

Manitoba Health, Seniors and Active Living (MHSAL) supports reporting and learning from patient safety events. The focus of a patient safety review is to closely look at the health care system that surrounds and interacts with those giving and receiving care. The goal is to identify risks to patient safety and recommend the most effective ways to minimize risk and improve the delivery of healthcare.

Patient Safety Learning Advisory

Healthcare Acquired COVID-19 Infection

Summary:

A COVID-19 outbreak was declared during the fourth wave of the global pandemic at a rural healthcare facility. There had been four patient deaths related to contracting the COVID-19 infection while under the provision of health care services.

As the world remains to be in a pandemic to date, with no full eradication of the virus, we continue to learn daily with and from others around the globe. The findings and learnings are shared to assist in mitigation strategies to prevent future outbreaks from occurring in healthcare facilities.

Keywords: Healthcare acquired COVID-19 infection

Findings of the Review:

A patient on the Medical Unit entered a COVID-19 positive patient's room to visit a friend without communicating this to staff and did not use any personal protective equipment (PPE). The visiting patient then returned to his/her double room and subsequently spread the virus to another in-patient who had shared the same room. The other patient who had shared the same room was moved to the Rehab Unit during this time period and developed symptoms a few days later. This was identified through contract tracing and was deemed to be a source of spread between the two units.

PPE is worn for extended periods of time (8-12-hour shifts). Staff voiced that practices occurred contrary to Infection, Prevention & Control (IP&C) guidelines e.g.) Touching masks, eye-shields on top of head, taking sips of water and lowering mask, food and drinks at nursing station. As well, a staff member exited a patient room with full PPE on when replacing a light bulb in a COVID-19 patient's room.

Staff uniforms/workwear are worn to and from the facility. This has a potential for community viral spread. The current regional Dress Code Policy and Procedure is outdated and indicates clinical employees are encouraged to not wear work attire in public except to travel to and from work. Since the pandemic started it is recommended that uniforms/workwear should not be worn to and from the work environment due to the increased risk for viral spread.

The Rehab Unit congregate meal area did not initially have tables and patients spaced to allow for a social distancing of a minimum of 6 feet prior to the outbreak.

Environmental layout of rooms with double and triple bed occupancy with shared bathrooms (one bathroom shared by multiple patients) increases the potential for viral spread. The facilities infrastructure is also very old with exposed wood at multiple nursing stations; outdated Heating, Ventilation and Air Conditioning (HVAC) system supplying poor air exchanges in the main part of the facility. A brand new facility is in the planning stages with a projected date of completion in 2025.

System Learning:

Review and follow the most current COVID-19 Outbreak Management Protocol (CLI.8011.PL.004.SD.03) in conjunction with Shared Health COVID-19 current level of COVID-19 Essential Care Partner and Visitor Guidelines for Acute Care by monitoring compliance as per regional policy Personal Protective Equipment (PPE) Observer (CLI.8011.PR.001)/ PPE Observation log (CLI.8011.PR. 001.FORM.01) during all outbreaks.

Educate all Physical Plant Services (Maintenance Personnel) on protocols for putting on and taking off Personal Protective Equipment (PPE) as well as the bagging/cleaning of tools when having to enter/exit COVID-19 positive patient rooms for immediate repairs.

Revise the Regional Dress Code: Attire and Grooming (ORG.1511.PL.001) Policy to align with current Infection Prevention and Control recommendations related to clinical employee uniforms/workware not be worn to and from the work environment due to an increased risk for viral spread.

Educate/inform clinical staff on the revised Regional Dress Code Policy: Attire and Grooming (ORG.1511.PL.001) including audit for compliance.

Recommend all Rehab Unit congregate meal area floor plans be arranged to meet the minimum 6 feet radius between patients to maintain social distancing.

Consult with IP&C during new facility build to assist in identifying any Infection control related gaps and required standards to be met.

Date of Posting: