

DDD Notice No.21158

OCMOH Memo on IPAC Measures

December 30, 2021

Dear Pharmacy,

Thank you very much for your tireless work to test and vaccinate during the COVID-19 pandemic. It is making a substantial difference in our response.

I am writing to remind you of the critical importance of reviewing and ensuring adherence to IPAC measures, in particular when testing individuals for COVID-19 in your pharmacy. As you know, the Omicron variant is highly transmissible and spreading rapidly in all areas of Ontario. Today's laboratory data show that approximately 8.5K tests were done by pharmacies and 44% of those were positive – an extremely high percentage.

Participating Pharmacies Providing Symptomatic COVID-19 Testing:

Below is a summary of the key points which apply to all participating community pharmacies in Ontario who are providing direct care to or interacting with suspected, probable or confirmed cases of COVID-19 for Publicly Funded COVID-19 Testing Services in Ontario Pharmacies.

Key Reminders:

- Health care providers and workers should perform frequent hand hygiene with soap and water or alcohol-based hand rub (ABHR) (minimum 70% alcohol) (when hands are not visibly soiled) for a minimum of 15 seconds.
- For the individual collecting specimens, this means personal protective equipment (PPE) for Droplet/Contact Precautions in accordance with [Directive # 1](#) which include:
 - Well-fitted surgical/procedure mask (i.e., medical mask); or non-fitted N95 respirator (or equivalent)
 - Eye protection (i.e. face shield, goggles)
 - Gloves; and
 - Gown.
- Pharmacies must have a separate, designated area for COVID-19 specimen collection, which is separate from areas for medication dispensation and flu/COVID-19 vaccine clinics occurring concurrently, to minimize congregation of people in the store.

Required IPAC Precautions:

1. Physical environment

- Pharmacies must have a separate, well ventilated, designated area for COVID-19 specimen collection, which is separate from areas for medication dispensation and flu/COVID-19 vaccine clinics occurring concurrently. Consider testing individuals outdoors or in personal vehicles. Recommendation for room set up include:
 - Single room with a door;
 - Optimize ventilation in the testing space (e.g. window open, adequate air changes, HEPA filtration unit, negative air flow);
 - Storage of test kits and supplies kept in a designated, clean space.
 - ABHR and disinfectant wipes at point of entry and point of care.
 - Ensure additional time/resources incorporated for cleaning of frequently touched surfaces within the testing room between each patient.
 - Ensure appropriate space with ABHR to don and doff PPE with regular waste management pick-ups on a schedule.
- The space should be designed such that physical distancing of 2 metres between patients/customers is maintained at all times if possible. Physically distancing between symptomatic patients will not eliminate all risk.
- Separate entrance and exit for those entering the testing area (as opposed to the symptomatic patient walking through the pharmacy retail space). Patients should enter the pharmacy through a point of entry from the outdoors (as opposed to walking through commercial spaces for entry) whenever available.
- Implement ways to minimize traffic flow throughout the retail space, (e.g. physical markings, limiting capacity inside the store, creating unidirectional flow, separate points of entry/exit are preferred where possible).
- Perform routine environmental cleaning. All common areas should be regularly cleaned and disinfected at a minimum of a daily frequency.
 - After any patient contact, surfaces (i.e., areas within 2 metres of the patient, including specimen collection area) should be cleaned and disinfected as soon as possible and always in between patients, allowing for sufficient contact time for the disinfectant used.

2. Hand Hygiene

- Practice frequent hand hygiene. ABHR stations should be readily available at the entrance as well as inside the specimen collection area to promote hand hygiene.
- Health care providers and workers should perform frequent hand hygiene with soap and water or ABHR (minimum 70% alcohol) (when hands are not visibly soiled) for a minimum of 15 seconds.
- Hand hygiene should be performed before putting on PPE for specimen collection and after taking off PPE.
- If hands are visibly soiled, hand washing with soap and water must be performed prior to applying alcohol-based hand rub.

3. Masks/Face Coverings

- All individuals inside the pharmacy must wear a mask or face covering in a manner that covers their mouth, nose and chin (compliance with limited exceptions).
- Individuals who are symptomatic for COVID-19 or who have a recent exposure and are entering the pharmacy for the purpose of testing must be informed to arrive wearing at least a surgical/procedure mask (e.g., medical mask). If the individual is not wearing a surgical/procedure mask upon arrival, they should be provided a surgical/procedure mask.

4. Ventilation

- Optimize ventilation within the pharmacy to maximize airflow. This may include increasing outdoor air ventilation (minimize recirculation), increasing HVAC filter efficiency and re-directing air flow from AC units and fans at head level. Refer to PHO's Resource on [Heating, Ventilation and Air Conditioning \(HVAC\) Systems in Buildings and COVID-19](#).

5. Testing Appointment Times

- Minimize the need for patients and other visitors to wait for testing by booking appointments in advance for on-site specimen collection. Patients do not need an appointment to pick up or drop off samples for self-collection.
- Patients must be informed to arrive no more than 5 minutes prior to their scheduled appointment time and to wait outside the pharmacy until their appointment time.
 - Avoid queuing. If queuing is necessary, physical markers should be placed in a dedicated and separate waiting area or line up to support physical distancing.
- Adequate time should be included between individuals being tested to allow for cleaning and to avoid queuing.

6. Use of Personal Protective Equipment

- All individuals who are participating in the specimen collection process must wear appropriate PPE for their activities. For the individual collecting specimens, this means PPE for Droplet/Contact Precautions which include:
 - Well-fitting surgical/procedure mask (i.e., medical mask) or non-fitted N95 respirator or equivalent;
 - Eye protection (i.e. face shields, goggles);
 - Gloves; and
 - Gown.
- Individuals (e.g. health care providers, other workers as required) who require the use of PPE must be provided with appropriate PPE and be trained at regular intervals in accordance with [Directive # 1](#).
- Cross-contamination between clean and soiled PPE (such as during storage, putting on/removing, and the use of PPE) must be avoided.
- PPE should be changed between patients and disposed of properly after use. Extended use of PPE will not be appropriate in most instances as some "symptomatic" patients may be negative and others positive. There is a potential

of self-contamination of staff. There is also a risk of cross contamination between patients during the testing process. Eye protection may be reused after it has been properly cleaned and disinfected.

7. Staffing

- Establish dedicated testing staff to minimize exposures.

Please ensure your pharmacy understands and practices the required IPAC measures. The Ontario College of Pharmacists provides additional resources on COVID-19 for pharmacy professionals and can be accessed online [here](#). Please continue to monitor your ONEMail account for updates.

Thank you,
Dr. Kieran Moore
Chief Medical Officer of Health