested N95 respirator.
 - Please consult local institutional guidelines regarding air clearance times, and if necessary, your local Infection Prevention and Control Team for more information.
 - Use a fit-tested N95 respirator if entry to a room is required immediately after an AGMP procedure or before the required air clearance time has lapsed.

Environmental Cleaning

- Environmental cleaning and disinfection for COVID-19 virus is the same as for other common viruses. Cleaning products and disinfectants that are regularly used in hospitals and health care settings are strong enough to deactivate coronaviruses.
- Disinfectants should be classed as a hospital grade disinfectant and registered in Canada with a Drug Identification Number (DIN) and labelled as effective for both enveloped and non-enveloped viruses.²
- Follow product instructions for dilution, wet contact time and safe use (e.g., use of PPE and proper ventilation).



- Clean and disinfect high-touch surfaces at least twice a day and when soiled (e.g., doorknobs, countertops, phones, call bell cords or buttons, light switches, bathroom fixtures, sinks, toilets, toilet and shower handles, faucets, shower chairs, grab bars, outsides of paper towel dispensers, bedside tables, bedrails, overbed tables, chair arms).
- Clean visibly dirty surfaces before disinfecting (unless otherwise stated on the product instructions).
- Floors and walls should be kept visibly clean and free of spills, dust and debris.
- Change mop solutions between every patient room for COVID-19 cohort units.³ If using a microfiber mop system, follow standard procedures - changing mop solutions between patient rooms is not required.
- Dedicate cleaning supplies to the COVID-19 unit, such as housekeeping cart, mop and mop bucket. When not possible, clean and disinfect cleaning supplies (e.g., housekeeping cart, mop handles, mop bucket and any reusable item) and transfer them to another cart before leaving COVID-19 unit.³
- Items that cannot be easily cleaned and disinfected should be removed (e.g., plush toys).
- Follow the facility's protocol for daily and terminal cleaning of patient room/space after discharge, transfer, or discontinuation of Droplet and Contact precautions.
- Wash bedside privacy curtains following patient discharge or transfer.
- Do not remove additional precaution signs until the patient's personal hygiene and the environmental cleaning of their space have been completed.
- **Dedicate staff to specific units or areas whenever feasible. When not possible, cleaning staff should provide service to COVID-19 units last (i.e., after providing service to all other units).**

Waste Management

No special precautions are required. The facility's routine procedures are sufficient for COVID-19.

- Waste from patients with COVID-19 should be handled using routine procedures.
- Waste that is normally considered biomedical is disposed in the usual biomedical bag/container.
- If a bag is punctured or has waste spilled on the exterior, it should be placed into a second biohazard bag.
- Sharps should be placed in sharps containers per usual practice.
- All bags should be securely closed for disposal. Do **not** compress bags or try to remove excess air.
- Waste should be transported using clearly defined transport routes within the health care facility.
- Removal of waste should be scheduled at designated times from designated locations when possible.
- Clean and disinfect carts used for transporting waste regularly using hospital grade disinfectant that has a Drug Identification Number (DIN).

Laundry

No special precautions are required. The facility's routine procedures are sufficient.

- Soiled laundry from patients with COVID-19 should be handled using routine laundering practices.
- Do not shake dirty laundry.
- Place the dirty laundry directly in a linen bag without sorting. Do not overfill bags. Do **not** compress bags or try to remove excess air.
- Contain wet laundry before placing it in a laundry bag (e.g., wrap in a dry sheet or towel).
- Consider placing a bag liner in the hamper that is either disposable (can be thrown away) or can be washed.
- Clean and disinfect hampers or carts used for transporting laundry regularly using hospital grade disinfectant that has a Drug Identification Number (DIN).



- Wash items in accordance with the manufacturer’s instructions. Use the warmest water settings allowed and dry items completely.
- Store clean laundry in designated areas.
- Maintain clear separation between clean and dirty laundry.

Resources

- For up-to-date information on COVID-19, please refer to the BC Centre for Disease Control (BCCDC) website: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>.
- If you think you have symptoms, use the COVID-19 Self-Assessment Tool: <https://bc.thrive.health/>

References

1. Public Health Agency of Canada (April 22, 2020). [Infection prevention and control for coronavirus disease \(COVID-19\): Second Interim guidance for acute healthcare settings.](#)
2. Vancouver Coastal Health (April 8, 2020). [Environmental Cleaning on COVID-19 Cohort Units.](#)
3. PICNet (September 2016). [British Columbia Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Healthcare Settings and Programs.](#)

