INFECTION PREVENTION & CONTROL UPDATE: CARING FOR A PATIENT WITH COVID-19 IN THE HOME

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LEARNING OBJECTIVES

- At the conclusion of this webinar, the participant will be able to:
  - Outline how to reduce the risk of transmitting and being exposed to SARS-CoV-2 when caring for a patient with COVID-19 in the home
  - Describe current CDC recommendations and OSHA regulations for the use and management of PPE in the home.
  - Explain best practice recommendations for managing PPE and other supplies when inventory is limited.
SARS-COV-2 TRANSMISSION

Modes of Transmission:

- Inhalation of virus
- Deposition of virus on exposed mucous membranes
- Touching mucous membranes with soiled hands
COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

Preferred PPE – Use N95 or Higher Respirator
- Face shield or goggles
- N95 or higher respirator
- When respirators are not available, use the best available alternative, like a facemask.
- One pair of clean, non-sterile gloves
- Isolation gown

Acceptable Alternative PPE – Use Facemask
- Face shield or goggles
- Facemask
- N95 or higher respirators are preferred but facemasks are an acceptable alternative.
- One pair of clean, non-sterile gloves
- Isolation gown

cdc.gov/COVID19
FILTERING FACEPIECE RESPIRATORS

- Fit testing and medical questionnaire
- Limited reuse versus extended use
- Inspection
FILTERING FACEPIECE RESPIRATOR
ELASTOMERIC HALF FACEPIECE RESPIRATOR

- Covers the nose and mouth only
- Reusable facepiece with replaceable cartridges or filters
- Fit testing required
MANAGEMENT OF RESPIRATORS WITH EXHALATION VALVES
RESPIRATORY PROTECTION STORAGE: N95 & FACE MASK

- “New & never used” N95 respirator storage
- Options for interim storage in “Limited re-use mode:”
  - Container
  - Temperature
  - Location
# PERSISTENCE OF SARS-COV-2

<table>
<thead>
<tr>
<th>Surface</th>
<th>SARS-CoV-2 Survival Time</th>
</tr>
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<tbody>
<tr>
<td>Aerosols</td>
<td>≤ 3 Hours</td>
</tr>
<tr>
<td>Plastic</td>
<td>≤ 2-3 Days</td>
</tr>
<tr>
<td>Stainless steel</td>
<td>≤ 2-3 Days</td>
</tr>
<tr>
<td>Copper</td>
<td>≤ 4 Hours</td>
</tr>
<tr>
<td>Cardboard</td>
<td>≤ 24 Hours</td>
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</tbody>
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AEROSOL-GENERATING PROCEDURES

- Staff knowledge

- Wear N95 or higher-level respirator, eye protection, gloves, gown for:
  - Performing AGPs and/or
  - Any procedures that are likely to generate splashes or sprays of blood or body fluids and COVID-19 is suspected

- Potential for staff exposure
  - Perform aerosol-generating procedures cautiously
  - Limit the number of staff present
  - Conduct AGPs in a private room with the door closed
  - Clean and disinfect surfaces promptly

- Considerations for family members
PERFORMING CPR IN THE HOME

Airway management

Chest only compression

X
DROPLET PRECAUTIONS: FACE MASK

- Droplet precautions versus source control
- Extended use versus reuse
- Well-fitting
FACE MASK EFFICACY

DROPLET PRECAUTION: EYE PROTECTION

- Options:
  - Face Shield
  - Goggles
  - Safety Glasses

- Management
EYE PROTECTION

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CONTACT PRECAUTIONS

- Gown:
  - Disposable versus cloth gown
  - Prioritized use

- Gloves:
  - Alternatives
  - Glove reuse options
  - Compliance issues
CONSERVING GLOVE USAGE

- When Required
- When Not Required
DONNING AND DOFFING OF PPE

- Preventing self-contamination
- Staff knowledge
- Where/how to don and doff PPE
- PPE disposal
SOURCE CONTROL MEASURES

- Personal protective equipment:
  - Well-fitting face mask at all times
  - Eye protection under certain circumstances
COVID-19 “BAG TECHNIQUE”

