



COVID-19 UPDATE

INFECTION PREVENTION & CONTROL IN PHARMACY

The purpose of this document is to provide guidelines to prevent the transmission of known and / or unknown pathogens, including SARS-CoV-2, to susceptible patients and other healthcare workers in the pharmacy setting.

ELIMINATION AND SUBSTITUTION

The hierarchy of Infection Prevention and Control (IPC) measures to prevent and reduce the risk of transmission of pathogens include the following in order of priority:

- Engineering Controls
- Administrative Controls
- Environmental Controls

These are the most effective measures to reduce risk and include Standard Precautions, which have to be implemented first. It has however to be done in conjunction with consistent practices at home, while off duty to be effective and to prevent that staff are infected in the community. Always perform hand hygiene after touching surfaces, avoid touching your face, eyes, nose and mouth, social distancing, open windows to ensure adequate ventilation, avoid crowds and wear a cloth mask when off-duty.

ENGINEERING CONTROLS

Engineering controls are enduring physical changes which can be made to the environment to reduce transmission.

- **Cough screens** provide a physical barrier between the pharmacist and the patient/nurse and must be in place at dispensing counters.
- Similar screens can provide a barrier between two pharmacists standing at the reception counter to reduce the risk of transmission to colleagues.
- Ventilation should be adequate in the pharmacy to increase the air changes and to ensure a continuous flow of fresh air either by opening windows or installing an extraction fan or similar technology to ensure a supply of fresh air and removal of contaminated air, while still ensuring the adequate room temperature to ensure compliance with pharmacy legislation.

ADMINISTRATIVE CONTROLS

Administrative controls refer to the following:

- A set of well-designed policies and procedures guiding IPC practices.
- Access control procedures.
- Work from home and shift rotation protocols if possible and where applicable.

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- Telephonic and Take Home Medication prescriptions:
 - **Retail telephonic orders:** Patients should phone or send an e-mail 2 days in advance to collect scripts for chronic medication to reduce waiting times.
 - **Take Home Medication:** In-patients that are discharged have to receive their take-homeprescriptions in the ward to reduce the number of patients entering the pharmacy.
 - Nursing staff has to send the prescriptions to the pharmacy to allow adequate time for processing by pharmacy personnel.
 - When the medication arrives in the ward, telephonic counselling has to be done by pharmacy personnel.

NOTE: Refer to the following Pharmacy related documents:

- Pharmacy Process COVID-19: Patient access to the pharmacy (25 March 2020)
- COVID-19 Update Suspension: Retail pharmacy service: Coronavirus COVID-19 (1 April 2020)

ENVIRONMENTAL CONTROLS

Environmental controls include Standard Precautions, which consist of the following (to mention a few that is relevant to Pharmacy):

- Hand hygiene
- Environmental cleaning
- Personal Protective Equipment (PPE)
- Cough etiquette
- Social distancing
- Universal masking

STANDARD PRECAUTIONS

TOPIC	ACTIONS
Hand hygiene	Perform hand hygiene according to the Five Moments of Hand Hygiene:
	Before patient contact
	Before dispensing a prescription
	After dispensing a prescription
	After patient contact
	After contact with the patient surroundings
	Before the mixing of medication
	Before putting on and removing PPE
	NOTE: Hand hygiene can be performed by rubbing the hands for 20 – 30 seconds with 2-3 ml 70% alcohol based handrub or until dry. The hands have to be covered with the alcohol based handrub. Alternatively, hands can be washed with soap and running water for 20 – 30 seconds and dried properly with a single use paper towel when hands are visibly soiled. Alcohol based handrub has to be available in waiting areas. Posters informing patients about hand hygiene should be displayed in waiting areas.
Maintenance of a	Ensure adherence to routine cleaning and disinfection of all surfaces, furniture and
clean environment	equipment.
	• First clean the area with a detergent (soap) and water to remove dirt and organic material.

