COVID-19

Guidance for home care provision

This guidance is correct at the time of publishing. However as it is subject to changes, please ensure that the information at time of issue is accurate and correct.
Guidance for home care provision (COVID-19)
Updated 19 March 2020

Who this guidance is for
This guidance is aimed at registered providers, who support and deliver care to people in their own homes, including community health services.

This guidance sets out key messages to support planning and preparation in the event of an outbreak or widespread transmission of COVID-19.

It takes account of latest government advice on self-isolation, set out in the local Stay at home (self-isolation) guidance and there is also separate guidance for people in prisons, set out in the COVID-19: prisons and other prescribed places of detention guidance. Both of these documents can be viewed at gov.im/coronavirus.

Provision of care and support in people’s home is a high priority service, in that most care and support cannot be deferred to another day without putting individuals at risk of harm. It is therefore vital that these services are prioritised and this guidance will support you in doing this. This guidance will be regularly updated.

Steps for home care providers to maintain delivery of care
Home care providers are advised to:

1. review their list of clients, and ensure that it is up to date, including levels of informal support available to individuals. Providers should consider how they could benefit from sharing this information electronically with local partners, if they receive a legitimate request, including what the dataset might be.

2. establish plans for mutual aid, taking account of their business continuity plans, and consider arrangements to support sharing of the workforce between home care providers, and with local primary and community services providers; and with deployment of volunteers where that is safe to do so.

If a care worker is concerned they have COVID-19
If a member of staff is concerned they have COVID-19 they should use the online assessment at gov.im/covidtest to determine whether they need to call the COVID 111 helpline.

- If they are advised to self-isolate at home they should follow the stay at home (self-isolation) guidance.
- If advised to self-isolate at home, they should not visit and care for individuals until safe to do so.

If the individual being cared for has symptoms of COVID-19
If the individual receiving care and support has symptoms of COVID-19, then the risk of transmission should be minimised through safe working procedures. The individual should be assisted with seeking clinical advice by using the online assessment at gov.im/covidtest to determine whether a call needs to be made to the COVID 111 helpline.
**Personal protective equipment**

Care workers should use personal protective equipment (PPE) for activities that bring them into close personal contact, such as washing and bathing, personal hygiene and contact with bodily fluids.

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. It is essential that personal protective equipment is stored securely within disposable rubbish bags.

These bags should be placed into another bag, tied securely and kept separate from other waste within the room. This should be put aside for at least 72 hours before being put in the usual household waste bin.

**Cleaning**

If care workers undertake cleaning duties, then they should use usual household products, such as detergents and bleach as these will be very effective at getting rid of the virus on surfaces. Frequently touched surfaces should be cleaned regularly.

Personal waste (for example, used tissues, continence pads and other items soiled with bodily fluids) and disposable cleaning cloths can be stored securely within disposable rubbish bags.

These bags should be placed into another bag, tied securely and kept separate from other waste within your own room. This should be put aside for at least 72 hours before being put in the usual household waste bin for disposal as normal.

**Laundry**

If care workers support the individual with laundry, then they should not shake dirty laundry. This minimises the possibility of dispersing virus through the air.

Wash items as appropriate, in accordance with the manufacturer’s instructions.

Dirty laundry that has been in contact with an ill person can be washed with other people’s items. If the individual does not have a washing machine, wait a further 72 hours after the 14-day isolation period has ended; the laundry can then be taken to a public launderette.

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.

**Individual being cared for does not have symptoms but is part of a household that is self-isolating**

If the individual being cared for and their care worker can remain at a safe protected distance from the symptomatic member of the household, then care can be provided without additional precaution. This would apply, for example, where the symptomatic family member can remain in their own room, is using separate bathroom facilities and is observing robust self-isolation and social distancing procedures, staying 2 metres away from other family members.
Where this is not possible – and this will vary on a case-by-case basis – the same procedures should be adopted as if the person being cared for did have symptoms of COVID-19 (see above). Care should continue to be taken to limit contact with any household member that has symptoms.

See guidance for COVID-19: Stay at Home guidance for households with possible coronavirus infection.

If neither the individual nor the care worker have symptoms of COVID-19

If neither the care worker nor the individual receiving care and support is symptomatic, then no personal protective equipment is required above and beyond normal good hygiene practices.

General interventions may include increased cleaning activity and keeping property properly ventilated by opening windows whenever safe and appropriate.

Care workers should follow advice on hand hygiene.

Support for home care provision

Community services and primary care, will be working with and supporting home care providers in the provision of care.

Community service providers are already, or will be taking steps to:

- ensure their list of individuals in receipt of care at home support is up to date, establish levels of informal support available to individuals, and share lists with local authorities and home care providers to ensure join-up.

- consider which teams need to extend operational hours, or link to other services (such as out of hours general practice) in order to ensure the best possible care and maintain patients in the community.

- explore options for alternative care models, including tele-care and ‘hub and spoke’ models to provide advice and guidance to patients and potentially their families.

- take stock of how to maintain viable home care provision during the outbreak of COVID-19. This includes developing joint plans with local authorities, home care and care home providers and primary care colleagues to agree how and when escalation processes can be triggered.

- support local authorities in planning around resilience; including plans to share resources locally in an outbreak of COVID-19. This should include workforce, including the deployment of volunteers where it is safe to do so, and where indemnity arrangements are in place.

- consider how voluntary groups that currently support DHSC services could also support teams and specific individuals. Make the links between those voluntary groups that currently support DHSC services, home care providers and local authorities.

The information in this guidance document has been adapted with kind permission from Public Health England. The content has been taken from Public Health England COVID-19: Guidance on home care provision.