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Accessibility – Environmental Sensitivities (previously known as Multiple Chemical Sensitivities)

Title: Accessibility – Environmental Sensitivities (prev. Accessibility – Multiple Chemical Sensitivities)		Policy No:	2.3.2
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		Policy Lead:	Accessibility Committee
Department:	Corporate		
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1. PURPOSE

People with environmental sensitivities (such as multiple chemical sensitivities or electromagnetic hypersensitivities) may present to a Quinte Health hospital not only for treatment of reactions related to their sensitivities, but also for unrelated injuries, acute or chronic illnesses, surgeries, appointments, and other purposes. When caring for patients with environmental sensitivities, we must endeavour to prevent reactions, minimize discomfort, and avoid extended hospital stays. In doing this, we enhance the confidence and trust of patients with environmental sensitivities, reduce fear / concern from their families, and increase the likelihood of successful treatment outcomes (Marshall & MacLennan, 2001).

This policy will assist clinical staff in anticipating and meeting the needs of those with environmental sensitivities, as well as outline the management and nursing responsibilities when caring for a patient with environmental sensitivities.

2. SCOPE

This policy applies to all Quinte Health staff and physicians when caring for patients with environmental sensitivities, such as a multiple chemical sensitivities (MCS) and / or electromagnetic hypersensitivities (EHS) illness / injury.

3. DEFINITIONS

Multiple Chemical Sensitivities (MCS): “A multisystem disorder that manifests as a result of exposure to various environmental contaminants (solvents, hydrocarbons, organophosphates, heavy metals) at concentrations below the ‘Threshold Limit Value’ (TLV) that are considered toxic doses for the general population,” (Rossi & Pitidis, 2018).

Electromagnetic Hypersensitivities (EHS): The clinical condition of patients reporting health effects (allergy-like symptoms, heart arrhythmia, neurological dysfunction, etc.) while being exposed to an electromagnetic field (EMF) (Rea et. al., 1991). Electromagnetic fields are created by moving electric charges from things like computers, radios, cellphones, WIFI, microwaves, remote controls, and diagnostic imaging equipment.

Environmentally Clean Room / Zone: A space that has been assessed as appropriate to place a patient with environmental sensitivities where they are least likely to be exposed to substances / objects (i.e. scents, materials, EMF) that may exacerbate symptoms related to their environmental sensitivity.

4. POLICY

Patients with - or experiencing severe reaction related to - an environmental sensitivity who present to a Quinte Health hospital will have all possible interventions / alternatives implemented in their plan of care to accommodate their condition and avoid reasonably preventable exacerbation of their symptoms.

5. PROCEDURE

5.1. The patient care team will collaborate with the admitting physician and the patient (or substitute decision-maker, as applicable) to make appropriate arrangements that will accommodate as best as possible any environmental sensitivity-related illness / condition that the patient has.

5.2. The person initially obtaining the patient’s history (i.e. the triage nurse, the booking clerk, etc.) is responsible for discussing any environmental sensitivities with the patient, completing appropriate documentation, and notifying the department.

5.2.1. Due to the nature of environmental sensitivities, patients’ specific intolerances / allergies can vary significantly, as well as how they may react when exposed. The patient (or their substitute decision-maker, as applicable) is responsible for informing those obtaining their history of the specifics around their environmental sensitivity, what symptoms they may develop, any known treatment protocols, and any accommodations that will alleviate / avoid symptom development.

5.3. An environmentally clean private room is required if the patient care team is unable to otherwise protect a patient from substances / objects that may cause or exacerbate symptoms related to their environmental sensitivity.

5.3.1. As a medical necessity, a private room will not be charged to the patient.

5.3.1.1. To ensure environmentally clean status, the room should not be new / newly renovated, and should be located away from potential triggers, such as;

5.3.1.1.1. for MCS, high-traffic areas, exhaust vents, parking lots, truck delivery areas, and laundry rooms

