




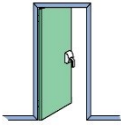




Routine Practices

In Corrections Health

Routine Practices help prevent the spread of infections. These practices apply when interacting with patients whether in Alberta Health Services (AHS) Corrections Healthcare areas on in Correctional Centre when delivering healthcare services. Use Routine Practices for every patient¹, every time, regardless of their diagnosis or infectious status.

	<p><u>Point of Care Risk Assessment (PCRA):</u></p> <p>Before providing care to any patient, assess the risk of spreading infection:</p> <ul style="list-style-type: none"> • Note any possible contact you may have with blood or body fluids (e.g. coughing, bleeding, runny nose, or soiled clothing, equipment or environment). • Perform <u>hand hygiene</u> and put on appropriate personal protective equipment (PPE) before providing care.
 	<p><u>Hand Hygiene</u> is the single most important step in preventing infections</p> <ul style="list-style-type: none"> • Perform hand hygiene by using alcohol-based hand rub (ABHR) or soap and water. • Use ABHR for hand hygiene unless hands are visibly soiled. • Use plain soap and water when: <ul style="list-style-type: none"> ○ hands are visibly soiled; ○ caring for patients¹ with diarrhea and/or vomiting. • Keep finger nails natural, clean, healthy and short. There are restrictions on nail enhancements and jewelry. Check the AHS Hand Hygiene Policy for more information. • Use only AHS or Justice and Solicitor General (JSG) approved ABHR, soap, and hand lotion. • Follow the steps for performing hand hygiene found in the AHS Hand Hygiene Procedure. • Perform Hand Hygiene: <ul style="list-style-type: none"> ○ before contact with a patient or patient's environment; ○ before a clean or aseptic procedure; ○ after exposure or risk of exposure to blood or body fluids; ○ after contact with a patient or patient's environment (e.g., infirmary cell or health care exam room); ○ immediately after removal of gloves. • Show patients and JSG staff how and discuss when to use hand hygiene products. • AHS Staff unable to adhere to the hand hygiene policy and procedure should report this to Workplace Health and Safety. JSG staff should report these issues to their JSG OHS department.

¹ Patients are all persons who receive or have requested health care or services. The terms "client" or "resident" may also be used, depending on the health care setting.





	<h3>Accommodation</h3> <ul style="list-style-type: none"> When room-sharing: <ul style="list-style-type: none"> Follow IPC recommendations for Cohorting; Change PPE (if worn) between each patient interaction and treat each patient space as a private room; Remove PPE (if worn) and perform hand hygiene when leaving one bed space or before providing care to the other patients in the room; Separate patient beds by minimum of 2 meters whenever possible.
   	<h3>Personal Protective Equipment: Gloves</h3> <ul style="list-style-type: none"> Disposable gloves are single-use. Use only once, then dispose of them immediately after use. Wear new non-sterile disposable gloves: <ul style="list-style-type: none"> to help protect your hands from contact with blood, body fluids, excretions, secretions, mucous membranes or non-intact skin of patients; to handle dirty or potentially contaminated items; to protect your hands if you have non-intact skin (e.g. open cuts, lesions or rashes). Perform hand hygiene before accessing and putting gloves on AND immediately after taking gloves off. Change gloves between care activities for the same patient (e.g. when moving from a contaminated body site to a clean body site). Do not wear gloves outside clinic rooms, cells or bed spaces unless carrying contaminated items or when cleaning spills of blood or body fluids. Never wash disposable gloves or use ABHR on any gloves. Sterile gloves are for sterile procedures and are single use. Gloves are not necessary when touching somebody during an interview, pushing a wheelchair, delivering meals, handling clean supplies, or providing care to patients with intact skin (i.e. no open wound or breaks in the skin). (Refer to the AHS Donning and Doffing PPE posters for details on correct removal and disposal of gloves).

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 	<h3>Personal Protective Equipment: Gowns</h3> <ul style="list-style-type: none"> • Wear a gown to protect exposed skin and clothing during activities likely to cause: <ul style="list-style-type: none"> ○ splashes of fluids; ○ contact with blood or body fluids (e.g. wound drainage). • Perform hand hygiene before accessing and putting on and immediately after taking off a gown. • Fasten the tie strings at the neck and the waist. • Make sure the sleeves cover your wrists. • Never use gowns as housecoats or warm-up jackets. • Do not wear gowns outside patient cells or exam room spaces unless carrying contaminated items or when cleaning contaminated items. • Remove damaged or heavily soiled gowns as soon as possible. • Do not reuse gowns. • After removing gown: <ul style="list-style-type: none"> ○ place in waste container (these may be disposed in general waste unless visibly dripping with blood and/or other bodily fluids); ○ perform hand hygiene. • (Refer to the AHS Donning and Doffing PPE posters for details on correct removal and disposal of gowns).
 	<h3>Personal Protective Equipment: Masks and Eye Protection</h3> <ul style="list-style-type: none"> • If you need a mask, you also need eye protection (e.g. goggles, face shields, visors attached to masks). • Wear a mask and eye protection to protect your mouth, nose and eyes during activities likely to spray or splash you with blood or body fluids. • Perform hand hygiene before accessing and putting on, and immediately after taking off mask and eye protection. • Proper wearing of a mask includes: <ul style="list-style-type: none"> ○ ensuring a snug fit over the nose and under the chin; ○ molding the metal bar over the nose (AHS Staff masks); ○ wearing the mask with the moisture-absorbing side closest to the face; ○ changing the mask when it is moist; ○ correct removal after use, touching only the elastic or ties; ○ ensure that patients are provided masks that do not contain a wire metal bar over the nose to maintain the safety and security of the environment. • Prescription glasses do not meet AHS Workplace Health and Safety Regulations for eye protection. JSG staff should consult with their own OHS department for advice. • Clean and disinfect re-useable eye protection after each use.

