## COVID-19: Preventive and Protective Measures for Funeral Services Businesses

### INTERIM RECOMMENDATIONS

INSTITUT NATIONAL DE SANTÉ PUBLIQUE DU QUÉBEC

> These measures apply in the context of community transmission. May 31, 2021 – Version 4.0. Please pay close attention to the entire document, as the changes made were too numerous to be indicated in yellow.

### Institutional caveat

INSPQ

These interim recommendations have been written to support funeral services businesses (FSBs) in applying preventive and protective measures when taking charge of the bodies of COVID-19 cases. Measures intended to ensure the safety of FSB workers and clients during funeral activities are also proposed.

These measures are based on the information available at the time they were developed as well as on expert opinion. Based on knowledge drawn from Canadian and international public health organizations, they include findings and recommendations that may need to be revised as scientific knowledge related to the current pandemic evolves. To this end, the Institute has implemented scientific monitoring targeting various topics to enable it to identify emerging knowledge and to proceed with the required updates, when it deems this appropriate.

## Context

As of May 17, 2021, the Directeur national de santé Publique and the sous-ministre adjoint has removed COVID-19 from the list of diseases included in Schedule 1 of the Regulation respecting the application of the Funeral Operations Act (CQLR, chapter A-5.02, r.1).

This amendment allows for the embalming of the bodies of COVID-19 cases, as well as associated activities. The recommendations presented in this document have been updated accordingly.

COVID-19 is caused by a virus identified as SARS-CoV-2. COVID-19 was originally listed in Schedule 1 of the Regulation respecting the application of the Funeral Operations Act (CQLR, chapter A-5.02, r.1), from which it has just been removed. However, SARS-CoV-2 remains infectious and preventive and protective measures are applicable for workers and visitors during funeral activities.

Some SARS-CoV-2 variants (SARS-CoV-2 variants of concern or VOCs) have demonstrated the potential for increased person-to-person transmissibility. However, increased transmissibility in the post-mortem context has not been reported in the scientific literature.

COVID-19 remains a form of infection under investigation by the Directeur national de santé publique (DNSP) within the context of a health emergency and must be considered in the same manner as a notifiable disease (*maladie à déclaration obligatoire* or MADO). For this reason, box 27 of the SP3 form must be checked when a COVID-19 case dies, indicating the potentially contagious nature of the body.



Although as of April 6, 2020, Funeral Services Businesses (FSBs) are no longer required to obtain authorization from the Direction de santé publique (DSPublique) for their territory (their regional public health department) when taking charge of the bodies of COVID-19 cases, it is recommended that FSBs contact the DSPublique for their territory for any other matters that arise after the body is taken in charge at the place of death that are not specifically covered in this document or by a directive of the Ministère de la Santé et des Services sociaux (MSSS) (the department of health and social services).

Also, deaths may occur in persons under investigation for COVID-19 or who are suspected of having had COVID-19 at the time of death. In such situations, it is the responsibility of either the physician or the nurse who draws up the attestation of death, or of the DSPublique, to transmit to the FSB the recommendations that apply, taking into account certain criteria and the result of a post-mortem diagnostic test if indicated. The instructions regarding this subject are available in the <u>Guide de gestion des décès de COVID-19</u> (in French only) intended for health and social services facilities, public health departments and FSBs.

Finally, the management of deaths during a pandemic must include a method for managing the risks of contamination not only by the body, but also among funeral workers and among participants in funeral events. Certain general rules for the protection of the health of workers apply; these recommendations are set out in <u>Annex 1</u> of this document.

## Methodology

The interim recommendations contained in this document are based on the current state of knowledge regarding COVID-19 as well as on the various notices and recommendations published by the INSPQ and by recognized national and international public health authorities. They also take into account the Regulation respecting the application of the Funeral Operations Act (CQLR, chapter A-5.02, r.1).

This document was developed in consultation with experts in embalming, in occupational health and safety and in infection prevention and control.

## Modes of transmission

Current data indicate that transmission of SARS-CoV-2 occurs primarily through close (less than 2 metres) and prolonged (15 minutes) contact via drops and aerosols from the respiratory secretions of a symptomatic, pre-symptomatic or sometimes asymptomatic infected person. Transmission can also occur at just over 2 metres in certain settings, such as in confined, inadequately ventilated, and densely occupied spaces (INSPQ, January 8, 2021).

