

## December 2021 INTERIM DIRECTION

### Addendum to COVID-19 Guidance for MCCSS-funded and Licensed Congregate Living Settings (November 2021)

Beginning December 24, 2021, until further notice, all Ministry of Children, Community and Social Services (MCCSS)-funded and licensed congregate living settings (CLSs) to which the [COVID-19 Guidance for MCCSS-funded and Licensed Congregate Living Settings \(November 2021\)](#) applies (see section **Scope**), are required to change their asymptomatic testing protocols with respect to the use of rapid antigen tests as follows:

#### Staff

- **Mandatory** rapid antigen screening of all staff who enter a CLS (regardless of vaccination status), at a frequency of 2 times per week (7-day period).
  - This may include the minimum once-per-week rapid antigen screening requirement for unvaccinated staff under the service provider's vaccination policy. **Vaccination policy requirements under CMOH Letters of Instruction and existing agency business processes are expected to continue.**
- CLSs that are currently using at-home antigen screening for staff may continue to do so.
- A staff member with a positive result on a rapid antigen test must not be permitted entry to the CLS and must obtain a PCR test as soon as possible, and before returning to work.

#### Visitors

- **Mandatory** rapid antigen screening as part of active screening for all visitors entering a CLS (regardless of the visitor's vaccination status). Exception only if the visitor presented a negative rapid antigen test result at the same CLS the day before.
- A visitor with a positive result on a rapid antigen test must not be permitted entry and should be encouraged to seek a PCR test as soon as possible.

#### Residents Returning from an Overnight Absence from a CLS

- **Required** to make rapid antigen screening available for residents who return to a CLS (regardless of vaccination status) from an overnight absence. For clarity, it is not a mandatory requirement that returning residents undertake the test. However,

service providers are strongly encouraged to promote the use of rapid antigen screening by returning residents as a measure to protect others in the CLS.

- **For overnight absences of 2 nights or less:** Rapid antigen screening should occur on day three and day seven from the day the resident left the setting.
  - **For overnight absences of 3 nights or more:** Rapid antigen screening should occur on the day of return (as part of active screening upon entry) and day four following their return.
  - If the resident leaves for a subsequent overnight absence within those 7 days, a new 7-day period should be started when they return to the CLS.
- A resident who receives a positive result on a rapid antigen test should be given a medical (surgical/procedure) mask to wear, unless they are subject to a masking exemption (see masking section) and directed to a designated space away from other residents where they can self-isolate and wait for arrangements to be made for a confirmatory PCR test.
    - See **Caring for Individuals Who Need to Self-Isolate**.

## **Use of N95 Respirators**

In CLSs the need for the use of N95 respirators will most often be indicated based on an individual's medical status specifically individuals who are known or suspected to have COVID-19 and/or as directed by a public health unit (PHU).

PHO's interim recommended PPE when providing direct care for individuals with suspect or confirmed COVID-19 includes a fit-tested, seal-checked N95 respirator (or equivalent or greater protection), eye protection, gown, and gloves.

- Other appropriate PPE (based on risk assessment) includes a well-fitted surgical/procedure (medical) mask, or non-fit tested respirator\*, eye protection, gown and gloves for direct care of individuals with suspect or confirmed COVID-19.
- N95 respirators should be fit-tested prior to use to optimize any expected benefit.

A fit tested N95 respirator (or equivalent or greater protection) should be used when an individual's medical needs require an aerosol-generating medical procedure and they are known or suspected to have COVID-19.

\* A non-fit tested N95 (or equivalent) respirator is considered an alternative to a medical mask.

Please review PHO's Technical Brief '[Interim IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19](#)' (December 15, 2021) for more information.

As previously communicated, based on the organization's PCRA MCCSS-funded or licensed service providers may identify situations not described in the guidance linked above where PPE including N95 respirators may be used as part of an individual's care plan. Service providers should ensure documentation of any such requirements within the individual's care plan.

- N95 respirators will be available to staff in CLSs based on an organization's risk assessment of the needs of individuals receiving service and the nature of the supports being provided by staff and documented in an individual's care plan.
- Service providers should ensure the appropriate and necessary policies and procedures are in place to support the access to and usage of N95 respirators as part of a respiratory protection program. For example, the process for staff to access to respirators outside of regular business hours. This may require engagement of an organization's Joint Health and Safety Committee (JHSC) in the development and review of measures and procedures.
- A service provider's respiratory protection program should incorporate the necessary training for staff to ensure that the PPE will be used safely and appropriately by staff and in accordance with any industry-based standards that may exist.

### ***Fit Testing for N95 Respirators***

Before N95s can be accessed and used, service providers must have identified staff fit tested to ensure a proper seal and trained on appropriate usage of the respirator.

- Please contact your MCCSS IPAC Hub Champion for support in accessing fit testing if required.
- The 3M 1870+ N95 is the most common model available through MCCSS. In the case that the 3M 1870+ N95 does not seal for an individual, staff may be fit tested to an alternative N95 provided by the ministry.

If there is a positive case within a setting, N95s can be accessed through the OACAS web portal <https://request.cwconnects.org/tp/> and flagged as an emergency order for shipments within 24-48 hours. NOTE: while fit-testing is recommended, it is not required in order to place an emergency order.

Please note: PHUs may continue to provide direction that may be different and/or in addition to those set out in this Interim Direction to prevent and mitigate the spread of COVID-19 and/or other infectious diseases to ensure a tailored response to each local outbreak scenario.