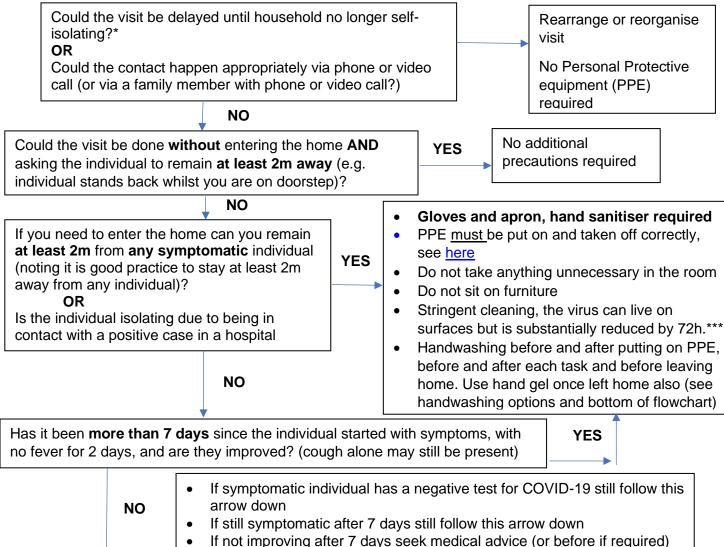
Visiting individuals in their home that are self-isolating with or without symptoms - no physical contact required V1

- Excellent hand hygiene should be maintained at all times.
- To be read with associated national guidance and further local guidance (overleaf)



PPE required (also see overleaf for advice re uniforms/waste):

- Fluid repellent surgical mask**
- Eye protection (goggles, face shield, visor) if individual coughing or risk of splashing from bodily fluids
- Disposable gloves and apron, hand sanitiser (at least 70% alcohol) and hand wipes
- PPE <u>must</u> be put on and taken off correctly, see guidance <u>here</u>
- Hand washing before and after putting on PPE, before and after contact with client, before and after each task and before leaving the home. Use hand gel once you have left the home also.

No soap and water available:

Use antibacterial gel (at least 70% alcohol) if hands are visibly clean. Otherwise use hand wipes followed by gel.

Handwashing options

No hand gel available:

Before washing hands prior to leaving the home, every surface you need to touch (e.g. door handles) must first be cleaned with antibacterial wipes.

^{*72} hours after the last person in the house with symptoms has isolated for 7 days (and is now well and not had a temperature for 2 days. Having only a cough after this time does not mean the individual is infectious)

^{**}If a fluid repellent surgical mask is not available then FFP2 masks should be used in accordance with the manufacturer's instructions. It must adhere to BS/EN standards and have a CE mark. Non-fluid repellent masks should not be used.

^{***}Clean with a detergent followed by disinfectant with chlorine (1000ppm) – example of disinfectants include Milton, Chlorclean or Tritan. A combined detergent/disinfectant solution at a dilution of 1,000 parts per million available chlorine can also be used. Apron and gloves should be used for cleaning.

National Situation and Guidance

Key information about the national and local picture with links to key guidance and resources can be found here (this is updated regularly and sets out the national approach being taken).

Information for the public (and staff)

- https://www.nhs.uk/conditions/coronavirus-covid-19/
- https://www.gov.uk/government/publications/full-guidance-on-staying-at-home-and-away-from-others

National Guidance

There are a range of national guidance documents that can be found here to support you in managing staff and supporting customers:

https://www.gov.uk/government/collections/coronavirus-covid-19-list-of-guidance

Local Guidance

In addition to the above national guidance, we have produced the local guidance flowchart (see earlier) and the below to clarify some areas in the national guidance -Please note that these recommendations relate to care that is essential, and can't be delayed to another time, or cannot be done remotely.

PPE

- We would ask that providers seek to source their own PPE as above to protect their own staff.
 Coventry City Council and Warwickshire County Council are also planning to purchase some fluid repellent surgical masks/visors as contingency for social care staff.
- There is a national stockpile of fluid-repellent surgical masks currently in the process of being distributed directly to CQC registered care home and home care providers from the national PHE pandemic flu stockpile. If you have immediate concerns over the supply of PPE, there is now a dedicated telephone line (see below) for the health and social care sector. If you are unable to get PPE from your normal supplier, please report this to the National Supply Disruption Response (NSDR) team who can advise on alternative suppliers. Telephone: 0800 915 9964
- If you urgently need PPE please email: <u>CV19SupplierFAQ@warwickshire.gov.uk</u>

Staff risk assessment (as outlined in infection control guidance)

 A risk assessment is required for health and social care staff at high risk of complications from COVID-19, including pregnant staff and staff with long term conditions (see guidance for high risk groups above). Employers should discuss with employees who are at risk or are pregnant the need to be deployed away from areas used for the care of those who have, or are clinically suspected of having, COVID-19

Staff who have symptoms/Staff who have been in contact with a resident with COVID-19 symptoms

- Staff with COVID-19 symptoms (or whose household member has COVID-19 symptoms) should self-isolate with their household (as per national guidance for households) and they should not be working – see here
- There is no need for staff that are self-isolating to be named or for the rest of the team to self-isolate unless they themselves develop symptoms.
- Staff who have come into contact with a resident with COVID-19 symptoms, without appropriate PPE, can continue to work (as per guidance for secondary care staff here). They should stop work should they develop COVID-19 symptoms.

Visiting individuals who have been medically defined as extremely vulnerable

- Certain groups of individuals, who have been written to individually, have been medically defined as extremely vulnerable.
- A list of these groups and guidance can be found <u>here</u>
- These groups are being asked to self-isolate for 12 weeks and avoid any face to face contact
- National guidance recognises that some of these individuals require care to continue for them, and it
 is important that providers support these individuals to follow the self-isolation guidance.
- Handwashing precautions become even more important to protect these individuals from COVID-19, on arrival in the home/prior to giving care
- Staff caring for this vulnerable group should themselves stringently follow the national social distancing guidance, found here
- Alternative care arrangements should be planned proactively for if care staff become unwell.

Self-isolation advice for people receiving care

In cases of supported living whole household isolation may be appropriate and judgement on this will
need to be made on a case-by-case basis depending on the service. For instance individual selfcontained properties could be treated as separate households while shared environments with
communal households may require whole household isolation.

Waste

• Follow waste guidance in national guidance here

Uniforms/Clothes

 Uniforms/clothes should also be washed on the hottest wash possible on a daily basis (washed separately to other items). This is good practice.

Visitors/staff in residential settings (consistent with national guidance)

- For all staff and visitors (in care home/other residential settings), a check should be done to assess whether they:
 - are self-isolating or have been advised to
 - have COVID symptoms (i.e. new continuous cough or a high temperature)
 - are a household member of someone with COVID symptoms and should be self-isolating
 - are a confirmed case of COVID-19
- If the answer to any of the above questions is "yes", then the staff member/visitor should not enter the home/provide care.
- It is recommended that homes/residential settings restrict visitors given the national guidance to stop
 all non-essential social contact. It remains critical that health, care and social work professionals,
 DOLs assessors, etc. (assuming they have been screened as above) are allowed to visit the care
 home residents, to ensure they have access to services to support their health and wellbeing
 appropriately. Visitors should also be allowed for compassionate reasons.

We have established an email address for any queries from providers that are not clarified as part of PHE advice or this update. We will endeavour to deal with queries as efficiently as possible and will be devising some FAQs to support some of the queries. Please send enquiries to:

CV19SupplierFAQ@warwickshire.gov.uk