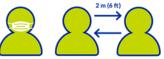
Bulletin #174: COVID-19 Information

Oct. 8, 2021







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Amendments to Vaccine Policy

As you know, the COVID-19 Vaccination Policy for Government of New Brunswick (GNB) employees took effect on September 7, 2021. Yesterday we received an amendment to the GNB Vaccination Policy which is communicated below.

Horizon is committed to the health and safety of its employees, physicians, volunteers, patients, and clients. The GNB policy, developed in consultation with Public Health, contributes to our fight against COVID-19 and unites us in our common mission to ensure the wellbeing of all New Brunswick.

As part of the ongoing effort to ensure the safety of GNB workplaces for employees and members of the public, Cabinet has approved the following amendments to the vaccination policy for employees in Parts I, II, III and IV effective October 8, 2021:

1. Mandatory vaccines

Health care workers will have six weeks (until November 19, 2021) to provide Employee Health Services or their designate with proof that they are fully vaccinated against COVID-19 if they have not already done so. This six-week period provides sufficient time to receive two doses.

Note: During the six-week notice period, health care workers who have not provided proof of full vaccination will still be required to complete rapid testing three times per week and wear a mask at all times when at work.

• A health care worker (without a valid medical exemption for the COVID-19 vaccine supported by a medical certificate) who has not provided proof of full vaccination by November 19, 2021 will be placed on leave without pay.

2. <u>Leave for unvaccinated health care workers when</u> <u>isolating during six-week notice period</u>

Public Health requires unvaccinated individuals to self-isolate while waiting for their COVID-19 test result if they have two or

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more symptoms or when they have been in close contact with a COVID-19 case.

Therefore, during the six-week notice period, **unvaccinated health care workers** (without a valid medical exemption supported by a medical certificate) who must isolate because either:

- they have two or more symptoms and are waiting for their test result; or
- they were directed by Public Health to isolate because they have been in close contact with a COVID-19 case will be placed on leave without pay for the duration of their isolation period.

Early in the pandemic, GNB directed that health care workers be placed on paid leave when required to self-isolate by Public Health because circumstances were largely beyond the health care worker's control. Now, with the introduction of vaccines, health care workers do control whether they will be required to self-isolate under certain circumstances. Absences due to the refusal to get vaccinated are avoidable and create unnecessary strain on our operations and work colleagues.

Please note that emergency leave provisions in collective agreements and non-bargaining policies will not apply in these isolation cases during the six-week period since the health care worker's isolation is not an unexpected event given current circumstances and is due to the health care worker's personal









choice

not to be vaccinated. It is within the health care worker's control (except for the medically exempt) to get vaccinated and avoid potential isolation periods following close contact with COVID-19 cases.

Similarly, quarantine leave provisions will not apply. It is within the health care worker's control to get vaccinated and avoid potential isolation periods following close contact with COVID-19 cases.

Vacation leave and the use of banked overtime will not apply either since they have to be pre-approved by the supervisor subject to operational requirements.

Paid sick leave will only apply if the health care worker is sick and the health care worker provides a supporting medical note.

If Public Health adds other circumstances where unvaccinated persons would be required to isolate while vaccinated persons would not, the same directive will apply.

The <u>GNB site for the vaccination policy</u> will be updated soon to reflect these amendments to the policy.

The vaccines work, as demonstrated by the fact that the vast majority of new COVID-19 cases are contracted by unvaccinated individuals. We all need to do our part to help reduce the risk of spreading the virus to vulnerable and youth populations and the

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number of hospitalizations which are interrupting or reducing other important medical care.



ID-IPC Personal Protective Equipment (PPE) required when caring for Suspect/Confirmed COVID-19 Patients

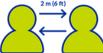
Prior to every patient interaction, healthcare workers (HCWs) have a responsibility to perform a Point of Care Risk Assessment (PCRA) to assess the infectious risk posed to themselves and others. A PCRA will help determine the correct PPE required to protect the HCW in their interaction with the patient and patient environment.

The use of Droplet/Contact Precautions (medical grade face mask, gown, gloves, eye protection) are recommended for all HCWs when caring for patients with suspect or confirmed COVID-19.

Full Precautions are followed when caring for suspect or confirmed COVID-19 patients and aerosol-generating medical procedures (AGMPs) are being performed. A fit-tested and seal-checked N95 respirator is worn in place of a medical grade face mask in addition to gloves, gown, and eye protection.

An AGMP is a medical procedure that can generate aerosols as a result of artificial manipulation of a person's airway. The risk









of transmission of infection may increase during AGMPs due to the potential to generate a high volume of respiratory aerosols that may be propelled over a longer distance than that involved in natural dispersion patterns.

To prevent transmission of infection associated with aerosols produced by AGMPs such as endotracheal intubation/extubation, CPR, etc. the <u>Infection Prevention and Control Guidance for Performing an Aerosol Generating Medical Procedure During Patient Resuscitation and Other Scenarios</u> guides the management of all patients receiving an AGMP in all patient care areas.

N95 respirators are required when providing care to suspect or confirmed COVID-19 patients following Full Precautions in the following settings:

- When providing direct patient care to a patient with suspect or confirmed COVID-19 during an AGMP.
- When in a patient care area/room where a suspect or confirmed COVID-19 patient is being managed and an AGMP is being performed.

Please refer to the <u>Infection Prevention & Control Guidance:</u> <u>Management of Suspect/Confirmed COVID-19 Patients</u> posted under the <u>IPC Resources COVID-19 Skyline Page</u>.

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