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fyi

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From: McDowell, Jock CPPS
Sent: Monday, January 16, 2023 11:23 AM
To: CPPS CSRS SCC <CPPSCSRSSCC@gov.sk.ca>
Subject: De-escalation of COVID-19 measures

To all staff,

As of today, it has been three weeks since the Saskatchewan Health Authority has declared the outbreak at the Saskatoon Correctional Centre over. This makes it eligible to transition into Phase 2 of the Ministry's de-escalation of COVID -19 Measure protocol. Page 48 of the attached document speaks to this.

Phase 2 will be in effect starting at 12:00 pm, Monday January 16th. The two biggest changes with how we have been operating over the last several weeks will be:

- Removal of continuous masking for all units not deemed Isolation, Quarantine,

Admission/Assessment, and Admitting (with some exceptions).

- Work groups like cleaners, laundry, food carts, kitchen inmates and kitchen staff to keep masking due to the nature of their work and their movement throughout the facility.
- Mixed unit classrooms and programs can resume.

The PPE requirements in Isolation, Quarantine, Admission/Assessment, and Admitting units will remain as they are now as will the Admission process, Custody Testing and Transfer protocols.

For those that prefer to continue to wear a mask outside of the above units, you are able to do so. Regular hand washing/sanitizing, proper cough etiquette, physical distancing and universal precautions are still encouraged.

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Guideline to Personal Protective Equipment and Exposure Control for COVID-19

Ministry of Corrections and Policing
Ministry of Justice and Attorney General
Integrated Justice Services

**Occupational Health and Safety Branch
Integrated Justice Services**

Developed: March 2020

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Next review: January 2023



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1. Introduction

This guideline has been developed following the COVID-19 recommendations for Personal Protective Equipment (PPE) and exposure control as outlined by the World Health Organization (WHO) and standard Public Health Measures as outlined by the Government of Saskatchewan and Chief Medical Officer. Key documents referenced are the *Rational Use of Personal Protective Equipment for Corona Disease (COVID19)*, and *The Preparedness, Prevention and Control of COVID-19 in Prisons*. This guideline is subject to change based on evidence and the progression of the pandemic and will be updated as required.

2. Purpose

The Ministry of Corrections and Policing, Integrated Justice Services and The Ministry of Justice and Attorney General are committed to ensuring workplace health, safety, and wellness. Due to the incubation period of the virus, COVID-19, the potential exists for Ministry employees to encounter possible exposure(s) to COVID-19 in the performance of their daily tasks. The purpose of this guide is to provide standards for the assessment and proper controls to protect employees from a potential exposure and spread of COVID-19. Usage of Personal Protective Equipment (PPE) is based on the risk of exposure and specific to the environment.

3. Informing Employees

Employees shall be informed by their supervisor/manager about the potential exposure to an infectious material associated with their job tasks and what precautions will be taken.

4. Roles and Responsibilities

4.1 Employers

The Employer will ensure employees are informed about the risks associated with exposure to infectious materials and organisms and how to identify and correct factors that could lead to exposure injuries by developing an exposure control plan, according to Section 6 22-(1) of *The Occupational Health and Safety Regulations, 2020*.

4.2 Supervisors

Supervisors perform a risk assessment to evaluate the likelihood of exposure, and follow the outlined PPE based on results. Refer to the Government of Saskatchewan, Guidelines for Hazard Identification and Risk Assessment in addition to the Saskatchewan COVID-19 Assessment Tool located on Saskatchewan.ca. Ensure exposure injury or hazardous situations are reported as per the Human Resource Manual section-818-OHS Incident Reporting and Investigation. Supervisors shall notify and educate employees of exposure symptoms and hazards, and the controls to protect themselves as outlined in this document. Supervisors ensure that employees receive training related to the use, limitations, care, sanitation, inspection, and disposal of PPE. Supervisors are to ensure that PPE is used by the employee, as outlined, and removed from use or service when damaged.

4.3 Employee

Employees will use a risk assessment approach before and during each interaction to evaluate the likelihood of exposure, and follow the outlined PPE based on results. Employees are to participate in PPE training and use PPE in accordance with their training. PPE will be inspected before use to ensure it is not cracked, broken or damaged in any way, reporting damaged equipment to your supervisor. Employees are to follow safe work procedures and policies. Employees shall notify their supervisor of any potential risks that arise. In the event of a high-risk or infected individual, surface or work area, employees shall notify their supervisor as quickly as possible and cease all movement

in the immediate vicinity to reduce the possibility of further contamination. Employees are responsible for reporting exposure or potential exposure incidents to your immediate supervisor as per the Human Resource Manual section-818-OHS Incident Reporting and Investigation.

5. COVID-19

As defined by the Government of Canada, COVID-19 is an illness caused by a coronavirus. Human coronaviruses are common and are typically associated with mild illness, similar to the common cold. Coronaviruses are a large family of viruses. They can cause diseases from the common cold to more severe diseases as Severe Acute Respiratory Syndrome (SARS). Some cause illnesses in people, while others circulate among animals. Some Coronaviruses transmit easily from person to person while others do not.

COVID-19 is a new virus that has not been previously identified. At present it is causing mild to moderately severe symptoms and may cause death in rare cases.

5.1 Symptoms

Those who are infected with COVID-19 may have little to no symptoms. Symptoms, similar to a cold or flu, may take up to 14 days to appear after exposure to COVID-19. Symptoms include:

- new or worsening cough
- shortness of breath or difficulty breathing
- temperature equal to or over 38°C
- feeling feverish
- chills
- feeling very unwell
- fatigue or weakness
- muscle and/or joint aches
- new loss of smell or taste
- headache
- gastrointestinal symptoms (abdominal pain, diarrhea, vomiting)

Children have been more commonly reporting abdominal symptoms, and skin changes or rashes.¹

5.2 Transmission

COVID-19 is transmitted via droplets and fomites during close unprotected contact between an infected person and an uninfected person. The droplets can also be spread by touching surfaces with the virus on it and then touching your mouth, nose, or eyes before washing your hands. While it is not yet known exactly how long the virus lives on surfaces, preliminary evidence suggests it can live on objects and surfaces from a few hours to several days. Therefore, isolation at home or hospital is important to prevent transmission.

While the primary driver of COVID-19 transmission is by people who are symptomatic, there is evidence that some COVID-19 infected people who never develop symptoms or are not yet sick are able to transmit the virus. Sometimes the symptoms are so mild that people don't pay attention to them. It is recommended to maintain a physical distance of two metres whenever possible. Public Health Orders must be adhered to.

5.3 Precautions and Vaccines

In the absence of effective treatments or vaccines, infection prevention and control (IPC) strategies to prevent or limit transmission of COVID-19 include:

- prompt identification
- appropriate risk assessment by screening
- management and placement of probable and confirmed cases

¹Government of Canada, Coronavirus disease (COVID-19): Symptoms and Treatment; 2020 (Access date: March and October 2020) <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/symptoms.html>

- investigation and follow up of close contacts
- In December 2020, COVID-19 vaccines became available in Canada. The vaccine protects against COVID-19 by teaching cells how to make protein that will trigger an immune response without using the live virus that caused COVID-19. Once triggered, the body then makes antibodies that help fight the infection, if the real virus enters the body. Even when immunized, employees must follow all public health orders and the information outlined in this guideline. As the pandemic progresses, and Saskatchewan’s Chief Medical Officer indicates changes to the restrictions, updates and direction will be provided based on consultation.

A National Advisory Committee on Immunization provided federal and provincial health agencies with recommendations on key populations for early COVID-19 immunizations. More information on vaccine delivery phases, can be found on [Taskroom](#) and [Saskatchewan.ca](#).

Currently, three different vaccines have been approved for use in Canada:

- Pfizer BioNTech Vaccine- Information, guidance and fact sheets on the COVID-19 Vaccine from Pfizer BioNTech is located on [Saskatchewan.ca](#)
- Moderna Vaccine– Information and guidance and fact sheets on the COVID-19 Vaccine from Moderna is located on [Saskatchewan.ca](#)
- AstraZeneca– Information and guidance and fact sheets on the COVID-19 Vaccine from AstraZeneca is located on [Saskatchewan.ca](#)

6. Early Recognition and Source Control

The key to exposure control is to have a multi-faceted plan that limits the spread of the virus and limits the number of employees who could be exposed to the virus. Signage will be posted, including at client and visitors point of entry, to instruct symptomatic individuals to alert ministry employees, thus prompt screening and isolation, where possible.²

6.1 Universal Precautions

The most important first steps for protection are:

- performing hand hygiene and avoid touching your face, mouth, nose, and eyes
- regular sanitizing of common surfaces
- where possible, maintain physical distancing of 2 metres
- physical barriers in areas where initial assessment occurs is preferred
- early recognition of individuals with respiratory illness
- rapidly isolating anyone suspected of having COVID-19 and having the individual wear a surgical/procedural mask, if tolerated
- self-monitoring of personal health for signs and symptoms
- donning the appropriate PPE based on the risk of exposure and specific environment

Measures such as these are critical to reducing the likelihood of exposure of employees to

² Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; 2020 (Access date: March 2020) <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>

the virus.³ (Refer to the symptoms listed above.)