Surfaces in the area of an infected person may be contaminated with SARS-CoV-2 for a period of hours to days, depending on the type of surface and the heat or humidity conditions. Transmission through contact with contaminated surfaces followed by hand contact with the mouth, nose or eyes is possible, but there is little evidence to support this (INSPQ, February 2021).

Although the virus has been found in stool, urine, blood, plasma and serum, transmission through these biological liquids has not been demonstrated (INSPQ, March 2021).

## Risk of transmission when handling bodies

The following risks should be considered when handling the bodies of COVID-19 cases (O'Keeffe, 2021):

- Compression of the thorax may result in the projection of aerosols or fluids that may contain viral particles;
- Biological liquids projected in the form of splashes can result in direct contact of these liquids with mucous membranes, representing, in theory, a risk of contamination;
- Some parts of the deceased's body as well as surfaces or equipment in the area of the body may be contaminated with the virus. Indirect contact with mucous membranes via hands that have touched these surfaces represents a possible risk of contamination;
- Embalming procedures likely to generate aerosols can result in the presence of airborne viral particles, particularly in a poorly ventilated environment.

The presence of SARS-CoV-2 on human remains has been reported in the scientific literature, but there is currently no evidence of confirmed cases of transmission via human remains (Plenzig, 2021; O'Keeffe, 2021).

## Recommendations

### Prerequisites

Prerequisites	
Type of additional precautions [section (s.) 55 of the	In addition to the basic practices to be followed when working on any body, the following additional precautions are recommended for the bodies of COVID-19 cases:
Regulation respecting the application of the	Droplet-contact precautions with eye protection in the absence of embalming procedures likely to generate aerosols;
Funeral Operations Act, (CQLR, chapter A-5.02, r.1 )]	Airborne-contact precautions with eye protection during embalming procedures likely to generate aerosols.
General preventive and protective	See <u>Annex 2</u> for the wording of section 62 regarding the responsibilities of licensed embalmers and staff assisting them.
measures for embalming (s. 62)	See the <u>Guide de prévention des risques chimiques et infectieux chez les travailleurs du</u> <u>domaine funéraire</u> (in French only) for measures to be applied for all bodies.
	<ul> <li>Gloves labelled for medical use (non-sterile disposable gloves);</li> </ul>
Personal protective	Masks:
equipment (PPE)	<ul> <li>High quality mask as in all workplaces;</li> </ul>
(to be used when handling bodies and performing	<ul> <li>Medical mask (procedural or surgical mask) that meets, at a minimum, ASTM F2100 level 2 criteria when there is a risk of splashing;</li> </ul>
embalming) See <u>the INSPQ notice</u> regarding the	N95 type respiratory protective devices (RPDs) or equivalent, taking into consideration the chemical risks present in the environment (formaldehyde) when choosing the RPD, for procedures likely to generate aerosols.
hierarchy of control measures in the workplace	Eye protection (safety glasses or face shield) to prevent all contact with mucous membranes of eyes. The face shield should be worn in situations where there is a high risk of splashing;
	Long-sleeved, splash-resistant gown.

