

<b>JOHN NOBLE HOME</b> Infection Control Manual	<b>DIVISION:</b> Infection Control  <b>CATEGORY:</b> Infectious Diseases	<b>POLICY NO:</b> 4-A-65
<b>ISSUED BY:</b> Infection Control Committee	<b>SUBJECT:</b> <b>COVID Protocol</b>	<b>PAGE NO:</b> 1 of 4

**POLICY:** It is the policy of the John Noble Home to follow the recommendations of the Public Health Unit, the Ministry of Long-Term Care and failing direction from these resources to act in a manner that respects prevailing Best Practices within the industry.

**PURPOSE:** To prevent the spread of infection specifically COVID and all associated variants and to respect the residents’ rights set out in the Bill of Rights for Residents. Specifically: The resident has the right to be cared for in a safe and clean Environment.

**Principles that Form the Basis of this Policy:**

- **We care for a vulnerable population that suffers negative outcomes when they are impacted by an infectious disease**
- **We have a responsibility to provide a safe and clean environment for our resident’s Home**
- **We have to balance the risk of a negative outcome, up to and including death, with restrictions that impact the psychosocial well-being of our residents, staff, volunteers and contractors.**
- **The Home supports each person’s right to choose their accepted risk level but recognizes that living in a congregate setting may increase the risk to others in their attempt to exercise this right. The Home has a mandate to protect each resident from potential harm as laid out in the legislation.**

**PROCEDURE:**

Related to COVID

1. The John Noble Home will require all staff, volunteers, caregivers, and contracted services to be fully vaccinated. Currently, fully vaccinated is defined by the Ministry of Health in the Staying Up to Date with COVID-19 Vaccines document. In keeping with this document anyone entering the Home will be required to have 2 doses plus a booster vaccine, with the exception of persons 5-11 that are only required to have 2 doses of the vaccine and person under 5 who are not required to be vaccinated. In the future these requirements may change as recommendations evolve. All outdoor visits are exempt from this requirement.

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2. Any person entering the Home will be screened by the Home to ensure they do not have any symptoms or contact concerns related to exposures to COVID. A tool approved by the Ministry of Long-Term Care/Public Health, following the most up to date recommendations/ directives/prevaling practice, will be used. Visitors will follow the directions of the Home for use of appropriate PPE. Emergency personnel and Ministry inspectors are exempt from this requirement.
3. Rapid Antigen Testing (RAT) will be completed by all individuals entering the Home (except Inspectors and emergency personnel) in keeping with a schedule set by the Home based on Best Practices and recommendations from the above entities and community transfer rates.
4. The John Noble Home recognizes the value of wearing a medical grade mask for source protection for our staff, visitors, contractors and volunteers and residents were tolerated. The lack of Influenza and other viral outbreaks has been noted during the Pandemic as evidence of the effectiveness of PPE. The Home will continue to require the use of a medical mask indefinitely within the Home. Face shields will be worn when deemed beneficial by the Home based on a Point of Risk Assessment.
5. For residents in isolation, individuals entering their room, where physical distancing of 2m or greater can not be maintained, will be required to wear a medical or N95 mask, as indicated by the nature of the virus and the care taking place, and a shield if the chance of droplet or airborne spread is a risk. Contact/Droplet precautions will continue to be used for anyone that has been placed in isolation related to the symptoms they are experiencing. This will include the use of gown, gloves, mask (medical or N95 based on risk assessment).
6. The Home recognizes that as treatment modalities change and become newly available, we will revisit the specifics of this policy to make appropriate adjustments to the policy as indicated by the treatment available.
7. Visitors will follow the directions of the Home for use of appropriate PPE.
8. Any staff, visitor, or volunteer who develops symptoms while in the Home, must report immediately to their manager or Registered Nurse.
9. Recreational programs will be provided to our residents and may exceed 10 individuals. The Home continues to recognize the value of resident home area-based programs (RHA). Large group programs where social crowding may take place are still strongly discouraged.

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- Residents can name caregivers (4 at this time) and may receive support from them as they wish. General visitors are also permitted in the Home. During an outbreak only one caregiver/visitor can be present at a time and general visitors are not permitted. Outdoor visits are available and residents can leave the Home for leave of absences as they wish except in cases of isolation or high-risk contacts.

**RESOURCES:**

[Staying Up to Date with COVID-19 Vaccines: Recommended Doses \(gov.on.ca\)](#)

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8377789/>

[CDC COVID Data Tracker: Vaccine Effectiveness and Breakthrough Surveillance](#)

[The efficacy and effectiveness of the COVID-19 vaccines in reducing infection, severity, hospitalization, and mortality: a systematic review - PMC \(nih.gov\)](#)

[https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/index.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Feffectiveness.html](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fvaccines%2Feffectiveness.html)

<https://pubmed.ncbi.nlm.nih.gov/35045566/>

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**DATE REVIEWED:**

**DATE REVISED:**



Ministry of Health

# Staying Up to Date with COVID-19

## Vaccines: Recommended Doses

This guidance provides basic information only. This document is not intended to provide or take the place of medical advice, diagnosis or treatment, or legal advice. In the event of any conflict between this guidance document and any applicable legislation, orders or directives issued by the Minister of Health, Minister of Long-Term Care, or the Chief Medical Officer of Health (CMOH), the legislation, order or directive prevails.

