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ABOUT CORONAVIRUS DISEASE (COVID-19)

WHAT IT IS

COVID-19 is an illness caused by a coronavirus.

Human coronaviruses are common and are typically associated with mild illnesses, similar to the common cold.

SYMPTOMS

Symptoms may be very mild or more serious. They may take up to 14 days to appear after exposure to the virus.



FEVER



COUGH



DIFFICULTY BREATHING

HOW IT IS SPREAD

Coronaviruses are most commonly SPREAD from an infected person through:

- ▶ respiratory droplets when you cough or sneeze
- ▶ close personal contact, such as touching or shaking hands
- ▶ touching something with the virus on it, then touching your eyes, nose or mouth before washing your hands

These viruses are not known to spread through ventilation systems or through water.

PREVENTION

The best way to prevent the spread of infections is to:



- ▶ wash your hands often with soap and water for at least 20 seconds



- ▶ avoid touching your eyes, nose or mouth, especially with unwashed hands



- ▶ avoid close contact with people who are sick



- ▶ when coughing or sneezing:
 - cover your mouth and nose with your arm or tissues to reduce the spread of germs



- immediately dispose of any tissues you have used into the garbage as soon as possible and wash your hands afterwards



- ▶ clean and disinfect frequently touched objects and surfaces, such as electronic devices and doorknobs.



- ▶ stay in your unit if you are sick to avoid spreading illness to others

- ▶ Avoid using public transport or ride shares

IF YOU HAVE SYMPTOMS

If you have SYMPTOMS of COVID-19 — fever, cough, or difficulty breathing:



- ▶ stay in your unit to avoid spreading it to others
 - if you live with others, stay in a separate room or keep a 2-metre distance



- ▶ call ahead before you visit a health care professional or call Health Link 811
 - tell them your symptoms and follow their instructions



- ▶ Contact your property manager
- ▶ if you need immediate medical attention, call 911 and tell them your symptoms.

FOR MORE INFORMATION ON CORONAVIRUS:



The guidance provided in this document can assist you to prevent the introduction of COVID-19.

Please be aware this information is based on the best information currently available and will be updated as more is learned about the COVID-19 outbreak. The AHC may change its recommendations as the situation evolves.

Communicate with staff and person served

- Keep residents and employees informed.
- Describe what actions your program site is taking to protect them, including answering their questions and explaining what they can do to protect themselves and the person served.
- Educational materials and information should be made available.

Program Sites Signage

- Post signs at the entrance instructing visitors to use hand sanitizer and or wash their hands before and after visiting.
- When possible, screen visitors in advance and upon arrival for fever or signs of an acute respiratory illness.
- Inform potential visitors that symptomatic persons will not be allowed to enter.
- We encourage all staff to use their usual communication channels to inform potential visitors of these rules before they travel to the site.

Prevent the Spread

- Residents who have been evaluated and do not meet COVID-19 testing criteria but who have fever or respiratory symptoms, restrict residents with fever or acute respiratory symptoms to their room or an area where they can be isolated from others in the facility by at least 6 feet.
- Consider daily temperature and symptom checks of residents and monitor for new fever and/or respiratory illness.
- If multiple persons become ill, establish a designated area(s) of the facility specifically for sick persons. Designate staff to care for these individuals only limit

the movement of designated staff between parts of the facility to decrease the risk of staff spreading COVID-19 to other parts of the facility.

- If the sick person must leave the room for medically necessary procedures, have them wear a facemask.
- Support hand and respiratory hygiene, as well as cough etiquette by residents, visitors, and employees.
- Make sure tissues are available and any sink is well-stocked with soap and paper towels for hand washing.

Housekeeping

- Clean facilities routinely and effectively.
- Clean frequently touched surfaces, such as doorknobs, door handles, handrails and telephones, as well as non-porous surfaces in bathrooms, sleeping areas, kitchen area and offices (e.g., floors)
- Place waste baskets in visible locations and empty regularly;
- Ensure that waiting areas, TV rooms and reading rooms have adequate ventilation (e.g., open windows if practical)
- Linens, eating utensils and dishes belonging to those who are sick do not need to be cleaned separately, but should not be shared without thorough washing.
- Instruct cleaning staff to avoid “hugging” laundry before washing it to avoid self-contamination.
- Instruct cleaning staff to wash their hands with soap and water or an alcohol-based hand sanitizer immediately after handling infected laundry

COVID-19 INFORMATION

HELP PREVENT THE SPREAD

**Prevention starts with awareness.
Be informed on how you can
protect yourself and others from
novel coronavirus:**

- Self-isolate if you're feeling sick
- Wash your hands frequently
- Cover coughs and sneezes
- Avoid touching your face

**Concerns about your health?
Call Health Link 811.**

alberta.ca/covid19

Alberta 

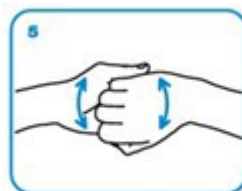
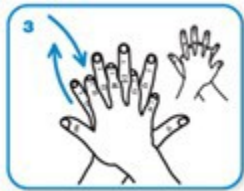
How to Hand Wash

© 2019 Alberta Health Services.

If you have any questions or comments regarding this information please contact the Infection Prevention & Control Hand Hygiene Program at: Hand.Hygiene@ahs.ca



- Roll up long sleeves and push up any wrist accessories
- Wet hands with warm water
- Apply enough soap to cover surfaces of the hands



- Vigorously rub soap over palms, backs of hands and wrists
- Include space between fingers, fingertips and thumbs
- Procedure should take 15 to 30 seconds



- Rinse under warm, running water
- Pat hands dry with disposable towel
- Turn tap off with the disposable towel

Periodically apply AHS-provided hand lotion for skin integrity.

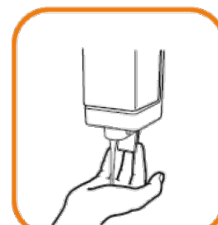
Adapted with permission from The World Health Organization

Original date: May 2017
Revised date: June 2019

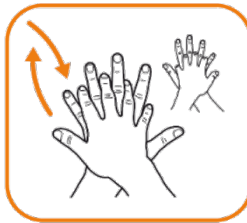
How to Use Alcohol-based Hand Rub

© 2019 Alberta Health Services

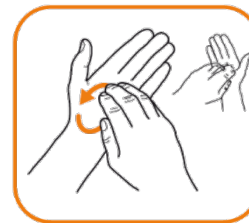
If you have any questions or comments regarding this information please contact the Infection Prevention & Control Hand Hygiene Program at: Hand.Hygiene@ahs.ca



- Roll up long sleeves and push up wrist accessories
- Apply a palmful of AHS-provided ABHR to hands
- Rub all surfaces of your hands and wrists



- Include palms, fingers, fingertips and thumbs
- Rub until hands are completely dry



Periodically apply AHS-provided hand lotion for skin integrity.

Adapted with permission from The World Health Organization

Original date: May 2017
Revised date: April 2019

Cover Your Cough

Stop the spread of germs that make you and others sick!



OR



Cough or sneeze into your sleeve, not your hands

Cover your mouth and nose with a tissue and put your used tissue in the waste basket

Clean your hands after coughing or sneezing



OR



Wash your hands with soap and warm water, for at least 20 seconds

Clean hands with alcohol-based hand rub or sanitizer

You may be asked to put on a mask to protect others

COVID-19 Screening Criteria

Issued by the AHS Emergency Coordination Centre (ECC)

People with fever and/or a cough, or shortness of breath, or difficulty breathing, are at highest risk of having COVID-19 if they meet any of the following criteria:

In the 14 days before illness onset, they:

- Travelled anywhere outside of Canada;

OR

- Had close contact* with a confirmed or probable case of COVID-19;

OR

- Had close contact* with a person with acute respiratory illness who has travelled anywhere outside of Canada within the last 14 days before their illness;

OR

- Had laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19 virus.

* A close contact is defined as a person who:

- Provided care for the individual, including healthcare workers, family members or other caregivers, or who had other similar close physical contact with the person without consistent and appropriate use of personal protective equipment

OR

- Lived with or otherwise had close prolonged contact (within 2 metres) with the person while the person was infectious

OR

- Had direct contact with infectious bodily fluids of the person (e.g. was coughed or sneezed on) while not wearing recommended personal protective equipment.

Additional Resource: Case Map

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

novel Coronavirus (COVID-19) FAQs for Public

Issued by the AHS Emergency Coordination Centre (ECC)

What's happening in Alberta?