Prerequisites			
	If there is discharge of body fluids (e.g., the body is not in a shroud or body bag):		
Alternative equipment (in case of shortage)	Gloves: In the absence of gloves labelled for medical use, nitrile gloves, which are of good quality and in good condition, are adequate;		
See: <u>COVID-19</u> <u>Mesures</u>	N95 type RPDs: see the document on <u>COVID-19 medical masks and respirators;</u>		
exceptionnelles pour	Gowns: In the absence of long-sleeved gowns, one may consider:		
les équipements de protection individuelle lors de pandémie :	<ul> <li>Wearing long-sleeved, splash-resistant work coveralls or overgarment (e.g., Tyvec type);</li> </ul>		
recommandations	A smock with a splash-resistant apron.		
intérimaires, INSPQ (in French only)	In the absence of discharge of body fluids:		
(	Consider the same types of equipment without splash protection.		
	The following topics must be covered during training:		
Training	Additional precautions and wearing of the required personal protective equipment (e.g.: the IRSST's <u>Guide pratique de protection respiratoire</u> [in French only]);		
	Procedures for the safe donning and doffing of personal protective equipment worn by workers (e.g., <u>http://asstsas.qc.ca/publication/equipments-de-protection-individuels-epi- a70</u> and <u>https://vimeo.com/399025696</u> [both in French only]).		
Respiratory protection program	<ul> <li>All RPDs must be used in accordance with a respiratory protection program (RPP). Section 45 of the Regulation respecting occupational health and safety (OHS) states that: Equipment shall be selected, adjusted, used and cared for in accordance with the CSA Standard Z94.4-93 Selection, Use and Care of Respirators. A respiratory protection program shall be drafted and applied in compliance with that standard.</li> <li>The RPP must provide for, among other things, fit testing to enable selection of an RPD</li> </ul>		
	that provides an adequate seal, seal testing for each use, an appropriate training program, and an adequate RPD maintenance program. Le Guide pratique de protection respiratoire (in French only), published by the Institut de recherche Robert-Sauvé en santé et en sécurité du travail, also provides useful information for setting up an RPP.		
	The Regulation respecting the application of the Funeral Operations Act requires that all embalming rooms be mechanically ventilated and designed to control the various contaminants and odours present in the air.		
Ventilation (s. 67)	In the context of the COVID-19 pandemic, the World Health Organization recommends for autopsy activities at least 6 air changes per hour (ACH) for old buildings and 12 ACH for new buildings (WHO, September 2020).		
	It is important to respect the current standards and regulations for this sector of activity with regard to ventilation.		
Communication	Ensure that all the information relevant to the application of the preventive and protective measures is transmitted by FSBs to the persons concerned, in particular, workers and also clients.		

## Management of bodies

Management of bodi	es
	Bodies of confirmed COVID-19 cases (by laboratory or epidemiological link):
	The funeral services business (FSB) no longer requires authorization from the DSPublique to take charge of deceased persons confirmed positive for COVID-19. However, the FSB may contact the DSPublique with any questions related to the contagiousness of the body and the precautionary measures to be taken.
Access to documents or information related to	Bodies of persons under investigation for COVID-19 (pre-mortem test) or cases suspected of having COVID-19 at the time of death:
the causes of death (s. 61)	The physician or nurse who signed the SP3 or the DSPublique can indicate the precautions to be taken. While awaiting the result of the pre-mortem or post-mortem test, the FSB can take charge of the body, while applying the preventive and protective measures indicated for COVID-19 cases.
	The instructions regarding such cases are available in the <u>Guide de gestion des décès de</u> <u>COVID-19</u> (in French only) for health and social services facilities, public health departments and FSBs.
	Ideally carried out by personnel in the facility or residence where the death occurred, who must ensure that no objects belonging to the deceased are left inside the shroud;
Management of personal effects	Otherwise, quarantine personal belongings for a minimum of 24 hours or machine wash clothes, towels, curtains and bedding in hot water with the usual detergent (or disinfect items that cannot be washed) before returning the belongings to the family (INSPQ, February 2021).
Temporary storage of bodies in the facility	Ensure that the bodies of COVID-19 cases are placed in a double shroud or sealed body bag, that they are labelled, and that the outside of the shroud or body bag is disinfected. Ensure that any surface where the shroud or body bag may have been placed is disinfected;
	Keep the bodies of COVID-19 cases separate from other bodies if a room cannot be assigned exclusively to the bodies of COVID-19 cases.
Taking in charge of the body (s. 32 to 37)	When signing their section of the attestation of death, the funeral services worker (FSW) must pay close attention to the causes of death, particularly as regards COVID-19. The attestation of death or SP3 should make mention of COVID-19 and of the fact that the body poses a health risk. If death occurs as a result of late sequelae of COVID-19, box 27 of the attestation of death should not be checked and therefore the body should not be treated as contagious for COVID-19;
	The worker should also look carefully for the words "case under investigation" or "suspected case of COVID-19." In such situations, the FSB should treat the bodies as COVID-19 cases until such time as a notice to the contrary is obtained indicating that this obligation can be lifted.
	Two situations:
Collection and	If the body has already been placed in a shroud for collection by the FSB: apply basic practices and ensure that the shroud is securely closed;
transportation (s. 123-133)	If the body must be placed in a shroud or bag by the staff of the FSB: see the section on <u>handling of the body</u> .
	To ensure the safety of workers travelling in the same vehicle: see Annex 1.

