

PURPOSE:

- To promote patient, employee, and community safety during community spread of COVID 19
- To establish a protocol for employee symptom screening, client symptom reporting, transmission reduction expectations, testing protocol, use of PPE, and eligibility to work.

DEFINITION OF TERMS:

- COVID 19: Novel Coronavirus originating in Wuhan China in December 2019.
- N-95: A particulate respirator mask used to protect from inhalation of airborne pathogens.
- Surgical Mask: A disposable medical paper mask designed for single use to reduce droplet transmission.
- Reusable cloth mask: A fabric facial covering that covers the mouth and nose, often homemade. Intended to reduce the amount of droplets inhaled or exhaled. Ability to reduce droplet inhalation/exhalation depending on material type and mask fit.
- PPE: Personal Protective Equipment are wearable shields designed to protect from exposure to a transmissible disease. May include gloves, mask, face shield, gown, eye protection.
- Social Distancing: The practice of reducing droplet transmission by keeping 6-10 feet of distance between oneself and others.
- Shelter in Place: A government order or policy which requires citizens to remain at home except to obtain essential supplies or perform work that has been designated essential. May also be known as a Stay At Home order.

POLICY:

Communication:

- Employees are expected to access and read ERSP messages a minimum of once each day they work for PDHH. This is necessary to stay abreast of rapidly developing changes.
- Employees are expected to abide by the PDHH Emergency preparedness policy.

Daily Screening and Reporting:

- All employees must complete an online daily screening survey prior to reporting to their assigned shifts.
- Employees who have symptoms of fever (Temp >100.4F), cough, shortness of breath, sore throat, or other symptoms of contagious illness (or have these symptoms present in their household) must complete a screening call with a PDHH nurse supervisor to determine risk of viral transmission. The PDHH nurse supervisor will place the employee into one of the following categories:
 - A. Cleared to work without additional restrictions.
 - B. Cleared to work with caution – Mask use is required during the entirety of shift. Requires additional phone screening prior to next shift. Additional precautions may be required by nurse supervisor evaluating eligibility for work.
 - C. Off work for 24 hours to monitor symptom progression. Must call nurse supervisor the next day to re-evaluate.

PRIVATE DUTY HOME HEALTHCARE: COVID 19 POLICY AND PROCEDURE
UPDATED OCTOBER 2020

D. Off work until RN determines transmission risk is low (per current Health Department/CDC guidelines for essential workers/healthcare workers). Final determination of ability to return to work will be made by the PDHH nurse supervisor/administrative team.

- Employees who have been exposed to someone who is under investigation for symptoms of COVID 19, is being tested, or has tested positive, must report to the PDHH nurse supervisor for a discussion of risk and determination of eligibility to work.
- Every PDHH employee must remain alert to symptoms of COVID 19 (fever, cough, shortness of breath, sore throat, fatigue, aches, chills, loss of taste or smell) in their client and their client's household. Employees must report client and client household symptoms to PDHH immediately. PDHH RNs will follow up with client and household screening. Residents of Stately Living, AFC will also have daily temperature monitoring.
- PDHH nurse supervisors will continuously maintain a report of all who have been telephonically screened for symptoms and exposure, including follow-up notes, decision to remove from shifts, and date cleared to return to work. A similar log will be maintained for clients and their households, detailing symptoms, exposure, and precautions taken.
- PDHH nurse supervisors will report suspected cases of COVID 19 to the Berrien County Health Department.
- Visitor Restriction is ongoing at Stately Living, AFC. Refer to most recent Stately Living, AFC COVID 19 Policy. Visitors are restricted to individuals whose presence is necessary for resident health, safety, and wellbeing, and entry is granted only after screening and approval by the nursing supervisor.

Eligibility to Work:

- Eligibility to work will be determined by the RN supervisor on a case by case basis. Elements considered include employee's symptoms, exposure, test status, client vulnerability, status of available staffing alternatives, client/family wishes, critical nature of staffing needs, protective equipment available. Employees should NOT assume that they know whether or not they are eligible or ineligible to work in their given situation. Eligibility determination conversations are between the employee and PDHH administrative RNs. Employees should not discuss their health with clients/families or try to make arrangements directly with client families.
- All PDHH employees are considered essential workers. Per the Berrien County Health Department (BCHD), criteria for return to work for essential workers is different than for the general population. Per the BCHD, the following categories of individuals may be eligible to work when needed: asymptomatic close contacts of positive persons, asymptomatic positive persons, previously symptomatic positive persons whose symptoms have resolved prior to the 10 day isolation period. These individuals may be asked to work at the discretion of the PDHH RN supervisor when other staffing options are not available.
- If asked to work in any of the above situations, these employees must act as though they had the ability to transmit COVID 19 and take the following additional measures to protect their clients and coworkers:
 - A. Double mask with surgical mask for the entirety of the shift. Mask before you enter the house and do not remove the mask until after you leave. (Double mask with cloth mask if surgical mask is not available.)
 - B. Wash hands hourly in addition to standard handwashing recommendations. (To reduce overall microbial presence.)

