

COVID -19: Infection Control in Home Care & Supported Living

Awareness & Refresher Course

All slides adapted from:

Infection Prevention & Control in Care Homes (NHS Royal National Orthopaedic Hospital NHS)
and

Covid-19: Infection Prevention and Control in Domiciliary Care (Northamptonshire CCG)



Current guidance

GOV.UK

<https://www.gov.uk/government/publications/covid-19-how-to-work-safely-in-domiciliary-care>



Personal protective equipment (PPE)
– resource for care workers delivering
homecare (domiciliary care) during
sustained COVID-19 transmission in
the UK

What we will cover



**Standards of
Infection
prevention and
control**



**Principles of
hand hygiene**



**The use of PPE
including
'sessional' use**



**Problems with
using PPE**



**Cleaning and
decontamination**



**Disposal of
waste**



**Handling of
laundry**

Standard Infection Prevention and Control Precautions

These include:

1. Handwashing
2. Use of Personal Protective Equipment (PPE)
3. Safe management of soiled/infected linen
4. Cleaning of equipment and the environment
5. Safe disposal of used sharps
6. Safe management of waste
7. Management of blood and body fluid spillages

For the purposes of this presentation we are going to focus on the importance of hand hygiene and the use of PPE

Hand Hygiene - Top tips for effective Hand Hygiene

Bare below the elbows:

- Sleeves should be short or long sleeves must be rolled up

Jewellery

- No watches or bracelets should be worn – a Kara may be worn providing it is pushed up the arm while when performing hand hygiene. Individual staff members must ensure that their Kara is clean
- Medi-alert bracelets may be worn under clothing on a necklace
- One single plain metal finger ring is permitted but should be removed or moved up when hand washing to wash underneath it
- No stoned rings

Nails

- No long nails, no false/gel nails or nail varnish should be worn

Cuts & abrasions

- Waterproof dressing should be applied to any cuts or abrasions

Skin care - remember to moisturise your hands at the end of each shift

Handwashing versus alcohol hand rubs

Liquid Soap & Water

- Correct handwashing technique **removes** the virus from our hands
- The type of liquid soap and water temperature is not important, the handwashing technique is

Alcohol based hand rubs (ABHR) need to contain 75 to 85% ethanol, isopropanol, or n-propanol or a combination of these products.

- Hand rub used correctly kills the virus
- Hand rub should not be used on soiled hands – soiled/dirty hands must be washed
- Hand rubs are an effective substitute when handwashing facilities are not readily available – you do not need both

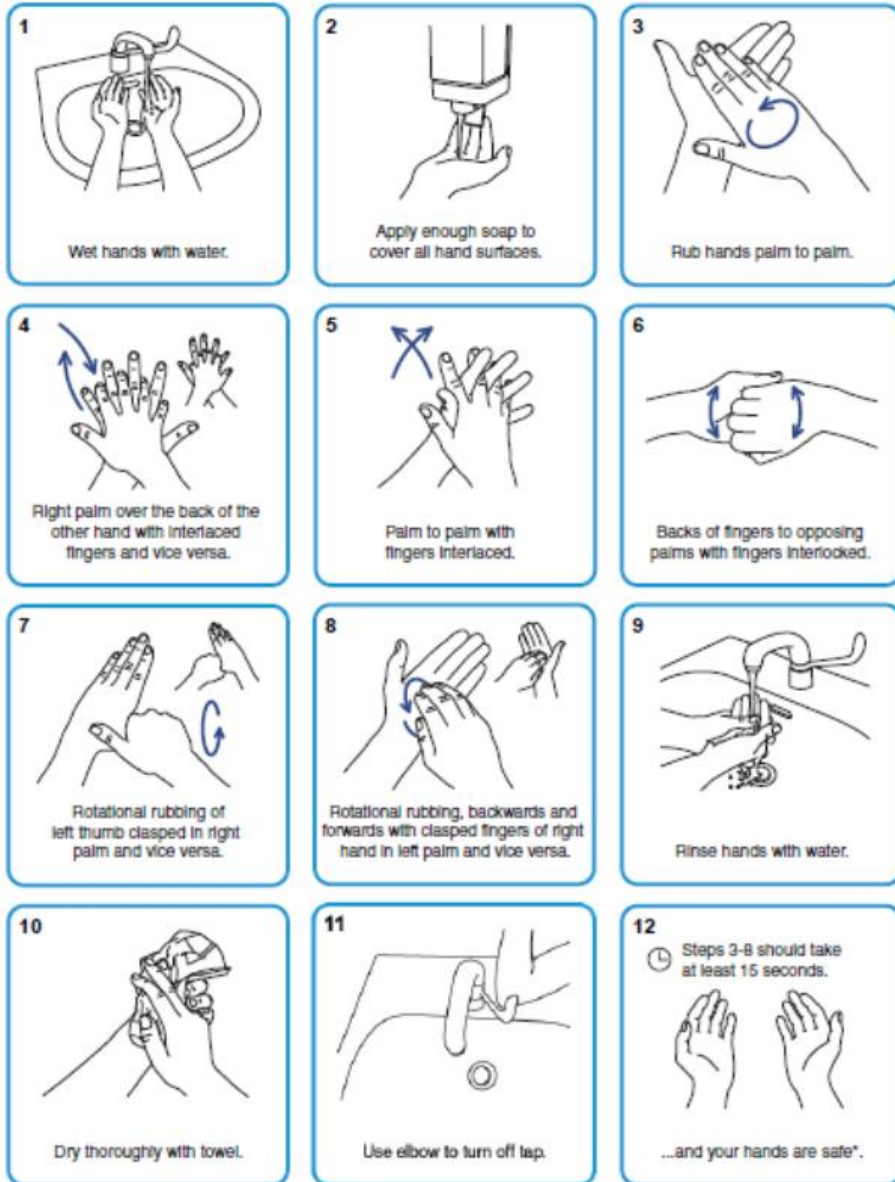
The same technique should be used when washing hands and using when using hand rub