## Operations on the body

Operations on the bo	ody			
	A. For a body that is not in a shroud or body bag, or if discharged body fluids can be observed or present a risk, with or without a shroud or body bag:			
	<ul> <li>Practice hand hygiene prior to handling;</li> </ul>			
	<ul> <li>Wear medical gloves — double thickness (not the same pair of gloves for handling the body and for cleaning the outside of the shroud);</li> </ul>			
	<ul> <li>Wear a medical mask (that meets, at a minimum, ASTM F2100 level 2 criteria) and eye protection (safety glasses or face shield);</li> </ul>			
	<ul> <li>Wear a long-sleeved, splash-resistant gown or the equivalent;</li> </ul>			
	<ul> <li>Securely cover the respiratory tract of the deceased;</li> </ul>			
	The body must be handled in such a way as to limit as far as possible the emission of gases or liquids from the respiratory tract, in particular by avoiding placing pressure on the thorax;			
Handling of the body (s. 53)	The body must be placed in a properly closed body bag/shroud (ideally a double shroud);			
	<ul> <li>Safely remove one of the two pairs of gloves;</li> </ul>			
	The bag must be disinfected immediately after it is closed;			
	<ul> <li>Remove the other pair of gloves;</li> </ul>			
	Practice hand hygiene after handling.			
	B. For a body that is in a closed and leakproof shroud or body bag:			
	<ul> <li>Wear gloves;</li> </ul>			
	Practice hand hygiene after removing gloves once finished handling.			
	Note: for the handling of a body by more than one worker, especially in situation B, if physi distancing measures are impossible to apply, the wearing of a high quality mask, in additio the wearing of gloves, is recommended.			
	Not all embalming procedures generate aerosols, but the following precautions, in addition to those required for the handling of the body, should be observed:			
	The number of persons in the embalming room should be limited to essential persons. The other persons in the room should wear the same PPE as required for operations on the body of a COVID-19 case;			
	Procedures that generate splashes or aerosols should be avoided or replaced with alternative procedures whenever possible;			
General measures for embalming	Measures should be put in place to limit the generation of splashes or aerosols when these procedures cannot be avoided or replaced;			
procedures likely to generate aerosols	The use of an N95 type respiratory protective device (RPD) is recommended during activities that generate aerosols. If a different RPD (e.g., a chemical cartridge respirator) is required due to the presence of other contaminants (e.g., formaldehyde), it should be used with the addition of an N95, or better, particulate pre-filter;			
	In contexts where the wearing of a high quality mask is recommended at all times in the workplace, in order to limit the handling of masks, the N95 type RPD should be worn upon entering the embalming room when procedures at risk of generating aerosols are planned. The N95 type RPD should be removed upon leaving the room, after practicing hand hygiene and hand hygiene should be repeated following the removal of the RPD;			