6.2 Risk Assessment – Symptom Screening

The application of universal precautions and additional precautions is based on a symptom screening risk assessment. All employees will use a risk assessment approach before and during each interaction to evaluate the likelihood of exposure, and follow the outlined controls based on results.⁴ The Public Service Commission (PSC) has developed *Guidelines for Hazard Identification and Risk Assessment* to assist with the identification of the tasks with potential exposure hazard, the risk rating and controls required using the hierarchy of hazard controls. (Appendix 10)

7. Personal Protective Equipment

PPE will always be considered as the last line of defense, and elimination, substitution, engineered controls followed by administrative controls and safe work procedures are to be considered prior to PPE. Where PPE is used, it will be selected based on the results of a risk assessment and used in conjunction with other controls to provide the most effective protection against identified hazards. PPE will be inspected before use to ensure it is not cracked, broken, modified or damaged in any way. Report damaged or modified equipment to your supervisor. PPE must never be modified.

Wearing PPE does not negate the importance and use of universal precautions. Whenever possible, employees need to continue the use of protective barriers, social distancing and diligently practice hand hygiene, and cough etiquette.

7.1 When to use Personal Protective Equipment

When an individual is displaying symptoms or is confirmed to have COVID-19, if a barrier is not present or you cannot maintain physical distancing (2 metres), follow droplet/contact PLUS* precautions based on the risk assessment results. This includes the appropriate selection and use of personal protective equipment (PPE) based on the task being completed, including cleaning, and disinfecting of effected unit/areas. (See PPE Appendices for additional information on the appropriate use of PPE by task.)^{5 6 7 8}

³ World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Accessed March 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

⁴ Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; 2020 (Access date: March-October 2020) <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>

^{5 9} World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

⁶ Saskatchewan Health Authority, NOVEL CORONAVIRUS (COVID-19): Interim Infection Prevention and Control Guidance for Primary Health Care Settings (Access date: March-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control#infection-prevention-and-control>

⁷ Government of Saskatchewan, COVID-19 Appropriate Use of Personal Protection Equipment (PPE) April 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

⁸ Saskatchewan Health Authority, COVID-19 PPE Bulletin, April 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

7.2 Disposable Gloves

Medical grade nitrile disposable gloves, class II are appropriate for the care of clients with or suspected to have COVID-19. When providing direct hands-on care of an individual displaying symptoms/confirmed to have COVID-19 follow universal precautions by wearing medical grade, class II gloves.⁹ If unable to maintain physical distance (2 metres) from an individual displaying symptoms/confirmed to have COVID-19, and a barrier is not present, follow universal precautions by wearing medical grade, class II gloves.¹⁰ All employees will at minimum wear nitrile disposable gloves, or as directed by the product's Safety Data Sheet, to protect hands while cleaning and disinfecting. See donning and doffing of PPE for additional information. Hand hygiene will be performed prior to donning and after doffing disposable gloves.

7.3 Long Sleeved Gown

Gowns will be worn based on the specific job task and the environment. Gowns are to be worn to reduce skin exposure to bodily fluids or chemical products and as a droplet precaution based on the risk assessment results. (See the Appendices for additional information on the appropriate use of PPE by task.) See donning and doffing of PPE for additional information.¹¹ Uniforms or clothing that have become contaminated (e.g., physical contact, or contaminated with respiratory droplets from an individual displaying symptoms/confirmed to have COVID-19,) require laundering in hot water and placed in a hot dryer until completely dried.

7.4 Facial Protection – Surgical/Procedural Mask

Surgical/procedural masks are medical grade masks used to protect both the client and employees. Surgical/procedural masks must meet Level 1 classifications under ASTM International Standards.¹² When an individual displaying symptoms/confirmed to have COVID-19 and a barrier is not present or if physical distancing (2 metres) cannot be maintained, a surgical/procedural mask must be donned based on the risk assessment results. Clients use of masks can be used to limit the spread of respiratory diseases, such as COVID-19. Employees entering or cleaning effected units/areas are required to wear a surgical/procedural mask.¹³ Change surgical/procedural mask when it becomes moist, damaged, or soiled.

Proper wearing of surgical/procedural masks requires a snug fit over the nose and under the chin. Wearing multiple masks is not recommended. See donning and insufficient to provide an

¹⁰ ¹¹ World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness,-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

¹² Government of Canada, COVID-19 medical masks and respirators: Information for health professionals. (Access date November 2, 2020) <https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/personal-protective-equipment/medical-masks-respirators/health-professionals.html>

adequate level of protection and other equally relevant measures will also be adopted as outlined below.

7.5 Eye Protection – Face Shield/Sealed Goggles

When an individual is displaying symptoms/confirmed to have COVID-19, if a barrier is not present or you cannot maintain physical distancing (2 metres), eye protection is required. There are two provincial standards used for Droplet/Contact Plus Precautions with suspected or confirmed COVID-19 cases. Face shields that fit from forehead to below chin and ear to ear (covering the whole face completely, without gaps or openings at the top). Appropriately fitted, Class 2B non-vented or indirectly vented sealed goggle with a neoprene or elastic strap. Employees cleaning effected unit/area are required to wear eye protection based on the risk assessment results and as directed by the Safety Data Sheet for the products used. (Prescription glasses do not meet the OH&S regulations for eye protection.)¹⁴ Follow the manufactures guidelines for proper use and sanitation.

7.6 When to wear a N95 Respirator

When an individual is showing symptoms or has been confirmed to have COVID-19 a N95 respirator is required during an Aerosol Generating Medical Procedure (AGMP), such as a nebulizer, Continuous Positive Airway Pressure therapy (CPAP), Emergency Medical Services (EMS) interventions including intubation, Bag Valve Mask. A full list of AGMP's is located on Saskatchewan.ca. All employees require gloves, gown, facial/eye protection and a fit-tested N95 respirator. The following steps will be followed:

- limit the employees in the room during this procedure
- hang “AGMP in Progress! Do Not Enter “poster on the closed door. (Poster is in Appendix 11.3 Table 1)
- ensure employee have been fit tested and are trained to use a N95 respirator
- the N95 respirator and eye/facial protection will be removed immediately after leaving the room. Where the AGMP was performed will remain vacant or a N95 respirator will continue to be worn until the air clearance time has elapsed. If specific settle time is not identified, use 2 hours.¹⁵
- following the completion of the AGMP, complete and post the poster in Appendix 11.3 Table 2. “AGMP completed at _____”, “Settle time: _____” (If specific settle time not identified, use 2 hours.) Fill in “Safe to Enter Room at: _____”. Once the safe to enter time has lapsed, employees no longer require a N95
- see disinfecting procedures for AGMP below for additional details

Tight-fitting respirators must seal to the wearer’s face to provide the expected protection. Therefore, fit testing by a competent person is required as per Section 7-3 of The Occupational Health and Safety Regulations, 2020.

7.7 Removal of PPE

Before leaving an effected unit/area, gloves, gown, and eye protection will be removed and disposed of to minimize the potential for cross contamination.^{16 17} Refer to donning and doffing posters below for details on the careful removal of all PPE.¹⁸

*Note: If continuous masking applies, please following the direction in section 11.2 Table 1: Continuous Masking for **Custody Workers**.

8. Procedures

8.1 Self-Monitoring and Exposure

Self-monitoring means watching closely for symptoms in yourself or your dependents. You should avoid crowded public spaces, if possible. The [Saskatchewan COVID-19 Self-Assessment Tool](#) can be used as a self-assessment to determine whether you should be tested for COVID-19 symptoms. Speak to your supervisor on how to quickly self- isolate if you develop fever, cough or difficulty breathing or any other symptoms when at work. When there are no symptoms, continue with your daily activities. If you have been exposed without proper PPE, or at the first sign of symptoms, such as increase in body temperature or development of a cough, sore throat, or shortness of breath, you should self-isolate and call the Public HealthLine 811 for assessment and direction. For workplace exposure without proper PPE, notify your supervisor and follow the Human Resource Manual section-818-OHS Incident Reporting and Investigation. (Form 101) Whether you're self-isolating or self-monitoring, make sure you maintain proper physical distancing. (2 metres)

8.2 Exposure Control

All first point of contact employees will complete a risk assessment by way of a symptom screening on individuals being admitted, or prior to services provided. All incoming transport clients with symptoms or confirmed COVID-19, will don a surgical/procedural mask, and perform hand hygiene prior to entering custody. The surgical/procedural mask shall remain on until an assessment has been completed.

If an individual presents with symptoms of influenza-like illness, and within 14 days before the

¹⁶ Government of Saskatchewan, COVID-19 Appropriate Use of Personal Protection Equipment (PPE) April 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

¹⁷ World Health Organization, The Preparedness, Prevention and Control of COVID-19 in Prisons. March 15, 2020; Regional Office website (Access date: March-October 2020) <http://www.euro.who.int/en/health-topics/health-determinants/prisons-and-health/publications/2020/preparedness-prevention-and-control-of-covid-19-in-prisons-and-other-places-of-detention-2020>

¹⁸ Alberta Health Services, Infection Prevention & Control, putting on (Donning) Personal Protective Equipment (PPE) & Taking off (Doffing) Personal Protective Equipment (PPE)

onset of illness has travelled outside of Canada, has been in close contact with a probable or confirmed case of COVID-19 or someone who has travelled outside of Canada:

- where possible, reschedule the service
- place the individual in a designated separate area, where possible
- encourage the individual with signs and symptoms of an acute respiratory infection to perform respiratory hygiene/cough etiquette, and provide tissues, and a waste receptacle
- limit contact/visitors to only those who are essential
- do **not** cohort with other individual (unless necessary, in which case cohort only with individual with similar screening symptoms to COVID-19)
- disinfect the contaminated area as outlined in this guideline
- practice universal precautions, wash your hands with soap and water or alcohol-based hand sanitizer

Reference Taskroom for the COVID-19 Workplace Contact Notification Toolkit process for positive cases in the workplace.

