

AT A GLANCE

(ARCHIVED) Infection Prevention and Control Practice Considerations for Pharmacies Conducting Symptomatic Testing

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Introduction

Public Health Ontario (PHO) is providing the following infection prevention and control (IPAC) practice considerations for expanding COVID-19 testing in pharmacies to symptomatic patients. These are meant to supplement existing [Ministry of Health COVID-19 Guidance: Testing of Individuals in Pharmacies](#).¹

Employers should implement a variety of measures to reduce potential COVID-19 exposures. These include but are not limited to vaccination policies, screening, source control masking, physical distancing and barriers, ventilation, frequent cleaning and disinfection of surfaces, and, where needed, personal protective equipment. Pharmacies should have written measures and procedures for worker health and safety.¹

Participating pharmacies should consult the PHO's [Interim IPAC Recommendations for Use of Personal Protective Equipment for Care of Individuals with Suspect or Confirmed COVID-19](#) for further details on IPAC recommendations.² The following key messages are not intended to replace Ministry directives.

Important Context

The utilization of pharmacies for symptomatic testing may pose both IPAC and clinical challenges that require careful consideration.

In general, IPAC measures remain the same whether testing asymptomatic or symptomatic individuals; however, expanding testing in pharmacies to include symptomatic individuals has an added element of risk for transmission. Pharmacies might be serving several functions (e.g., providing testing for asymptomatic individuals, administering immunizations and serving the general public/retail customers). Symptomatic testing in pharmacy settings requires careful considerations for risk mitigation.

All pharmacies may not be able to create spaces that satisfy all criteria. In addition, there may be an imbalance between access to testing and risk mitigation in some communities. Communication within these communities may be necessary to inform the public of these changes and encourage vaccination based on this additional risk.

Key IPAC Considerations

Pharmacies should apply the [hierarchy of controls](#) when designing their space with the goal of minimizing transmission risk.³ The levels in the hierarchy of controls, in order from **most** effective to **least** effective, are:

1. Elimination

Remove the risk of exposure entirely from the workplace.

Response: Remove risks to staff and patrons.

- Consider a process for pickup/drop-off of self-collected specimens, if feasible.
- Book appointments for symptomatic individuals and stagger them throughout the day. Ensure patients do not arrive before their allotted time to avoid waiting in close proximity to other patrons of the pharmacy.
- Designate a separate room/area (independent of the retail pharmacy) for symptomatic individuals including usage of outdoor spaces if feasible.
 - Space should be completely separate from the immunization and retail function including waiting and monitoring areas.
 - Space should be well-ventilated (e.g., room is free of clutter, has both a fresh air supply and an exhaust vent or a room with a window). Ensure air flows moves away from other pharmacy customers. Participating pharmacies should consult the PHO document [Use of Portable Air Cleaners and Transmission of COVID-19](#) for further details on the use of portable air cleaners.⁴
 - Physically distancing symptomatic patients will not eliminate all risk. Consider all four seasons when considering designated specimen collection and waiting areas, including waiting outdoors or in personal vehicles until scheduled appointment.
- Separate entrance and exit for those entering the testing area. Screening pre-visit and upon arrival.

2. Substitution

Response: No recommended controls

3. Engineering Controls

Make physical changes to remove the hazard through ventilation or separate workers from the hazard, including changes that support physical distancing and hygiene.

Response:

- Ensure that regular maintenance and care of the existing ventilation systems is done and documented. Specialists in HVAC systems may be necessary to assess and optimize existing systems. If large physical barriers are used to separate areas, it could create unintended effects (e.g., dead spaces), and the ventilation system may need to be rebalanced to provide the expected ventilation/filtration.

4. Administrative Controls

Make changes to the ways people work and interact, using policies, procedures, training and signage. For example, you could create policies to limit the number of people in a space at one time, schedule to stagger work shifts and breaks, establish new cleaning and disinfection protocols.

Response:

- There should be written measures and procedures for worker health and safety.
- Pharmacies should be expected to have a staff vaccination policy in place which provides education and strongly encourages and/or enforces vaccination for employees.
- Dedicated staff to perform specimen collection to minimize exposures. Preferably staff who are fully immunized and boosted.
- Distancing of at least 2m between patients waiting to be tested.
- Provide clear signage to direct the patients to the entry for testing and instruct all individuals seeking testing that a mask is required. Signage may need to be updated/changed (existing pharmacy guidance stated “no symptomatic testing at pharmacy”).
- Ensure training and adequate supply of PPE that can support their current and ongoing operations (this will be a change in practice).
- Daily active screening of staff for symptoms, unprotected exposures, and travel history with exclusion from work and testing when screen positive.
- Distancing between staff in break rooms.