Operations on the bo	ody			
	After an aerosol-generating embalming procedure has been performed, the required waiting time, based on the ventilation characteristics of the room used (number of air changes per hour for an elimination rate of 99.9%), must be respected before entering the room without a RDP. <sup>1</sup> If the number of air changes is unknown, wait approximately six hours before entering the room without a RPD.			
Removal of hypodermic devices (pacemaker or other) (s. 54)	Permitted while respecting the precautions required when <u>handling the body</u> .			
	Permitted while respecting the precautions required when <u>handling the body</u> ;			
Preparation and	To avoid splashing, it is preferable to clean the body without running water;			
disinfection of the	<ul> <li>If running water is required, keep the pressure low to avoid splashing;</li> </ul>			
body (s. 53)	As a last resort, washing with a pressurized hose should be carried out in accordance with the general measures for embalming procedures likely to generate aerosols, including the use of an N95 type RPD.			
Embalming (injection of arterial fluids and	Permitted while respecting the general measures for embalming procedures likely to generate aerosols;			
treatment of organs in the thoracic and	N95 type RPD or equivalent is required for these procedures;			
abdominal cavities) (s. 138)	Pay particular attention to chemical hazards when selecting the RPD.			
Embalming the bodies of suspected but unconfirmed COVID-19 cases in a	It is strongly recommended that bodies for which a post-mortem test was requested be considered suspected cases of COVID-19 even if the test result is negative, given that the reliability of post-mortem tests is not optimal. Similarly, a body collected from the site of a COVID-19 outbreak should be considered a suspected case, with or without a diagnostic test for COVID-19;			
pandemic situation (s. 62)	If a FSB wishes to perform embalming procedures on a body whose post-mortem test result was negative, but that is a suspected case, or on a body collected from the site of a COVID-19 outbreak, the FSB must ensure that all necessary measures are taken to protect against splashes and aerosols, including the wearing of an N95 mask by embalmers.			

<sup>&</sup>lt;sup>1</sup> See Appendix VIII of the Public Health Agency of Canada's <u>Routine Practices and Additional Precautions for Preventing the</u> <u>Transmission of Infection in Healthcare Settings</u> to estimate the time required based on the number of air changes per hour.

## Funeral practices

Funeral practices					
Identification of the body (s. 74, s. 80 and s. 138)	<ul> <li>The usual preparation of unembalmed bodies for identification is permitted in accordance with the following conditions, in addition to the standards set forth in the regulation concerning the timing, duration and refrigeration obligations, if applicable, as well as the health instructions in force for gatherings:</li> <li>Visitors must not be able to come into physical contact with the body (glass wall or equivalent recommended, e.g., Plexiglas);</li> <li>Identification should be limited to the immediate relations of the deceased.</li> </ul>				
Washing of the body and other rituals in the presence of the body (s. 134-135-136-137)	<ul> <li>Washing of the body or rituals in the presence of the body are permitted in accordance with the following conditions, in addition to the standards set forth in the regulation and the health instructions in force for gatherings:</li> <li>In all cases, the entire activity must be conducted in the presence of a licensed embalmer;</li> <li>If the body is embalmed: visitors may come in contact with the body and hand hygiene must be carried out after contact;</li> <li>If the body is not embalmed:</li> <li>Proceed in a manner that does not generate splashes or aerosols;</li> <li>PPE must be worn by those involved in the washing of the body or who may come in contact with the body.</li> <li>It should be noted that this practice should not be performed on bodies with a higher risk of discharging fluids.</li> </ul>				
Viewing (s. 74-88)	<ul> <li>Closed casket viewing: permitted;</li> <li>Open casket viewing:</li> <li>If the body is embalmed: permitted in accordance with the conditions described in Division III of the Regulation respecting the application of the Funeral Operations A</li> <li>If the body is not embalmed: permitted under the terms of s. 78 while disallowing physical contact with the body.</li> <li>Rental caskets: not recommended unless the body is embalmed or placed in a double shroud or equivalent to avoid contamination of the rental casket.</li> </ul>				
Gatherings to honour the deceased, for funerals or interments	<ul> <li>To limit the risk of transmission among participants, gatherings should be restricted to a specific number of participants dependant on the <u>measures in force</u> in the region, and on the alert levels.</li> </ul>				

## Disposal of the body

Disposal of the body			
Preparation for interment/cremation (s. 110 and 118)	Bodies that will be interred must be placed in caskets and bodies that are to be cremated must be placed in containers (wood, cardboard, etc.) in such a way as to prevent discharge and allow for the safe handling of the body.		
	Interment in a cemetery: permitted;		
Interment/ cremation	Interment in a crypt/mausoleum: permitted while applying the preventive and protective measures for staff, especially if the body is not embalmed;		
(s. 101-122)	<ul> <li>Flame cremation: permitted;</li> </ul>		
	Cremation by alkaline hydrolysis: not recommended.		
Interment	<ul> <li>Take precautionary measures for pallbearers (high quality mask at all times, even if physical distancing is possible, and gloves or hand hygiene if the handles or wheel bier could not be disinfected).</li> <li>See <u>Annex 1</u> for the other precautions.</li> </ul>		
Placement in a vault	▶ Permitted.		