8.3 Hand Hygiene

Hand hygiene is essential to reduce cross-contamination and will be performed often. Hand hygiene consists of either washing hands thoroughly with soap and water for at least 20 seconds and drying with a single use towel or by using alcohol hand sanitizer containing at least 60% alcohol. Hand sanitizers provide a convenient option for hand hygiene where soap and water are not available.

8.4 Transporting Individuals

All incoming transports to correctional facilities with symptoms or confirmed COVID-19, will don a surgical/procedural mask prior to entering custody. The surgical/procedural mask shall remain on until an assessment has been completed. All outbound transports of individual with symptoms or confirmed COVID-19 will be reviewed and completed based on the results of the risk assessment. Transport vehicles are to be sanitized if suspected or confirmed COVID-19 exposure has occurred.

8.5 Handling of Deceased Bodies

Universal precautions will be used properly and consistently when handling deceased bodies or preparing bodies for autopsy or transfer to mortuary services. Provincial and territorial specified communicable disease regulations will be followed.¹⁹

8.6 Disposal of PPE and Garbage

Single-use disposable equipment and PPE will be discarded into a no-touch garbage

¹⁹ Government of Canada, Infection prevention and control for coronavirus disease (COVID-19): Interim guidance for acute healthcare setting; (Access date: March–October 2020) (<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-acute-healthcare-settings.html#a4.1>)

receptacle after use.²⁰ No special precautions are recommended; universal precautions are sufficient. Garbage receptacles must be emptied as soon as they are full, overfull receptacles can cause cross contamination.

8.7 Cleaning and Disinfecting

Cleaning and disinfecting are two different processes: cleaning removes dirt and debris from a surface while disinfecting kills bacteria, mold, and viruses on the surface. For common workplace settings, cleaning can be accomplished with water, detergent and scrubbing. Cleaning must be completed prior to disinfecting; the disinfectant is rendered ineffective as it cannot penetrate the soiled surface. Disinfecting requires the infected surface to be in contact with an approved disinfecting product for a minimum amount of time, as recommended by the manufacturer's guidelines.

Increased frequency of general precautionary cleaning and disinfecting of high-touch surfaces and shared equipment (e.g., telephones, keyboards, photocopier, fax machine) is significant in controlling the spread of microorganisms during a respiratory infection outbreak. Shared common areas, counter tops, sinks, desktops, file cabinets, door handles kitchen areas, sinks and taps will be cleaned and disinfected at least at the beginning and the end of each shift with documentation.²¹ Dishes will be cleaned as per normal food sanitation guidelines.²²

Breakrooms/eating area

Breakrooms have been identified as a high-risk area of transmission. No open or shared food (including fresh fruit, bread, or open items. i.e., boxed donuts.) Items must be single serve or be removed. (Including condiments.) Post signage for the maximum number of employees allowed in the breakroom. Post established SHA's processes for breaks. The process must include:

1. Complete hand hygiene.
2. Put on gloves. Using a disinfectant, wipe the table and chair arms. Discard the wipe in the garbage.
3. Take a second wipe, clean the location where eye protection (when applicable) will be stored for the break. (To prevent contamination, eye protection should not be placed on surfaces. Hooks should be available where they can be disinfected and hung to dry.) Remove eye protection (when applicable). Clean and disinfect (inside surface, straps/arm, then the front of the eye protection last.) Place in a clean

²⁰ Saskatchewan Health Authority, NOVEL CORONAVIRUS (COVID-19): Interim Infection Prevention and Control Guidance for Acute Health Care Settings (Access date: March-October 2020)

^{21,22} Government of Saskatchewan, COVID-19 Cleaning and Disinfection for Public Facilities, 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

- location away from the dining area.
4. Remove gloves and clean hands.
 5. Obtain a clean mask, set it on the clean dining table (or clean napkin). Remove mask, place immediately into the garbage. (Or laundry bag if surgical/procedural mask is not required). Clean hands.
 6. New mask should be worn as soon as finished eating or drinking.
 7. Clear table. Put on gloves. Using disinfectant, wipe the table, chair arms. Discard wipe and gloves into the garbage.
 8. Clean hands and replace eye protection (when applicable) before returning to work.
- *Not all ministry employees are required to wear eye protection or surgical/procedural mask, as it is based on the task and the level of risk. Follow the outlined process as applicable.

Chemical product labels are required and to be visible on cleaning solutions. An employer who acquires a hazardous product for use, storage or handling at the workplace shall obtain a supplier safety data sheet. If a hazardous product that is used in a workplace is three years old, the employer shall, if possible, obtain from the supplier an up-to-date supplier safety data sheet with respect to the hazardous product at that time. A copy of a safety data sheet must be made readily available to employees who may be exposed to the hazardous product and the occupational health committee / worker representative(s).

8.8 Disinfecting Environments Suspected or Confirmed COVID-19

In Government- occupied workspaces, to facilitate a quick response when a deep clean and disinfection is required (for example, if an individual with a presumptive or confirmed case of COVID-19 has been in one of our workplaces), reach out to the Building Manager. Reference [Taskroom](#) for additional documented processes.

Environmental cleaning of premises and areas that may have been contaminated with COVID-19 due to proximity of individuals displaying symptoms/confirmed to have COVID-19 requires cleaners to don a surgical/procedural mask, eye protection, gloves, gown and boots or closed work shoes. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into 50 parts of water. For example, 1 teaspoon (5 mL) bleach into 1 cup (250 mL) water. These directions are based on bleach that is 5% sodium hypochlorite²³. Where other disinfecting products are used in place of a bleach and water solution, ensure that the product is approved as a disinfectant for COVID-19 (e.g., Health Canada approved disinfectants will contain an 8-digit DIN number on the product label). Follow PPE requirements listed on the Safety Data Sheet (SDS).

8.9 Disinfecting for Aerosol Generating Procedure

²³ Saskatchewan.ca, COVID-19 Cleaning and Disinfecting for Public Facilities (Access date April-October 2020)
<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

Where possible, wait for aerosolize settle time prior to environmental cleaning **after an aerosol generating medical procedure (AGMP)**. If an area cannot be secured and requires immediate cleaning, cleaners will don a N95 respirator, eye protection, gloves, gown and boots or closed work shoes. Post settle time of 2 hours, a N95 respirator is not required and can be replaced with a surgical/procedural mask. According to Health Canada, a disinfecting solution can be made by mixing one part of bleach into 50 parts of water. For example, 1 teaspoon (5 mL) bleach into 1 cup (250 mL) water. These directions are based on bleach that is 5% sodium hypochlorite.²⁴ Where other disinfecting products are used in place of a bleach and water solution, ensure that the product is approved as a disinfectant for COVID-19 (e.g., Health Canada approved disinfectants will contain an 8-digit DIN number on the product label). Follow PPE requirements listed on the Safety Data Sheet (SDS).

8.10 Personal Belongings

All reusable equipment and supplies, electronics, personal belongings, etc. should be dedicated to the use of the individuals with signs and symptoms and exposure criteria consistent with COVID-19. If use with other individuals is necessary, the equipment and supplies will be cleaned and low-level disinfected before reuse. Items that cannot be appropriately cleaned and disinfected will be discarded upon individuals transfer or discharge. Practice good hand hygiene do not touch your face, eyes, or nose.

8.11 Linens

All individuals dealing with soiled bedding, towels, and clothes from or infected by **individuals with COVID-19 will:**

1. Wear appropriate personal protective equipment, which includes gloves, surgical/procedural mask, eye face shield, long-sleeved gown, (if gown is not fluid resistant), and don boots before touching any soiled linen.
2. Never carry soiled linen against body; place soiled linen in a clearly labeled, leak-proof container.
3. If there is any solid excrement on the linen, such as feces or vomit, scrape it off carefully with a flat, firm object and put it in the designated toilet before putting linen in the designated container.
4. Wash and disinfect linen: washing by machine with hot water and laundry detergent is recommended for cleaning and disinfection of linens.²⁵

8.12 Infection Control Measures and Limitations

- **Vaccination:** when available to the public, employees will be able to choose to be vaccinated.

²⁴ Saskatchewan.ca, COVID-19 Cleaning and Disinfecting for Public Facilities (Access date April-October 2020)

<https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/public-health-measures/guidance-for-health-care-facilities/cleaning-and-disinfecting-public-facilities>

²⁵ World Health Organization, Q & A on infectious prevention and control for health care workers caring for patients suspected or confirmed 2019-nCoV (Access date March 2020) <https://www.who.int/news-room/q-a-detail/q-a-on-infection-prevention-and-control-for-health-care-workers-caring-for-patients-with-suspected-or-confirmed-2019-ncov>

- Limitations: a sufficient percentage of the population will need to be vaccinated to reduce cases; vaccinations may not be effective for new strains of COVID, research is still underway.
- **Engineering controls:** designs or modifications to reduce the source of exposure, such as dividers/baffles/shields and Plexiglas barriers.
 - Limitations: employees and clients may not follow procedure and may interact in areas without barriers; engineering controls can give a false sense of security resulting in physical distancing and masking not being complied with.
- **Personal protective equipment:** Personal protective equipment is prescribed and provided where required.
 - Limitations: incorrect donning and doffing, using contaminated PPE for long durations. PPE can give a false sense of security resulting in physical distancing not being complied with.
- **Safe work practices and procedures:** developed as necessary by divisions.
 - Limitations: employees may be unaware of, or not follow, safe work practices and procedures.
- **Standard practices that incorporate universal precautions:** continue to be incorporated on an ongoing basis, following direction from saskatchewan.ca including limits on in-person gathering, using technology and virtual meetings rather than in-person meetings, cleaning and disinfecting, hand hygiene, physical distancing, masking etc.