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	<ul style="list-style-type: none"> • Discard single-use masks and single-use eye protection in waste container. • (Refer to the AHS Donning and Doffing PPE posters for details on correct removal and disposal of masks and eye protection).
	<p><u>Respiratory Hygiene:</u> Cover Your Cough, Clean Your Hands</p> <ul style="list-style-type: none"> • Cover your nose and mouth with a tissue when coughing or sneezing. • Use the tissue once then dispose of it immediately, and perform hand hygiene. • If tissues are not readily available or not approved for use in the area, cough or sneeze into your upper arm or elbow.
	<p>Handling Patient Care Items and Equipment</p> <ul style="list-style-type: none"> • Discard items labeled as single-use after use on one patient. • AHS staff (e.g. service aids, nursing, etc.) are to clean and disinfect reusable equipment after use, before use on another patient. Inmate or contracted cleaners should not be responsible for cleaning these items as they are AHS owned and operated. • Bring minimal supplies into patient cells, shower rooms, and treatment rooms. • Do not share personal items (e.g. soaps, lotions, razors, nail clippers) between patients. • Use non-sterile gloves when handling soiled items, equipment, linens (correct PPE may also include a gown). • Handle soiled or used linens with minimal agitation and place directly in linen cart at point of care, without sorting. Inmates who perform these tasks should be provided PPE as appropriate to the task. Do not overfill carts. Laundry carts are recommended to be cleaned and disinfected using an AHS or JSG approved low-level or intermediate-level disinfectant. • After patients are discharged/transferred or released, discard single-use supplies that remain in patient's cell and launder unused linens. • Used meal trays and beverage dishes do not require special handling. Place on the dietary cart or in an area designated for used dishes.
	<p>Environmental Cleaning</p> <ul style="list-style-type: none"> • Clean patient care areas on a regularly scheduled basis and after patient discharge/transfer or release. • Use AHS or JSG approved products and procedures. AHS staff should consider consulting AHS IPC or Environmental Services if using JSG approved products to ensure they meet a healthcare standard if utilized in health care units or infirmary units. • Refer to Environmental Services (ES) Cleaning-frequency-standard and practices.

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	<h3>Patient Movement (leaving cell, holding tank or clinic/exam room) or Transfer:</h3> <ul style="list-style-type: none"> • Before patients leave their cell in health care, educate or assist them with: <ul style="list-style-type: none"> ○ performing hand hygiene, ○ performing respiratory hygiene if coughing or sneezing, ○ putting on clean clothing or coveralls, ○ ensuring dressings and other products (e.g. incontinence products) are able to contain any drainage, • Health Care Staff preparing patient(s) for transfer should assess the risk of spreading infection and assist transport staff to choose the correct personal protective equipment to wear. Health care staff should also inform any escorting JSG staff if additional PPE is required or recommended during escorts and transfers.
	<h3>Visitors</h3> <ul style="list-style-type: none"> • Encourage visitors (family, friends, lawyers, contracted staff, clergy, etc.) to: <ul style="list-style-type: none"> ○ perform hand hygiene upon entry into and exit from the health centre area and correctional centre. Additionally, promote the need to perform hand hygiene to patients including before eating, after toileting and when hands are visibly soiled. Ensure the discussion includes proper technique as noted in the AHS Hand Hygiene Procedure; ○ practice respiratory hygiene while visiting; ○ reschedule visits when feeling unwell.
	<h3>Waste and Sharps Handling</h3> <ul style="list-style-type: none"> • Wear gloves to remove waste from patient cells, common care areas (e.g. shower, treatment and exam rooms) and if the outside of bag is soiled. • Avoid contact with body. • Remove gloves and perform hand hygiene. • Remember: New Needle, New Syringe, Every Time! • Dispose of sharps immediately after use in puncture-proof biohazard container. • Do not overfill waste or sharps container. • Follow centre waste management sorting and disposal guidelines. • Ensure AHS and JSG staff are aware of what items are to be disposed in general versus biohazard waste (e.g. soiled dressing do not require biohazard disposal, unless visibly dripping with blood and/or other bodily fluids). Certain items may be required to be disposed of in biohazard containers due to security concerns even though they may otherwise be disposed of in general waste (e.g. nail clippers). Ensure staff are aware of centre specific requirements. • Waste containers shall contain clear plastic bags to ensure safety and security of the centre.

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