Latest info for travellers, visit: ahs.ca/covid

NEW Should I change or cancel my travel plans outside of Canada?

- Travel outside Canada is **not recommended** at this time.
- Given the rapid global spread of COVID-19, it is no longer possible to assess health risks for the duration of the trip.
 - Public Health Agency of Canada's Travel Health Advisories: <https://travel.gc.ca/travelling/health-safety/travel-health-notices>.
 - World Health Organization's bulletins: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/travel-advice>.

NEW What should I do if I have recently returned from travelling outside of Canada?

- Effective March 12, all Albertans currently outside of the country, or who have recently returned, are recommended to self-isolate on their return for 14 days, independent of the country they were visiting.

You can do this by following these guidelines (<https://www.alberta.ca/assets/documents/health-self-isolation-information-sheet.pdf>), which include:

- Avoid close contact with other people, especially those with chronic conditions, a compromised immune system, or seniors.
- Do not attend work, school, social events or any other public gatherings.
- Watch for symptoms like fever, cough or shortness of breath in yourself or family members.
- Call Health Link 811 at the first sign of symptoms. Call from home before going to a health care facility, unless severely ill.
- If severely ill and in need of immediate medical attention call 911 and inform them that you may have COVID-19.

If you are unsure if you should be self-isolating, or if you have questions about how to do it, follow these guidelines or call Health Link 811.

NEW I have a large event planned/I am planning to attend a large event, what should I do?

- To help prevent the spread of COVID-19, Alberta has implemented new public health restrictions as of March 12. The following mass gatherings should be **cancelled**:
 - Events with more than 50 attendees that involves international participants, critical infrastructure staff, seniors, or other high-risk populations.
 - Large events with more than 250 attendees:
 - Includes: sporting events, conferences and community events
 - Does not include: places of worship, grocery stores, airports or shopping centres

- Events that do not meet this criteria can proceed, but risk mitigation measures must be in place, such as providing sanitizer stations and distancing between attendees.

Schools, daycares and post-secondary institutions can remain open at this time, but steps should be taken to ensure no more than 250 people are in the same room at any given time.

UPDATED I was on a flight where there was someone who looked sick. Am I at risk?

- Influenza and the common cold are far more likely causes of respiratory illness among travellers.
- You can protect yourself by washing your hands often and well, and getting your annual influenza vaccine.
- Returning travellers on international flights may be screened at the airport: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/canadas-reponse.html>
- If any cases are diagnosed among travellers to Alberta, Public Health will be following up with anyone who was exposed.

UPDATED How can I protect myself and my family from COVID-19?

- To help protect against all respiratory illnesses, including the flu and COVID-19, you should:
 - Wash your hands often and well. Refer to hand-washing guidance here: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-flu-handwash-how-to.pdf>
 - Avoid touching your face, nose, or mouth with unwashed hands.
 - Avoid close contact with people who are sick
 - Clean and disinfect surfaces that are frequently touched
 - Stay at home and away from others if you are feeling ill
 - When sick, cover your cough and sneezes and then wash your hands. Refer to respiratory etiquette guidance here: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/if-hp-ipc-cover-cough.pdf>

UPDATED I am worried about catching COVID-19. Should I wear a medical mask?

- Masks can be very important in certain situations. When sick, wearing a mask helps prevent us from passing illnesses on to other people. This is why we ask people who have a cough or respiratory symptoms to wear a mask and wash their hands when visiting an emergency department or clinic.
 - If you are sick, wearing a mask helps prevent passing the illness on to other people.
 - If you are healthy, medical masks are not recommended as they don't provide full protection and can create a false sense of security.
 - See [appropriate infection prevention and control precautions for health-care settings](#)
- Frequent and thorough hand washing, covering your mouth when coughing or sneezing and avoiding touching your face, nose or mouth remain the best evidence-based ways to prevent the spread of respiratory illness.
- N95 masks (respirator masks) require special fitting and testing in order to be effective. We strongly recommend against members of the public using N95 masks, as they can make it more difficult to breathe for some individuals, especially those with chronic breathing problems. They provide little, if any, benefit beyond that provided by a procedure mask.

What is novel coronavirus (COVID-19)?

- Coronaviruses are a large family of viruses.
- Some coronaviruses cause respiratory illness in people, ranging from common colds to severe pneumonias. Others cause illness in animals only.
- Rarely, animal coronaviruses can infect people, and more rarely, these can spread from person to person through close contact.
- Novel coronaviruses are new strains of the virus that have not been previously identified in humans.

What are the symptoms of COVID-19?

- Symptoms for COVID-19 are similar to those for influenza or other respiratory illnesses. The most common symptoms include:
 - fever
 - cough
 - extreme tiredness
- Most people (about 80%) recover from this disease without needing special treatment.
- However, it can cause serious illness. Those who are older, and those with other medical problems are more likely to develop serious illness, which can include:
 - difficulty breathing
 - pneumonia
- There is a risk of death in severe cases.
- While we are still learning about how COVID-19 affects people, older persons and persons with pre-existing medical conditions (such as high blood pressure, heart disease, lung disease, cancer or diabetes) appear to develop serious illness more often than others.

How is COVID-19 spread from person-to-person?

- COVID-19 is believed to be spread mainly by coughing, sneezing or direct contact with a sick person or with surfaces they have recently touched.

Who should be assessed for COVID-19?

- People who develop a fever and/or cough or difficulty breathing should be assessed for COVID-19 if, within 14 days before symptoms began, **they meet any of the following criteria:** <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-case-def.pdf>.
- Anyone meeting these criteria should avoid contact with others and call Health Link 811 for advice.

What should I do if I think I have COVID-19?

- If you are sick and meet these criteria: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-case-def.pdf>
 - Stay home and call Health Link 811 for advice.

- If you are not seriously ill, **do not** go to a physician's office, a health care facility or a lab without consulting with Health Link first.
- Call 911 if you are seriously ill and need immediate medical attention and inform them that you may have COVID-19

What does self-isolation mean?

- Self-isolation means avoiding situations where you could infect other people. This means all situations where you may come in contact with others, such as social gatherings, work, school, child care, athletic events, university, faith-based gatherings, healthcare facilities, grocery stores, restaurants, shopping malls, and all public gatherings.
- You should, (where possible) not use public transportation including buses, taxis, or ride sharing.
- As much as possible, you should limit contact with people other than the family members/companions who you travelled with.
- You should avoid having visitors to your home, but it is okay for friends, family or delivery drivers to drop off food.
- You can also use delivery or pick up services for errands such as grocery shopping.
- Avoid sharing household items such as dishes, drinking glasses, cups, eating utensils, towels, pillows, or other items with other people in your home. After using these items, you should wash them thoroughly with soap and water, place in the dishwasher for cleaning, or wash in the washing machine.
- Wash your hands often with soap and water and regularly clean and disinfect frequently touched and shared surfaces such as doorknobs and counters.
- If you need to leave your home for an urgent errand, such as picking up essential medication, as a precaution to reduce risk of spread, you should wear a surgical mask while you are out.
- During this time, it is important that you monitor your health for symptoms like fever or cough, and call Health Link 811 if you have any concerns.

How is COVID-19 treated?

- Although there are no specific medications for COVID-19 at this time, the Alberta health care system is able to provide effective care for people who develop a serious COVID-19 illness.

Are there vaccines to prevent COVID-19?

- Not yet. Much research is currently underway to develop a vaccine, but it could take some time before a vaccine is developed and approved for use in Canada.

Who is most at risk for becoming very sick with COVID-19?

- Although most people who develop COVID-19 will experience mild illness, some individuals are more likely to become seriously ill. Older adults and people with medical conditions like high blood pressure, diabetes, heart disease, and lung disease appear to be at higher risk of becoming very sick.

Is AHS prepared to meet the increased demands on health care in the event of a local outbreak of COVID-19?

- In collaboration with Alberta Health and the Alberta Emergency Management Agency, Alberta Health Services prepares for a serious respiratory outbreak as part of our regular operations. We are ready to enact these plans to respond to COVID-19 in Alberta.
- The goals of our outbreak response are to control the spread of disease, reduce illness and death, minimize disruptions to the daily life of Albertans, minimize economic impacts and support an efficient and effective use of resources during response and recovery.
- Although influenza is the model infection used, Alberta's Pandemic Plan is also applicable to other respiratory illnesses, including COVID-19. You can read more about the plan on the Government of Alberta website at <https://www.alberta.ca/pandemic-influenza.aspx>

I am not having symptoms, but I'm concerned about COVID-19 and want to talk to someone. Should I call Health Link?