### Get Vaccinated and Stay Up to Date

- **Up to date** means a person has received all recommended COVID-19 vaccine doses, including any booster dose(s) when eligible.

Protection after a primary COVID-19 vaccine series decreases over time, especially against the Omicron variant of concern. COVID-19 vaccine booster doses help to increase protection against symptomatic infection and severe outcomes at the individual level and helps to reduce transmission at the population level.

What is considered to be up to date for COVID-19 vaccines will likely need to be modified over time based on availability of new vaccines in the future, potential changes in disease epidemiology and as new evidence on additional booster doses becomes available.

The [‘fully vaccinated’](#) definition may continue to be used in some settings, and relevant policies, legislation, directives or orders must continue to be followed where applicable.

### When Are You Up to Date with Your COVID-19 Vaccines?

People are up to date with their COVID-19 vaccines when they have followed the recommendations listed below and in Table 1. The recommendations will be different depending on the persons age, health status, and which vaccines they have received.

## **People Aged 12 Years and Older**

People aged 12 years and older are recommended to receive a booster dose of a COVID-19 vaccine to be up to date with their COVID-19 vaccines.

This booster dose is recommended 6 months after the last dose of their primary COVID-19 vaccine series if they are 12-17 years old or 3 months after the last dose of their primary COVID-19 vaccine series if they are 18 or older.

## **Children Aged 5 to 11 Years Old**

Children aged 5 to 11 years old are recommended to receive a primary COVID-19 vaccine series to be up to date with their COVID-19 vaccines.

A booster dose of COVID-19 vaccine is not currently recommended for this age group.

## **People That are Moderately or Severely Immunocompromised**

Moderately or severely immunocompromised people aged 5 and older are recommended to receive a 3-dose primary COVID-19 vaccine series.

People aged 12 and older that received a 3-dose primary series are recommended to receive a booster (fourth) dose to be up to date with their COVID-19 vaccines.

**Table 1: COVID-19 immunization series for individuals ≥5 years of age**

Age at first dose	Recommended Intervals	Minimum Intervals
5 to 11 years	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 8 weeks after 1 <sup>st</sup> dose	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 21 days after 1 <sup>st</sup> dose
12 to 17 years	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 8 weeks after 1 <sup>st</sup> dose Booster dose, 6 months after 2 <sup>nd</sup> dose	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 21 days after 1 <sup>st</sup> dose Booster dose, 8 weeks after 2 <sup>nd</sup> dose
≥18 years	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 8 weeks after 1 <sup>st</sup> dose Booster dose, 3 months after 2 <sup>nd</sup> dose	1 <sup>st</sup> dose 2 <sup>nd</sup> dose, 21 days (Pfizer-BioNTech) or 28 days (Moderna) after 1 <sup>st</sup> dose Booster dose, 8 weeks after 2 <sup>nd</sup> dose

**Notes:**

- For 1<sup>st</sup> and 2<sup>nd</sup> doses, the vaccine manufacturer indicates the minimum intervals above, however the CIG recommends that the minimum interval between 1<sup>st</sup> and 2<sup>nd</sup> doses is 19 days (Pfizer-BioNTech) or 21 days (Moderna).
- Moderately or severely immunocompromised individuals ≥5 years are recommended to receive a 3 dose primary series. The recommended interval for the 3<sup>rd</sup> dose is 56 days after the 2<sup>nd</sup> dose and the minimum interval is 28 days after the 2<sup>nd</sup> dose.

**People Who Received Vaccines Not Authorized by Health Canada**

People who received only **one or two doses of a non-Health Canada (HC)** authorized COVID-19 vaccine may receive two additional doses in Ontario to be up to date with their COVID-19 vaccines.<sup>1</sup> The first additional dose is recommended 28 days after the previous dose to complete the primary series. A booster dose is then recommended 3 months later (if aged 18 or older) or 6 months later (if aged 12 to 17).

People who received **one HC authorized vaccine and one non-HC authorized vaccine** (in either order) are recommended to receive a booster dose 3 months

<sup>1</sup> See Health Canada's [website](#) for a list of COVID-19 vaccines authorized by Health Canada.

after their second dose (if aged 18 or older) or 6 months after their second dose (if aged 12 to 17) to be up to date with their COVID-19 vaccines.

People who received **three doses** (any combination of HC authorized, and non-HC authorized) are recommended to receive a booster (fourth) dose to be up to date with their COVID-19 vaccines.

### **People Who Have Had COVID-19**

People who have had COVID-19 should complete the above vaccination schedule to be up to date; however, they may wait to get their next dose for up to 1 to 6 months after having COVID-19 (optimal timing can be discussed with a health care provider and depends on age, number of doses received and health status).