

**PROCEDURE: I-12****Title: Airborne Precautions****Type:** Clinical Procedures**Subsection:** I- Infection Control**Authority:** Executive Director with Medical Director**Related Documents:****Preamble**

This policy applies to Physicians, Registered Nurses (RN's), Registered Practical Nurses (RPN's) and Personal Support Workers (PSW's), residents, volunteer's, and visitors at Residential Hospice Grey Brue to prevent the transmission of diseases spread by airborne route while caring for the resident requiring Airborne Precautions.

**Policy**

Residential Hospice Grey Bruce program exists to provide high quality palliative care to residents who are at the end of their life. Residential Hospice Grey Bruce will take precautions to prevent and control the transmission of diseases spread by droplet route through education and implementation of Infection Prevention and Control (IPAC) best practices.

**I-12.01 Airborne Precautions on Admission**

1. A patient requiring Airborne Precautions will not be admitted. They will be considered for discharge home or transferred to an acute care facility. Residential Hospice Grey Bruce is not able to maintain negative air pressures in the resident rooms. Residents with the following illness/diseases will not be admitted to or permitted to stay at Residential Hospice Grey Bruce:
  - 1.1. Pulmonary Tuberculosis.
  - 1.2. Measles.
  - 1.3. Chickenpox (Varicella) also use Contact Precautions.
  - 1.4. Disseminated Zoster (Disseminated Shingles) also use Contact Precautions.
2. All potential residents are screened for infectious illness/disease.
3. If it is discovered that a resident has one of the illnesses/diseases listed above, a plan will be reviewed with the LHIN, and a service plan put in place to discharge home or transfer to an acute care facility.

**I-12.02 Resident and Caregiver Education**

Explain and educate family and caregivers the reasons for the discharge/transfer from GBH.

**I-12.03 Review Cycle**

Clinical Policies shall be reviewed in the odd year.

**Original Approval:** 09-2020  
**Reviewed On:**  
**Revised On:**