- Please visit the following websites if you have further general questions about what COVID-19 is, how it is spread, or how many cases there are in the world at present. You can call Health Link 811 if you have additional questions about what you need to do to protect yourself and your family against getting a COVID-19 infection.
 - Alberta Health: alberta.ca/covid19
 - Public Health Agency of Canada: canada.ca
 - World Health Organization: who.int

Environmental Cleaning in Public Facilities

Public Health Guidelines for Environmental Cleaning of Public Facilities during Respiratory Illnesses in the Community

This document is to support owners and operators of public facilities with general cleaning and disinfection considerations as it relates to COVID-19. For general information on COVID-19 or to find site specific resources, please visit: ahs.ca/covid.

General Cleaning

- Increase daily cleaning and disinfection of common areas and surfaces. Pay particular attention to door knobs, light switches, staff rooms, desktops, washrooms and other high touch surfaces.
- Cleaning refers to the removal of visible dirt, grime and impurities. Cleaning does not kill germs but helps remove them from the surface.
- Disinfecting refers to using chemical to kill germs on surfaces. This is most effective after surfaces are cleaned. Both steps are important to reduce the spread of infection.
- Use a **disinfectant** that has a Drug Identification Number (DIN) and a virucidal claim. Be sure to follow the instructions on the label to disinfect effectively. Alternatively, you can prepare a bleach water solution with 100 ml of unscented household bleach per 900 ml of water.
- Be sure to use take the appropriate precautions when using chemicals for cleaning and disinfecting. Consult the products Safety Data Sheets.

Prevention

- [Wash your hands often and well](#)
- Avoid touching your face, nose, or mouth with unwashed hands
- Avoid close contact with people who are sick
- Clean and disinfect surfaces that are frequently touched
- Stay at home and away from others if you are feeling ill
- [When sick, cover your cough and sneezes and then wash your hands](#)

Enhanced Measures

- In the event of a cluster of illness in a specific public facility, please adhere to any additional recommendations provided by Public Health at that time.

References:

Alberta Health Services Infection Prevention and Control

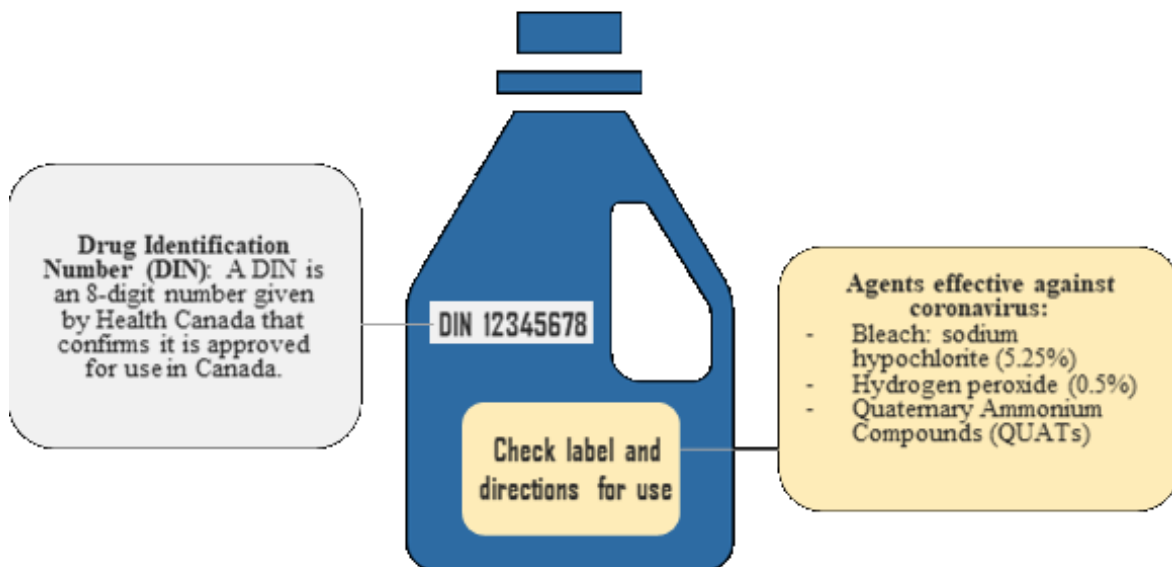
Centers for Disease Control and Prevention: Coronavirus Disease 2019 (COVID-19)

Appendix A- Disinfection Products Effective Against Coronaviruses

For frequently touched surfaces and areas that are likely to become contaminated, the below list of products provides examples of common effective disinfectants. Often janitorial product suppliers carry all these as well as other effective products. You should confirm with your supplier that the product is effective against the COVID-19 virus, one of many coronaviruses. *Always follow the manufacturer's instructions.*

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 soiled surfaces should be cleaned before disinfecting (unless otherwise stated on the product).



List of disinfecting agents and their working concentrations known to be effective against coronaviruses (Dellanno *et al.*, 2009; Alberta's IPC Guidelines- when available; European Interim Guidance for Environmental Cleaning, 2020)

Agent and Concentration		Uses
1.	Chlorine: Unscented household bleach – sodium hypochlorite (5.25%) 1:9 (5000 ppm solution) 100 ml bleach to 900 ml water	Used for disinfecting general surfaces, e.g., hand railings, grab handles, door knobs, cupboard handles. Can also be used for disinfecting surfaces contaminated with blood/bodily fluids, but only after cleaning with soap and water first.
2.	Disinfectant with a Drug Identification Number AND a Virucidal Claim. Follow manufacturer's instructions	Used for disinfecting general surfaces e.g., hand railings, grab handles, door knobs, cupboard handles. Can also be used for disinfecting surfaces contaminated with blood/bodily fluids, but only after cleaning with soap and water first.
3.	Accelerated Hydrogen Peroxide 0.5%	Used for disinfecting general surfaces (e.g. counters, hand rails, door knobs).
4.	Quaternary Ammonium Compounds (QUATs)	Used for disinfecting of general surfaces (e.g., floors, walls, furnishings).

Alberta Health does not endorse or promote any specific brands of disinfectant products.

Maintain Cleaning and Disinfecting Policies

Regular cleaning and disinfecting of objects and high-touch surfaces (e.g. door handles, water fountain push buttons) will help prevent the transmission of viruses. This can be done using existing school/child care setting cleaning and disinfection protocols, as long as the disinfectant product is effective against coronaviruses, particularly the COVID-19 virus. Disinfection is most effective on a clean surface; surfaces should be cleaned first, as necessary, before applying the disinfectant.

Cleaning is 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 a cleaning cloth. *Cleaning for COVID-19 virus is the same as for other common viruses.* In general, cleaning should be done whenever surfaces are visibly soiled.

Disinfection is the killing of viruses and bacteria. A disinfectant is only applied to objects; never on the human body. Most schools/child care settings will have existing policies to disinfect high-touch surfaces at least once per day; if not, these should be developed. Consider more frequent disinfection whenever respiratory illnesses are circulating in the school/child care setting. As well, additional disinfection should occur in any settings occupied by a student/child who is symptomatic and at risk of COVID-19.

Memorandum

Date: UPDATED March 15, 2020

To: Publicly Funded Long-term Care, Designated Supportive Living, Hospice, Home Care and Day Program Providers

From: Alberta Health Services Emergency Coordination Centre

RE: COVID – 19 Response

PLEASE NOTE:

- Information in this document is current as of the date it was released. This is a rapidly evolving situation. Guidance on suspending operations of Adult Day Programs, Visitor and Volunteer Screening Questionnaire (Appendix A), Visitation in Congregate Living Sites (Appendix B), and Staff Accountabilities in Congregate Living Sites (Appendix C) has been updated from the previous memo release, and is current as of March 15, 2020. For the latest information, please visit Continuing Care Connection at connection.albertahealthservices.ca or www.ahs.ca/covid. Registration for Continuing Care Connection has been simplified and made available to all interested parties.
- Guidance provided herein represents AHS's minimum recommended practices for publicly funded Long-term care, Designated Supportive Living, Hospice, Home Care and Day Program Providers

Introduction

- Continuing Care (Long Term Care and Designated Supportive Living) settings pose challenges due to their unique environments and the individuals they serve. Particular challenges include the health status of these populations, residents living in close quarters, group dining and recreation and sometimes limited professional staff for monitoring health conditions.
- Particularly for older individuals and those with respiratory, cardiac or multiple chronic conditions, the risks of more severe symptoms and death from COVID-19 are greater. Special steps must be taken to prevent disease transmission when considering the movement of clients or residents, visitors and staff into and within the facilities.
- Home care has challenges in that individuals being served are typically also included within populations where the risk of more severe symptoms and death is higher. Special steps must also be taken in environments where home care is being provided by publicly funded Home Care providers.