Additional Resources

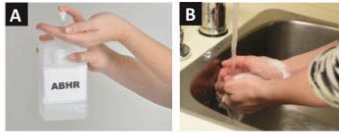
- Exposure Control Plan, Integrated Justice Services
- Guideline for Hazard Identification and Risk Assessment, Government of Saskatchewan
- Section 818-Occupational Health and Safety- Incident Reporting and Investigation (IRI), Government of Saskatchewan
- Saskatchewan.ca

Post the donning and doffing posters in the designated donning and doffing locations:

9. How to Don and Doff Personal Protective Equipment

Putting on (Donning) Personal Protective Equipment (PPE)

1 HAND HYGIENE



- A** Using an alcohol-based hand rub is the preferred way to **clean your hands**.
- B** If your hands look or feel dirty, soap and water must be used to wash your hands.

2 Gown



- A** Make sure the gown covers from neck to knees to wrist.
- B** Tie at the back of neck and waist.

3a Procedure/Surgical Mask



- ♦ Secure the ties or elastic around your head so the mask stays in place.
- ♦ Fit the moldable band to the nose bridge. Fit snugly to your face and below chin.

3b N95 Respirator

There are different styles of N95 respirators (pictured below). They include: a) molded cup, b) duckbill, c) flat-fold and d) v-fold



All styles have the same basic steps for donning; molded cup and duckbill are pictured below. Refer to the manufacturer for specific donning instructions.



- A** Pre-stretch both top and bottom straps before placing the respirator on your face.
- B** Cup the N95 respirator in your hand.
- C** Position the N95 respirator under your chin with the nose piece up. Secure the elastic band around your head so the N95 respirator stays in place.
- D** Use both hands to mold the metal band of the N95 respirator around the bridge of your nose.
- E** Fit check the N95 respirator.

4 Eye Protection or Face Shields



- ♦ Place over the eyes (or face).
- ♦ Adjust to fit.

5 Gloves



- ♦ Pull the cuffs of the gloves over the cuffs of the gown.

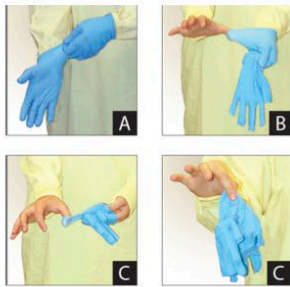


Updated on March 2020
Some Photos Used from Alberta Health Services

For more information contact infectioncontrol@saskhealthauthority.ca

Taking off (Doffing) Personal Protective Equipment (PPE)

1 Gloves



- A** Grasp the outside edge of the glove near the wrist and peel away from the hand, turning the glove inside-out.
- Hold the glove in the opposite gloved hand.
- B** Slide an ungloved finger or thumb under the wrist of the remaining glove.
- C** Peel the glove off and over the first glove, making a bag for both gloves.
- Put the gloves in the garbage.

2 HAND HYGIENE



- A** Using an alcohol-based hand rub is the preferred way to **clean your hands**.
- B** If your hands look or feel dirty, soap and water must be used to wash your hands.

3 Gown



- A** Carefully unfasten ties.
- B** Grasp the outside of the gown at the back of the shoulders and pull the gown down over the arms.
- C** Turn the gown inside out during removal.
- Put in hamper or, if disposable, put in garbage.

4 HAND HYGIENE



- **Clean your hands.** (See No. 2)
- Exit the patient room, close the door and **clean your hands** again.

5 Eye Protection or Face Shield



- Handle only by headband or ear pieces.
- Carefully pull away from face.
- Put reusable items in appropriate area for cleaning.
- Put disposable items into garbage.

6 Mask or N95 Respirator



- Bend forward slightly and carefully remove the mask from your face by touching only the ties or elastic bands.
- Start with the bottom tie, then remove the top tie.
- Throw the mask in the garbage.

There are different styles of N95 respirators but all styles have the same basic steps for doffing.

7 HAND HYGIENE

- **Clean your hands.** (See No. 2)

Updated on March 2020

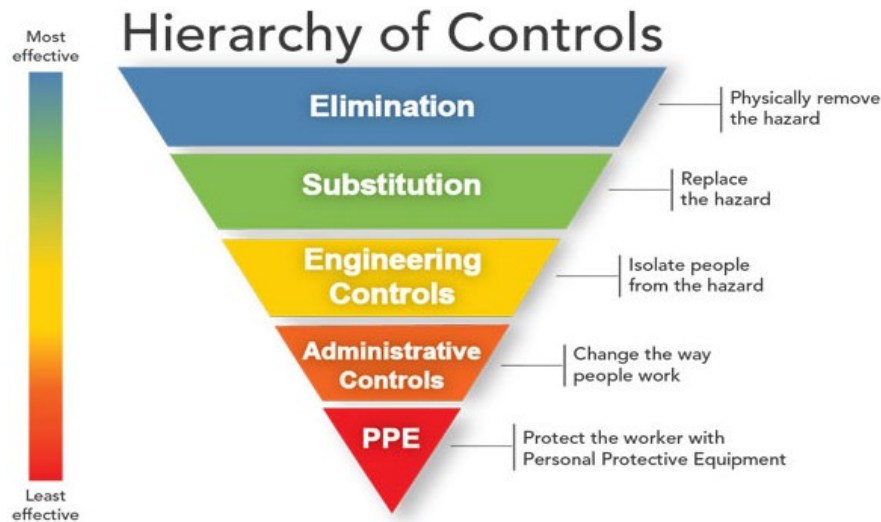
Some Photos Used from Alberta Health Services

For more information contact infectioncontrol@saskhealthauthority.ca

10. Hierarchy of Controls

How to Apply in a COVID-19 Environment:

PPE is an effective way to control hazards within a work environment. The Hierarchy of Controls is a system used to deploy effective controls within an organization, workplace, or community to identify the most effective ways to control a hazard. Depicted within the inverted pyramid below, the more effective controls are on the large, top side of the pyramid.



Examples of How to Apply in the Workplace:

When applying the Hierarchy of Controls in a COVID-19 environment, start at the top with the more effective controls and work your way down.

Elimination – Removing the risk entirely (ex: working from home and not permitting entry of those who are symptomatic)

Substitution – Although no controls around substitution have been identified for COVID-19, an example of this would be substituting technical grade ethanol with medical grade ethanol in hand sanitizer.

Engineering controls – Using physical or mechanical means to separate the person from the hazard (ex: physical barriers / partitions with plexiglass)

Administrative controls – Use policies, procedures, signage to guide behaviors (i.e.) hand

PPE – Will be considered after careful consideration of the previous control measures (ex: use a risk assessment to determine the level of PPE needed)

11. Appendices

11.1 Table 1: Custody Services – Standard PPE

Table 1. Recommended PPE to control potential exposure hazards during the outbreak of COVID-19, according to the setting, personnel, and type of activity^a. For the purpose of this table, Youth Facility Workers and Correctional Workers will be referred to as Custody Workers. Health Care workers will be referred to as Nurses.

Note: Continuous masking is implemented on a directed basis, and supplements the controls laid out in Table 11.1.

Setting	Target personnel or clients	Activity	Type of PPE or procedure
ADULT / YOUTH / REDUCED CUSTODY FACILITIES			
Custody Facilities			
All areas non-designated as Isolation, Quarantine, 14-Day Assessment, and Admitting	Nurses Custody workers	Providing <u>direct hands-on care</u>	No COVID-19 specific PPE required – Standard Universal Precautions *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
		Aerosol-generating medical procedures (AGMP) performed on any client	Respirator N95 or equivalent Gown Disposable Gloves Face shield/sealed goggles
	Cleaners	Entering to clean and disinfect the room	Disposable gloves Additional PPE as outlined by the Safety Data Sheet (SDS) for the products used
Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas/ corridors)	All clients not known or not suspected to have COVID-19	Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas/ corridors)	Clients <u>must</u> don a surgical/procedural mask. This would include when on exercise together.
	Custody Worker	Escort out of the non-designated units	No COVID-19 specific PPE required – Standard Universal Precautions

Medical Units Within Custody Facilities			
Treatment room	Nurses	Physical examination of all clients	Surgical/Procedural mask Gown Disposable Gloves Face shield/sealed goggles *Gloves and gown will be changed between each client
	Clients	Any	Clients <u>must</u> don a surgical/procedural mask during entire admission process and movement until placed in cell
	Cleaners	Cleaning and disinfecting after and between clients with respiratory symptoms (Not AGMPs)	Surgical/ Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles Boots or closed work Shoes as per SDS sheet
	Custody Worker	When required to be in the treatment room	Required to don the PPE that corresponds with the unit the client came from
Waiting area	Clients with respiratory symptoms or from Quarantine / Isolation/ 14-Day Assessment and Admission unit	Any	Clients <u>must</u> don a surgical/procedural mask during entire admission process and movement until placed in cell Immediately move the client to an isolation room or separate area away from others; if this is not feasible, ensure spatial distance of at least 2 metres from other clients

Medical Administration	Clerical support	Does not provide direct contact with clients and can maintain 2 metres	PPE dependent on infrastructure and interaction / tasks associated with clients
Quarantine Unit			
Quarantine Unit	Nurses Custody Workers	Providing <u>direct hands-on care or contact</u>	Disposable gloves Surgical/Procedural mask Face shield/sealed goggles Gown
	Custody workers	Working the Quarantine unit	Surgical/Procedural mask Face shield/sealed goggles *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
	Cleaners	Entering to clean and disinfect the room of suspected/ confirmed COVID-19 clients	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles Boots or closed work shoes as per SDS sheet *If an AGMP was performed, a N95 mask is to be used if cleaning is required before the settle time of 2 hours
Other areas of movement/ access through the facility (e.g., Video Court/common areas/ program / work areas/ corridors)	Clients	Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas /corridors)	Clients <u>must</u> don a surgical/procedural mask whenever out of their cell. (Exception for hygiene and eating.) If a quarantined unit happens to be a dorm, the clients <u>must</u> don a surgical/procedural mask at all times. (Exception

