## FNIHB – ON COVID-19 Personal Protective Equipment (PPE) Request Process

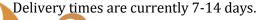
To accompany the FNIHB - ON COVID-19 PPE Request Form\_30April 2020

## **Process:**

- 1. Community submits completed form to <a href="mailto:sac.covid-19fnihbontario.isc@canada.ca">sac.covid-19fnihbontario.isc@canada.ca</a> or via fax to 1-807-343-5348.
- 2. FNIHB Ontario Region receives and reviews request from community.
- 3. Once assessed, the region will forward to FNIHB national office for processing.
- 4. National office will notify the region and community on approval and arrangement shipment.

## Notes:

- The Government of Canada recently provided PPE to provincial and territorial governments to distribute within their respective health care systems, including services for Indigenous people. The Indigenous Services Canada (ISC) stockpile received a small percentage of that order.
- We recommend that communities and regions continue to engage with provincial and territorial governments to access their stockpiles. In the interim, FNIHB is able to provide an estimated one month of PPE at a time.
- The revised calculator estimates PPE requirements for health services that are functioning in the community. Health services included in the calculator are: COVID-19 testing and management of severe cases until they are transferred out of community; residential care facilities in the community; essential health services being offered by primary care, home care, and public health; health facility security staff; ground medical transportation; those who may provide care for the deceased; and band police, firefighters, and paramedics who interact with suspect or confirmed COVID-19 cases.
- Please review the assumptions to be aware of how much PPE is allocated for each interaction and use the PPE accordingly. At this time we are unable to provide additional PPE for staff, organizations, or community members not identified in the calculator.
- As we know, there continues to be a worldwide shortage of PPE. Please follow your provincial guidelines for optimizing/ conserving PPE, even if it is different from the assumed allocations in the PPE calculator.
- PPE allocation is informed by the WHO document *Rational use of personal protective* equipment for COVID-19 and considerations during severe shortages <a href="https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-for-coronavirus-disease-(covid-19)-and-considerations-during-severe-shortages">https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-for-coronavirus-disease-(covid-19)-and-considerations-during-severe-shortages</a> and other documents as referenced in the "Assumptions" section below.
- As much as possible, please use additional methods in the hierarchy of controls to reduce the risk of exposure without the need for PPE. Note that PPE is not required for staff who are not providing direct care and work more than 2 metres away from clients.





- Please re-order additional PPE 10-18 days before you require it. Limited stockpile quantities mean that submitting a new request prior to that time will result in additional questions about current COVID-19 cases and PPE usage in the community. Please do not submit a new request if you have more than 10-18 days worth of PPE available in the community.
- COVID-19 testing is taking place in some communities in collaboration with the province. Where feasible, non-remote and isolated communities should refer COVID-19 testing and management to provincial facilities.
- The FNIHB stockpile only contains the items listed on the updated form. At this time we are unable to fulfill requests for any other supplies (ie: soap, cleaners and disinfectants, or N95 models that are not currently in the stockpile). We are unable to provide hand sanitizer for community use. We are unable to provide PPE for community use, with the exception of those people who are self-isolating due to COVID-19 and their caregivers.

## **Assumptions**

- Population Estimates are based on size of the Indigenous population from the 2016 census.<sup>1</sup> A certain % of First Nations people live off reserve, and this % differs by province this has been accounted for. First Nations people who live off-reserve and have COVID-19 symptoms will access health services off-reserve. Inuit and Metis in the provinces do not live on reserve and their first contact with the health system will be off-reserve. We will not provide PPE for these cases. There are no reserves in Northern region, so estimates are based on the entire Indigenous population.
- In non-remote and isolated communities, 25% of the population is assessed for COVID-19, and 10% are confirmed cases. In remote and isolated communities, 50% of the population is assessed for COVID-19, and 25% are confirmed cases.
- COVID-19 mode of transmission is droplet/ contact.<sup>2</sup> Provinces and territories recommend contact/ droplet precautions, unless aerosol generating medical procedures are being performed on a suspect/ confirmed COVID-19 case. Health care providers should follow their provincial guidance on PPE use, including guidance on optimization. In all cases that we are aware of, where provinces have mandated the use of certain types of PPE with every client, they have also provided direction on extended use of those types of PPE.
- Where provincial guidance specifies airborne precautions, it is assumed health care providers, some first responders (paramedics), and janitorial staff in health centres have been fit tested. N95s are provided for those groups.
- There is some evidence of asymptomatic transmission.<sup>3</sup>
- 80% of COVID-19 cases are mild, 20% are severe.
- Mild cases will be discharged home and instructed to return if symptoms worsen.
- Severe cases would stay at the nursing station while waiting for medevac. On average, it will take 12 hours for a medevac flight.