When should you wash your hands?

- On entering the persons home
- Before putting on PPE
- Before every episode of care and in-between different activities/tasks with the same person
- After taking PPE off
- Before and after handling food/meal preparation
- After completing any cleaning activities
- Immediately prior to leaving the persons home
- Whenever they are dirty

Remember – regular hand washing should be done at all times, not just at work!

Steps 3-8 should take at least 15 seconds.



*Any skin complaints should be referred to local occupational health or GP.

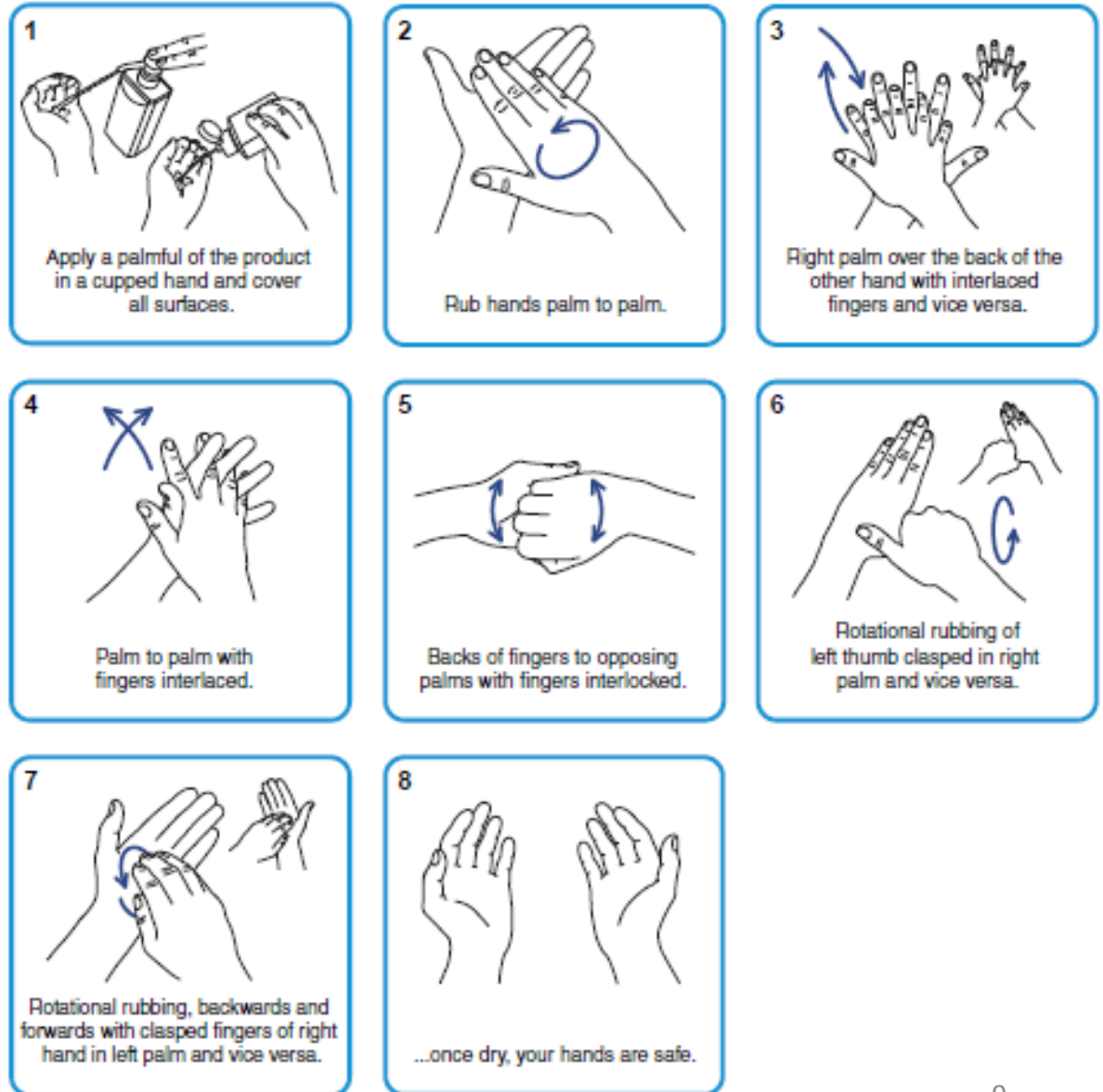
How to wash your hands

- Take time to study all the steps in the poster.
- Practice the steps and remember to use them at all times, not just at work
- Use liquid soap rather than bar soap
- Don't forget to wash all the way up to the elbow - not just the wrists
- Hand drying - this is just as important as the hand washing process.
- Watch the video
<https://www.youtube.com/watch?v=6JrEeR5OXiE>

