

## Covid-19: Quick Summary for Domiciliary Care settings on PPE & Infection Prevention (7 May 2020)

Ascertain, where possible before face to face contact, whether an individual or household member meets the case definition for a possible or confirmed case of COVID-19 OR is shielding

Providing personal care (within 2m) where the visit **does require direct contact with the client, OR you are within 2m of anyone in the household who is coughing**

### PPE<sup>2</sup>

PPE should include:

- Disposable gloves (single use<sup>3</sup>)
- Disposable plastic apron (single use<sup>3</sup>)
- Fluid repellent Surgical mask (can be used for caring for more than one client<sup>4</sup>)
- Eye protection if client or household member symptomatic for COVID or if risk of body fluid splashes/droplets.<sup>4</sup> Clean after use if reusable. Goggles are freely available for all adult social care staff through the council.

Providing care (**closer than 2m and no direct contact**) to client who is not coughing, in a household where there are **no people that need shielding**

### PPE<sup>2</sup>

PPE should include:

- Surgical mask (can be used for caring for more than one client<sup>4</sup>)

Further guidance on PPE<sup>5</sup>:

- [Video on putting on \(donning\) and taking off \(doffing\) PPE](#)
- [Poster on donning and doffing PPE](#)
- [Hand hygiene advice<sup>6</sup>](#)

Entering the property house of someone **shielding**

### PPE<sup>2</sup>

PPE should include:

- Disposable gloves (single use<sup>3</sup>)
- Disposable plastic apron (single use<sup>3</sup>)
- Surgical mask (single use<sup>3</sup>)

- PPE is only effective when combined with good hand and respiratory hygiene practice.
- Wash Hands with hand sanitiser or soap and warm water.<sup>6</sup>
- Never touch the outside of a worn mask.

- This guidance covers Extra Care housing and Live-In Homecare as well as Domiciliary Care
- **Aerosol generating procedures (including noninvasive ventilation ("CPAP"/"BiPAP"/"NIV"), cough assist, mouth suction, open tracheostomy suction/tracheostomy care and some other rare procedures) require different PPE to the above –check [guidance for aerosol generating procedures](#) and contact [Wolverhampton Council's Adult Social Care team](#) if you perform AGPs so we can offer assistance and supply PPE where needed**
- You will usually know what PPE you need to wear before entering the property – put this on before entering if possible, and definitely before being within 2m of a household member. Take it off close to the door to the property, more than 2m from anyone in the house.
- Open a window where possible.
- If practical, household members with respiratory symptoms, and pets, should remain outside the room(s) where the care worker is working. Remain more than 2m away from any person that you practically can. If a person in the house who is not the client is [shielding](#), advise them to stay in another room.
- All symptomatic people should be immediately isolated in their home for 7 days from onset of symptoms, their household members for 14 days.
- Your organisation should have a list of all clients who are [shielding \(ie in the clinically extremely vulnerable group\)](#). No staff in the [shielding group](#) should be providing face to face care, and staff in the clinically vulnerable group should be deployed away from caring for symptomatic people.<sup>1</sup>
- It may be appropriate to visit symptomatic individuals at the end of your list, where safe to do so, and discuss ways with your manager to minimise direct contact where practical, to further reduce risk to yourself. If you discover a client who has symptoms of COVID, immediately tell your manager.

## Links to key guidance:

[COVID-19: How to work safely in domiciliary care in England \(30.4.20\) \(essential PPE reading\)](#) and [COVID-19: guidance on home care provision \(essential reading\)](#)

[Shielding the extremely vulnerable](#)

[COVID-19: infection prevention and control \(IPC\) \(including section on general PPE use\)](#)

[Staying at home and away from others \(social distancing\)](#)

[Stay at home guidance for households with potential coronavirus infection](#)

[Guidance on social distancing for everyone in the UK and protecting older people and vulnerable adults](#)

[Best Practice Guidance on Blood and body fluid spillages](#)

[Standard Operating Procedures for Social Care](#)

[Occupational health and staff deployment](#)

### Notes:

1. Employers should discuss with any staff (including bank staff) in [the clinically vulnerable group](#) (note: this is **not** the shielding group) the need [to be deployed away from care for people with COVID](#) or suspected COVID.
2. All health and social care workers need to have access to and, where required, wear aprons, face masks, eye protection and gloves.
3. Aprons and gloves are subject to single use as per Standard Infection Control Precautions, with disposal and hand hygiene after each patient contact
4. Staff may wear the same item for the whole period between breaks, including, if safe to do so, whilst travelling. They must remove **and dispose** of the mask if it becomes damaged, soiled, damp, or uncomfortable to use. Do not re-use used masks. Where staff need to remove masks (e.g. to take a drink or eat) a new one must replace it. Masks and eye protection may not be allowed to “dangle” off the face.
5. All staff must be competent (at least have seen and understood materials) at putting on and taking off PPE.
6. If forearms become exposed, eg. to cough droplets/fluids, [wash forearms as well as hands](#)

### PPE supply shortage

You should inform your manager if you are concerned about any shortage of PPE, who should contact the **Adults Commissioning Department of the City of Wolverhampton City Council**

### Cleaning

If care workers undertake cleaning duties, then they should use usual household products, such as detergents and bleach. Frequently touched surfaces should be cleaned regularly.

Spills should be [treated according to guidance](#).

Open a window if possible.

### Waste

Waste should be placed in a refuse bag and can be disposed of as normal domestic waste unless the client has symptoms of COVID-19.

Waste from people with symptoms of COVID-19, waste from cleaning of areas where they have been (including disposable cloths and tissues) and PPE waste from their care:

1. Should be put in a plastic rubbish bag and tied when full
2. The plastic bag should then be placed in a second bin bag and tied
3. It should be put in a suitable and secure place and marked for storage for 72 hours

Waste should be stored safely and securely kept away from children. You should not put your waste in communal waste areas until the waste has been stored for at least 72 hours. This waste does not require a dedicated clinical waste collection in the above circumstances.

### Laundry

Regardless of wearing PPE, uniforms should be laundered as follows:

- Separately from other household linen
- In a load not more than half the machine capacity
- At the maximum temperature the fabric can tolerate, then ironed or tumble dried

If care workers do not wear uniform they should change their clothing when they get home and launder as for uniforms.

If supporting the individual with laundry, do not shake dirty laundry before washing. Wash items as appropriate, in accordance with the manufacturer's instructions.

Items heavily soiled with body fluids, for example, vomit or diarrhoea, or items that cannot be washed, should be disposed of, with the owner's consent (see above waste guidance).

For further information please see [guidance on home care provision](#).