



*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 nine (9) resident 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

This review is based on a multiple numbers of events.

#### **Findings of the Review:**

The magnitude and speed at which the COVID-19 virus spread at the site was multi-factorial e.g.) multiple new staff in leadership roles/positions in combination with a sudden staffing shortage due to high infection rate of staff and residents with COVID-19, plus a winter storm impacting the ability for staff to come to work and supplies to be delivered. This further led to an emergency replacement of staffing unfamiliar to location of policy and procedure outbreak binder, layout of facility, outbreak protocols, and Infection Prevention & Control (IP&C) practices conducted during an outbreak.

Staff working beyond normal daily roles and responsibilities with an overwhelming influx of information received on provincial updates regarding COVID-19 protocols coupled by staff being re-deployed to work in an unfamiliar work environment due to a sudden

staffing shortage, increased the likelihood of infection prevention and control practices being utilized contrary to provincial guidelines at the time of the outbreak.

The current Regional Dress Code policy and procedure is outdated and indicates clinical employees are encouraged to not wear work attire in public except to travel to and from work.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.

An environmental scan was completed by Infection Prevention & Control Facilitator (IP&C) two weeks prior to the outbreak identifying several areas for system improvement &/or mitigation strategies to prevent viral spread and limit outbreaks. The recommendations had not been implemented due to gaps in vacant leadership roles/positions prior to the outbreak increasing the high probability of spread.

Two portable fans were in use during the COVID-19 outbreak further increasing the spread of virus.

Aging infrastructure approximately 50 years old with a hybrid heating, ventilation and air cooling (HVAC) system that doesn't align with current IP&C standards may have potentially contributed to the spread of the virus.

All residents had multiple underlying health conditions/co-morbidities including some with cognitive impairment (Dementia) who would wander increasing the probability of viral spread or demise.

### **System Learning:**

Implement and follow the most current updated COVID-19 Outbreak Management Protocol (CLI.8011.PL.004.SD.03) in conjunction with Shared Health COVID-19 Essential Care Partner and Visitor Guidelines for long term care.

Implement the regional policy & procedure Personal Protective Equipment (PPE) Observer (CLI.8011.PR.001)/ PPE Observation log (CLI.8011.PR. 001.FORM.01) at the site.

Revise the Regional Dress Code: Attire and Grooming (ORG.1511.PL.001) Policy to align with current Infection Prevention and Control recommendations related to healthcare providers. Healthcare providers are encouraged to bring a change of clothes and change after a shift and not wear work attire in public due to the increased risk for viral spread.

Obtain a baseline audit of healthcare providers at the site pre-education on the revised Regional Dress Code Policy: Attire and Grooming (ORG.1511.PL.001) including a post audit to assess compliance.

Educate 100% of healthcare providers at the site on the revised Regional Dress Code Policy: Attire and Grooming (ORG.1511.PL.001).

Implement all recommendations identified in the environmental scan completed by Infection Prevention and Control (IP&C).

Educate a minimum of 80% of all regular nurses, health care aides, housekeeping and maintenance staff at all acute care and personal care home facilities that portable fans are not to be utilized during an outbreak as per regional Policy and Procedure on *"Portable Fan Usage in Healthcare Facilities"* (CLI.8011.SG.005).

Implement the recommended upgrades to the heating, ventilation and air cooling (HVAC) system based on the provincial review/report as required at the site.

Pursue converting the secondary oil bank filter in the (HVAC) system in the interim to align with the current code requirements of Merv 14 secondary filters. This recommendation will be dependent on the outcome/target date set by the provincial report.

**Date of Posting:**