Purpose of this document

- To build upon the communication sent by Alberta Health on March 11, 2020, to Long-term Care, supportive living, and home care providers, adding information pertinent to AHS contracted operators.
- Ensure publicly funded continuing care providers and publicly funded home care providers are aware of the work AHS has completed to date on COVID-19.
- Outline the work being completed by AHS in the next few days to support providers of care to continue preparations for COVID-19 in congregate living settings and home care.
- Provide links to available resources and proactive steps that can be taken by contracted providers of care to limit the transmission of COVID-19.
- Establish a communication pathway with contracted continuing care providers and contracted home care providers for the COVID-19 response.

Update on AHS Response

- AHS has an Emergency Coordination Centre (ECC) established, and continues to work collaboratively with Alberta Health and care providers across Alberta. The continuing care sector, including congregate living settings and home care, is represented in the Emergency Coordination Centre.
- A Continuing Care COVID-19 Working Group has been established under the auspices of the ECC to adapt existing and develop new resources that are required to support the response to COVID-19 in congregate living settings and home care environments. Dr. James Silvius, Provincial Medical Director Seniors Health and Amy Good, Executive Director Seniors, Palliative and Continuing Care, Calgary Zone are leading.
- AHS Zone Emergency Operations Centres have been established in all zones, with continuing care representation.
- Assessment Centres are now operational in both Calgary and Edmonton Zones to allow symptomatic individuals to receive testing at the direction of Health Link. These sites are not open to general public drop-in and are being used to help control the needs for testing, while ensuring the safety of the public and healthcare workers. Individuals gain access to assessment by calling Health Link in Alberta at 811. Further assessment centres will be opened in other zones as the needs dictate.

Work In Progress for Continuing Care and Home Care Settings

- Finalizing processes and guidance to enable on-site testing for clients/residents in Long Term Care, Designated Supportive Living and Home Care settings. All testing will be done outside of acute care hospitals unless absolutely necessary.
- Ensuring COVID-19 resources are publicly available on Continuing Care Connection in one consolidated location before the end of this week.
- Finalizing adjustments to the Continuing Care Pandemic Operational Guide for COVID-19 as required. These should be available within the next few days and will be posted on Continuing Care Connection.
- Confirmation of Contracted Operator Pandemic / Business Continuity Planning, beginning with facilities that have not yet shared their complete plan with AHS.
- Developing communications to assist contracted operators to encourage illness reporting within their Health Care Workers and close contacts.
- Developing resident and client communications to encourage reporting of the onset of an ILI specific to COVID-19 for themselves or close contacts. This will include information on the reasons for testing, what will happen if they test positive, and what they can do to protect informal caregivers who will provide support through their illness.
- Exploring approaches to provide contracted operators and family physicians with PPE where required.

Completed Work for Continuing Care and Home Care Settings:

- **On March 16, 2020, AHS Zone Operations representatives will contact Adult Day Program operators about the decision to suspend services as quickly as is feasible.**
- Updated guidance to prevent disease transmission when considering the movement of clients or residents, visitors, volunteers, outside workers and staff into and within the facilities.
 - Visitor and Volunteer Screening Questionnaire (Appendix A)
 - Visitation in Congregate Living Sites (Appendix B)
 - Staff Accountabilities in Congregate Living Sites (Appendix C)
 - AHS staff will still require access to sites in order to provide care, and are taking the greatest of precautions to ensure the safety of our shared clients.

- The AHS Provincial Continuing Care Audit Team will be pausing routine audit activities. Understanding that there needs to be a balance between keeping clients or residents and employees safe with that of providing continued assurance related to safe, quality care, the Audit Team will shift focus to identifying and supporting sites that may be struggling in achieving compliance with IPC, Care Assessment and Follow up to Care.

Next Steps for Providers of Care in Congregate Living and Home Care Settings

- Review connection.albertahealthservices.ca or www.ahs.ca/covid for the latest updates on the AHS COVID-19 response.
- Ensure you are registered for Continuing Care Connection and review the COVID-19 materials available for your information and preparation. connection.albertahealthservices.ca
- For continuing care settings, post signs at facility entrances instructing visitors not to visit if they have symptoms of acute COVID-19 illness. The AHS developed sign may be found at connection.albertahealthservices.ca. This signage may be updated from time to time as the situation evolves; the current sign as of March 15, 2020, is included in Appendix D.
- Ensure staff and residents are familiar with the symptoms of acute COVID-19 illness.
- Review your Pandemic and Business Continuity Plans in preparation for follow-up by AHS staff.
- Review the Respiratory Illness ILI Algorithm (Appendix E)
- Review the COVID-19 Interim IPC Recommendations (Appendix F)
- Continuing care will be needed to assist should acute care capacity become an issue as COVID-19 progresses. Please begin to consider ways you may be able to assist by taking additional residents.

Communication

- Review www.alberta.ca/COVID19
- Review connection.albertahealthservices.ca or www.ahs.ca/covid
- Please submit any questions, suggestions or concerns to continuingcare@albertahealthservices.ca
- As we receive your questions, we will endeavor to provide a quick response and share relevant information with all partners.
- Future town hall options for information sharing with contracted operators are being developed.

Appendix A: Visitor and Volunteer Screening Questionnaire

Visitor and Volunteer Screening Questionnaire

- Effective immediately, we are restricting visitors to all congregate living sites to essential visitors only.
- **Residents are at extreme risk if exposed to COVID-19.**
- We are asking that essential visitors are restricted to one or two persons at a time and that those visitors be immediate family or designated support persons only.
- This will reduce the risk of loved ones being exposed to COVID-19.
- We ask you to also restrict visitation of children as children do not necessarily show symptoms of COVID-19.
- If you are ill with fever, cough, shortness of breath, fatigue or sore throat, please do not visit.
- No pets.

FILL OUT THIS QUESTIONNAIRE TO DECIDE IF YOU SHOULD ENTER TODAY
Risk Assessment: Initial Screening Questions:

1.	Do you have any of the below symptoms:	CIRCLE ONE	
	• Fever	YES	NO
	• Cough	YES	NO
	• Shortness of breath/breathing difficulties	YES	NO
	• Other symptoms such as fatigue or sore throat	YES	NO
2.	Have you travelled outside of Canada in the last 14 days?	YES	NO
3.	Have you had close contact (face-to-face contact within 2 meters/6 feet) with someone who is ill with cough and/or fever?	YES	NO
4.	Have you been in contact in the last 14 days with someone that is being investigated or confirmed to be a case of COVID-19?	YES	NO
5.	Have you had laboratory exposure while working with specimens known to contain COVID-19?	YES	NO

If you have answered “**Yes**” to any of the above questions, please **DO NOT** enter at this time.

If you have answered “**No**” to all the above questions, please sign in and out and practice hand hygiene (wash hands for 30 seconds, and or use hand sanitizer) before and after your visit.

Our goal is to minimize the risk of infection to our residents and staff, thank you for your understanding and cooperation.

Name _____

Signature _____

Date _____

Current as of March 15, 2020

Appendix B: Visitation in Congregate Living Sites

Visitation in Congregate Living Sites

Visits from family and friends are an important part of the lives of our continuing care residents. At the same time, COVID-19 has been demonstrated to be a particular risk to older adults and those with heart or lung disease, or multiple chronic conditions. Not only does COVID-19 appear to lead to more severe illness, the death rate amongst these groups consistently ranges from 15-20% in various studies.