- Personal protective equipment
- Disinfectant wipes
- Surface barriers
- Hand hygiene supplies
- Single-use items
- Reusable items:
  - Use dedicated or disposable noncritical patient-care equipment, or if not available, clean and disinfect according to manufacturers’ instructions
PERFORMING HAND HYGIENE: PERFORMING WHEN INDICATED

- Before and after having direct contact with patient
- Before donning PPE
- Before performing an aseptic procedure
- After removing PPE
- After contact with blood, body fluids, or contaminated surfaces
- After contact with patient’s immediate environment

Your Moments for Hand Hygiene
Health care in a residential home

1. Before touching a patient
2. Before Aseptic Procedure
3. After Body Fluid Exposure
4. After PPE Removal

ACCREDITATION COMMISSION FOR HEALTH CARE

EDUCATIONAL RESOURCES
HAND HYGIENE: TECHNIQUE

- **Soap and water:**
  - Rub hands together vigorously for a minimum of 20 seconds covering all surfaces
  - Hand drying
  - Use towel to turn off faucet/tap

- **Alcohol-based hand hygiene product:**
  - Cover all surfaces of hands & fingers, until hands are dry

HAND HYGIENE: PRODUCT USAGE AND STORAGE

- Product used
- Hand lotion or cream access
- Partially empty soap container
- Alcohol-based hand hygiene:
  - Storage location
  - Expiration dating
  - Compounded BUD
  - When not to use
CLEANING & DISINFECTION

- Product selected:
  - EPA List N
  - Antiseptic vs. disinfectant

- Storage:
  - Repackaging
  - Labeling
  - Closure
  - Temperature

- Personal protective equipment

- Contact time

- First aid

BEST PRACTICES FOR DEVICE MANAGEMENT

- Device management
- Paper documentation
- Electronic visit verification:
  - Patient’s skin contamination
  - Equipment contamination
- Disinfection

UNDIAGNOSED RESPIRATORY ILLNESS & COVID-19: POLICIES AND PROCEDURES

- Standard and Transmission-based precautions
- Hand hygiene
- Management of equipment and supplies
- Respiratory protection plan
- Employee health
- Reporting to local/state public health officials
- Emergency management
SECONDARY HOUSEHOLD TRANSMISSION OF SARS-COV-2

- Assessment and PCR testing of positive patients and their household contacts:
  - 53% tested positive in the first 7 days of PCR testing
  - ~75% of secondary infections occurred within the first 5 days of index patient’s illness
  - 60% of infected household contacts were asymptomatic

SECONDARY HOUSEHOLD TRANSMISSION

- Meta-analysis: 54 studies with 77,758 participants
- Secondary transmission higher in households with:
  - Symptomatic patient
  - Adults
  - Spouses
  - Household with one contact

PREVENTING SECONDARY IN-HOME SPREAD OF SAR-COV-2

- Individualized infection prevention and control patient/family education

- How to avoid transmission of COVID-19:
  - Wear a mask in shared spaces around others
  - Keep at least 6 feet apart
  - Provide information from CDC’s web pages:
    - “Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for Coronavirus Disease 2019 (COVID-19)”
    - “If You are Sick or Caring for Someone”
    - “Protect your Home from COVID-19”
  - Get vaccinated to prevent COVID-19
INFECTION SURVEILLANCE

- Surveillance plan implemented:
  - Collect and monitor COVID-19 surveillance data (Medicare-certified providers)

- Management interviews:
  - Knowledge of how many patients currently diagnosed with COVID-19 (suspected and confirmed)
  - Knowledge of how to communicate with local/state public health officials

- Staff interviews:
  - IPC concerns identified, reported, and acted upon
SUMMARY

- How to reduce the risk of transmitting and being exposed to SARS-CoV-2 when caring for a patient with COVID-19 in the home
- Current CDC recommendations and OSHA regulations for the use and management of PPE in the home
- Best practice recommendations for managing PPE and other supplies when inventory is limited
QUESTIONS?

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THANK YOU!