


Guidance Document for COVID-19



Title: Women & Children's Program – COVID-19 Positive Patient/Positive Essential Care Partner (ECP) Considerations	Version #: 1
Approved: COVID-19 Incident Manager Signature: 	Approval Date: February 3, 2022
<i>This document is intended to provide guidance to staff/professional staff during COVID-19</i>	

1. PURPOSE

To clarify expectations for ECP access to COVID-19 positive patients and for COVID-19 /suspect positive ECPs to attend a department in the Women & Children's (W&C) Program.

2. GUIDELINES (e.g. background, definitions, procedure, etc.)

Due to the provincial guidance from the Ministry of Health, COVID-19 Integrated Testing & Case, Contact and Outbreak Management Interim Guidance: Omicron Surge (January 13, 2022), all household members of a COVID positive patient should not attend a high risk health care setting (including hospitals) for 10 days. Given our PFCC model, the following considerations for COVID positive patients/ECPs in the Women & Children's Program include:

Maternity Centre

- Patients are encouraged to attend their appointment alone and have an ECP join the appointment virtually.

Labour & Delivery

- ECPs that are already in the delivery room when a patients' test results COVID positive;
 - Will be allowed to remain in the room until delivery, if the patient is admitted for labour and birth; no movement outside of the room will be permitted
 - Will be asked to leave the premises if the patient is not anticipated to deliver
- ECPs that arrive to the Labour & Delivery entrance after it is known that the patient is COVID positive;
 - Will fail screening due to self-isolation, but will be allowed if not symptomatic. As per Infection Prevention and Control (IPAC), symptomatic to include respiratory symptoms not resolving x 24 hours/gastrointestinal symptoms not resolving x 48 hours,. This should only be explored if the patient is anticipated to deliver.

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- ECPs that arrive to the Labour & Delivery entrance that are COVID positive themselves:
 - If symptomatic, will not be permitted access. An alternate ECP should be explored. As per IPAC, symptomatic to include respiratory symptoms not resolving x 24 hours/gastrointestinal symptoms not resolving x 48 hours.
 - If asymptomatic, will require Director approval through the Manager on days and Administrative Coordinator after hours to enter the building. This should only be explored if the patient is anticipated to deliver. The respective W&C department must inform IPAC if the patient has had a visit with a COVID+ ECP to ensure appropriate case management of the patient.

Maternal Newborn

- If symptomatic, will not be permitted. An alternate ECP should be explored.
- If the postpartum patient or newborn are acutely ill, ECP may room in to assist in caring for the newborn. In the event that the patient is COVID positive, rooming in to care for newborn will be determined on a case-by-case basis and will require Director approval through the Manager on days and Administrative Coordinator after hours.

NICU

- ECPs who are suspect/COVID positive will require an exception in order to visit the NICU.
 - Arrange virtual visit or,
 - Select alternate ECP who will pass the COVID screening.
 - Essential Care Partner Waiver: Risk of Visiting COVID-19 Patient (available on the "COVID-19 Intranet Portal") is required to be completed
- Exceptions will be considered on a case-by-case basis and will require Director approval through the Manager on days and Administrative Coordinator after hours
 - ECPs must be asymptomatic to visit,
 - Consult IPAC to review symptomology and timeline of infectious period,
 - Determine priority level of visit:
 - Low:** Baby expected to be transferred/discharged less than 24hrs = postpone
 - Moderate:** Baby expected to be in NICU for greater than 24 hours = consider visit soon or for review to the following day (not after hours)
 - High:** Baby is critically unstable/requiring imminent transfer/palliative or end of life
- Once approval is obtained:
 - If appropriate, transport infant in isolette to mother's room on 1C (based on stability of newborn and ability to monitor baby off unit)

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- Visit in NICU will only be permitted in an isolation room
 - Visit will be coordinated by the Care Partner Liaison/Manager or designate to accompany ECP from 1C or L&D doors to the NICU
 - Entrance to the unit will be via the back of the unit (entrance closest to the isolation rooms)
 - ECP must be in full PPE at all times (transport and during visit)
 - ECP will not be permitted to leave room and must be escorted out (either back to 1C or out of building via L&D entrance)
 - Curtains should be closed on all other infants in the NICU while COVID positive ECP passes through department
 - Consider placing other infants in isolettes to minimize risk if warranted
 - 3 hours duration with 1 access per day (unless condition warrants otherwise)
 - Access to be re-evaluated daily
- The respective W&C department must inform IPAC if the patient has had a visit with a COVID positive ECP to ensure appropriate case management of the patient.

Paediatric Inpatient

- Paeds can allow 1 household contact ECP to remain self-isolating in the room at all times.
- If the ECP is COVID positive they may only be permitted if they remain asymptomatic. If they develop symptoms they must leave and identify an alternate ECP that is asymptomatic.
- If an alternate ECP cannot be identified then the symptomatic COVID positive ECP will be considered with Director approval on an individual basis AND provided they are well enough to provide for the care and supervision of the child.
- Should they develop symptoms requiring medical care or treatment they would not be able to continue as ECP.
- ECPs must strictly adhere to room isolation and PPE requirements.

CAMHU

- ECPs for COVID positive patients will be considered on a case-by-case bases. All exceptions will require Director approval through the Manager or Administrative Coordinator after hours.
- ECPs who are suspect/COVID positive will require an exception to visit. Exceptions will be considered on a case-by-case basis and will require Director approval through the Manager on days and Administrative Coordinator after hours.

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3. RELATED POLICIES, PRACTICES AND/OR LEGISLATIONS

Essential Care Partner Access in COVID-19 Situations

Guidance Document Essential Care Partner and Care Partner Guidelines