### Hygiene and sanitation

Hygiene and sanitation		
General rules for the protection of the health of FSB workers and clients	<ul> <li>Make sure you have all the necessary equipment and products;</li> <li>In the workplace, a <u>high quality mask</u> should be worn at all times as required by the <u>CNESST</u>;</li> <li>Refer to <u>Annex 1</u> for more details on general precautions to be applied in the workplace and when interacting with clients.</li> </ul>	
Removal of personal protective equipment (PPE)	Personal protective equipment must be removed in a safe manner. See section on <u>Training</u> .	
Cleaning and	Disinfect all materials used and work surfaces that have been in direct or indirect contact with the body and any materials or device used as well as work surfaces that may have been contaminated;	
disinfection	Be particularly vigilant when disinfecting surfaces. Disinfectants that have proven effective <sup>2</sup> against enveloped viruses, such as SARS-CoV-2, are alcohols, aldehydes (glutaraldehyde), alkalis, biguanides, halogens, peroxygen compounds, some phenols, and some quaternary ammonium compounds (QACs).	
Hygiene (work clothing)	CIDIDES DE REMOVED AND DIACED IN A CIDSED DAD AT THE END OF THE WORK SNIT. IT SOILED WITH	
	<ul> <li>Disinfect the driver and passenger compartments after each work shift;</li> <li>Description of the other interaction of the other interaction of the other interaction.</li> </ul>	
Hygiene (vehicle)	<ul> <li>Regularly clean the section of the vehicle reserved for bodies and disinfect daily;</li> <li>See <u>Annex 1</u> and the section on safety measures for company vehicles for all the measures to be applied.</li> </ul>	

AND

<sup>&</sup>lt;sup>2</sup> Refer to the list of disinfectant products known to be effective: <u>https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html</u>

Refer to the INSPQ information sheet *Surface Cleaning and Disinfection* which also explains how to clean and disinfect porous materials such as curtains and carpets, as well as linens/bedding: <u>https://www.inspq.qc.ca/en/publications/3054-surface-cleaning-disinfection-covid19.</u>

<sup>&</sup>lt;sup>3</sup> Remove work clothing at the end of the work shift, place it in a closed plastic or cloth bag and wash in hot water with the usual laundry soap, ideally at work. If clothes need to be washed at home, they can be washed with the family's clothes in hot water with the usual laundry soap. However, work clothing must be transported in the closed plastic or cloth bag, which must not be opened by another member of the family. Avoid shaking the bag or the laundry when placing it in the washer.

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# Annex 1 General preventive and protective measures in the workplace

Whether at work or while participating in the ritual events surrounding death, in the context of the COVID-19 pandemic when sustained community transmission is confirmed by public health authorities, everyone must collaborate in the application of preventive and protective measures in order to minimize transmission of the pandemic virus. Based on current knowledge, the disease can be transmitted by asymptomatic persons who are carriers of the disease. Therefore, preventive measures are recommended at all times to protect the health and safety of workers in funeral services businesses and their clients.

These measures are based on the following principles:

- Exclusion of symptomatic persons from workplaces and funeral activities;
- Exclusion from workplaces and funeral activities of individuals who have been ordered to isolate;
- Physical distancing;
- Hand hygiene;
- The wearing of masks or face coverings by clients in enclosed or partially covered public places (Order in Council 810-2020 - Québec.ca);
- The wearing of a <u>high quality mask</u> at all times inside workplaces, as required by the <u>CNESST</u>;
- Hygiene and respiratory etiquette;
- Ongoing application of hygiene measures to materials, tools, equipment and frequently touched surfaces;
- Sanitation of the premises.

The following information sheets set forth the general rules regarding worker health protection that may apply to FSBs:

- COVID-19 : Mesures de prévention en milieu de travail : recommandations intérimaires (in French only);
- COVID-19: Hierarchy of Control Measures in the Workplace Preventive Measures in the Workplace.

Special attention must be given to pregnant workers and to workers with certain health conditions. Please refer to the following recommendations:

Pregnant or nursing workers;

<u>Immunosuppressed workers</u> (in French only); <u>Workers with chronic diseases</u> (in French only).

