

Guidance for workers who are providing home care.

1. Considerations for the Worker

If a member of staff is concerned that they have COVID-19, please follow NHS guidelines:

Stay at home if you have either:

- **a high temperature** – this means you feel hot to touch on your chest or back (you do not need to measure your temperature)
- **a new, continuous cough** – this means coughing a lot for more than an hour, or 3 or more coughing episodes in 24 hours (if you usually have a cough, it may be worse than usual)
- **Do not** go to a GP surgery, pharmacy or hospital.
- You do not need to call 111 if you are staying at home and testing for coronavirus is not needed.
- Self-isolate; workers should not visit and care for individuals until safe to do so.

If you have COVID-19 symptoms, however mild – stay at home for 7 days from when your symptoms started.

If you are the first person in your household to have symptoms, other members of the household must also stay at home and not leave the house for 14 days. (14 days starts from the day the first person in the house became ill.)

For anyone else who starts displaying symptoms, they need to stay at home for 7 days from when their symptoms first appeared.

People living together are more likely to infect each other, or already be infected, therefore staying at home for 14 days minimises infection to others in the community. If possible, move vulnerable individuals (elderly or those with underlying health conditions).

If you cannot move vulnerable individuals, stay away from them as much as possible.

Ask your friend, neighbour or employer to help you get the things you need to stay at home.

Hand hygiene - wash your hands with soap and water more often and do this for at least 20 seconds. You should follow this advice on [hand hygiene](#).

Put used tissues in the bin straight away and wash your hands afterwards.

Do not touch your eyes, nose or mouth if your hands are not clean.

If you cannot cope with your symptoms at home, or your condition worsens and you do not get better after 7 days then use NHS 111 online, or call NHS 111. For a medical emergency dial 999.

Government guidance is changing quickly, please see this [Public Health Wales Guidance](#) for the most up to date information.

2. Prior to any visit

Wherever possible, before a worker undertakes a home care visit, a phone call should be made to contact the individual in advance to ask if they, or anyone in the household has any of the COVID-19 symptoms (as above).

Social distancing of 2m should be used for non-contact activities such as giving advice or conducting verbal consultations.

Hand hygiene - wash your hands with soap and water more often and do this for at least 20 seconds. Workers should follow advice on [hand hygiene](#).

Use hand sanitiser gel if hand washing facilities are not available.

Always wash your hands when you get home or into work.

Cover your mouth and nose with a tissue or your sleeve (not your hands) when you cough or sneeze.

Put used tissues in the bin straight away and wash your hands afterwards.

Do not touch your eyes, nose or mouth if your hands are not clean.

Please see this [UK Government Guidance](#) for further information:

3. Personal Protective Equipment (PPE)

Workers should use personal protective equipment (PPE) for activities that bring them into close personal contact with service users.

- Fluid Resistant Surgical Mask (FRSM),
 - Disposable gloves
 - Disposable plastic apron
 - Appropriate eye protection after risk assessment of need if splashing or spraying of body fluids likely
- The type of PPE used will vary based on the type of exposure anticipated, and not all items of PPE will be required.
- The order for putting on PPE is Apron, Surgical Mask, Goggles (if required) and Gloves.
- The order for removing PPE is Gloves, Goggles, Apron and then Surgical Mask.
- Aprons, gloves and fluid repellent surgical masks should be used in these situations. If there is a risk of splashing, then eye protection will minimise risk.
- New personal protective equipment must be used for each episode of care.

Effective Hand Hygiene is Essential Combined with use of PPE.

Any PPE equipment provided must only be used in conjunction with national guidance.

National Infection Prevention and Control Manual that Wales has adopted can be found [here](#).

All services are advised to keep up to date with the latest advice on COVID-19 via Public Health Wales (PHW) website [here](#).

PPE equipment will be distributed by Chris Evans and his team, he can be contacted using the following email address pccsscommissioning@powys.gov.uk

Currently if PPE stock cannot be accessed, arrangements are in place that care providers can approach Powys Teaching Health Board for urgent assistance.

Putting on Personal Protective Equipment (PPE)

Guide to donning and doffing standard PPE can be found here:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877658/Quick_guide_to_donning_doffing_standard_PPE_health_and_social_care_poster_.pdf

Perform hand hygiene before putting on PPE

Apron

Pull over head and fasten at back of waist.

Surgical mask

Secure ties or elastic bands at middle of head and neck.

Fit flexible band to nose bridge.

Fit snug to face and below chin.

Goggles

Place over face and eyes and adjust to fit.

Gloves

Select according to hand size.

Extend to cover wrist.

Removing Personal Protective Equipment (PPE)

Gloves

- Pinch and hold the outside of the glove near the wrist area.
- Peel downwards, away from the wrist, turning the glove inside out.
- Pull the glove away until it is removed from the hand and hold the inside-out glove with the gloved hand.
- With your un-gloved hand, slide your finger/s under the wrist of the remaining glove, taking care not to touch the outside of the glove.
- Again, peel downwards, away from the wrist, turning the glove inside out.
- Continue to pull the glove down and over the inside-out glove being held in your gloved hand.
- This will ensure that both gloves are inside out, one glove enveloped inside the other, with no contaminant on the bare hands.
- Discard disposable items into an appropriate lined waste bin
- Hand hygiene

Goggles

- Take off your goggles or face shield by grasping the portions nearest your ears and pulling up and away from your face.

Apron

- Apron front is contaminated.
- Unfasten or break ties.
- Pull apron away from neck and shoulders touching inside only.
- Fold and roll into a bundle.
- Discard into an appropriate lined waste bin.
- Hand hygiene

Surgical Mask

- Do Not touch the front of mask
- Unfasten the ties - first the bottom, then the top.
- Pull away from the face without touching front of mask.

- Discard disposable items into an appropriate lined waste bin
- Hand hygiene

Hand hygiene

- Staff to wash hands using their own liquid soap and towel prior to leaving the service user property. If this is not possible, use hand sanitiser and wash hands as soon as possible.
- Staff to place used towel into washable bag (pillowcase or equivalent) in their car prior to leaving for next call.

Disposal

- It is essential that personal protective equipment is stored securely within disposable rubbish bags when removed.
- These bags should be placed into another bag, tied securely and kept separate from any other waste within the room. This should, be put aside for at least 72 hours before being put in the usual household waste bin.

Extremely vulnerable group or Shielded people are:

1. Solid organ transplant recipients.
2. People with specific cancers:
 - a. people with cancer who are undergoing active chemotherapy
 - b. people with lung cancer who are undergoing radical radiotherapy
 - c. people with cancers of the blood or bone marrow such as leukaemia, lymphoma or myeloma who are at any stage of treatment
 - d. people having immunotherapy or other continuing antibody treatments for cancer
 - e. people having other targeted cancer treatments which can affect the immune system, such as protein kinase inhibitors or PARP inhibitors
 - f. people who have had bone marrow or stem cell transplants in the last 6 months, or who are still taking immunosuppression drugs
3. People with severe respiratory conditions including all cystic fibrosis, severe asthma and severe COPD.
4. People with rare diseases and inborn errors of metabolism that significantly increase the risk of infections (such as SCID, homozygous sickle cell).
5. People on immunosuppression therapies sufficient to significantly increase risk of infection.
6. Women who are pregnant with significant heart disease, congenital or acquired.