Prevention of infection is perhaps the most important step we can take in protecting one of our most vulnerable populations, those living in congregate facilities. While fully appreciating the need to find the balance between visitor restriction and ensuring continued quality of life for residents, visitor restriction is one of the most important tools we have available to us. At this stage, the following guidance is in effect:

- Effective immediately, we are restricting visitors to all congregate living sites to essential visitors only.
 - **Residents are at extreme risk if exposed to COVID – 19.**
 - We are asking that essential visitors are restricted to one or two persons at a time and that those visitors be immediate family or designated support persons only.
 - This will reduce the risk of loved ones being exposed to COVID-19.
 - We ask you to also restrict visitation of children as children do not necessarily show symptoms of COVID-19.
 - If you are ill with fever, cough, shortness of breath, fatigue or sore throat, please do not visit.
 - No pets.
1. Post signage at all entrances to your facility. Signage is available through connection.albertahealthservices.ca
 2. Screen visitors at arrival. This needs to identify anyone who:
 - a. Appears to be ill or reports fever, cough, shortness of breath, fatigue or sore throat;
 - b. Has travelled outside Canada in the last 14 days;
 - c. Is a close contact of someone with confirmed COVID-19; or
 - d. Is a close contact of someone who has recently developed fever, cough, shortness of breath, fatigue or sore throat?
 3. Identify to visitors that if any of the screening questions have a “yes” answer, they will not be allowed to visit.
 4. Alternate methods for communication, such as Facetime or Skype, need to be considered as part of an overall plan to support our residents.

Current as of March 15, 2020

Appendix C: Staff Accountabilities in Congregate Living Sites

Staff Accountabilities in Congregate Living Sites

COVID-19 has been demonstrated to be a particular risk to older adults and those with heart or lung disease, or multiple chronic conditions. Not only does COVID-19 appear to lead to more severe illness, the death rate amongst these groups consistently ranges from 15-20% in various studies.

Prevention of infection is perhaps the most important step we can take in protecting one of our most vulnerable populations, those living in congregate facilities. While staff are essential to provide good, safe, quality care, staff members may also be at risk for introducing COVID-19 into our congregate living sites.

To minimize this risk, the following guidance is in effect:

1. For any staff that returned from any out of country travel from February 27, 2020, up to and including March 12, 2020:
 - a. If not currently showing signs of illness including fever, cough, shortness of breath, fatigue or sore throat, the staff member may continue to work, but must monitor themselves for signs of illness for 14 days following their return to Alberta.
 - b. If signs of illness are present or develop, the staff member should immediately self-isolate and call Health Link.
2. For any staff returning from any out of country travel on or after March 13, 2020:
 - a. Stay off work and self-isolate for 14 days. The staff member should contact Health Link if signs of illness such as fever, cough, shortness of breath, fatigue or sore throat are present or develop.
 - b. If the staff member remains asymptomatic for the entire 14 day self-isolation period, they may return to work.
3. For any staff that have had close contact with a person with an acute respiratory illness who travelled outside of Canada in the 14 days before their illness onset:
 - a. If not currently showing signs of illness including fever, cough, shortness of breath, fatigue or sore throat, the staff member may continue to work, but must monitor themselves for signs of illness for 14 days following their return to Alberta.
 - b. If signs of illness develop, the staff member should immediately self-isolate and call Health Link.
4. For any staff that have returned to Alberta from travel to Italy, Iran or Hubei province, China since February 27, 2020:
 - a. Stay off work and self-isolate for 14 days. The staff member should contact Health Link if signs of illness such as fever, cough, shortness of breath, fatigue or sore throat are present or develop.
 - b. If the staff member remains asymptomatic for the entire 14 day self-isolation period, they may return to work.
5. For any staff member feeling unwell with signs of illness such as fever, cough, shortness of breath, fatigue or sore throat:
 - a. Do not attend work and report to their own Workplace Health and Safety
 - b. Immediately self-isolate and call Health Link.
6. Facility policies around payment for time away will apply on a site by site basis.

Current as of March 15, 2020

7. Health care workers attending at a site who are not staff of that site, including allied health personnel, palliative care consult personnel, and physicians, will be required to adhere to the same restrictions as staff at a congregate living facility.

In addition:

- To help protect against all respiratory illnesses, including the flu and COVID-19, you should: Wash your hands often and well. Refer to hand-washing guidance here: <https://www.albertahealthservices.ca/info/Page14955.aspx>
- Avoid touching your face, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick
- Clean and disinfect surfaces that are frequently touched
- Stay at home and away from others if you are feeling ill
- When sick, cover your cough and sneezes and then wash your hands. Refer to respiratory etiquette guidance here: <https://www.albertahealthservices.ca/info/Page14511.aspx>

Current as of March 15, 2020

Appendix D: COVID-19 Poster for Congregate Living Settings

COVID-19

Have you travelled outside Canada within the last 14 days?
Have you been in close contact with a confirmed or probable
case of COVID-19?

Do you have a fever, or cough, runny nose, sore throat or
shortness of breath?

If you answered yes to ANY of these, STOP.

Do not enter this site.



If you answered no to ALL of these:

You are free to enter...

Please wash your hands with soap and water or clean your
hands with alcohol-based hand rub before and after your
visit.

Note: If there are extenuating circumstances and you must
gain access to this site, please call _____ at _____

Original date: MARCH-2020

For more information, visit: www.ahs.ca/covid

Current as of March 15, 2020

Appendix E: Respiratory Illness ILI Algorithm

Respiratory Illness

Assessing the Need for Additional Precautions (Isolation)

Does the individual have symptoms of Influenza-like Illness (ILI)?

ADULTS

Sudden onset of NEW cough or change in existing cough

PLUS one or more of the following:

- ☐ Fever** ($\geq 38^{\circ}\text{C}$ on arrival or by history)
- ☐ Sore throat
- ☐ Joint pain
- ☐ Muscle aches
- ☐ Severe exhaustion/weakness

PEDIATRIC - Sudden onset of any of the following symptoms:

runny nose, cough, sneezing, +/- fever and under age 5
gastrointestinal symptoms may be present

****over age 65 or under age 5 fever may not be present****

YES

NO

Has patient traveled in the past 14 days to any countries where novel respiratory virus is circulating? (e.g., novel Coronavirus (COVID-19), MERS-CoV, avian influenza, etc.)

Note: <https://www.who.int/emergencies/diseases/en/>

YES

NO

Is tuberculosis suspected?

YES

NO

1. Put procedure mask on patient and place patient immediately in a separate space (2m or physical barrier)
2. **Notify IPC**

Put procedure mask on patient and place immediately in a separate space (2m or physical barrier)

Put procedure mask on patient. Notify IPC and refer to: IPC Diseases and Conditions Table and/or local TB Services

ROUTINE PRACTICES

1. Initiate **Contact & Droplet Precautions**
2. Patient placement:
 - ☐ Single room with hard walls and door (Contact IPC if not available)
 - ☐ Move to airborne isolation room with negative pressure ventilation if AGMP* required (if unable to move patient to airborne isolation room, ensure door is closed prior to AGMP)
3. N95 + eye protection for AGMP (see page 2)
(Please refer to [COVID-19 Interim IPC Recommendation](#))

Initiate [Contact & Droplet Precautions](#) and place patient in walled or curtained bed space with $\geq 2\text{m}$ separation from other patients. Use N95 + eye protection for AGMP (see page 2)

For further information refer to the Resource Manual on the Infection Prevention and Control Website: <http://www.albertahealthservices.ca/info/Page6854.aspx>



March 11, 2020

To: Long-term care, licensed supportive living, and home-care providers

Subject: Updates for novel coronavirus (COVID-19)

The following is an update to the previous information provided on February 24, 2020. With cases of COVID-19 now reported in the province, Alberta Health and Alberta Health Services (AHS) want to ensure health-care workers have up-to-date information and feel well informed and equipped to navigate through the changing COVID-19 situation. Attached you will find important information to assist in prevention and planning activities.

Cases

As of March 10, there have been 14 cases reported in Alberta. The number of tests performed and the number of confirmed COVID-19 cases are regularly updated on the Alberta Health website: www.alberta.ca/COVID19.

Risk

While the risk level associated with COVID-19 in Alberta is currently low, this may change in the coming weeks. Risk is determined by assessing how likely Albertans are to be exposed to the virus in the province. Currently, Albertans have a low chance of contracting COVID-19 within Alberta. If this changes in the coming weeks, the risk level will be updated. The risk to Albertans who are traveling outside of Canada is considered to be high.

All travelers returning from outside Canada should monitor their health for 14 days after coming home and if they develop symptoms, they should self-isolate and call Health Link 811. AHS COVID-19 screening criteria are available at:
<https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-ncov-case-def.pdf>.

