Information for Directors of residential care facilities about Coronavirus (Covid-19)

Background

Covid-19 is a new type of illness which can affect the lungs and airways. It is caused by a new human coronavirus which can cause a higher number of deaths particularly in people over 60 years. People with underlying health conditions such as cardiovascular disease, chronic respiratory disease, diabetes and cancer are also at increased risk.

It is highly contagious, and transmission is caused by human-to-human contact with high transmission rates when space between people is limited. Because it is new there is no vaccine against it and currently no cure. Scientists world-wide are trying to find a vaccine but this is likely to take more than a year to be ready.

Residents and staff in social care homes are at a higher risk of being infected as they live so close to each other and underlying health conditions may dramatically impact the chances of recovering. Special precautions are necessary to protect staff, residents and visitors.

It should be noted that infection protection measures, such as limited or no visitors and restriction of activities may affect the mental health and well-being of both residents and staff.

PREVENTION OF COVID-19:

1. **Infection and Control Group**

Establish an Infection Prevention and Control Group (IPC) to lead the co-ordinate infection and control activities. This will normally be led by the Director, assisted by a small group of staff who will each have delegated tasks.

2. **Information and training for staff and residents**

- Educate staff about COVID 19 and teach them the main symptoms of the COVID-19 infection. Train them on hand-washing and standard precautions. Ensure they perform this hand hygiene at the beginning and end of each day, before and after touching residents, before and after using the toilet and before eating.
• Provide easy-to-read information to residents on the virus and explain to them how they can protect themselves.
• Check that hand-hygiene is being carried out by residents and staff and also that staff and residents wash their hands after touching items from outside.
• Post reminders, posters etc. around the social care home for residents and staff to reinforce the importance of hand hygiene.
• When possible provide adequate supplies of tissues and waste-paper bins with a lid.
• Post reminders for staff and residents reminding them to sneeze into their elbows or to use a tissue and dispose of it immediately.

3. Physical Distancing

Physical distancing should be used in the care home to prevent the spread of COVID-19

• Enforce a minimum of one meter distance between residents.
• Limit group activities and staff meetings to those where physical distancing is possible. Place chairs a meter apart and consider relocating outside.
• Have meals in shifts to ensure physical distance.
• Educate residents and staff so that they avoid touching (e.g. shaking hands, hugging or kissing).
• Encourage residents to establish small support groups whilst ensuring physical distancing.

4. Visitors

Access to visitors should be limited as much as possible.

• Replace physical visits with on-line communication with families and try to establish these facilities if they are currently unavailable.
• If a visit is unavoidable, mark the details of the visitor on arrival in the logbook, screen the visitor for signs of COVID-19 and do not allow anyone to enter who has symptoms.
• If possible, set up a room close to the entrance where the visit can be carried out. Equip the room with a long table and chairs to ensure one meter distance.
• Only one visitor should be allowed per resident and if possible, the visit should be carried out in a separate room.
• Visitors should be instructed to carry out hand hygiene as they sign in.
- Visitors should visit the resident as soon as they arrive and leave immediately after their visit. They should not visit parts of the institution where there are other residents.

**OUTBREAK OF COVID-19**

The response to an outbreak of COVID-19 is based on early recognition, isolation, care and source control (prevention of onward spread for an infected person):

**Early Recognition**

Early identification is essential to limit the spread of the virus, so the following action is recommended:

**Residents**

- Assess the health status of any new resident for any signs of a fever, cough or shortness of breath.
- Assess all residents twice daily for the development of a fever, cough, or shortness of breath.
- Report any resident with symptoms to the leader of the IPC group (see above).

**Employees**

- Ask staff to report and stay at home if they have any signs of the virus.
- Follow up any unexplained staff absences to determine their health status.
- Undertake temperature check as staff arrives for work at the care home.
- Immediately remove from service if any staff member becomes visibly ill and inform the relevant authorities.

**CARE FOR COVID-19 PATIENTS**

The following steps should be taken if a patient is suspected of having COVID-19:

- Notify the relevant authorities.
- If available, place a medical mask on the patient and others staying in the room.
- Ask the relevant authority to test the patient for COVID-19.
- Promptly notify the patient, the patient’s family and the relevant authorities if the test is positive.
• Move the patient to a single room where possible or isolate if not. If neither are possible then move the patient into a room where other patients either have or are suspected of having COVID-19.
• Staff treating the patient should wear as much protective gear as possible including masks and gloves.
• Staff treating COVID-19 patients should not treat other patients who do not have the virus.
• Place visible warning signs on the door of the patient with COVID-19.
• Dedicate the medical equipment used by patients with COVID-19 such as thermometers.
• Clean and disinfect equipment before use on another patient.
• Restrict sharing of devices such as books with other residents.
• Prevent patients who have COVID-19 from leaving their rooms.

**Personal Protective Equipment (PPE) and cleaning**

If possible, PPE should be used when providing routine care for a resident suspected or confirmed COVID-19. Contact precaution and droplet precautions should be practiced.

• It is recommended that you try to follow the instructions with regard to PPE, which have been issued by the relevant authorities.
• Cleaning and disinfecting agents are recommended for all horizontal and frequently touched surfaces (light switches, door handles bed rails phones) and bedrooms should be cleaned twice daily.
• There are recipes which can be used to make your own your own disinfectant agents (see below).

**Support for residents**

• Support residents, particularly older people and those with cognitive decline, dementia and those who are highly dependent who may become more anxious, angry, stressed or agitated and withdrawn during the outbreak or while in isolation.
• Practical and emotional support should be provided either through families or staff.
• Residents, together with staff should be provided with regular updates.
**Staff Burnout**

- Staff should, wherever possible, be protected from stress, both physically and psychologically so they can fulfill their roles in the context of a high workload. Their well-being should be checked regularly.
- They may also suffer as a result of the stigma or fear they may face in their family or community and should be given support in this respect.
- The IPC should consider setting up small support groups for staff to discuss and talk about their worries whilst always practicing physical distancing.
- Foster an environment for timely, accurate communication and provision of care with regular updates.
- Staff needs to know that safety measures are in place to prevent excessive worry or anxiety within the care home.

**Palliative Care**

There should be palliative care available or those patients who are close to death and who cannot be transferred to hospital for treatment. Adequate supplies of appropriate sedatives should be available.
Make your own disinfectant
COVID-19

Coronaviruses are some of the easiest types of viruses to kill. They are not hardy and are easily destroyed by good disinfecting products. Disinfectants break a protective coating around the coronavirus so that it can’t spread to another cell.

How to disinfect:

1. Soap and water
2. Isopropyl alcohol CAS 67-63-0 (Don’t dilute.)
3. Hydrogen peroxide CAS 7722-84-1 (Don’t dilute.)
4. Home-made disinfectant:
   - 4 teaspoons household bleach
   - 1 quart water
   - Pour both into one quart spray bottle, shake vigorously
   - Spray on surface to disinfect, let sit for 10 minutes, wipe away with wet cloth

Important!

Do not mix common household disinfectants. The following combinations may create toxic vapors that can damage organs, and cause nerve damage, breathing difficulties and/or throat burns.

- Bleach and vinegar
- Windex and vinegar
- Bleach and ammonia
- Bleach and rubbing alcohol
- Hydrogen peroxide and vinegar, bleach, or ammonia
- Bleach and toilet bowl cleaner

Which products do not kill COVID-19:

- White distilled vinegar.
- Vodka
- Homemade hand sanitizers