



## **HCBS 1915i Infection Control Guidance Concerning COVID-19**

### **What is COVID-19?**

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. Patients with COVID-19 can experience mild to severe respiratory illness, including fever, cough and shortness of breath. Persons who are capable of giving virus to others may also have no symptoms. The virus that causes COVID-19 is a novel (new) coronavirus. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold.

### **How does COVID-19 spread?**

The virus that causes COVID-19 is thought to spread mainly from person-to-person, between people who are in close contact with one another (within about 6 feet) through respiratory droplets when an infected person coughs or sneezes. When persons are in close contact with those who have the virus they may also pick it up on their hands by touching an individual or a surface or object that has the virus on it and then touching their own mouth, nose or their eyes. This is why hand shaking and touching your face are strongly discouraged.

### **Protect individuals supported and direct care staff from exposures and transmission**

Agency personnel who provide HCBS services can take a few simple steps to help protect both the individual supported and direct care staff:

1. All HCBS direct care staff should wear a mask at all times while at work. This will prevent staff who may have COVID but are not displaying symptoms from spreading it. It will also reduce the risk that HCBS staff contract the virus by preventing them from touching their mouth and nose.
2. When providing services, identify individuals at risk for having COVID-19 before or immediately upon engagement of interaction. The individual and any other person who will be present during the appointment (e.g., legal guardian, family member) should be carefully screened for the following:
  - a. Fever or respiratory symptoms (cough, shortness of breath or sore throat)



b. Close contact with a suspected or confirmed person with COVID-19

c. Residing in a community, or facility, where community-based spread of COVID-19 is widespread

\*If any one of these criteria is present, services should only be conducted by essential personnel and assistance should be provided to the individual in notifying their health care provider as needed. The following are suggestions for reducing non-essential personnel contact with individuals:

- Close direct contact should be provided by direct care staff only. These are staff that provide services in which the interruption would endanger the individual's life, health or personal safety.
- Provide services via telemedicine, if appropriate, for the individual and with consent from the individual, to the greatest extent possible.
- Minimize the number of non-essential personnel contact with the individual to reduce potential transmission. Non-essential staff are considered to be those staff who come into contact with residents, or resident rooms, but do not provide direct care (see list below). These staff may be needed in the facility for normal operations but should reduce their contact with residents with COVID-19. For those circumstances in which non-essential staff need to enter a individuals room, or come into close contact with them, these staff should be wearing appropriate PPE (includes mask, face shield, gown and glove). Please consider this example list of staff personnel to be evaluated as essential or non-essential:
  - Ancillary staff
  - Administrative staff
  - Housekeeping staff
  - Maintenance staff (unless needing to repair vital equipment)
  - Meal delivery
  - Activity staff
  - Volunteers
  - Case managers

\*ONLY ESSENTIAL staff should go into the room of a confirmed or presumed resident with COVID-19. The CMHC and/or setting leadership should determine who is essential, as well as provide proper don and doffing training and education of hand hygiene practices.

3. Wear a disposable facemask and gloves when providing direct care, including touching or having contact with stool or body fluids.

a. Masks should be conserved to the greatest extent possible.

b. Throw these away after use and do not reuse.

- c. When removing, first remove and dispose of gloves, then immediately clean your hands with soap and water or alcohol-based hand sanitizer.
- d. Next, remove and dispose of the facemask and immediately clean your hands again with soap and water or alcohol-based hand sanitizer.
- e. Should you encounter a mask shortage, store your mask in a zip-top bag and do not touch the front of the mask, only the strings or ear loops. Clean your hands after securing the zip-top bag.

4. Wash your hands often and thoroughly with soap and water for at least 20 seconds. Use alcohol-based hand sanitizer that contains 60% to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. You should use soap and water if your hands are visibly dirty.

- a. Perform hand washing upon entry to the building before work and prior to exit after changing into street clothes.

5. Avoid touching your eyes, nose and mouth.

6. Cover your coughs and sneezes. Use respiratory cough etiquette using your sleeve or tissue to cough. If a tissue is used, dispose of the tissue right away and perform hand hygiene immediately.

7. Minimize the number of personnel in contact with individuals to reduce potential transmission.

- a. Identify staff who are willing to work with individuals who are showing symptoms.
- b. Determine if select personnel should quarantine with individuals supported at the residential setting who are showing symptoms.
- c. Consider designating one or more specific personnel to provide support to any individual who is showing symptoms.
- d. Provide services via telemedicine, if appropriate, for individuals and with consent from the individual, to the greatest extent possible.

8. Maintain at least a 6-foot distance from the individual and other individuals whenever possible.

- a. Encourage individuals to remain in their room to the greatest extent possible.
- b. Designate a single bathroom for any individuals who are showing symptoms to use and encourage other individuals and personnel to use another bathroom.