<p>Other areas of movement (Continued)</p>			<p>for hygiene, eating and sleeping)</p> <p>Clients must don a surgical/procedural mask on all external escorts.</p>
	<p>Custody workers</p>	<p>Escort out of the Quarantine unit</p>	<p>Surgical/Procedural mask Face shield/sealed goggles</p>
<p>Isolation Unit</p>			
<p>Isolation Unit</p>	<p>Custody workers</p>	<p>Working the Isolation unit, suspected/confirmed COVID-19 client unit that <u>does not involve direct hands-on care and can maintain 2 metres from client</u></p>	<p>Surgical/ Procedural mask at all times Face shield/sealed goggles</p> <p>*Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands</p>
	<p>Nurses & Custody Workers</p>	<p>Providing <u>direct hands-on care</u> to suspected/confirmed COVID-19 clients</p>	<p>Surgical/Procedural mask Gown Disposable gloves Face shield/sealed goggles</p>
	<p>Cleaners</p>	<p>Cleaning Isolation area</p>	<p>Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)</p> <p>Face shield/sealed goggles</p> <p>Boots or closed work shoes as per SDS sheet</p> <p>*If an AGMP was performed, an N95 mask is to be used if cleaning is required before the settle time of 2 hours</p>

Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/work areas/corridors)	Clients with or without respiratory symptoms	Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas/corridors)	Clients <u>must</u> don a surgical/procedural mask whenever out of their cell. (Exception for hygiene and eating.) If a quarantined unit happens to be a dorm, the clients <u>must</u> don a surgical/procedural mask at all times (exception for hygiene, eating and sleeping) Clients must don a surgical/procedural mask on all external escorts.
	Custody workers	Escort out of the Isolation unit	Surgical/Procedural mask Face shield/sealed goggles Gown Disposable gloves
14-Day Admission / Assessment Unit			
14-Day Admission/ Assessment Unit	Custody workers	Working on the 14-Day Admission/ Assessment unit	Surgical/Procedural mask Face Shield/sealed goggles *Perform hand hygiene frequently, before entering and after exiting the unit. Avoid touching face with unwashed hands
	Nurses Custody Workers	Providing <u>direct hands-on care</u>	Surgical/Procedural mask Face Shield/sealed goggles Disposable gloves
	Cleaners	Cleaning assessment area	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles

			<p>(if risk of splash from organic material or chemicals)</p> <p>Boots or closed work shoes as per SDS sheet</p> <p>*If an AGMP was performed, an N95 mask is to be used if cleaning is required before the settle time of 2 hours</p>
<p>Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas/ corridors)</p>	Clients	Other areas of movement/access through the facility (e.g., Video Court/ common areas/ program/ work areas/corridors)	<p>Clients <u>must</u> don a surgical/procedural mask whenever out of their cell. (Exception for hygiene and eating.)</p> <p>If a quarantined unit happens to be a dorm, the clients <u>must</u> don a surgical/procedural mask at all times (exception for hygiene, eating and sleeping)</p> <p>Clients must don a surgical/procedural mask on all external escorts.</p>
	Custody workers	Escort out of the 14-day Admission/ Assessment unit	Surgical/Procedural mask Face Shield/sealed goggles
<p>Administrative Areas and Admitting</p>			
Administrative areas	All employees	Any activity that does not involve contact with suspected/ confirmed COVID-19 Clients	No COVID-19 specific PPE required – Standard Universal Precautions
Admitting	Nurses	Screening Providing <u>direct hands-on care</u>	Surgical/ Procedural mask Gown Disposable gloves Face shield/sealed goggles

Admitting (Continued)	Custody Worker	Working the admission process, that <u>does not involve direct contact to suspected/confirmed COVID-19 clients and can maintain 2 metres from client</u>	No COVID-19 specific PPE required – Standard Universal Precautions *Perform hand hygiene frequently, before entering and after exiting the unit.
	Custody workers	Working the admission process, that <u>does involve direct hands-on care and cannot maintain 2 metres from client</u>	Surgical/ Procedural mask Gown Disposable gloves Face shield/sealed goggles
	Clients	New clients entering the facility and transporting to the 14-Day Assessment Unit	Clients <u>must</u> don a surgical/procedural mask during entire admission process and movement until placed in cell. *Perform hand hygiene frequently, before entering and after exiting the unit
	Cleaners	Cleaning the area	Surgical/Procedural mask Gown Face shield/sealed goggles Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Boots or closed work shoes as per SDS sheet *If an AGMP was performed, a N95 mask is to be used if cleaning is required before the settle time of 2 hours
Transport			

EMS transport	Custody workers	Transporting suspected/ confirmed COVID-19 clients to the referral health care facility	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles *If an AGMP is performed – Custody Worker is not to be present unless they have been fit tested and have donned a N95 Respirator
	Custody workers	Transporting client <u>without</u> suspected/ confirmed COVID-19 to the referral health care facility	No COVID-19 specific PPE required – Standard Universal Precautions
	Client with suspected COVID-19	Transport to the referral health care facility	Clients must don a surgical/procedural mask on all external escorts.
	Client <u>without</u> suspected COVID-19	Transport to the referral health care facility	Clients must don a surgical/procedural mask on all external escorts.
Staff Transport	Custody workers	Transporting suspected/ confirmed COVID-19 clients to the referral health care facility	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles
		Transporting client <u>without</u> suspected/ confirmed COVID-19 to the referral health care facility	No COVID-19 specific PPE required – Standard Universal Precautions
	Client with suspected COVID-19	Transport to the health care facility	Clients must don a surgical/procedural mask on all external escorts.
	Client <u>without</u> suspected COVID-19	Transport to the health care facility	Clients must don a surgical/procedural mask on all external escorts.

Staff Transport (Continued)	Cleaners	Cleaning after and between transport of clients	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles Boots or closed work Shoes as per SDS sheet
Special Consideration for Rapid-Response Teams (RRT) or Emergency Response (ERT) Physically Responding and Handling of Client Disturbance or Code Response^D			
Isolation, Quarantine, Admission/ 14 Day Assessment unit/cell	Responders	Responding to any code	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles
	Client(s) involved in disturbance	Post-restraint, client(s) should be supplied shower	Surgical/procedural mask Spit hood as per protocol
All areas not designated as Isolation, Quarantine, 14 Day Assessment, and Admitting	Responders	Responding to a code (other than <u>CODE BLUE</u>)	No COVID-19 specific PPE required - Standard Universal Precautions
All Code Blue Responses	Custody Health care worker	Responding to <u>CODE BLUE</u>	Surgical/Procedural Mask Disposable gloves Face shield/sealed goggles Gown (N95 if in area within 2 hours of EMS performing AGMP)
	Custody worker	CPR with compressions only (pending EMS arrival) if not an AGMP and does not require an N95 – see Corrections COVID-19 CPR Policy	Surgical/Procedural mask on client
	Cleaners	Cleaning area after <u>CODE BLUE response</u>	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles

<p>All Code Blue Responses (Continued)</p>			<p>Boots or closed work Shoes as per SDS sheet</p> <p>(N95 if in area within 2 hours of EMS performing AGMP)</p>
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a In addition to using the appropriate PPE, frequent hand hygiene and respiratory hygiene should always be performed. PPE should be discarded in an appropriate waste container after use, and hand hygiene should be performed before putting on and after taking off PPE.

b Not Applicable.

c Not Applicable

d All rapid-response team members must be trained in performing hand hygiene and how to put on and remove PPE to avoid self-contamination. For PPE specifications, refer to WHO's [disease commodity package](#).^{27 28 29}

²⁷ Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Primary Care March 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

²⁸ World Health Organization, Rational Use of Personal Protective Equipment for Corona Disease (COVID19) March 19, 2020; (Access date: March-October 2020) <https://apps.who.int/iris/handle/10665/331498>

²⁹ Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Acute Care, 2020; (Access date: April-October 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

11.2 Table 1: Continuous Masking for Custody Services

Adopted from the Saskatchewan Health Authorities Continuous Masking Talking Points and FAQ's and Continuous Masking Principals and Guidelines

Note: In every decision that is made, the top priority is the safety of all employees, clients, and visitors. Continuous masking will be implemented on a directed basis to supplement the controls laid out in Table 11.1. Dependent on circumstances and advice from Health Officials, Custody Services could transition back and forth between the requirements laid out in Table 11.1 and Table 11.2.

Temporary measures to COVID-19 PPE and Exposure Control Guidelines, January 7, 2022³⁰

As advised by Saskatchewan Health Authority (SHA) / Public Health (PH) representative through risk assessment of Custody Services tasks and practices, all Custody Services were issued direction to double-mask on January 10, 2022 so as to limit the spread of the COVID-19 Omicron variant.

This is a temporary measure and will be re-assessed with the SHA/PH representative until this temporary measure is removed.

SHA/PH representative indicates although Custody Services does take its guidance from the Saskatchewan Health Authority³¹, Custody Services is a specialized congregant facility and has been issued a specialized direction for Custody Services' needs. These temporary measures for using a double surgical/procedural mask are in alignment with Saskatchewan *Occupational Health & Safety Regulations, 2020*, Section 7-1(1)³².