Intps://science.sciencemag.org/content/early/2020/03/24/science.abb3221



<sup>&</sup>lt;sup>1</sup> https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/hlt-fst/abo-aut/Table.cfm?Lang=Eng&T=101&S=99&O=A

<sup>&</sup>lt;sup>2</sup> https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/assumptions.html

- All communities are providing only essential routine health services. Essential services are those that the interruption of which would immediately endanger the life, health or personal safety of the whole or part of the population. This may include but is not limited to emergency outpatient visits, safe injection sites, detox services, prenatal care, emergency dental services, pharmacy services, other as deemed necessary by the region.

**PPE requirements:** 

11 L requirements.	T	
	Remote and isolated – 50% of	Gown, gloves, surgical mask,
	population tested and 25%	face shield <sup>4</sup> .
	confirmed cases. Non-remote	
	and isolated – 25% of	
	population tested and 10%	
COVID-19 testing - health care	confirmed cases. 1 set per	
provider	assessment.	
	Remote and isolated – 50% of	Gown, gloves, surgical mask,
	population tested and 25%	face shield <sup>5</sup>
	confirmed cases. Non-remote	
	and isolated – 25% of	
	population tested and 10%	
	confirmed cases. 1 set per	
COVID-19 testing - cleaners	assessment	
	80% of confirmed cases have	Surgical mask <sup>7</sup>
COVID-19 testing - symptomatic	cough <sup>6</sup> . 1 procedure mask per	
patients	symptomatic client.	
	Avg 12 hrs to medevac, 20% of	7 sets for nursing, 3 for
	severe cases require AGMP.	cleaning, 2 for other – gowns,
Management of severe COVID-	_	gloves, facial shield, surgical
19 cases at health centre until		mask <sup>8</sup> . N95s <sup>9</sup> for AGMP.
medevac		
	All cases are mild, no one	
	requires direct care. 2 masks	
Temporary Isolation Structures	per staff member per day. 2 full	

<sup>&</sup>lt;sup>4</sup> https://www.ecdc.europa.eu/sites/default/files/documents/novel-coronavirus-personal-protective-equipment-needs-healthcare-settings.pdf; https://www.canada.ca/en/public-

health/services/diseases/2019-novel-coronavirus-infection/health-professionals.html

 $<sup>^{5}\</sup> https://www.ecdc.europa.eu/sites/default/files/documents/novel-coronavirus-personal-protective-equipment-needs-healthcare-settings.pdf$ 

 $<sup>^6\,</sup>https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/epidemiological-summary-covid-19-cases.html$ 

<sup>&</sup>lt;sup>7</sup> https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-for-coronavirus-disease-(covid-19)-and-considerations-during-severe-shortages

<sup>&</sup>lt;sup>8</sup> https://www.ecdc.europa.eu/sites/default/files/documents/novel-coronavirus-personal-protective-equipment-needs-healthcare-settings.pdf