- 5.3.1.1.2. for EHS, WIFI routers / boosters, WIFI-dependent technology, radios, and diagnostic imaging departments / equipment.
 - 5.3.1.2. The designated room for the patient would ideally have a window that can be opened to allow extra intake of fresh air and the escape of any accumulated volatiles. If the window must be kept closed, an air purification system must be placed in the room. An air purification system is available at each site.
 - 5.3.1.2.1. At Belleville, Trenton, and Picton hospitals, contact the Hospitality Supervisor between 0700 and 2100 or the Resource Centre outside of these hours to obtain an air purification system.
 - 5.3.1.2.2. At North Hastings hospital, contact the Facility Services Representative or Hospitality Services Representative to obtain an air purification system.
 - 5.3.1.2.3. Patients are permitted to bring their own air purifier if they wish, provided it meets the requirements of policy 7.2 Electrical Safety.
 - 5.3.1.3. If necessary, an RF-blocking canopy can be installed within the patient's room to help block any EMF.
- 5.4. When a hospital visit is anticipated (i.e. if a patient with environmental sensitivities is coming into hospital for a scheduled appointment), admission arrangements will be coordinated with the applicable department / management in advance.
 - 5.5. Wait times in common / unassessed areas need to be limited as much as possible for patients with environmental sensitivities.
 - 5.6. If a patient is being transferred between units (for bed traffic reasons, diagnostics, a procedure, etc.) the sending nurse must provide a report to the receiving unit that includes information on the patient's environmental sensitivities, and what interventions should be put in place to avoid exposure.
 - 5.6.1. Patients with MCS should wear face masks prophylactically when travelling outside their environmentally clean room / zone.
 - 5.7. If a radiographic procedure requiring the use of contrast media has been ordered, the radiologist must complete an assessment of the patient related to their tolerance of the diagnostic contrast media's ingredients. Appropriate accommodations / alternatives must be explored if a patient cannot tolerate the standard contrast media.
 - 5.8. Patients requiring routine blood work will be treated prior to other patients to avoid the introduction of contaminants by other patients. Avoid use of alcohol swabs for patients with allergies or sensitivities as required.
 - 5.9. Wherever possible, the care team will use products that can be tolerated by the patient, and avoid bringing items into their space that could cause symptom flare-up.
 - 5.9.1. MCS examples: latex-free supplies, non-metallic prosthetics, chlorhexidine swabs instead of alcohol swabs, unscented lotions / hand hygiene products
 - 5.9.2. EHS examples: do not bring personal wireless devices (cellphones, smart watches, etc.) into the patient room
 - 5.10. If the patient has specific food allergies, the care team must contact the Diet Technician to interview the patient and to determine suitable menu items. Food will be heated using appropriate glassware and non-PVC covering (i.e. aluminum foil). Water in

glass bottles will also be available from the Nutrition and Food Services Department for patients with sensitivities to chlorinated water and PVC bottles.

- 5.11. Patients are encouraged to bring their own personal care products and / or bedding and clothing that will block EMF / accommodate their sensitivities.
- 5.12. A notice will be posted on the door to patient rooms indicating when the patient has a medically-documented environmental sensitivity, and what must be avoided in the space based on patient's needs.
- 5.13. Quinte Health shall continue to take steps to reduce environmental contaminants. Quinte Health only uses paints identified as containing low levels of Volatile Organic Compounds (VOC) and where available paints with no VOC. While cleaning chemicals must meet the Provincial Infectious Disease Advisory Committee (PIDAC) Guidelines, wherever possible, scent free or low scented products are used. When purchasing drapes, blinds and other furnishings, Quinte Health will consider products that are identified to have low or no chemical off-gassing. Quinte Health has prohibited smoking on its properties (Corporate Policy 2.11.20). All staff must comply with the Occupational Health & Safety (OH&S) Policy 7.9 Reduced Scent.
- 5.14. Prior to completing any work with potential to generate detectable odours (e.g. floor stripping/waxing, work with adhesives/epoxies, or other high-VOC substance), the department completing the work will send advance notification to all department managers. If a patient has identified sensitivities, the department manager must notify the manager of the initiating department who will reschedule the work to a more suitable time. The department initiating the work shall post a notice at the elevator or entrance to the unit to indicate the potentially hazardous work in progress and shall further ensure a copy of the relevant Material Safety Data Sheet is available and/or provided to OH&S.
- 5.15. With respect to Quinte Health staff sensitivities, Occupational Health will maintain a list of all staff that have had or have self-declared sensitivities. Whenever possible, a medical assessment will be documented to verify all potential hazards related to the condition and route of hazard. This list is available to managers upon request.

APPENDICES AND REFERENCES

References:

Marshall, L.M., & MacLennan, B.A. (2001). Environmental health in hospital; A practical guide for hospital staff. Part II: Environmental-sensitive care. *Canadian Society for Environmental Medicine*.

Rossi, S., & Pitidis, A. Multiple Chemical Sensitivity: Review of the State of the Art in Epidemiology, Diagnosis, and Future Perspectives. *J Occup Environ Med*. 2018;60(2):138-146. doi:10.1097/JOM.0000000000001215.

Rea W.J., Pan Y., Fenyves E.F., Sujisawa I., Suyama H., Samadi N., Ross G.H. Electromagnetic field sensitivity. *J. Bioelectricity*. 1991;10:214–256. doi: 10.3109/15368379109031410.

Cross References:

Airborne Isolation Room Management – Infection Control (IC) 3-01/OH&S 5.15

Contractor Safety Rules and Regulations– OH&S 11.1

Electrical Safety – OH&S 7.2

Gloves Use (Hand Protection Program) – IC 3.25

Indications and Procedures; Gowns – IC 3.30/OH&S 6.8

Life Safety – electrical Appliance – Corporate 2.31

Masking for Personal Protection – IC3.36/OH&S 6.5

Personal Protective Equipment; General Standards and Requirements – IC 3.45/OH&S 6.1

Reduced Scent -OH&S 7.9 Smoke Free Environment – Corporate 2.11.20