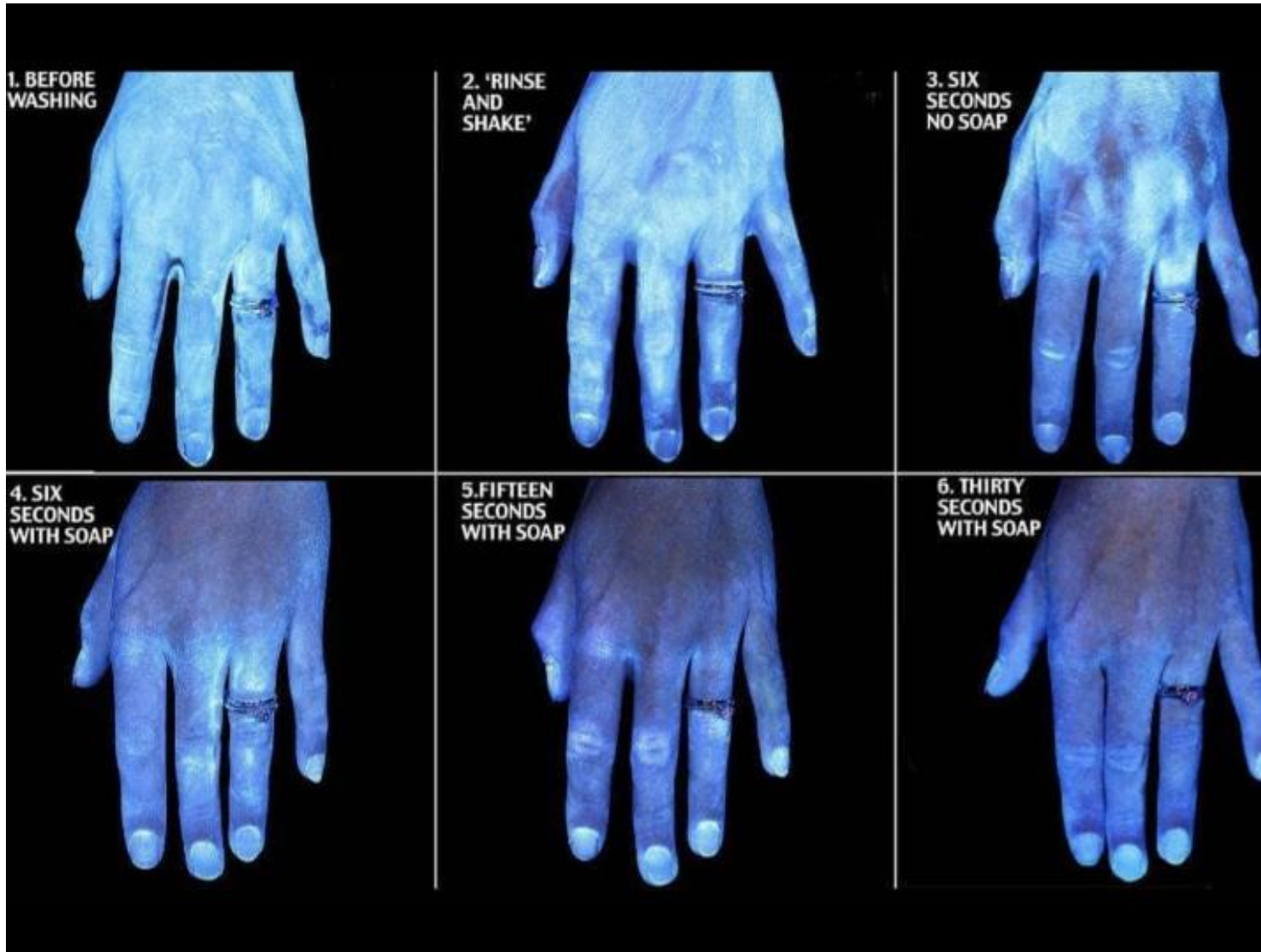
Using alcohol hand rub

- When using hand rubs, the same steps need to be followed as with hand washing which includes the wrists and forearms
- Make sure you give the hand rub sufficient time to dry before undertaking the next task
- Gloves are not a substitute for hand washing or hand rubs

Duration of the process: 20-30 seconds.



Effectiveness of handwashing



Remember to wash the frequently missed areas which include:

- Underneath a plain wedding ring
- The back of the hands
- Between the fingers
- Finger nails
- Wrists and forearms

Do not wear a stoned ring

What PPE should I wear, and when should I wear it?

What PPE to wear

- Disposable plastic aprons
- Disposable gloves - ideally latex or nitrile if there is a known allergy but vinyl is a suitable alternative
- Face mask – surgical/fluid repellent
- Eye shield – goggles or visor if risk assessed as needed

When to wear PPE

- Before contact with the person receiving care, put on at least 2m away from the person or anyone who is coughing
- When providing direct personal care or supporting a person with eating and drinking
- When undertaking any cleaning tasks
- When handling waste

Remember

- **Change PPE before every episode of care and in-between different activities/tasks with the same person**
- **Avoid touching your face or lowering your mask when talking**

What PPE should be worn – when providing close personal care in direct contact with the person or within 2 metres of anyone in the household who is coughing

Recommended PPE items	Explanation
Disposable Gloves	Yes
Disposable plastic apron	Yes
