

PPE GUIDELINES & INFECTION PREVENTION INSIDE DOMICILIARY CARE SETTINGS - CORONAVIRUS

(FOR NON AEROSOL GENERATING PROCEDURES)*

Version correct on 30/06/20. If this guidance is printed, you must confirm by checking on this link: www.wolverhampton.gov.uk/coronavirus-advice-and-information/advice-for-those-providing-care that this version is up to date



No staff with symptoms of COVID should be at work – they should be isolating appropriately and have immediate COVID-19 swab testing.



Staff in extremely vulnerable (shielding) groups should not be at work.

This guidance covers Extra Care housing as well as Domiciliary Care

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.¹

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.

WHEN TO WEAR YOUR PPE



Complete a Risk Assessment

Manager/Agency: Responsible for risk assessment of the likelihood of employee encountering a person with COVID-19 or a shielding person.

Employee: responsible for informing manager/agency of any changes to client. If practical, employee may call client ahead of visit to check on their symptoms.

Appropriate PPE should be planned as a result of this risk assessment in light of activities planned.

Providing personal care (within 2m) where the visit requires direct contact with the client, (e.g. touching)

OR

you are within 2m of anyone in the household who is coughing or shielding

Entering a property where someone living there is **shielding.**

Providing care closer than 2m where there is no direct contact to client (who is not coughing, in a household where there are no people that need **shielding)**
e.g. removing medicines from packaging for a client, domestic cleaning within 2m of the client or preparing food for clients who can feed themselves without assistance.

PPE should include:

- Disposable plastic apron (single use³)
- Disposable gloves (single use³)
- Fluid repellent surgical mask (this can be used for more than one client⁴)
- Eye protection if client or household member symptomatic for COVID or if risk of body fluid splashes/droplets⁴.

Clean eye protection after use, if reusable. Guidance

Goggles are freely available for all adult social care staff through the council. Contact people.commissioning@wolverhampton.gov.uk

PPE should include:

- Surgical mask (can be used for caring for more than one client⁴)
- Disposable plastic apron (single use³)
- Disposable gloves (single use³)

PPE should include:

- Surgical mask (this can be used for more than one client⁴)

Gloves and aprons are not required

PPE is only effective when combined with good hand and respiratory hygiene practice

- Wash hands with hand sanitiser or soap and warm water⁶
- Never touch the outside of a worn mask.

PPE supply shortage

You should inform your manager if you are concerned about any shortage of PPE. If there is a shortage your manager should contact the Adults Commissioning Team who will be able to assist

Contact them by email here: people.commissioning@wolverhampton.gov.uk

Notes:

- 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.
- All health and social care workers need to have access to and, where required, wear aprons, face masks, eye protection and gloves.
- Aprons and gloves are subject to single use as per Standard Infection Control Precautions, with disposal and hand hygiene after each patient contact
- 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.
- All staff must be competent (at least have seen and understood materials) at putting on and taking off PPE.
- If forearms become exposed, e.g. to cough droplets/fluids, [wash forearms as well as hands](http://www.hsa.gov.au/web_content/bands)

Links to key guidance:

COVID-19: How to work safely in domiciliary care in England (essential PPE reading)	View
Coronavirus (COVID-19): provision of home care (essential reading)	View
Shielding the extremely vulnerable	View
COVID-19: infection prevention and control (IPC) (including section on general PPE use)	View
Staying alert and safe (social distancing)	View
Stay at home: guidance for households with possible or confirmed coronavirus (COVID-19) infection	View
Best Practice Guidance on Blood and body fluid spillages	View
Novel coronavirus (COVID-19) standard operating procedure: Community health services	View
Occupational health and staff deployment	View



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:

- Should be put in a plastic rubbish bag and tied when full
- The plastic bag should then be placed in a second bin bag and tied
- 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 where 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](#).

Further guidance on PPE

- [Video](#) on putting on (donning) and taking off (doffing) PPE
- [Poster](#) on donning and doffing PPE
- [Hand hygiene advice](#)

* Aerosol generating procedures (including noninvasive ventilation (“CPAP”/“BiPAP”/“NIV”), cough assist, mouth suction, – tracheostomy suction/tracheostomy care and some other rare procedures) require 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