

SARS Provincial Operations Centre

Questions and Answers April 30, 2003

All health care providers and health care facilities

Q1. What level of protection should a health care or other worker undertake when providing care to a client who has failed Section C only on the SARS Screening Tool? What if the client has failed Section C, with only one symptom displayed?

A1. Full protection is currently recommended; this includes wearing a N95 or equivalent mask, gloves, gown and protective eye wear.

Q2. Many of our staff have low-grade illness and no fever and, therefore, are failing the SARS Screening Tool on the basis of Section C only. Must they be excluded from work?

A2. Yes. It should be noted that staff who fail the SARS Screening Tool based on Section C only, may be referred to Occupational Health or for medical assessment. This may result in their returning to work prior to the end of the 72-hour period. In addition, the institution's CEO or Chief of Staff may make an exception to the directive and allow staff to work with protection, if necessary for patient care.

Q3. What should be done with an individual who displays a symptom but has a chronic condition that has a similar symptom?

A3. If a symptom, such as a cough, is not normal for an individual, that individual would fail the SARS Screening Tool. For example, if an asthmatic has a cough made worse by an allergen this is "normal" for the individual. However, if the cough is productive, this would not be considered normal.

Q4. Given the complexity of the SARS Screening Tool, who should use it?

A4. The Science Advisory Committee recommends that, whenever practical, workers use the Screening Tool. However, if it is not practical, the Committee recommends using precautionary measures, such as frequent hand washing and wearing mask/gloves and gowns, if possible.

Q5. If someone in a facility outside of the GTA fails Section A of the SARS Screening Tool, does the individual have to be quarantined?

A5. Yes.

One of the most important containment aspects of the SARS Screening Tool is to quarantine individuals who fail Section A. Individuals that fail Section A, whether they are within or outside of the GTA area, are to be quarantined and the local Public Health Unit notified to make a determination regarding continued quarantine.

Q6. If an individual fails Section C of the SARS Screening Tool, should he/she stay home for up to 72 hours?

A6. Yes. Individuals who fail Section C of the SARS Screening Tool should stay home for up to 72 hours. These individuals should:

- self-isolate;
- monitor their temperatures twice daily and their symptoms regularly; and
- follow-up with their family doctor, Occupational Health or TeleHealth Ontario - this is particularly important if the symptoms worsen during this time period.

Once the 72-hour isolation period is completed, these individuals should take the SARS Screening Tool again. Upon passing the second screening, the individuals may resume their regular activities.

Community Care Access Centres (CCACs)

Q1. Should CCAC and service provider staff wear full protective gear when coming into contact with clients who share living quarters with others who are on voluntary home isolation?

A1. Household members who are on home isolation should be wearing masks whenever they are in the same room with others. If CCAC and/or service providers are uncertain that this procedure is being followed then, yes, they should wear full protective gear (mask, gloves, gown and protective eye wear) when providing in-home services.

Q2. Directive CC03-03 states that CCAC clients, community-referred clients and CCAC staff who fail the SARS Screening Tool will be directed to contact TeleHealth Ontario. This is no longer consistent with the instructions provided in the SARS screening tool dated April 23, 2003. What is the proper procedure?

A2. The SARS Screening Tool dated April 23, 2003 indicates that people who are sent home for up to 72 hours should follow up with their family doctor, Occupational Health or TeleHealth Ontario.

Q3 Can beds in facilities that have registered for the Sustainability Program be used for 1A crisis placements?

A3. Yes. Facilities that register with the Sustainability Program immediately make all beds in the facility, including preferred beds, available for 1A crisis placement. In addition, during the term of the facility's registration, beds remain available for all other placements.

Long-Term Care Facilities

Q1. Should long-term care facilities require all visitors to wear masks while in the facility?

A1. No. However there are times when a resident's condition may indicate that a visitor should take this precaution.

Q2. Should long-term care facilities be screening ambulance and medical transportation services employees when they enter the facility?

A2. No. It is not necessary for long-term care facilities to screen ambulance and medical transportation services staff. Ambulance and medical transportation services employees are being screened by their employer at the beginning of each shift or work period. Staff will have a sticker on their identification card to indicate that they have been screened.

Q3. How do facilities apply for reimbursement for protective supplies?

A3. Facilities should use the same process utilized for the High Intensity Needs Fund (HINF) to submit costs for reimbursement relating to SARS protective supplies. Note that the HINF process is being used here, not the fund itself.

Q4. Can employees of long-term care facilities self-screen using the new SARS screening tool of April 23, 2003?

A4. Employees can self-screen as they enter the facility for work using the SARS screening tool, but a responsible screener must still review the forms at every shift change and the forms are to be kept at the facility.

Q5. May long-term care facilities now allow residents to have more than one visitor at a time?

A5. Facilities have been allowing more than one visitor at a time on compassionate grounds.

Hospitals

Q1. Can staff working in a hospital unit closed due to unprotected SARS exposure also work in other facilities?

A1. No. These staff are under working quarantine and will be monitored by Public Health. However, once the unit is open, staff should not be constrained from working elsewhere.