Recommendation for room set up:

- Single room with door.
- Optimize **ventilation** in the testing space (e.g., window can open, adequate air changes, HEPA filtration unit, air flow away from other pharmacy customers).
- Space should be completely separate from the immunization and retail functions including waiting and monitoring areas.
- Storage of test kits and supplies kept in a designated clean space.
- Alcohol-based hand rub (ABHR) and disinfectant wipes at point of entry and point of care.
- Ensure additional time/resources incorporated for cleaning of horizontal surfaces within the testing room between each patient.

- Ensure appropriate space with ABHR to don and doff PPE with regular garbage pick-ups on a schedule (this may be a change in practice so considerations if external vendor cleaning is occurring).

5. Personal Protective Equipment (PPE)

This is equipment and clothing worn by a worker to minimize exposure to hazards and prevent illnesses and infection. PPE is used to protect the wearer and can include such things as a fit-tested seal-checked N95 respirators (or equivalent), medical (surgical/procedure) masks, eye protection, gloves and gowns.

Correct use of PPE can help prevent some exposures, however PPE is considered the least effective measure in the hierarchy of controls and it should not take the place of other control measures.

Response:

- Education and training should be provided to staff on the selection, use, and [donning and doffing of PPE](#).⁵
- Appropriate PPE must be worn by the individuals collecting specimens, this includes: a fit-tested seal-checked N95 respirator (or equivalent), eye protection (e.g., face shield, goggles), gloves and gown. If the N95 has not yet been fit-tested, a well-fitted medical (surgical/procedural) masks or non-fit-tested N95 respirator (or equivalent) must be worn.
- Extended use of PPE (use of the same PPE for multiple encounters without removal) or re-use of PPE (removing PPE and putting the same PPE back for subsequent encounter(s)) **will not be appropriate in most instances** as some “symptomatic” patients may be negative and others positive. There is a potential of self-contamination of staff. There is also a risk of cross contamination between patients during the testing process. This may include the need to provide updated education for staff. There should also be written policies and procedures for worker health and safety.
- Individuals coming in for testing should be provided with a medical mask upon entry.
- Ensure medical masks are available for individuals who arrive with soiled/poor/ill fitted mask.
- Consider the need for adequate supply of multiple sizing masks (i.e., adult as well as pediatric).

Additional considerations/questions:

Quality control and risk mitigation:

- Consider conducting a self-assessment of participating sites.
- Consider audits for practice (i.e., donning and doffing PPE).
- Ensure that these IPAC considerations can be maintained over time.

Clinical assessment:

- Ensure the assigned pharmacy staff are able to provide an assessment of the patient for signs and symptoms of distress and refer to an emergency department or a physician as appropriate.

Other considerations:

- Signage may need to be updated/changed

- Children may need assistance to remove their mask for testing. How will you accommodate multiple family members?

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References

1. Ontario. Ministry of Health. COVID-19 guidance: testing of individuals in pharmacies [Internet]. Version 2.0. Toronto, ON: Queen's Printer for Ontario; 2021 [modified 2021 Nov 18; cited 2021 Dec 30]. Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/2019_guidance_asymptomatic_testing_pharmacies.pdf
2. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Interim IPAC recommendations for use of personal protective equipment for care of individuals with suspect or confirmed COVID-19 [Internet]. Toronto, ON: Queen's Printer for Ontario; 2021 [modified 2021 Dec 15; cited 2021 Dec 30]. Available from: <https://www.publichealthontario.ca/-/media/documents/ncov/updated-ipac-measures-covid-19.pdf?la=en>
3. Ontario. Ministry of Labour, Training and Skills Development. Guide to developing your COVID-19 workplace safety plan [Internet]. Toronto, ON: Queen's Printer for Ontario; 2020 [modified 2021 Sep 21; cited 2021 Dec 30]. Available from: <https://www.ontario.ca/page/develop-your-covid-19-workplace-safety-plan>
4. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Use of portable air cleaners and transmission of COVID-19 [Internet]. Toronto, ON: Queen's Printer for Ontario; 2020 [cited 2021 Dec 30]. Available from: https://www.publichealthontario.ca/-/media/documents/ncov/ipac/2021/01/faq-covid-19-portable-air-cleaners.pdf?sc_lang=en
5. Ontario Agency for Health Protection and Promotion (Public Health Ontario). Recommended steps: putting on personal protective equipment (PPE) / taking off personal protective equipment (PPE) [Internet]. Toronto, ON: Queen's Printer for Ontario; 2020 [cited 2021 Dec 30]. Available from: https://www.publichealthontario.ca/-/media/documents/ncov/ipac/ppe-recommended-steps.pdf?sc_lang=en

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