Anyone who is feeling ill, even if they have not travelled, should stay home and should not visit long-term care facilities or supportive living accommodations as residents in these locations are at the highest risk of complications from both influenza and COVID-19, as well as other respiratory viruses. Albertans who are not experiencing symptoms can continue to visit loved ones in these settings. Albertans who have travelled from other locations recently and are currently self-monitoring for potential symptoms (see www.alberta.ca/COVID19) should consider the risk (which is high) to those living in long-term care facilities and supportive living accommodations and consider alternative ways to have contact with loved ones, other than visiting, until any monitoring time period has passed.

Health-care Workers¹ Returning from Travel

All health-care workers returning from outside of Canada who may have been exposed to COVID-19 should be assessed by their own Occupational Health Services or AHS Public Health before returning to work (regardless of whether or not they have symptoms). Alberta Health Services and Covenant Health employees should contact their Workplace Health and Safety (WHS)/OHS. All other health-care workers should connect with Public Health by calling Health Link at 811 for an individual exposure risk assessment and to determine when to return to work. Staff should also be in phone contact (i.e., don't visit first) with their own site leaders to assess and plan next steps.

Suspected COVID-19 Case in a Facility

If a resident of one of these sites experiences symptoms of COVID-19 such as fever or cough, have the resident wear a procedure mask immediately. Place the resident in a separate room with contact and droplet precautions and contact the AHS Zone Medical Officer of Health (MOH). You will find MOH contact information here:

<https://www.albertahealthservices.ca/assets/info/hp/phys/if-hp-phys-clin-moh-on-call-contact-information.pdf>. Ensure appropriate and strict hand hygiene is adhered to during this process.

Do not send the resident to another facility prior to contacting the Zone MOH.

If a worker at one of these sites experiences symptoms of COVID-19 while at work, the worker should immediately remove themselves from the work area and contact the Infection Prevention and Control lead (preferably by phone) to notify of symptoms and begin any established response protocols. The process would be the same for any family, friends, volunteers or visitors.

Infection Prevention and Control requirements for COVID-19

Droplet and contact precautions are required for patients presenting with influenza-like illness, as per standard recommendations. This is equally important for patients with history of travel anywhere outside of Canada.

N95 masks are required only when performing aerosol-generating procedures such (e.g. intubation). The strategy to assess fit test needs, and direction on how to access fit test services are found here: <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-fit-testing-memo.pdf>.

Please refer to the AHS Infection Prevention and Control guidelines for COVID-19 for more information: <https://www.albertahealthservices.ca/assets/healthinfo/ipc/hi-ipc-emerging-issues-ncov.pdf>.

¹ Health-care workers are individuals who provide health care or health support services. Examples include but are not limited to nurses, physicians, dentists, nurse practitioners, paramedics, emergency first responders, allied health professionals, unregulated health care providers, clinical instructors, students, volunteers and housekeeping staff.

Update on the Health System Response

Alberta Health is working closely with the Public Health Agency of Canada and with provincial and territorial partners to monitor developments, assess public health risks and take recommended public health measures in an aligned, pan-Canadian approach.

Alberta Health and Alberta Health Services (AHS) have activated their respective emergency response structures to support the health system response and AHS Zone Emergency Operations Centres have been established in all zones.

Assessment Centres are now operational in both the Calgary and Edmonton zones to allow symptomatic individuals to receive testing at the direction of Health Link. **These sites are not open to general public drop-in and are being used to help control the needs for testing, while ensuring the safety of the public and health-care workers. Individuals gain access to assessment by calling Health Link in Alberta at 811.** Further assessment centres will be opened in other zones as needs dictate.

Processes are being developed to enable on-site testing in long-term care, supportive living, and in home care settings. All testing will be done outside of acute care hospitals unless absolutely necessary.

Alberta Health and AHS will continue to work together to update existing resources and develop new resources to support the response of continuing care sites to COVID-19.

Next Steps for Operators

Ensure staff are familiar with COVID-19 symptoms.

Communicate information about COVID-19 symptoms, and steps required to self-assess and respond in the event of symptoms, to residents, volunteers, contractors, families, friends, visitors, etc.

Post signs at facility entrances instructing visitors not to visit if they are unwell. AHS has developed a sign which can be found at <https://www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-ipc-continuing-care-poster.pdf>.

All businesses and organizations should continue business continuity planning to prepare critical operations for any potential interruption.

For the latest COVID-19 information, visit www.alberta.ca/COVID19 or www.ahs.ca/covid.

Attachment: Important information for providers regarding COVID-19



March 11, 2020

Subject: Important information for providers regarding COVID-19

Congregate living settings pose challenges due to their unique shared-living environments and the individuals they serve. Particular challenges include the health status of these populations, residents living in close quarters, group dining and recreation areas. Professional staff for monitoring health conditions may be limited, or not available at all in settings not contracted to provide health care services.

More detailed outbreak planning, prevention, and control is expected shortly. This will be communicated immediately once it is finalized. The following information will support you in prevention, preparation and monitoring activities.

Reducing the Risk

In order to protect Albertans living in congregate care settings, it is extremely important to ensure:

- Health care workers who are feeling unwell do not have any contact with patients or residents (even if it feels like a mild cold). It is important to stress that even mild illness in workers or visitors can pose a significant risk to residents/patients/clients during this event. Not working while ill will be a critical aspect of protecting those most vulnerable.
- Family members who are sick should not visit loved ones in hospitals, long-term care or other supported living accommodations. (Anyone who is feeling well and not showing symptoms can continue to visit their loved ones in these homes).
 - o Signs that can be used at facility entrances instructing visitors not to visit if they have symptoms of acute COVID-19 illness can be found here:
www.albertahealthservices.ca/assets/info/ppih/if-ppih-covid-ipc-continuing-care-poster.pdf

Education

Good hygiene practices remain the best defense against respiratory infections such as COVID-19. There should be an increased emphasis on good hygiene practices such as:

- frequent handwashing,
- cover coughs and sneezes,
- avoid touching eyes, nose and mouth with unwashed hands,
- not sharing personal items that may have saliva on them such as drinking glasses,
- staying at home or away from others if you are feeling ill, and
- cleaning high touch surfaces frequently.

Masks are very important in some situations. When a person is sick, wearing a mask helps prevent passing illness to other people. If a sick resident must leave their room, they should minimize travel distance and time, and they should wear a mask and perform hand hygiene.

Reporting Illness

Both staff and residents should be reminded of the importance of reporting illness. All facilities should follow their process of outbreak identification and notification and maintain an increased vigilance for staff and clients with fever and cough.

Business Continuity

Congregate living sites should review their business continuity plans and think about how the possibility of COVID-19 could affect their workplaces, such as due to increased absenteeism. In order to prepare, we recommend planning to protect employees and clients/patients/residents, limit spread in workplaces, and ensure continuity of critical services if staff are ill or self-isolating.

Self-Isolation

Information Sheet

Why am I being asked to self-isolate?

Self-isolation can help prevent the spread of infections, such as novel coronavirus (2019-nCoV).

When you are exposed to an illness, there is a time between the exposure and when you start to feel sick. This is known as the incubation period (usually 2 to 10 days for 2019-nCoV, and up to a maximum of 14 days).

There is a very small chance that you can spread the germs during this time (the few days before a feeling of sickness starts).

More importantly, staying home means that if you do start to feel sick, you won't run the risk of this happening while you are in a public place. Self-isolation is a cautious action used to lower the chance that the virus could spread to others.

It is important to remember that not everyone who is exposed will get sick, and anyone who feels well for the full 14 days after an exposure of concern is not considered to be infectious.

What does self-isolation mean?

Self-isolation means avoiding situations where you could infect other people.

This means all situations where you may come in contact with others, such as social gatherings, work, school/university, child care, athletic events, faith-based gatherings, healthcare facilities, grocery stores, restaurants, shopping malls, and any public gatherings.

You should, (where possible) not use public transportation including buses, taxis, or ride sharing.

As much as possible, you should limit your contact with people and avoid having visitors to your home, but it is okay for friends, family or delivery drivers to drop off food or other things you may need.

You can also use delivery or pick up services for errands such as grocery shopping.

If you need to leave your home for an urgent errand, such as picking up essential medication, as a precaution to further reduce risk of spread, you can wear a surgical mask while you are out.

What else can I do to stop the spread of infection?

Wash your hands

Wash your hands often and thoroughly with soap and water for at least 20 seconds. You can use a hand sanitizer if soap and water are not available and if your hands are not visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

Cover your coughs and sneezes

Cover your mouth and nose with a tissue when you cough or sneeze, or you can cough or sneeze into your sleeve. Throw used tissues in the garbage, and immediately wash your hands with soap and water for at least 20 seconds making sure you dry them thoroughly, or use alcohol based hand sanitizer.