Therefore, and until temporary measures are removed, where the COVID-19 PPE and Exposure Control Guidelines state a single surgical/procedural mask is used in Custody Services, a double-mask shall be worn. Where N95 respirator use is required, it will continue to be required.

Procedure for **donning** a double surgical/procedural mask is to don one mask, then don a second mask on top of the first. Procedure for **doffing** double surgical/procedural masks is to doff both masks at once. Guidance on donning and doffing PPE is provided within the COVID-19 PPE and Exposure Control Guideline. Refrain from adjusting mask once donned. Refer to guidance within this table on replacing/discarding contaminated or soiled masks.

This temporary measure was removed February 9, 2022 as COVID-19 Omicron variant case numbers across the province of Saskatchewan are in steady decline.

Introduction

After careful consideration, evaluation of risk assessments, to align with the Saskatchewan Health Authority (SHA) and Public Health recommendations, Custody Services will adopt and implement the SHA's continuous masking principals and guideline strategy in an effort to protect the health and safety of employees, clients, and visitors. All employees will don a surgical/procedure mask as per Appendices 11.2 - Table 1 of this guideline. This requires employees to wear a surgical/procedure mask in common spaces (lobbies, hallways, elevators, etc.) and in the secure envelope as outlined below. Surgical/procedure masks can be used for

³⁰ Saskatchewan Health Authority, Official Memo from Medical Health Officer to Executive Director, Custody Services, CPPS

³¹ Saskatchewan Health Authority, Continuous Masking Guideline, Talking Points and FAQs (accessed January 19, 2022) <https://www.saskhealthauthority.ca/system/files/2021-06/CV-19-G0013-Continuous-Masking-Talking-Points-and-FAQs.pdf>

³² Publications Saskatchewan, *The Occupational Health and Safety Regulations, 2020* (Accessed January 19, 2022) <https://publications.saskatchewan.ca/api/v1/products/677/formats/994/download>

multiple client interactions as outlined below.

Note: If SHA changes direction on continuous masking, Custody Services would review current practices and adjust based on the results of the risk assessment and consultation of SHA and Public Health.

These enhanced measures, in combination with existing infection prevention and control measures (i.e., physical distancing, risk assessments, hand hygiene, environmental cleaning/disinfection, etc.) are guided by the following principles:

- As the Province re-opens, employees are at a higher level of exposure in the community. This information was evaluated during the risk assessment and considered when implementing suitable control measures, in addition to the consultation from SHA and Public Health.
- Prevention of transmission from employees who may be asymptomatic or mildly symptomatic carriers of the virus to our most vulnerable population.
- Prevention of transmission from clients or visitors who may be asymptomatic or mildly symptomatic carriers of the virus to employees.
- It is important that we continue to conserve PPE and use it responsibly and equitably to maintain a safe environment for our employees, clients, and visitors.

Guidelines for Continuous Masking

The process for employees to receive surgical/procedural mask(s) will be determined per facility, speak to your supervisor for site specific distribution.

1. All employees will continue to perform hand hygiene when they enter the building, frequently throughout their shift, and where indicated.
2. Employees who self-identify as working in the secure envelope of the facility and/or have interaction with clients or visitors, will be provided with a surgical/procedure mask at the start of their shift. Managers/supervisors or another designated point person at the facility will have access to a supply of surgical/procedural masks to provide to employees, when new surgical/procedural masks are necessary. (See below for exceptions)
3. The surgical/procedural mask must be discarded and replaced after eating, going on a scheduled break, when it becomes wet/ moist, damaged, or soiled and discarded at the end of your shift. ³³
4. Employees who supervise outside work are to follow the continuous masking principals and wear a surgical/procedural mask.
5. A surgical/procedural mask is required while travelling through all public/commons areas or while working in shared spaces. Examples include, going to the washroom, or photocopier. When employees are in private workspace for prolonged periods of time, without employee/clients/visitor contact, surgical/procedural masks can be doffed. When employees are required to leave the private workspace, or have interaction with employees/clients/visitors, they would then don a surgical/procedural mask. (Private workspace can be defined as an office or cubical where an employee can continuously maintain at least 2 metres from other employees/clients or visitors.)
6. When employees anticipate working in or travelling through the secure envelope, and/or have interaction with clients or visitors, they will don a surgical/procedural mask.
7. The re-use of surgical/procedural masks is NOT encouraged at this time due to the risk of self-

³³ Saskatchewan Health Authority, Continuous Masking Principals and guidelines (accessed January 19, 2020)
<https://www.saskhealthauthority.ca/system/files/2021-06/CV-19-G0013-Continuous-Masking-Talking-Points-and-FAQs.pdf>

contamination if the process of safely doffing, storing, and re-donning is not followed carefully. Should this change, appropriate training materials for surgical/procedural mask re-use will be provided.

Questions related to personal protective equipment (PPE) requirements may be directed to manager/supervisors. If your manager/supervisors are not able to resolve your question, they will consult with the Occupational Health and Safety Branch, Integrated Justice Services.

Exceptions for Continuous Masking in the Secure Envelope

Exercise Post and Perimeter Vehicles:

Employees will wear a surgical/procedural mask while walking in the secure envelope, to the exercise post or perimeter vehicle. In locations where employees are working prolonged periods of time without client or employee interaction, surgical/procedural masks could be doffed and disposed of once employees have reached the exercise post or perimeter vehicle. When required to return to the area where employees and clients would access, employees will don a surgical/procedural mask. A standardized sanitation process will be implemented for these areas.

Private Offices, Within the Secure Envelope:

Employees that work in an office located in the secure envelope, would be required to wear surgical/procedural mask while in the common spaces where client and employee contact is relevant. When employees are in private offices for prolonged periods of time without client or employee contact, they can doff and dispose of the surgical/procedural mask. When employees are required to leave the office, or have interaction with employees or clients, they would don a surgical/procedural mask. For intermittent users (i.e., those moving between the secure envelope of the facility and/or have interaction with clients, efforts will be made to organize activities to limit repeated exposures on the units/facility in an effort to conserve PPE.)

Guidelines for Source Control Masking – Clients and Visitors

The facilities will set up a one for one supervised daily surgical/procedural mask exchange, ensuring that all parties have their hands sanitized prior to the exchange process. If the surgical/procedural mask become soiled, damaged, or wet it may be exchanged sooner.

1. Mandatory Client Masking Secure Facilities (14-Day Assessment Unit, Isolation Unit, or on a Quarantined Unit):

- Clients must don a surgical/procedural mask during entire admission process and movement until placed in cell.
- Clients must don a surgical/procedural mask whenever out of their cell. (Exception for hygiene and eating.)
- If a quarantined unit happens to be a dorm, the clients must don a surgical/procedural mask at all times (exception for hygiene, eating and sleeping)
- Clients must don a surgical/procedural mask on all external escorts.

2. Mandatory Client Masking Secure Facilities (Non-Designated):

- Clients must don a surgical/procedural mask whenever out of their cell. (Exception for hygiene and eating.) This would include when on exercise together.
- Clients must don a surgical/procedural mask on all external escorts.

3. Mandatory Client Masking Reduced and Open Custody Facilities:

- Clients that are leaving the facility, for any reason, must don a surgical/procedural mask prior to leaving and replace it with a clean surgical/procedural mask once they have returned.
- Clients must don a surgical/procedural mask whenever out of their cell/room or in dorm area. (Exception for hygiene, eating and sleeping).
- Open Custody Facilities will limit community outings to activities that ensure youth/employees avoid contact with members of the broader community. Youth must don a surgical/procedural mask prior to leaving the facility and replace it with a clean surgical/procedural mask once they have returned.

4. Mandatory Client Masking Work Placements, Programs, Internal Movement for “Non-Designated” Clients in Secure Facilities:

- All clients leaving the home non-designated unit for work detail, programming, or other internal facility movement must don a surgical/procedural mask for duration of the activity.
- Clients must don a surgical/procedural mask whenever out of their cell/room. (Exception for hygiene and eating.)

5. Mandatory Client Masking Individuals Entering Custody Services buildings:

- Visitors walking through or working in the facility, will follow the continuous masking principals and don a surgical/procedural mask. (i.e., Central Services, contractors, Doctors, Elders, or visitors)

Appropriate Surgical/Procedural Mask Use

- Ensure the colored side of the surgical/procedural mask is facing out
- Fit the moldable band to the nose bridge. Fit snugly to your face and below chin
- Secure the elastics around your ears
- If using ear protectors, follow the proper guidelines by ensuring they are disinfected or laundered at the end of each shift and that they are positioned properly
- Appropriate use and positioning of ear protectors:



- Do not touch surgical/procedural mask once in position
- If the surgical/procedural mask becomes soiled or damp, replace with a new one
- Surgical/procedural masks can be worn from one unit to another, including the designated Isolation/14-Day Assessment and the Quarantine units. Proper hand hygiene is imperative, wash hands prior to exiting and entering units. Employees can continue to wear the same surgical/procedural mask and eye protection between clients. Gowns and gloves will be removed and changed between clients. Eye protection can be disinfected/discarded after all interactions with

clients suspected/confirmed to have COVID-19 are completed.³⁴

- Where possible, employees should plan their tasks so that they would transition from non-COVID-19 related units to COVID-19 suspected/confirmed designated units. (Ideally this would line up with a break, the surgical/procedural mask would be doffed for the duration of the break and a fresh surgical/procedural mask would be donned when returning to client facing area)
- For intermittent users (i.e., those moving between the secure envelope of the facility and/or interact with clients), efforts will be made to organize activities to limit repeated exposures on the units/facility in an effort to conserve PPE. (i.e., change only when wet, damaged or soiled, when going on a scheduled break and at end of shift)
- It is important to stay hydrated. Efforts should be made to take hydration breaks during regularly scheduled breaks in efforts to conserve PPE use, as surgical/procedural masks must be discarded and replace once removed.

