Keeping staff, residents and visitors in the care home safe

COVID-19 is spread when respiratory secretions from an infected person enters the mouth, nose or eyes of another. To prevent spread of COVID-19 remember to:

- Ensure that no staff or visitors enter the care home if they have symptoms of COVID-19
- Practice physical (social) distancing in the workplace and minimise close contact with colleagues wherever possible
- Avoid touching your eyes nose or mouth unless you have washed your hands immediately beforehand
- Catch coughs or sneezes in a tissue or the crook of your elbow

Providing care: Key Infection Prevention and Control Measures

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<th>Category</th>
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| Hand Hygiene (HH) | • Ensure bare below the elbows (do not wear long sleeved clothing)  
• Carry out HH using soap and water (essential if visibly soiled) or alcohol based hand rub (ABHR)  
• Undertake HH; before and after touching an individual/their environment, after body fluid exposure risk, before an aseptic procedure  
• Extend HH to exposed forearms if contaminated |
| Isolation | • Ensure suspected and confirmed individuals are isolated in a single room for 14 days from symptom onset  
• Wherever possible, keep the door to the isolation room/area closed  
• If no single rooms available, you may cohort confirmed individuals together or suspected individuals together provided they have no other known/suspected infections  
• Dedicated equipment where needed  
• Staff should be dedicated to COVID-19 areas |
| PPE | When providing care within 2m of an individual who is shielding* or who may be suspected or known to have COVID-19  
• Fluid Resistant Surgical Mask (sessional) – can go between individuals in same item of PPE  
• Eye/face protection (sessional) – can go between individuals in same item of PPE  
• Apron (should always be single use only) – remove after individual care or cleaning  
• Gloves (should always be single use only) – remove after individual care or cleaning  
• Always perform Hand Hygiene after removing your PPE  
• See COVID-19 care home guidance for additional PPE required for aerosol generating procedures |
| Cleaning | Decontaminate equipment and the environment at least TWICE daily with  
• General purpose detergent followed by or combined with a chlorine releasing agent at least 1000ppm av Chlorine  
• Ensure at least TWICE DAILY cleaning of frequently touched surfaces (e.g communal toilets, door handles, bed rails, tables)  
• Ensure COVID-19 areas are cleaned after non COVID-19 areas |
| Waste | Dispose of COVID-19 waste in clinical waste bags at point of use  
If you do not have a clinical waste stream, COVID-19 waste can be disposed of in the domestic waste stream. Once full, the bag should be placed in a second bag and tied. These bags should then be stored in a secure location for 72 hours before being put out for collection. |
| Linen | • Manage all COVID-19 linen as ‘infectious’  
• Wear PPE when handling linen and do so within the individual’s room  
• Do not shake linen  
• Transport securely to laundry facility in linen receptacle  
• Change in and out of uniform at work and transport home in a bag to launder |
| Visitors | • Restrict visitors to essential only  
• Special consideration should be given for visitors to those with cognitive impairment or receiving end of life care  
• Provide visitor with access to PPE if within 2m of a suspected/confirmed COVID-19 individual |