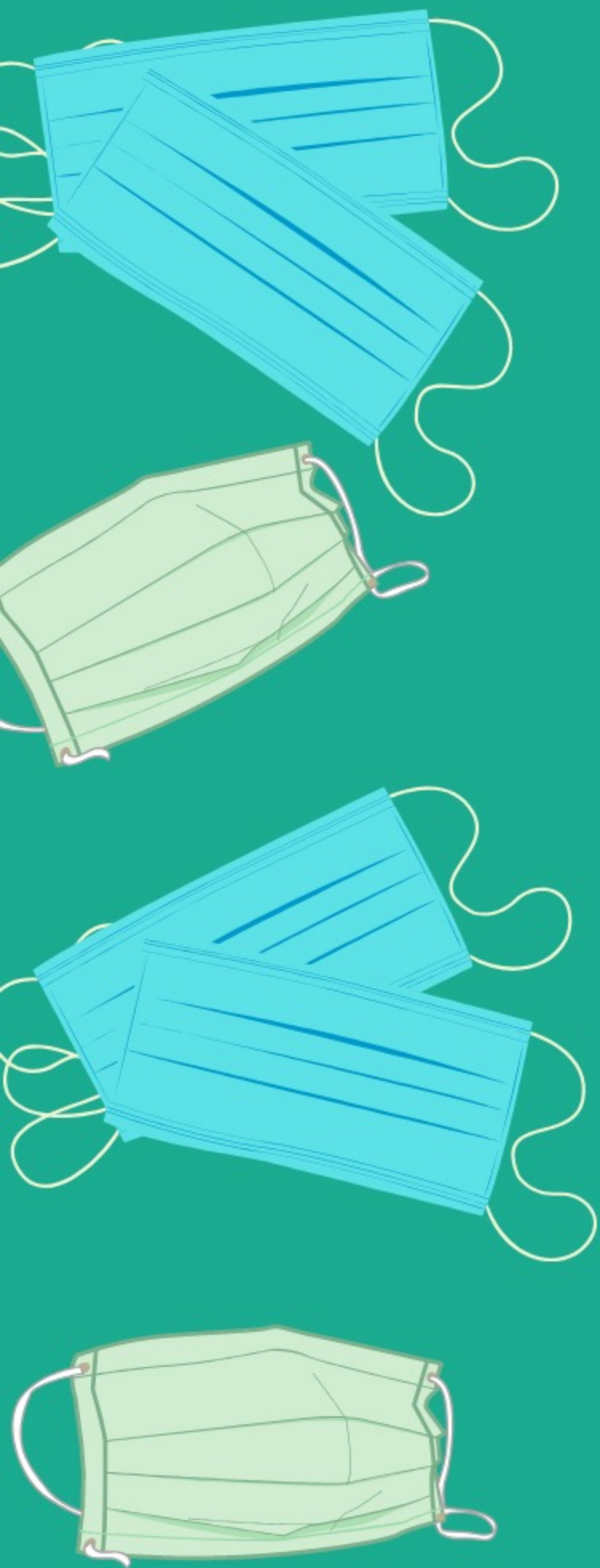
Avoid sharing household items

You should not share dishes, drinking glasses, cups, eating utensils, towels, pillows, or other items with other people in your home. After using these items, you should wash them thoroughly with soap and water, place in the dishwasher for cleaning, or wash in the washing machine. Regularly clean and disinfect frequently touched and shared surfaces such as doorknobs, counters.

Getting food and medicine

Where possible, contact a friend, family member, or delivery services to carry out errands like supermarket shopping on your behalf.

For more information on self-isolation call [Health Link 811](tel:811).



HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK



World Health
Organization

WHEN TO USE A MASK

For healthy people wear a mask **only if you are taking care of a person with suspected 2019-nCoV infection**

Wear a mask, **if you are coughing or sneezing**

Masks are effective only when used **in combination with frequent hand-cleaning with alcohol-based hand rub or soap and water**

If you wear a mask then you **must know how to use it and dispose of it properly**



World Health
Organization



HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

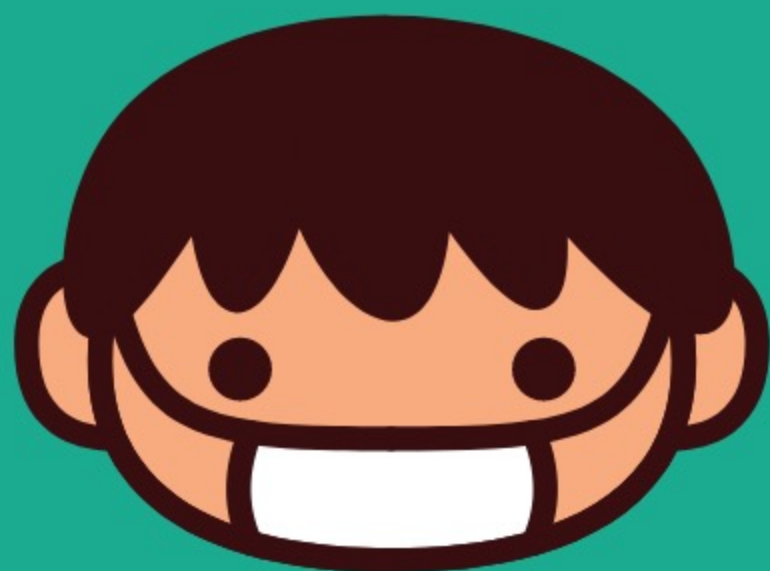
**Before putting on a mask,
clean hands with alcohol-
based hand rub or soap
and water**



World Health
Organization

HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

**Cover mouth and nose
with mask and **make sure**
there are no gaps
between your face and
the mask**



World Health
Organization

HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

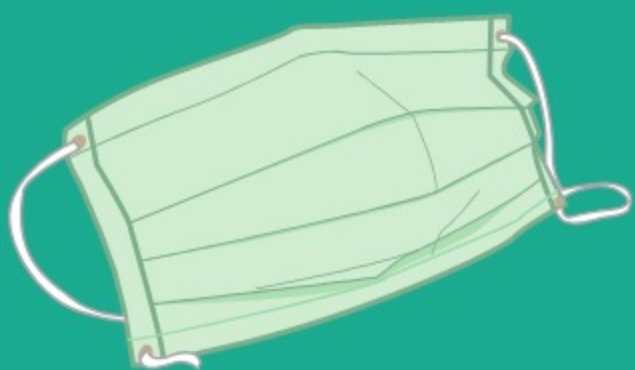
**Avoid touching the mask
while using it;
if you do, clean your
hands with alcohol-based
hand rub or
soap and water**



World Health
Organization

HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

Replace the mask with a new one as soon as it is damp and do not re-use single-use masks



World Health
Organization

HOW TO PUT ON, USE, TAKE OFF AND DISPOSE OF A MASK

To remove the mask: remove it from behind (do not touch the front of mask); discard immediately in a closed bin; clean hands with alcohol-based hand rub or soap and water



World Health
Organization

Date: Thursday, February 27, 2020
To: People who are under investigation for COVID-19
From: Medical Officers of Health, Alberta Health Services
Subject: Caring for yourself at home

You have been tested because your risk of having COVID-19 is higher than most Albertans. We know it can be frightening to wait for test results and you are likely worried about your well-being and the well-being of people around you. Even though you are at higher risk, it is still very likely that your symptoms are caused by one of the many other common viruses that cause respiratory symptoms, such as the influenza virus.

Coronaviruses are a large family of viruses. They cause respiratory illnesses in people, ranging from the common cold to severe pneumonias. COVID-19 is a disease caused by a new type of coronavirus that was not previously detected in humans, and is the cause of the respiratory outbreak in China and other countries. At this time, COVID-19 does not appear to be as severe as some coronaviruses, such as SARS. Many patients have reported only mild symptoms. COVID-19 is believed to be spread by coughing, sneezing or direct contact with a sick person

It may take several days for your test results to come back. Public Health will contact you with the results. In the meantime, there are several **important things you can do to protect your health and prevent the spread of illness:**

- **Isolate yourself at home.** This means that you need to stay home from work, school, daycare, and all other activities outside your home. Do not have any visitors over to your home. **You may return to your usual activities only when advised to do so by Public Health.**
- Wash your hands often and well.
- Avoid close contact with people (staying at least 2 meters away) – we recognize this may be difficult to do for others in your household, but please do your best.
- Cover your cough and sneezes with a tissue, sleeve or elbow and then wash your hands.