### Preventive and protective measures specific to interaction with clients

### **Exclusion of symptomatic persons**

The funeral director and counselors must advise clients not to come to the funeral home or attend the funeral if they have symptoms consistent with COVID-19.

## Measures to be adopted by the worker who takes charge of a person presenting symptoms consistent with COVID-19

- Have an emergency kit ready for use in a COVID-19 situation. The kit should contain gloves, high quality medical masks, eye protection, resealable bags, protective gowns, and hydroalcoholic solution;
- Have an isolation room in the facility, which must be well ventilated. Opt for a room with mechanical ventilation or, if not available, a room with an open window;
- Isolate the person in the room designated for this purpose;
- Call 1-877-644-4545 and follow their instructions or consult the MSSS self-assessment tool;
- Before entering the area where the worker is located or if contact within two metres is necessary (e.g., to help the worker):
  - Ask the person with symptoms to wear a high quality mask, unless they have difficulty breathing and cannot tolerate the mask;
  - The worker taking charge of the symptomatic person must wear gloves, eye protection and a protective gown in addition to the high quality mask already being worn.
- Once the person has left, air out the room and proceed with cleaning and disinfection (see the document <u>COVID-19: Surface Cleaning and Disinfection</u>).

### Physical distancing

- Avoid all physical contact between persons (e.g., handshakes, hugs, etc.);
- Maintain a distance of at least 2 metres between persons. Install physical markers on the ground or on walls (lines, stickers, cones, wooden structures, etc.) to indicate the 2-metre distance to be respected between persons in lineups;
- Install signs or posters reminding people of the physical distancing measures that need to be respected (at the entrance and in the facility).

### Meals and snacks

For the public, follow the <u>measures in force</u> in the region, based on alert levels. The measures are specified under the "funerals" tab on the Québec.ca website and detail what is and is not allowed in terms of food and beverage distribution.

### Exchange or signing of documents

Whenever possible, minimize the exchange of hardcopy documents (e.g., electronically sign contracts, delivery slips, condolences cards, attendance book, etc.).

Where hardcopy documents are required:

- Hand over and retrieve documents by placing them on a clean surface, while maintaining the 2-metre distance between individuals;
- Do not share a pen with others; they must use their own pen;
- Set out pens for clients to keep if they did not bring their own pen to sign documents;
- ▶ If shared, clean your pen regularly with a damp cloth and mild soap or a disinfectant wipe;
- ▶ When retrieving documents, place them in an envelope.

### Travelling by car (for workers or clients)

- Allow workers to use their personal vehicle for transport between sites, with use limited to the driver/owner only;
- Reduce the number of drivers per vehicle and encourage the same drivers or tandems of drivers and codrivers to use the same vehicle (and to have the same work schedule in order to limit contact between workers as much as possible);
- If vehicles are shared:
  - ▶ Have hydroalcoholic solutions or disinfectant wipes available at all times;
  - Have cleaning products in the vehicles;
  - Regularly clean and disinfect the most frequently used equipment, such as the steering wheel, dashboard, gear shift, handles, cleaning product containers, etc.;
  - Limit the number of passengers in service vehicles as far as possible and, ideally, reduce the number of passengers to 50% of the vehicle's capacity;
  - Air out the vehicle interior as often as possible, weather permitting, and do not set the ventilation system to recirculation mode;
  - > Open the vehicle's windows when the weather permits to improve air exchange.

### Car service

- > Do not encourage using car service to transport family members or close relations between sites;
- ▶ If the service is available, refer to the instructions for taxiing, ride-sharing and paratransit.

## Annex 2 Letter from the Directeur national de santé publique, May 17, 2021

Ministère de la Santé et des Services sociaux Québec 🐏 😫

Direction générale de la santé publique

PAR COURRIER ÉLECTRONIQUE

Québec, le 17 mai 2021

### AUX DIRECTEURS ET AUX DIRECTRICES DES SERVICES FUNÉRAIRES ET AUX TITULAIRES D'UN PERMIS DE THANATOPRAXIE

Mesdames, Messieurs,

Conformément au deuxième alinéa de l'annexe 1 du Règlement d'application de la Loi sur les activités funéraires (RLRQ, chapitre A-5.02, r.1, ci-après le Règlement), le 18 mars 2020, nous avons inscrit la COVID-19 dans la liste des maladies et des infections prévues à cette annexe.