Fluid-resistant (Type IIR) surgical mask	<p>Fluid-resistant surgical masks (FRSMs) can be used continuously while providing care, unless you need to remove the mask from your face (e.g. to drink, eat, take a break from duties).</p> <p>You can wear the same mask between different homecare visits (or visiting different people living in an extra care scheme), if it is safe to do so whilst travelling. This may be appropriate when travelling between households on foot or by car or by public transport, so long as you do not need to take the mask off, or lower it from your face and providing it does not compromise your safety (e.g. driving ability) in any way.</p> <p>You should not touch your face mask. The mask is worn to protect you, the care worker, and can be used while caring for a number of different people regardless of their symptoms.</p> <p>You should remove and dispose of the mask if it becomes damaged, visibly soiled, damp, or uncomfortable to use. If removed, you would then need to use a new mask when you start your next homecare visit</p>
Eye Protection	<p>Eye Protecting is recommended for care of people where there is risk of droplets or secretions from the person's mouth, nose, and lungs or from body fluids reaching the eyes (e.g. caring for someone who is repeatedly coughing).</p> <p>Use of eye protection should be discussed with your Manager and you should have access to eye protection (such as goggles or visors). Eye protection can be used continuously while providing care, unless you need to remove the eye protection from your face (e.g. to take a break from duties).</p> <p>We do not recommend continued use of eye protection when driving or cycling.</p> <p>If you are provided with goggles/a visor that is reusable, then you should be given instructions on how to clean and disinfect following the manufacturer's instructions or local infection control policy and store between visits. If eye protection is labelled for single use then it should be disposed of after removal</p>

What PPE should be worn – when within 2 metres of the person but not delivering personal care or needing to touch them and there is no one within 2 metres who has a cough