What to Know About Wearing Surgical/Procedural Masks for Extended Periods of Time:

- **Avoid touching the surgical/procedural mask while wearing it**
- Remove the surgical/procedural mask using the appropriate technique; do not touch the front of the mask
- After removal or whenever a used surgical/procedural mask is inadvertently touched, clean hands using an alcohol- based hand rub or soap and water if hands are visibly dirty
- Do not pull the surgical/procedural mask off and put around your chin, neck, or forehead, as this will increase the risk of self-contamination
- Make sure the surgical/procedural mask is covering both your mouth and your nose³⁵

Entering the cell of a client suspected/confirmed to have COVID-19:

- Employees will NOT remove their surgical/procedural mask prior to entering the unit/cell
- Additional PPE will be put on (as outlined above) prior to entering
- When leaving the room,
 - gown and gloves will be removed.
 - Keep surgical/procedural mask on (unless wet, damaged, or soiled).
 - Keep eye protection on if employee will be entering rooms of additional clients suspected/confirmed to have COVID-19; and
 - Disinfect/discard eye protection and perform hand hygiene after all suspected/confirmed to have COVID-19 client interactions have been completed

Entering the cell of a client suspected/confirmed to have COVID-19 where Aerosol-Generating Medical Procedure (AGMP) is being/has been performed:

- Employees will remove and discard their surgical/procedural mask prior to entering the room to put on the required personal protective equipment (N95 respirator, gown, gloves, eye protection)
- When leaving the room/cell, the gown and gloves will be removed
- If the employees will be entering cells of additional clients suspected/confirmed to have COVID-19 where AGMP is being/has been performed prior to leaving the clinical area, the N95 respirator and eye protection will be left on

³⁴ Saskatchewan Health Authority, Continuous Mask Guideline Talking Points and FAQs (Accessed January 19, 2022) <https://www.saskhealthauthority.ca/system/files/2021-06/CV-19-G0013-Continuous-Masking-Talking-Points-and-FAQs.pdf>

³⁵ Saskatchewan Health Authority, Continuous Mask Guideline Talking Points and FAQs (Accessed January 19, 2022) <https://www.saskhealthauthority.ca/system/files/2021-06/CV-19-G0013-Continuous-Masking-Talking-Points-and-FAQs.pdf>

- The N95 respirator and eye protection will be discarded, and hand hygiene performed only after all interactions with clients requiring an AGMP have been completed

Incorrect Surgical/Procedural Mask Use

- Do not tuck the surgical/procedural mask under your chin, place on top of your head, or hang it by one ear
- Do not let your nose stick out of the top of the surgical/procedural mask
- Do not reuse single-use surgical/procedural masks
- Incorrect use and position of ear protectors:



Review of Proper Donning and Doffing

Proper donning and doffing is critical to prevent possible cross contamination.

To **don (put on)** a surgical/procedural mask:

- Wash hands thoroughly with soap and water or use hand sanitizer where water is not available.
- Holding only the ear loops or straps, place a loop around each ear or tie straps. (Where pleated, pleats are pointed down toward chin.)
- To eliminate significant gaping, pull the top of the surgical/procedural mask over your nose and the bottom over your mouth and chin.
- Once the surgical/procedural mask is adjusted, try, and avoid touching the surgical/procedural mask or face.
- Perform hand hygiene.

To **doff (remove)** surgical/procedural mask:

- Move to an assigned area for doffing, where an open top garbage bin is present.
- Wash hands thoroughly with soap and water or use hand sanitizer where water is not available.
- Use both ear loops or straps and gently lift/untie and remove the surgical/procedural mask. Immediately place the surgical/procedural mask in open top garbage bin.
- Perform hand hygiene.

Best Fit for Single Surgical/Procedure Mask, Considerations

Proper fit of the surgical/procedural mask is a key factor in its effectiveness to protect the wearer from being exposed to COVID-19. In addition to guidance provided in this document, these factors should be considered.³⁶

³⁶ Saskatchewan.ca, How to Protect Yourself (Access date January 19, 2022): <https://www.saskatchewan.ca/government/health-care-administration->

- Ensure the mask completely covers the nose, mouth and chin of the wearer to ensure the face lays snug to the face by:
 - Ensuring where the surgical/procedural mask has a flexible nosepiece, that this portion of the mask is molded over the bridge of the nose to prevent air leaking upwards;
 - Ensuring there are no gaps between the wearer’s face and the mask;
 - Ensuring there are no gaps at the top, sides and bottom of the mask;
 - Checking for air leaks and adjust, as necessary.
- Where the surgical/procedural mask does not or cannot meet the criteria above, different styles / brands of surgical/procedure should be explored.
- To further improve mask fit, consider these options:
 - Tie knots or twist the ear loop to reduce gaps on sides of mask, and tuck in sides of mask, as shown in the photo below;



Figure 1: CDC, Maximizing Fit for Cloth and Medical Procedure Masks to Improve Performance and Reduce SARS-CoV-2 Transmission and Exposure, 2021

11.3 Table 1: Poster - Aerosol Generating Medical Procedure in Progress



**AEROSOL GENERATING
MEDICAL PROCEDURES
IN PROGRESS!**



saskatchewan.ca/COVID19
April 5, 2020

11.3 Table 2: Poster - Aerosol Generating Medical Procedure

COVID-19

AGMP COMPLETED AT:

SETTLE TIME:

MINUTES

(IF SETTLE TIME NOT IDENTIFIED USE 120 MINUTES)

SAFE TO ENTER ROOM AT:



saskatchewan.ca/COVID19
April 5, 2020

11.4 Table 1: Courts and Prisoner Transport - Standard PPE

Table 1. Recommended personal PPE during the outbreak of COVID-19 outbreak, according to the setting, personnel, and type of activity^a

Setting	Target personnel or clients	Activity	Type of PPE or procedure
Courthouses and Transport Vans			
Courts Services General			
Courtroom	Deputy Sheriffs	Escorting accused with suspected/confirmed COVID-19 in secure areas within courthouse Providing <u>direct hands-on care</u> to suspected/ confirmed COVID-19 clients	Surgical/Procedural mask Gloves Face shield/sealed goggles Gown
	Court employees as well as judiciary	Performing regularly scheduled tasks, which may include taking payment from clients, reading information	Follow the direction provided in Public Health Orders Maintain spatial distance of at least 2 metres
	Cleaners	Entering the holding cells, transports vans and secure passages with suspected/confirmed COVID-19 client	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles (If risk of splash from organic material or chemicals) Boots or closed work Shoes as per SDS sheet
	Visitors ^b	Entering the courthouse	Follow the direction provided in Public Health Orders Mask required if there are symptoms

Unrestricted areas of transit (e.g., halls, corridors, stairwells)	All staff, including Deputy Sheriffs as well as judiciary	Any activity that <u>does not involve direct hands-on care and can maintain 2 metres</u> with clients	Follow the direction provided in Public Health Orders Maintain spatial distance of at least 2 metres
Administrative areas	All staff, including Deputy Sheriffs as well as judiciary	Administrative tasks that <u>does not involve direct hands-on care and can maintain 2 metres from client</u>	Follow the direction provided in Public Health Orders Maintain spatial distance of at least 2 metres
Holding cells			
Holding cells	Deputy Sheriffs	Physical search/ examination of client with suspected/ confirmed COVID-19	Surgical/Procedural mask Gown Gloves Face shield/sealed goggles
	Deputy Sheriffs	Physical search/ examination of client without suspected/ confirmed COVID-19	PPE according to normal standard precautions and risk assessment
	Clients with respiratory symptoms	Any	Provide Surgical/Procedural mask if tolerated Immediately moving client to an isolated room or separate area away from others; if this is not feasible, ensure spatial distance of 2 metres from other clients
	Clients without respiratory Symptoms	Any	Follow the direction provided in Public Health Orders Standard Universal Precautions

Holding cells (Continued)	Cleaners	After and between search/examinations of clients with suspected/confirmed COVID-19	<p>Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)</p> <p>Face shield/sealed goggles (if risk of splash from organic material or chemicals)</p> <p>Boots or closed work Shoes as per SDS sheet</p>
	Clients with respiratory Symptoms	Any	<p>Provide Surgical/Procedural mask if tolerated</p> <p>Immediately move the client to an isolation room or separate area away from others; if this is not feasible, ensure spatial distance of at least 2 metres from other clients</p>
Admitting area	Deputy Sheriffs	Preliminary screening not involving direct contact ^c with suspected/ confirmed COVID-19 Clients	<p>Follow the direction provided in Public Health Orders</p> <p>Maintain spatial distance of at least 2 metres</p>
	Clients with suspected/ confirmed COVID-19	Any	<p>Maintain spatial distance of at least 2 metres</p> <p>Surgical/ Procedural mask if tolerated</p>
	Clients without suspected/ confirmed COVID-19	Any	<p>Follow the direction provided in Public Health Orders</p> <p>Maintain spatial distance of at least 2 metres</p>