<sup>9</sup> https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals.html

	sets of PPE for cleaners per	
	day. 10	
Mild COVID-19 cases d/c home	5% of mild cases, 1 set for each	Gowns, gloves, face shield,
and require nursing or other	visit - 6 visits over 2 weeks	surgical mask <sup>11</sup>
professional home care (ie. PSW)	infectious	
Mild COVID-19 cases d/c home	10% of mild cases, 3 sets per	Gloves, face shield, surgical
and require home caregivers	day x 14 days infectious	mask <sup>12</sup>
support for activities of daily		
living		
Home management of mild	5 face masks per day x 14 days	Surgical mask <sup>14</sup>
cases d/c home - procedure	(wear max 6 hours <sup>13</sup> when in	
masks worn by patient if	presence of others, ideally pt	
tolerated or caregiver if not	self-isolates in separate room)	
-0	1 sets of gloves, gowns, and	Gloves, gowns, and surgical
Residential health care facility -	surgical masks per day for 50%	masks
routine care	of residents.	
	Full PPE for any confirmed cases	Gowns, gloves, surgical mask,
	in residence (assume 50% cases).	face shield, N95 (for AGMPs
	6 sets per day for 14 days (5 for	only)
	clinical care, 1 for cleaning) + 2	
	face masks per day for	
Residential care facility -	confirmed cases. 40% require	
outbreak	AGMPs (higher risk group)	
	Gloves and surgical masks - 25%	Gowns, gloves, surgical masks
E Colonia de la colonia	of population require essential	
Essential services - home care,	routine care. Gowns - 10% of	
nursing stations, public health,	population require essential	
long term care, physician/ NP clinics	routine care	
Cirrics	1 procedure mask for each	Surgical mask
	patient transported. 50% of	our great masic
Ground medical transportation -	suspect COVID-19 patients	
patient	require transportation	
	No barrier between driver and	Gowns, gloves, surgical mask,
	patient, patient requires	face shield
	assistance getting in and out of	
Ground medical transportation -	vehicle, driver brings patient to	
driver and cleaner	appointment and back home,	

 $<sup>^{10} \, \</sup>underline{\text{https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-for-coronavirus-disease-(covid-19)-and-considerations-during-severe-shortages}$ 

<sup>14</sup> Letter to communities appropriate use of masks



 $<sup>^{11}\,\</sup>underline{https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-for-coronavirus-disease-(covid-19)-and-considerations-during-severe-shortages}$ 

 $<sup>^{12}\,</sup>https://www.canada.ca/en/public-health/services/publications/diseases-conditions/how-to-care-for-person-with-covid-19-at-home-advice-for-caregivers.html$ 

<sup>13</sup> https://jbi.global/sites/default/files/2020-

<sup>04/10300%20%2823940%29%20</sup>Respiratory%20Infection%20Transmission%20%28Healthcare%20Workers%29%20Face%20Masks%20and%20Respirators%20%28AS-1%29.pdf

	using one set of PPE to	
	appointment, and one set of	
	PPE to drive home. Vehicle	
	cleaned between patients. 3	
	full sets of PPE per transfer.	
	50% of suspect COVID-19	
	patients require	
	transportation. <sup>15</sup>	
	1 per community, 3 sets per day.	Gowns, gloves, face shield,
PPE for security	1 face shield per day	surgical mask
	2 full sets for each deceased	Gowns, gloves, face shield,
	person <sup>16</sup> , 4% death rate due to	surgical mask
	increased rates of chronic	
	disease, overcrowding, and	
Care of the deceased	other SDOH	
	PPE required when responding	Gown, glove, face shield,
	to suspect or confirmed COVID-	procedure mask, N95 if
	19 cases (assume 15% of	intubating or high flow oxygen
	population assessed require	
	close (within 2 meters)	
	interaction with first responders;	
	5% of population assessed	
	require intubation or high flow	
	oxygen) <sup>17</sup> It will not always be	
	possible to assess the person for	
	symptoms prior to engaging with	
	them. Where possible, social	
	distancing and assessment for	
	symptoms should be done in	
	advance. Where not possible,	
Band First Responders (police,	first responders should wear PPE	
paramedics, fire fighters)	for specific interactions.	





<sup>&</sup>lt;sup>15</sup> https://www.who.int/publications-detail/rational-use-of-personal-protective-equipment-forcoronavirus-disease-(covid-19)-and-considerations-during-severe-shortages

16 https://apps.who.int/iris/bitstream/handle/10665/331538/WHO-COVID-19-IPC\_DBMgmt-2020.1-

https://www.publichealthontario.ca/-/media/documents/ncov/evidence-brief/eb-covid-19-firstresponders.pdf?la=en