Recommended PPE items	Explanation
Disposable Gloves	No
Disposable plastic apron	No
Type II surgical mask	<p>Type II surgical masks can be used continuously while providing care, unless you need to remove the mask from your face (e.g. to drink, eat, take a break from duties).</p> <p>You can wear the same mask between different homecare visits (or visiting different people living in an extra care scheme), if it is safe to do so whilst travelling. This may be appropriate when travelling between households on foot or by car or by public transport, so long as you do not need to take the mask off, or lower it from your face and providing it does not compromise your safety (e.g. driving ability) in any way.</p> <p>You should not touch your face mask. The mask is worn to protect you, the care worker, and can be used while caring for a number of different people regardless of their symptoms. You should remove and dispose of the mask if it becomes damaged, visibly soiled, damp, or uncomfortable to use. If removed, you would then need to use a new mask when you start your next homecare visit</p> <p>Note: Surgical masks do not need to be fluid resistant for use in this situation. However, if you are already wearing a fluid resistant surgical mask there is no need to replace it, and if only fluid resistant surgical masks are available then these may be used.</p>
Eye Protection	<p>Eye Protecting is recommended for care of people where there is risk of droplets or secretions from the person's mouth, nose, and lungs or from body fluids reaching the eyes (e.g. caring for someone who is repeatedly coughing).</p> <p>Use of eye protection should be discussed with your Manager and you should have access to eye protection (such as goggles or visors). Eye protection can be used continuously while providing care, unless you need to remove the eye protection from your face (e.g. to take a break from duties).</p> <p>We do not recommend continued use of eye protection when driving or cycling.</p> <p>If you are provided with goggles/a visor that is reusable, then you should be given instructions on how to clean and disinfect following the manufacturer's instructions or local infection control policy and store between visits. If eye protection is labelled for single use then it should be disposed of after removal</p>

HOW TO WEAR A MEDICAL MASK SAFELY

who.int/epi-win

Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



Find the top side, where the metal piece or stiff edge is



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



Adjust the mask to your face without leaving gaps on the sides



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

Don'ts →



Do not Use a ripped or damp mask



Do not wear the mask only over mouth or nose



Do not wear a loose mask



Do not touch the front of the mask



Do not remove the mask to talk to someone or do other things that would require touching the mask



Do not leave your used mask within the reach of others



Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 1 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.

EPI·WIN





Putting on personal protective equipment (PPE)

for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: https://youtu.be/-GncQ_ed-9w

Pre-donning instructions:

- Ensure healthcare worker hydrated
- Remove jewellery
- Tie hair back
- Check PPE in the correct size is available

- 1 Perform hand hygiene before putting on PPE.



- 2 Put on apron and tie at waist.



- 3 Put on facemask – position upper straps on the crown of your head, lower strap at nape of neck.



- 4 With both hands, mould the metal strap over the bridge of your nose.



- 5 Don eye protection if required.



- 6 Put on gloves.



Putting on (Donning) PPE

- Take time to study and remember all the steps in the poster.
- If possible carry a copy of the poster with you as a reminder of how to put on and take off PPE correctly - have them laminated so you can wipe them down when needed.
- Watch the video https://www.youtube.com/watch?v=-GncQ_ed-9w



Taking off personal protective equipment (PPE) for non-aerosol generating procedures (AGPs)*

Please see donning and doffing video to support this guidance: https://youtu.be/-GncQ_ed-9w

• PPE should be removed in an order that minimises the risk of self-contamination

• Gloves, aprons (and eye protection if used) should be taken off in the patient's room or cohort area

1 Remove gloves. Grasp the outside of glove with the opposite gloved hand; peel off. Hold the removed glove in the remaining gloved hand.



Slide the fingers of the un-gloved hand under the remaining glove at the wrist.

Peel the remaining glove off over the first glove and discard.



2 Clean hands.



3 Apron.

Unfasten or break apron ties at the neck and let the apron fold down on itself.



Break ties at waist and fold apron in on itself – do not touch the outside – **this will be contaminated.** Discard.



4 Remove eye protection if worn.

Use both hands to handle the straps by pulling away from face and discard.



5 Clean hands.



6 Remove facemask once your clinical work is completed.



Untie or break bottom ties, followed by top ties or elastic, and remove by handling the ties only. Lean forward slightly. Discard. DO NOT reuse once removed.