Points of entry			
Administrative areas	All employees	Any	<p>Follow the direction provided in Public Health Orders</p> <p>Maintain spatial distance of at least 2 metres</p>
	Cleaners	Cleaning the area where clients suspected/confirmed COVID-19 are being screened	<p>Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)</p> <p>Face shield/sealed goggles (if risk of splash from organic material or chemicals)</p> <p>Boots or closed work Shoes as per SDS sheet</p>
Temporary isolation area	Cleaners	Cleaning isolation area	<p>Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves)</p> <p>Face shield/sealed goggles (if risk of splash from organic material or chemicals)</p> <p>Boots or closed work Shoes as per SDS sheet</p>
	Any employees, including Deputy Sheriffs as well as judiciary	Assisting client/ employees/ judge suspected/confirmed COVID-19 transported to a health care or custody center	<p>Surgical/Procedural mask Gown Gloves Face shield /sealed goggles</p>
	Any employees, including Deputy Sheriffs as well as judiciary	Entering the isolation area, <u>does not involve direct hands-on contact and can maintain 2 metres from client</u>	<p>Surgical / procedural mask Gloves</p>

Ambulance or transfer vehicle	Deputy Sheriffs	Transporting suspected/confirmed COVID-19 clients to the referral health care facility or custody center	Surgical / procedural mask Gown Gloves Face shield /sealed goggles
	Driver	Involved only in driving the client with suspected/confirmed COVID-19	Maintain spatial distance of at least 2 metres Surgical/Procedural mask Gown Gloves Face shield/sealed goggles
		Assisting with loading or unloading client with suspected/confirmed COVID-19	Surgical/Procedural mask Gown Gloves Face shield/sealed goggles
		No <u>direct hands-on care or contact</u> with client suspected/confirmed COVID-19	Surgical/Procedural mask
	Client with suspected COVID-19	Transport to the referral health care facility or custody center	Surgical/Procedural mask if tolerated
	Cleaners	Cleaning after and between transport of clients with suspected/confirmed COVID-19	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles (if risk of splash from organic material or chemicals) Boots or closed work Shoes as per SDS sheet
Special considerations for rapid-response teams responding to client disturbance^d			
Holding cells, writs of possession orders, transport transfer or secure passages within courthouse			

Anywhere	Deputy Sheriffs Rapid-response team or Emergency Response team	Physically responding to client(s). Assume client is suspected/ confirmed COVID-19 positive	Surgical/Procedural mask Disposable gloves Face shield/sealed goggles Standard PPE
	Client(s) involved in disturbance suspected/ confirmed COVID-19	Post-restraint- Where possible, client(s) will be given sanitary wipes to clean self	Surgical/Procedural mask if tolerated Spit hood, according to protocol
	Cleaners	Cleaning affected suspected/confirmed COVID-19 area(s) post- restraint	Surgical/Procedural mask Gown Gloves as outlined in Safety Data Sheet for product (as a minimum requirement, disposable gloves) Face shield/sealed goggles (if risk of splash from organic material or chemicals) Boots as per SDS sheet
	Writs of Possession	All locations	Surgical/ Procedural mask Gloves Face shield/sealed goggles *Note: If physical contact with a suspected/ confirmed client without a gown, changing of uniform is required.

a In addition to using the appropriate PPE, frequent hand hygiene and respiratory hygiene should always be performed. PPE should be discarded in an appropriate waste container after use, and hand hygiene should be performed before putting on and after taking off PPE.

b The number of visitors should be restricted. If visitors must enter a COVID-19 client’s space, they should be provided with clear instructions about how to put on and remove PPE and about performing hand hygiene before putting on and after removing PPE; this should be supervised by a Deputy Sheriff.

c Not applicable.

d All rapid-response team members must be trained in performing hand hygiene and how to put on and remove PPE to avoid self-contamination. For PPE specifications, refer to WHO’s [disease commodity package](#).^{37 38}

³⁷ World Health Organization, Rational Use of Personal Protective Equipment for Corona Disease (COVID19) March 19, 2020; (Access date: March 2020) <https://apps.who.int/iris/handle/10665/331498>

³⁸ Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Primary Care March 2020; (Access date: April 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

11.5 Table 1: Coroner’s Services - Standard PPE

Table 1. Recommended personal PPE during the outbreak of COVID-19 outbreak, according to the setting, personnel, and type of activity^a

Setting	Target personnel or clients	Activity	Type of PPE or procedure
Field setting			
Any, including urban or rural residential, commercial, industrial, or out of doors			
Field setting	Community Coroner	Providing <u>direct hands-on care</u> to deceased confirmed COVID-19 clients	Do not attend scene. Follow procedure for home investigation
		Providing <u>direct hands-on care</u> to the deceased	Surgical/Procedural mask Gown or Tyvex suit, as appropriate Latex Gloves Face shield/sealed goggles
		Information gathering through coordination with others, i.e., police, EMS, family members	Follow the direction provided in Public Health Orders Maintain spatial distance of at least 2 metres
Autopsy facilities			
Autopsy room	Health care workers	Physical examination of client	Follow standards as outlined by SHA
Special considerations for coroners assisting with public health investigations^d			
Community			
Anywhere	Community coroners	Interview suspected/ or confirmed COVID-19 clients or their contacts	Follow the direction provided in Public Health Orders Remote interview is the preferred method
		In-person interview of suspected/ confirmed COVID-19 clients <u>without direct care or contact</u>	Interviews should be conducted outside the house or outdoors and when possible. Maintain spatial distance of at least 2 metres. If this is not possible, a Surgical/ Procedural mask is required

Anywhere (Continued)	Community coroners (Continued)		confirmed or suspected COVID-19 clients should wear a Surgical/Procedural mask if tolerated
		In-person interview with asymptomatic contacts of suspected/confirmed COVID-19 clients	<p>Follow the direction provided in Public Health Orders</p> <p>Maintain spatial distance of at least 2 metres</p> <p>The interview should be performed outside the house or outdoors. If it is necessary to enter the household environment, use a thermal imaging camera to confirm that the individual does not have a fever, maintain spatial distance of at least 2 metres and do not touch anything in the household environment</p>

a In addition to using the appropriate PPE, frequent hand hygiene and respiratory hygiene should always be performed. PPE should be discarded in an appropriate waste container after use, and hand hygiene should be performed before putting on and after taking off PPE.

b Not applicable

c Not applicable

d All coroners must be trained in performing hand hygiene and how to put on and remove PPE to avoid self-contamination.

For PPE specifications, refer to WHO’s [disease commodity package](#).^{39 40 41}

³⁹ World Health Organization, Rational Use of Personal Protective Equipment for Corona Disease (COVID19) March 19, 2020; (Access date: March 2020) <https://apps.who.int/iris/handle/10665/331498>

⁴⁰ Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Primary Care March 2020; (Access date: April 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

⁴¹ Saskatchewan Health Authority, Summary of PPE Recommendations for Patients Suspected or Confirmed to have COVID-19 in Acute Care, 2020; (Access date: April 9, 2020) <https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/information-for-health-care-providers/ppe-infection-prevention-and-control>

12. De-escalation of COVID-19 Measures

On and after February 28, 2022, when Public Health measures are lifted, all facilities will continue to abide by Universal Precautions as found within this document and Covid-19 guidance as found on Taskroom.

Screening measures for clients, visitors and contractors, which may include temperature checks for entry, should cease in all facilities.

Should the employer wish to continue PPE measures, such as masking, a risk assessment made in review with the OHS Branch must support this decision and be available upon request. Clients and visitors can be recommended to wear a mask in these settings, but it is not required for entry, with the exception of judiciary discretion within courtroom settings.

Custody facilities will transition to dependance on Divisional Directive 612 Communicable Disease Outbreak. Transition is modelled after de-escalation measures set forth by Saskatchewan Health Authority COVID-19 Outbreak Guidance⁴² and Interim Infection and Control Guidance (IPAC) SHA De-escalation of COVID-19 matrix and should be used in conjunction with the Custody Services Roadmap for Pandemic Restrictions.

Outbreak status and de-escalation measures matrix, Custody Services			
Phase 0: High Risk Facility is listed in outbreak status	Phase 1: Moderate Risk Outbreak declared over by Public Health and for next 3 weeks	Phase 2: Low risk At least 3 weeks after outbreak declared over	Phase 3: Endemic for COVID-19 declared
Outbreak signage posted at all entrances, see 12.1			Assessment to sunset the requirements set out by this document will occur.
Self-screen questions posted at all entrances, see 12.2			
Cohorting of staff groups and offender groups, as possible			
Continuous masking required, see Table 11.2 in this document	Masking may be required in designated areas, see Table 11.1 in this document	Masking may be required in designated areas, see Table 11.1 in this document, and as based on risk	
Surgical/procedure mask required of all guests on-site. Can be provided upon sign-in.	Guests are strongly recommended to mask but are not required.		
All persons required to perform hand hygiene upon site entry	All persons encouraged to perform hand hygiene upon site entry		
No food sharing			

⁴² Saskatchewan Health Authority (SHA). SHA COVID-19 Outbreak Guidance for Long-Term Care Homes 2022. Revised: Feb.9, 2022, version 8. Last accessed on February 23, 2022: https://www.saskhealthauthority.ca/system/files/2021-06/CV-19-G0110-Outbreak-Guidance-LTC_0.pdf

Table 12.1 Outbreak Signage



Health Screen Self-Assessment Questionnaire

**If you answer YES to any question,
please stay home for the safety of our residents and staff**

**1. Do you have any of the new or worsening symptoms,
not attributed to seasonal allergies?**

- Cough
- Hoarse voice
- Runny nose or sneezing
- Shortness of breath, difficulty breathing
- Sore throat, difficulty swallowing
- Diarrhea
- Muscle aches
- Malaise
- Loss of sense of smell or taste
- Extreme fatigue
- Nasal congestion
- Chills

**2. Have you tested positive for COVID-19 within the last
five days?**

**3. Have you tested positive for COVID-19 and are still
symptomatic?**