

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

Presented by: Mary McGoldrick, MS, RN, CRNI® Home Care and Hospice Consultant Home Health Systems, Inc.



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

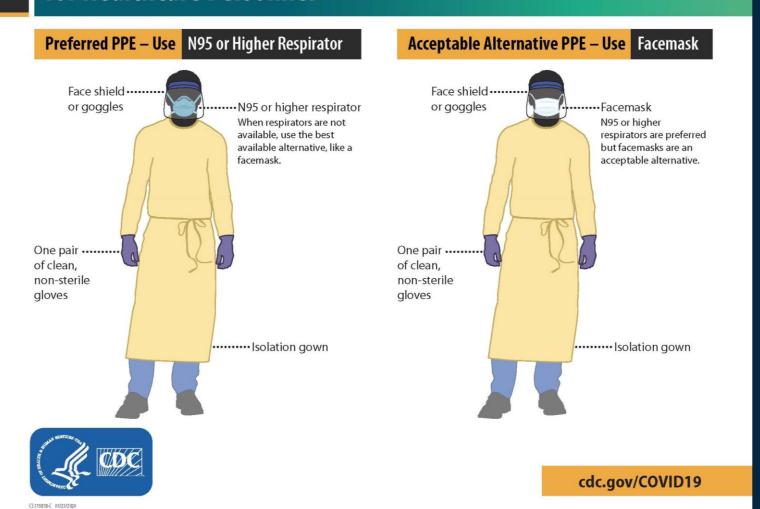
Modes of Transmission:

- 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

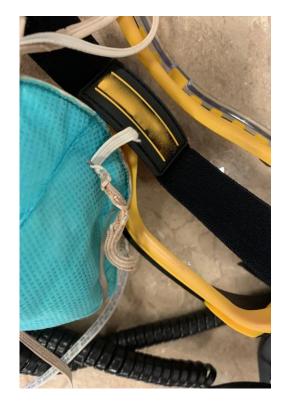






FILTERING FACEPIECE RESPIRATORS

- 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





N95 Storage





PERSISTENCE OF SARS-COV-2

Surface	SARS-CoV-2 Survival Time
Aerosols	≤3 Hours
Plastic	≤2-3 Days
Stainless steel	≤2-3 Days
Copper	≤4Hours
Cardboard	≤24 Hours

Source: N van Doremalen, et al. (2020). Aerosol and surface stability of HCoV-19 (SARS-CoV-2) compared to SARS-CoV-1. The New England Journal of Medicine.





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 s







DROPLET PRECAUTIONS: FACE MASK



Droplet precautions versus source control



Extended use versus reuse



Well-fitting

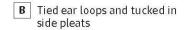


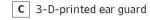


FACE MASK EFFICACY

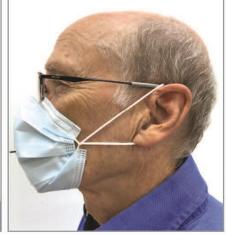
Source: Clapp, P. W., Sickbert-Bennett, E. E., Samet, J. M., Berntsen, J., Zeman, K. L., Anderson, D. J., ... & Bennett, W. D. (December 1, 2020). Evaluation of Cloth Masks and Modified Procedure Masks as Personal Protective Equipment for the Public During the COVID-19 Pandemic. JAMA internal medicine

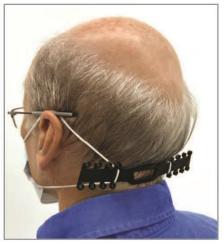
A Medical procedure mask











D Claw-type hair clip

E Three ganged rubber bands

F Segment of nylon hosiery









DROPLET PRECAUTION: EYE PROTECTION

- Options:
 - Face Shield
 - Goggles
 - Safety Glasses
- Management





EYE PROTECTION









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 curtain circumstances





COVID-19 "BAG TECHNIQUE"

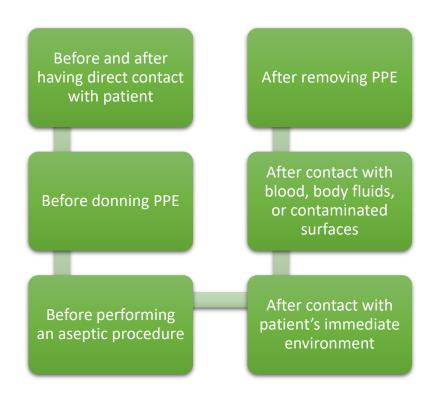
- Personal protective equipment
- Disinfectant wipes
- Surface barriers
- Hand hygiene supplies
- Single-use items
- Reusable items:
 - Use dedicated or disposable noncritical patient-care equipment, or if not available, clean and disinfect according to manufacturers' instructions







PERFORMING HAND HYGIENE: PERFORMING WHEN INDICATED









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



McGoldrick, M. (2017). Hand hygiene in the home setting: Technique matters. Home Healthcare Now, 35(9), 454-455.





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



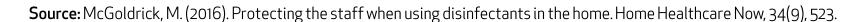


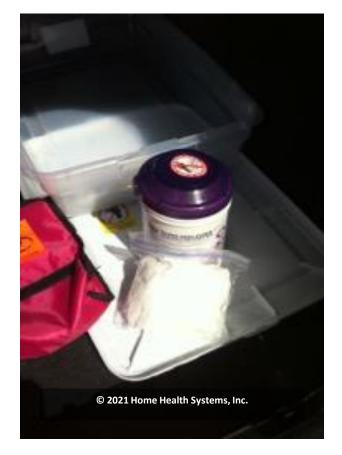


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CLEANING & DISINFECTION

- 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

Source: McGoldrick, M. (2019). Electronic visit verification: Infection prevention breaches when capturing the patient's signature. Home Healthcare Now, 37(6), 260-261.





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

Source: Grijalva CG, et al. (November 6, 2020). Transmission of SARS-CoV-2 Infections in Households—Tennessee and Wisconsin, April -September 2020. MMWR, 69(44),1631-1634.





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

Source: Madewell, Z. J., Yang, Y., Longini, I. M., Halloran, M. E., & Dean, N. E. (2020). Household Transmission of SARS-CoV-2: A Systematic Review and Meta-analysis. JAMA network open, 3(12), e2031756-e2031756.





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

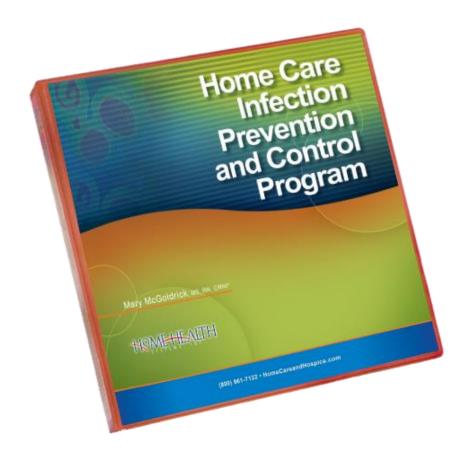
- How to reduce the risk of transmitting and being exposed to SARS-CoV-2 when caring for a patient with COVID-19 in the home
- Current CDC recommendations and OSHA regulations for the use and management of PPE in the home
- Best practice recommendations for managing PPE and other supplies when inventory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





QUESTIONS?

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THANK YOU!

