



The risk for transmission of the COVID-19 virus is low with respect to the use of paper and/or electronic clinical documentation provided the following practices are followed.

GENERAL PRINCIPLES:

- Staff are to perform hand hygiene **prior to and after** accessing the patient's health record (paper or electronic). The risk of transferring microorganisms from paper is negligible; therefore, performing hand hygiene after handling paper is sufficient.
- There is insufficient evidence to support holding a document for any length of time.

AT REGISTRATION:

- Prior to receiving admission papers, patients/residents/support persons are asked to perform hand hygiene with either alcohol based hand rub (ABHR) or liquid soap and water, where available.

PAPER:

- **Clip Boards** – if clip boards are utilized, they are to be plastic (not fiberboard) so they can be disinfected after use.
- **Paper Documents Brought in Room of Patient on Droplet/Contact Plus Precautions**
 - Only take paper documents into the patient's room/home if absolutely necessary.
 - Where possible, use a plastic clip board to place the papers on to limit contact with surfaces within the room.
 - Keep the clip board/papers 2 meters away from the patient where possible and limit contact with high touch surfaces.
 - Clean clipboard and pen and perform hand hygiene upon exiting the room – documents may be placed in the health record.
 - If the entire health record has been taken into the room, the outside of the binder must be cleaned and disinfected before it is returned to its storage location.
- **Patient Consent if on Droplet/Contact Plus Precautions**
 - Have patient perform hand hygiene prior to signing the consent.
 - Use a plastic clip board to hold the consent in the room.
 - Disinfect the pen and clip board after use.
 - Consent may be placed in the health record.
 - Staff to perform hand hygiene after handling the consent form.
- **Documents Contaminated with Bodily Fluids**
 - Allow the document to dry.
 - Once dry, place in a clear protective plastic sleeve (one page per sleeve).
 - If incomplete **Medication Administration Record (MAR) is still in use**, photocopy document within protective sleeve and continue using copied document or start a new document where the old one left off.
 - If other type of **incomplete document still in use**, file the contaminated document in the protective sleeve as indicated above and start a new document where the old one left off.

**ELECTRONIC:**

- Electronics that are used at the point of care, which travel from bedside to bedside or home to home, are to be disinfected in between patients. Refer to [CV-19 WS0001 Electronic Cleaning and Disinfecting](#).
- Shared fixed electronics must be cleaned after each use and hand hygiene is to be performed prior to use.

TRANSPORT TO ANOTHER AREA VIA STRETCHER/BED/WHEELCHAIR:

- Place a clean towel or sheet between the patient and the health care record or place the health record in a plastic bag for transport.

CLEANING AND DISINFECTING CLIPBOARDS, BINDERS AND PENS

- Use SHA approved disinfection products (solutions/wipes).
- Clean using friction (rub/scrub motion) to remove any foreign matter (feces, blood, sputum, dust, soil, food) and discard wipe(s).
- Immediately following cleaning, disinfect item with new wipe(s) using friction (rub/scrub motion). Item must remain wet long enough to maintain contact time as per manufacturer's direction.
- Disinfection is followed by air-drying to complete disinfection process.

CLEANING OF IN-HOME CHARTS TO TRANSPORT BACK TO PRIMARY HEALTH CARE NETWORK:

- Disinfect the front and back of the health care record and place in a small plastic bag prior to leaving the client's home.
- Ensure the outside of the plastic bag does not touch the client's environment.
- Return the health care record to the PHC network – remove the health care record from the bag without touching the bag to the network environment.
- Follow local network process for filing/scanning client information.
- Disinfect the front and back of the health care record after health care record is no longer needed (documents are all filed and scanned).