Or, à la lumière des connaissances actuelles sur la COVID-19, nous vous avisons du retrait de cette maladie de la liste des maladies et infections prévues à l'annexe I du Règlement.

L'Institut national de santé publique du Québec publiera sous peu un guide qui encadre les activités professionnelles de thanatopraxie dans le contexte de la COVID-19. Il convient d'ailleurs de vous rappeler de l'application de l'article 62 du Règlement qui prévoit que le titulaire d'un permis de thanatopraxie et le personnel qui l'assiste doivent effectuer leur travail privément, avec l'attention et le soin requis afin de prévenir tout danger de contamination. Ils doivent également avoir à leur disposition les équipements et les vêtements de protection nécessaires reconnus dans les pratiques établies en thanatopraxie. Le choix de l'appareil respiratoire et des équipements de protection doit se faire en tenant compte des autres risques infectieux et chimiques possibles au regard des activités de thanatopraxie et de la règlementation en vigueur.

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Édifice Catherine-De Longpré 1075, chemin Sainte-Foy, 12\* étage Québec (Québec) G1S 2M1 Téléphone : 418 266-6700 Télécopieur : 418 266-6707 www.msss.gouv.qc.ca Pour de plus amples renseignements, n'hésitez pas à communiquer avec madame Frédérique Bédard, responsable du dossier funéraire à la Direction générale adjointe de la sécurité civile et des affaires institutionnelles du ministère de la Santé et des Services sociaux, par courrier électronique : <u>permisfunéraire@msss.gouv.qc.ca</u>.

Veuillez agréer, Mesdames, Messieurs, l'expression de nos sentiments les meilleurs.

Le directeur national de santé publique et sous-ministre adjoint,

Horacio Arruda, M.D., FRCPC

c. c. Mme Nicole Damestoy, INSPQ M. Daniel Deshamais, MSSS Mme Patricia Lavoie, MSSS

N/Réf.: 21-SP-00528

## **Record of modifications**

Version	Date	Pages	Modifications
4.0	May 31, 2021	Entire document	Updating of recommendations subsequent to the removal of COVID-19 from the list of diseases and infections in Schedule 1 of the Regulation respecting the application of the Funeral Operations Act.
		p. 2	Updating of section on transmission.
		p. 2-3	<ul> <li>Addition of the section on transmission risks when handling bodies.</li> <li>Addition of additional airborne-contact precautions to apply during interventions likely to generate aerosols.</li> <li>Removal of the section concerning Schedule 1 (CQLR, chapter A-5.02, r.1).</li> <li>Addition of the section General preventive and protective measures for embalming.</li> <li>Section on PPE: addition of N95 type RPDs.</li> </ul>
		p. 4	<ul> <li>Addition of the section Respiratory protection program.</li> <li>Addition of the section Ventilation.</li> </ul>
		р. 5	<ul> <li>Taking in charge of the body section: addition of deaths due to late sequelae of COVID-19.</li> <li>Management of personal effects section: quarantine period</li> </ul>
			reduced to 24 hours.
		р. 6	Addition of the section General measures for embalming procedures likely to generate aerosols.
		p.10	Addition of the section General rules for the protection of the health of FSB workers and clients.
		р. 13-15	Complete revision of Annex 1.
		p. 16	Annex 2: replaced by letter on removal of COVID-19 from Schedule 1 of the Regulation respecting the application of the Funeral Operations Act.

### **COVID-19: Preventive and Protective Measures for Funeral Services Businesses**

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The French version is entitled *Mesures de prévention et de protection pour les entreprises de services funéraires* is also available on the website of the Institut national de santé publique du Québec at: <a href="http://www.inspq.qc.ca/publications/2913-mesures-services-funeraires-covid19">www.inspq.qc.ca/publications/2913-mesures-services-funeraires-covid19</a>

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Publication No.: 2913 - English version