	Disinfect all areas after cleaning, using 70% alcohol surface disinfectant or
	hypochlorite 1:1000 ppm solution or equivalent, alternatively use disinfectant wipes.
	 The pharmacy has to be cleaned and disinfected at least twice a day
	 Surfaces have to be cleaned regularly to reduce the bioburden and the risk of
	contamination. Disinfectant wipes are a useful alternative to use for the regular
	cleaning of frequently touched areas and equipment.
	 Frequently touched areas that have to be cleaned more frequently are:
	 Counters
	 Door handles
	 Telephones
	 Credit card machines
	 Keyboard, mouse and surfaces around each computer station
	 Access control keypads
	 Photostat machines and other shared equipment
	NOTE: Please use Addendum 1 to record the cleaning process.
Deep-cleaning	Deep-cleaning has to be done when there is an increase in COVID-19 cases
(An exceptional cleaning	amongst pharmacy personnel or when there is a concern of transmission in the
and disinfection process of the environment or an	pharmacy.
area, usually related to	 Surfaces and equipment have to be cleaned with detergent and water,
an outbreak or increase	followed by disinfectant such as hypochlorite 1:1000 ppm or 70% alcohol
in incidence of an	surface disinfectant (specific equipment, areas and objects are listed
infectious disease)	below), depending on the manufacturer's guidelines.
	• All non-porous containers and objects (e.g. lin-bins, plastic containers
	and trolleys) in the pharmacy have to be cleaned and disinfected and
	surfaces allowed to dry, ensure that medication packaging is not
	compromised (disinfectant wipes can be used to clean plastic containers of
	medication (but is not preferred for deep cleaning) that is exposed in 'high- traffic' areas of the pharmacy.
	 Floors of the entire pharmacy have to be thoroughly cleaned with a
	detergent and water (following removal of any gross spillage as necessary
	beforehand), followed by disinfection with hypochlorite 1:1000 ppm and
	allowed to dry.
	 Hydrogen peroxide fogging has to be added to the cleaning process
	(deep cleaning) whenever there is an increase of positive cases in the
	pharmacy in addition to routine cleaning and disinfection.
	NOTE: Please ensure that a certificate/proof of fogging is received from the
	company doing the fogging.
Personal Protective	Gloves
Equipment (PPE)	It is not appropriate to wear gloves in the pharmacy and it should not
	be allowed.
	Hand hygiene has to be performed frequently.
	Aprons
	Aprons are not indicated for use in the pharmacy.
	Masks
	• Wear a surgical mask to protect the respiratory tract from infectious agents and
	to prevent infected droplets from an asymptomatic/pre-symptomatic healthcare
	worker from being transmitted to colleagues and patients.
	• The mask has to fully cover the nose and mouth to prevent fluid penetration.
	 Discard in Healthcare Risk Waste (HCRW) container after removal.

INFECTION PREVENTION AND CONTROL IN DIFFERENT AREAS OF THE PHARMACY

The following Standard Precautions apply in all areas of the pharmacy:

- Hand hygiene before and after contact.
- Environmental cleaning: Regular cleaning and disinfection of surfaces and frequently touched equipment or objects in the pharmacy, at least twice a day.
- Wearing of appropriate PPE:
 - Surgical masks at all times.
 - \circ $\;$ Add visors in crowded spaces where social distancing is problematic.

Additional IPC precautions applicable to specific areas in the pharmacy

Front End:

- Cough screens have to be in place on all counters.
- Safe social (and professional) distancing of at least 1.5 2 metres between queueing patients, and between pharmacy personnel and patients across the counter, the use of floor markings is recommended.
- Applicable Mediclinic COVID-19 posters on hand hygiene, cough etiquette and social distancing information could be displayed as reminders, in addition to counselling patients at the front.
- Ventilation: open windows if possible.
- Whenever possible, allocate one employee per station or location at the counter and avoid using somebody else's workspace without cleaning the environment and electronic equipment.
- All pharmacy staff must wear a facial mask at the counter to protect both themselves and the public.
- Keep only essential objects at the counter.
- Wipe and disinfect the counter with a disinfectant wipe after each customer/patient.
- Ensure that a 70% alcohol based handrub is available for hand hygiene after attending to each patient or customer.
- Where possible, encourage patients to order their chronic medicines in advance and collect.
- Wipe pill counting trays with disinfectant wipes every few hours.

Dispensing area:

- Clean and disinfect surface areas as well as pill counting trays.
- Safe social distancing where possible.

Mixing of medication:

- Hand hygiene before and after mixing medication.
- Clean and disinfecting surfaces in mixing area before and after mixing took place.
- Clean and disinfect utensils and measuring cylinders before use and wash them with soap and water after use.
- Disinfect scales before and after use.

Store room:

- Hand hygiene
- Social distancing
- Regular cleaning of surfaces
- Ventilation: open windows if possible

Stock delivery area:

- Hand hygiene.
- Social distancing from delivery person.
- The delivery company staff may NOT enter the pharmacy through the stock room.
- Place items at door, ring door bell, step back 2 meters.
- Strict hand hygiene to be followed before and after receipt and after handling the packages.
- A dedicated person, wearing a mask as a minimum, has to manage deliveries.
- A visor in addition can be considered which will be cleaned daily.
- The delivery company staff must wear a mask.
- Ensure the delivery person spends minimum time on the premises during this process.

IMPORTANT: All staff must report flu-like symptoms (e.g. fever, cough, sore throat, body aches, loss of smell and/or taste and difficulty in breathing) to their Pharmacy Manager and appropriate steps must be followed.

REFERENCES

- National Department of Health. 2020. Practical Manual for Implementation of the National Infection Prevention and Control Strategic Framework. Available from: <u>https://www.nicd.ac.za/wp-content/uploads/2020/04/Practical-</u><u>Manual-for-implementation-of-the-National-IPC-Strategic-Framework-March-2020-1.pdf</u> (Accessed 2020 05 10).
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