7 Clean hands with soap and water.



Taking off (Doffing) PPE

- Take time to study and remember all the steps in the poster.
- If possible carry a copy of the poster with you as a reminder of how to put on and take off PPE correctly - have them laminated so you can wipe them down when needed.
- Watch the video (4 minutes 2 seconds in) https://www.youtube.com/watch?v=-GncQ_ed-9w

Points to note when removing PPE

- Self contamination is very common if you take PPE off (doffing) incorrectly
- Contributory factors to this include forceful or rushed movements and/or incorrect doffing sequence

Improve your technique

- Before removing PPE try standing in front of a bin and at least 2m away from the person being cared for
- Become familiar with the doffing sequence, use prompt cards or posters if this helps
- When doffing, focus on where the dirty surfaces are (outside of masks/goggles and front of apron)
- Practice when you have a few free minutes as these are new techniques

What is meant when we say 'sessional' use?



Sessional use refers to using PPE for a period of time



During this period you may be looking after more than one person



Items that can be used for a *session* are the ones that protect the carer from the risk of infection from the person receiving care i.e. mask and eye protection – a mask can be worn whilst travelling however we DO NOT recommend wearing a visor whilst travelling



Items that protect both the person receiving care and the carer cannot be used on a sessional basis i.e. gloves and aprons. These must be changed and discarded between residents.

Sessional use of PPE

Advantages:

- Reduces risk of self contamination by reducing frequency of taking off some PPE items
- Can reduce the number of masks and eye protection used
- Some items may be cleaned after the session and re-used (i.e. goggles/eye protection)

Disadvantages:

- Self contamination is easy
- Must remember not to touch the front of your mask and goggles
- Must remember to change if they become soiled/damp or damaged
- Remove the items properly and in the correct order

Sessional use of masks and eye protection

If using these on a sessional basis:

- **DO** take a comfort break before putting it on
- **DO** make sure you are well hydrated especially in the hot weather
- **DO** make sure that it is comfortably put in place and will not need adjustment
- **DO** dispose of after use if they are 'single use' items
- **DO** clean eye protection equipment in line with manufacturers instructions if they are 'reusable'
- **DO** remember to replace if they become visibly soiled, damaged, damp or uncomfortable to wear
- **DO NOT** take them off and leave on surfaces
- **DO NOT** wear the mask hanging off your chin or with goggles on top of your head

Remember

- **Gloves and apron are single use and should never be used on a *sessional* basis.**
- **Gloves are not a substitute for hand hygiene.**

How and where to dispose of used PPE

- All waste from a person's home should be placed in a refuse bag and can be disposed of as normal domestic waste if they do not have symptoms of COVID-19
- Waste from a person with symptoms of COVID-19, including disposable cloths, used tissues and PPE waste :
 - Should be put in a plastic rubbish bag and tied when two thirds full.
 - The plastic bag should then be placed in a second bin bag and tied.
 - This should then be put in a suitable and secure place and stored for 72 hours before being put in the normal household waste collection bin.
- Waste should be stored safely and securely kept away from children.
- Waste should be stored separate from other household waste for 72hrs.
- Storing for 72 hours saves unnecessary waste movements and minimises the risk to waste operatives. This waste does not require a dedicated clinical waste collection in the above circumstances.
- Do NOT put any items of PPE (or face coverings of any kind) in the recycling bin

Cleaning in the person's home

- If you are undertaking cleaning tasks then you should use normal household products such as detergents and bleach.
- Frequently touched surfaces should be cleaned more frequently
- If you are cleaning within 2 metres of the person receiving care then you should wear disposable gloves, plastic aprons and a Type II surgical mask.
- If cleaning a visor or goggles, these should be cleaned between use and placed into a clean plastic bag after cleaning and when not in use- do not place a visor onto surfaces that cannot be easily wiped e.g. car seat

Remember to wash your hands after completing any cleaning task – including wrists and forearms

Washing Uniforms / Clothes worn at work

Regardless of wearing PPE, uniforms (or own clothes if worn to work) should be laundered as follows:

- Change out of your uniform / clothing when you get home
- Wash separately from other household linen if heavily soiled
- Wash in a load not more than half the machine capacity
- Wash at the maximum temperature the fabric can tolerate, then ironed or tumble dried

This does not need to apply to underclothes unless contaminated by the person's body fluid (e.g. vomit, or fluids soaked through external items).

Shopping & Social Activities

- When possible change out of uniforms if this is not possible then cover them
- Do not wear aprons and gloves
- In England, you must by law wear a face covering from July 24th 2020 in shops and supermarkets and when using public transport.
- Do not wear a visor whilst outside a person's home
- Remember to maintain social distancing of 2 metres
- Clean frequently touched surfaces inside your car regularly with detergent wipes

Further information

If you have any queries or would like further information, please contact your Care Manager in the first instance.