- c. Consider designating specific equipment and household objects to any individual who is showing symptoms to the extent possible
9. Create a single staging area in the home for personnel to leave personal items and put on/remove personal protective equipment.
  - a. Consider changing clothes each day before leaving the residential setting.
10. Clean frequently touched surfaces and objects often using household disinfectants that contain bleach products or alcohol greater than 70%. A list of approved cleaning products can be found on the [CDC](#) website.
11. Monitor symptoms of individuals supported.
  - a. If the individual has flu-like symptoms such as fever, cough or shortness of breath, both the individual (if they can tolerate a face mask) and the caregiver should wear face masks.
  - b. If you suspect a possible COVID-19 case, assist the individual in contacting their health care provider; contact the ISDH Epidemiology Resource Center at 877- 826-0011 (available 24/7); and contact your local health department.
12. Assess the Suitability of the Residential Setting for Home Care

In consultation with State or local health department staff, a healthcare professional should assess whether the residential setting is appropriate for home care. Considerations for care at home include whether:

- The patient is stable enough to receive care at home.
- Appropriate caregivers are available at home.
- There is a separate bedroom where the patient can recover without sharing immediate space with others.
- Resources for access to food and other necessities are available.
- The patient and other household members have access to appropriate, recommended personal protective equipment (at a minimum, gloves and facemask) and are capable of adhering to precautions recommended as part of home care or isolation (e.g., respiratory hygiene and cough etiquette, hand hygiene);
- There are household members who may be at increased risk of complications from COVID-19 infection (.e.g., people >65 years old, young children, pregnant women, people who are immunocompromised or who have chronic heart, lung, or kidney conditions).

13. For home care instructions for individuals who have or are being evaluated for COVID19, visit: [www.in.gov/coronavirus/files/IN\\_COVID-19\\_Home\\_Care\\_3.18.20.pdf](http://www.in.gov/coronavirus/files/IN_COVID-19_Home_Care_3.18.20.pdf).

14. Identify and train back-up caregivers, including informal and family caregivers and additional direct care staff. Work with the Individualized Support Team to develop a back-up plan, especially for those individuals without available informal or family support.

15. Stay home when you're sick. Follow your organization's policies and procedures for reporting your absence with as much notice as possible to ensure they have sufficient time to identify who will be providing care in your place.

16. Get plenty of rest, drink fluids, eat healthy foods and manage your stress.

17. Personnel who develop symptoms confirmed or suspected to be COVID-19 should call their provider for testing authorization.

- a. The provider can have a testing request entered into the Indiana State Department of Health request form: <https://redcap.isdh.in.gov/surveys/?s=WMKD7PHEPF>. Please note that this form is intended to be used only by healthcare providers, infection preventionists or other health care personnel.
- b. For questions, please call the ISDH line at 877-826-0011 (available 24/7) to have testing approved. c. Providers also have the option to work with Lilly, LabCorp or Quest for commercial testing should they deem appropriate
- c. Personnel should also note that their local health department will be making contact with them if their test comes back positive and will instruct them on home monitoring of all close contacts.

18. Agency personnel should follow home quarantine recommendations from the Centers for Disease Control and Prevention ([https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhealthcare-facilities%2Fhcp-return-work.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhealthcare-facilities%2Fhcp-return-work.html)) and return to work when the following conditions have been met:

- a. Fever-free for at least 72 hours (three full days of no fever without the use of medicine that reduces fevers).

AND

- b. Other symptoms have improved (for example, your cough or shortness of breath have improved).

AND

- c. At least 7 days have passed since your symptoms first appeared.

### **COVID-19 testing and prevention strategies**

The Indiana State Department of Health (ISDH) has a team available to come into facilities to rapidly test residents and staff who are suspected of having COVID-19. In addition, ISDH, through the local health departments, will supply PPE when available. It is critical that facilities practice conservation and re-use of current PPE supplies.

- To request COVID-19 testing or to discuss prevention strategies, such as PPE donning and doffing, please contact your local health department.

### **PPE guidance**

Facilities should follow the Centers for Disease Control and Prevention (CDC) guidelines for health care workers and personal protective equipment (PPE) -

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

Facilities should require those involved in direct patient care to wear a mask during their entire shift. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html>

### **Additional information:**

General questions from the public or healthcare provider inquiries about COVID-19 may be directed to the ISDH COVID-19 Call Center at the toll-free number: 877-826-0011 (available 24/7).

Additional information and resources for COVID-19 are available at the links below.

- CDC COVID-19 webpage: [www.cdc.gov](http://www.cdc.gov)
- ISDH COVID-19 webpage: <https://coronavirus.in.gov>
- Guidance for Infection Control and Prevention Concerning COVID-19 in Home Health Agencies (CMS): [www.cms.gov/files/document/qso-20-18-hha.pdf](http://www.cms.gov/files/document/qso-20-18-hha.pdf)
- Preventing the Spread of COVID-19 in Homes and Residential Communities - Recommended Precautions for Household Members, Intimate Partners and Caregivers (CDC): [www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html)
- Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for COVID-19 (CDC): [www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-homecare.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-homecare.html)

Adapted from the Indiana State Department of Health guidance.