

Harm reduction worker safety during the COVID-19 global pandemic

NATIONAL RAPID GUIDANCE OUTREACH RECOMMENDATIONS

THIS DOCUMENT DOES NOT SUPERSEDE A PROVIDER'S CLINICAL EXPERIENCE AND DECISION-MAKING SKILLS.

VERSION 2 GUIDANCE DOCUMENT

Physical Distancing

A 2m distance (6 ft) between staff and clients reduces the risk of virus spread.



When travelling together, sit as far apart as possible, wear a mask and eye protection.



Meet clients outdoors to avoid close contact (remember to keep a 2m distance).

Personal Protective Equipment (PPE)

Wearing appropriate PPE helps prevent direct exposure to different viruses and bacteria, including the virus that causes COVID-19, by protecting against droplets exhaled by infected people.



Always wear a medical mask when conducting outreach activities, including travel.



Interaction with Clients
Medical mask, gown, gloves and eye protection.



No Interaction with Clients
Medical mask and eye protection.



AGMP: N-95 mask, gloves, gown and eye protection.

Hand Hygiene

Good hand hygiene is a critical part of preventing the spread of COVID-19.



Frequently sanitize hands using an alcohol-based hand sanitizer.



If hands are visibly dirty, use a wipe followed by hand sanitizer



Practice hand hygiene before and after any physical contact, contact with body fluids or shared surfaces and donning (putting on) and doffing (taking off) personal protective equipment (PPE).

Cleaning and Disinfecting

Frequent cleaning and disinfecting of equipment and high touch surfaces during outreach (e.g. phones, keys, seatbelts, steering wheel and bags) helps to reduce virus transmission between people.

- Always clean and disinfect surfaces using Health Canada approved products. If not available, use a diluted bleach solution.
- Implement a pre-shift and post-shift cleaning schedule.
- Follow manufacturer's instructions when cleaning and disinfecting. Launder items (soft surfaces) or wipe off any visible dirt using soap and water (hard surfaces).

Providing Supplies

A 2m distance (6 ft) between staff and clients reduces the risk of virus spread.

- Staff should place loose supplies (such as syringes, alcohol swabs, stericups, tourniquets etc.) in a bag for easy distribution, if possible.
- Provide harm reduction supplies through drop-offs rather than handing them directly to clients.
- If clients need to use staff phones, staff should offer to make phone calls on their behalf or clean and disinfect the device before and after client use.

Responding to an Overdose

Always take the highest COVID-19 precautions when responding to an overdose.

AGMP



Staff should be trained in overdose response protocols, PPE practices and environmental cleaning when in the community.



Pre-plan overdose response roles (e.g. one staff member will call 911 while another administers naloxone and CPR).



Staff providing care to clients should wear an N-95 mask, a gown, eye protection (goggles/face shield) and gloves.

*AGMP: Aerosol Generating Medical Procedures.

Note: Nasal naloxone is not an AGMP procedure and evidence suggests that CPR face shields do not provide sufficient protection.