You can lower the risk of transmission to household members and people in your community if you self-isolate, stay at least 2 meters away from others and practice the steps above to prevent spreading disease.

You do not need to change your living arrangements (e.g., have family members move to another home). If you or your household members are concerned about the possibility of spreading COVID-19, the following measures may be helpful while awaiting test results:

- Do not share sleeping arrangements.
- Frequently clean and disinfect surfaces that are often touched in shared spaces within the home such as bathroom surfaces, doorknobs, remote controls, phones, etc.
- Do not share personal items such as toothbrushes, cutlery, drinking straws, face/hand/bath towels etc.



For more information on self-isolation, please see the Alberta Health website at <https://open.alberta.ca/publications/self-isolation-information-sheet>

It is not necessary for members of your household to stay home unless advised to do so by Public Health. If you test positive, your household members may need further assessment and follow up by Public Health.

If your symptoms become worse or you have other concerns, please contact Health Link (811). If you need urgent medical attention, call 911 for an ambulance. Immediately tell the operator that you have been identified as a person under investigation for COVID-19.

Thank you for your cooperation.

CORONAVIRUS DISEASE (COVID-19)

HOW TO ISOLATE AT HOME WHEN YOU HAVE COVID-19

Isolation means staying at home when you are sick with COVID-19 and avoiding contact with other people to help prevent the spread of disease to others in your home and your community.

If you have been diagnosed with COVID-19, it is expected that you take the following measures.

Limit contact with others

- ▶ Do not leave home unless absolutely necessary, such as to seek medical care.
- ▶ Do not go to school, work, other public areas or use public transportation (e.g. buses, taxis).
- ▶ Arrange to have groceries and supplies dropped off at your door to minimize contact.
- ▶ Stay in a separate room and use a separate bathroom from others in your home, if possible.
- ▶ If you have to be in contact with others, keep at least 2 metres between yourself and the other person. Keep interactions brief and wear a mask.
- ▶ Avoid contact with individuals with chronic conditions, compromised immune systems and older adults.
- ▶ Avoid contact with pets if you live with other people that may also be touching the pet.

Keep your hands clean

- ▶ Wash your hands **often** with soap and water for at least 20 seconds, and dry with disposable paper towels or dry reusable towel, replacing it when it becomes wet.
- ▶ You can also remove dirt with a wet wipe and then use an alcohol-based hand sanitizer.
- ▶ Avoid touching your eyes, nose and mouth.
- ▶ Cough or sneeze into the bend of your arm or into a tissue.

Avoid contaminating common items and surfaces

- ▶ At least once daily, clean and disinfect surfaces that you touch often, like toilets, bedside tables, doorknobs, phones and television remotes.
- ▶ Do not share personal items with others, such as toothbrushes, towels, bed linen, utensils or electronic devices.
- ▶ Use regular household disinfectants or diluted bleach (one part bleach and nine parts water) to disinfect.
- ▶ Place contaminated items that cannot be cleaned in a lined container, secure the contents and dispose of them with other household waste.
- ▶ Put the lid of the toilet down before flushing.

Care for yourself

- ▶ Monitor your symptoms as directed by your healthcare provider or **Public Health Authority**.
- ▶ If your symptoms get worse, immediately contact your healthcare provider or **Public Health Authority** and follow their instructions.
- ▶ Get some rest, eat a balanced diet, and stay in touch with others through 'communication devices'.



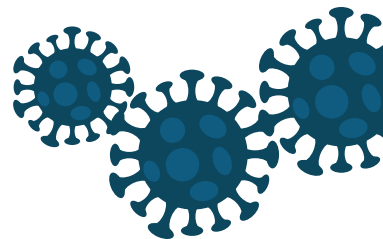
Supplies to have at home when isolating

- ❑ Surgical/procedure masks (do not re-use)
- ❑ Eye protection
- ❑ Disposable gloves (do not re-use)
- ❑ Disposable paper towels
- ❑ Tissues
- ❑ Waste container with plastic liner
- ❑ Thermometer
- ❑ Over the counter medication to reduce fever (e.g. ibuprofen or acetaminophen)
- ❑ Running water
- ❑ Hand soap
- ❑ Alcohol-based sanitizer containing at least 60% alcohol
- ❑ Dish soap
- ❑ Regular laundry soap
- ❑ Regular household cleaning products
- ❑ Bleach (5% sodium hypochlorite) and a separate container for dilution (one part bleach to nine parts water)
- ❑ Alcohol prep wipes
- ❑ Arrange to have your groceries delivered to you



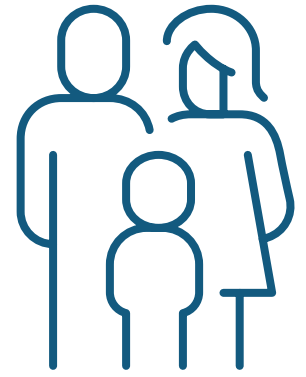
**WE CAN ALL DO OUR
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COVID-19. FOR MORE
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Canada.ca/coronavirus
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1-833-784-4397



CORONAVIRUS DISEASE (COVID-19)

HOW TO CARE FOR A PERSON WITH COVID-19 AT HOME: ADVICE FOR CAREGIVERS



If you are caring for a person who has been diagnosed with COVID-19, follow this advice to protect yourself and others in the home, as well as those in your community.

Limit contact

- ▶ Only one healthy person should provide care.
- ▶ Do not share personal items with the ill person, such as toothbrushes, towels, bed linen, utensils or electronic devices.
- ▶ Use a separate bathroom from the ill person if possible. If not possible, the ill person should put the toilet lid down before flushing.

Protect yourself

- ▶ If possible, people who are at higher risk of serious illness from COVID-19 should not care for someone with COVID-19. These people include elderly persons, those with chronic medical conditions (e.g., heart disease, diabetes) or compromised immune systems
- ▶ If you need to be within 2 metres of the ill person, wear a mask, disposable gloves and **eye protection**.
- ▶ Wear disposable gloves when touching the ill person, their environment and soiled items or surfaces.
- ▶ Do not re-use masks or gloves.
- ▶ Clean your hands often for at least 20 seconds, especially after contact with the ill person and after removing gloves, masks and eye protection.
- ▶ Dry your hands with disposable paper towels. If not available, use a reusable towel and replace it when it becomes wet.
- ▶ You can also remove dirt with a wet wipe and then use an alcohol-based hand sanitizer.
- ▶ Avoid touching your eyes, nose and mouth with unwashed hands.

Keep your environment clean

- ▶ Place used masks, gloves and other contaminated items in a lined container, secure the contents and dispose of them with other household waste.
- ▶ Place possibly contaminated laundry into a container with a plastic liner and do not shake. Wash with regular laundry soap and hot water (60-90°C), and dry well. Clothing and linens belonging to the ill person can be washed with other laundry.
- ▶ At least once daily, use household disinfectants or diluted bleach (one part bleach and 9 parts water) to clean and disinfect surfaces that people touch often (e.g., toilets, laundry containers, bedside tables, doorknobs, phones and television remotes). Clean touch screens with 70% alcohol wipes.

Monitor yourself for symptoms

- ▶ If you have always used the recommended precautions, then monitor yourself for symptoms for 14 days following your last contact with the ill person.
- ▶ If you have had direct contact with body fluids of the ill person (e.g. were coughed or sneezed on when you weren't wearing a mask), contact your local **Public Health Authority** for further instructions.
- ▶ If you develop symptoms, isolate yourself as quickly as possible and contact your local **Public Health Authority** for further instructions.



Maintain these supplies

- ☐ Surgical/procedure masks (do not re-use)
- ☐ Eye protection
- ☐ Disposable gloves (do not re-use)
- ☐ Disposable paper towels
- ☐ Tissues
- ☐ Waste container with plastic liner
- ☐ Thermometer
- ☐ Over the counter medication to reduce fever (e.g. ibuprofen or acetaminophen)
- ☐ Running water
- ☐ Hand soap
- ☐ Alcohol-based sanitizer containing at least 60% alcohol
- ☐ Dish soap
- ☐ Regular laundry soap
- ☐ Regular household cleaning products
- ☐ Bleach (5% sodium hypochlorite) and a separate container for dilution (one part bleach to nine parts water)
- ☐ Alcohol prep wipes



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