Reducing Risk:

PRIVATE DUTY HOME HEALTHCARE: COVID 19 POLICY AND PROCEDURE
UPDATED OCTOBER 2020

- Every PDHH employee is expected to reduce their risk of community exposure in order to maintain safe care with their vulnerable clients.
 - A. Follow all directives by the Michigan Department of Health and Human Services (MDHHS) and the Berrien County Health Department (BCHD) or county health jurisdiction in which the client and staff member resides.
 - B. When in the community, follow social distancing precautions. 6-10 feet between you and others not in your household.
 - C. Notify PDHH nurse if you work another job that requires you to have a higher risk of community exposure to discuss your risk to exposure and potential level risk to PDHH clients. (E.R. and EMS workers, retail/grocery workers, urgent care or hospital workers, etc).
 - D. Consider cloth face mask use in enclosed public places where social distancing is difficult to maintain, in addition to social distancing. When in enclosed public spaces on behalf of PDHH or PDHH client, a facemask must be worn.
 - E. Be advised of and follow any current additional guidance from the Michigan DHHS or BCHD.
 - Every PDHH employee must assume that they could be contagious even without symptoms every shift they work and take every precaution to prevent spread of their respiratory droplets.
 - Every PDHH employee must cover their mouth and nose with facemask (cloth, surgical, or higher filtration) when at work. The mask should be worn for the duration of the shift if tolerated. At minimum, the mask must be worn while in the same room as the employee's client or family members. If the employee needs to remove the facemask during their shift for eating/drinking or for any other reason, the employee must leave the room the client is in while removing their mask. Before re-entering the client's room, the employee must put the mask back on and wash their hands.
 - Hand hygiene is an essential component of reducing contact transmission of COVID 19. Soap and water should be used when possible and alcohol-based hand sanitizer of 60% or greater should be used when soap and water are not practical. All PDHH employees should increase their frequency of hand hygiene above and beyond the requirements of PDHH's infection control and hand hygiene policy. In addition to typical expected handwashing...
 - When arriving to a client's home
 - Before preparing food for yourself or your client
 - Before eating or drinking
 - Before putting on gloves and after removing gloves
 - Before and After using the restroom
 - Before and After assisting a client with personal care
 - Before and after changing a dressing
 - After blowing your nose, coughing, or sneezing
 - After touching an animal, animal feed, or animal waste
 - After touching garbage
 - Before leaving a client's home
- Employees should also perform hand hygiene...
- After putting on, touching or adjusting your facemask
 - After touching anything that has been touched by a member of the public
 - After being in a public space
 - Before and after touching their face
 - Before touching a client
 - After collecting or putting laundry in the washing machine
 - After handling any high touch surface

PRIVATE DUTY HOME HEALTHCARE: COVID 19 POLICY AND PROCEDURE
UPDATED OCTOBER 2020

Employees are encouraged to think of themselves as infectious and maintain clean hands at all times. Use of hand moisturizer on clean hands is encouraged to preserve skin integrity compromised by increased handwashing.

- Employees must clean high touch surfaces (such as door knobs, faucet handles, counters, table tops, walker handles, frequently used items like remotes) a minimum of at the beginning and ending of each shift. If possible, an approved disinfectant (the label should state it kills 99% of bacteria and viruses), or a 70% alcohol solution should be used. If unavailable, a bleach solution of 1/3rd cup of bleach to 1 quart of water may be used. If disinfectants are unavailable, surface cleansing must at least be done with a soap and water and a towel.
- Employees who do not take steps to minimize their risk of unnecessary exposure to COVID 19 or comply with mandatory screening during community spread may find themselves ineligible to work with vulnerable clients at the discretion of PDHH and individual clients.

Proper use of PPE:

- PDHH is aware of the CDC guidelines for use and reuse of personal protective equipment during the COVID 19 outbreak and requires employees to follow CDC recommendations as closely as possible when providing care to confirmed or suspected cases of COVID 19. PDHH is also aware that PPE supplies are limited. When working with confirmed or suspected cases of COVID 19, PDHH will provide employees with the PPE available at that time that offers the greatest protection. Employees are expected to use the PPE as directed by the CDC, and PDHH office. The below directive outlines ideal use for clients who have:
 - No signs of illness: Cover employee's nose and mouth with a reusable/washable cloth mask when in the same room as the client. Maintain a distance of 6 ft between yourself and your client when not providing personal care. Whenever possible, PDHH expects continuous wear of a face mask during shifts with clients. If mask removal is necessary during your shift, it must be done in an area of the home away from the client, food, medications, and food/med preparation surfaces (not in the same room as the client). Surfaces within 6 feet should be cleansed after mask is put back on.
 - Respiratory symptoms w/o medical suspicion of COVID 19: Employee is expected to wear a surgical mask when in client's home (Available from PDHH office.) Use multilayer fabric face mask, (preferably with filter layer) if surgical mask unavailable. Gloves when providing personal care.
 - Confirmed or suspected COVID 19: Initiate Droplet Precautions including N95 respirator mask, gloves, eye protection or face shield if appropriate. Employees working at Stately Living AFC must wear a gown when providing personal care to a resident with a confirmed or suspected case of COVID 19 and remove the gown when leaving the client's room prior to immediately washing their hands. If possible, homecare employees should gown prior to providing care, but at minimum must wear clothing that covers their arms and legs fully and must change their clothing at the end of their shift. Clothing worn during any employee's shift with a suspected or confirmed case of COVID 19 must be placed in a plastic bag and sealed until laundered by the employee. Clothing should be laundered in hot/warm water with detergent. Hands should be washed thoroughly after handling laundry.
 - Proper Donning and Doffing: All employees working with confirmed or suspected COVID 19 must demonstrate understanding of proper PPE donning and doffing procedures to a PDHH RN to ensure safe use.
 - Handling of reusable PPE:

PRIVATE DUTY HOME HEALTHCARE: COVID 19 POLICY AND PROCEDURE
UPDATED OCTOBER 2020

- A.) Cloth face coverings should be changed between clients and laundered with hot water and soap prior to drying. Care should be taken not to contaminate wash area surroundings. (Boiling of masks is an acceptable form of disinfection between use.) Hand hygiene should be performed before adjusting, putting on, or removing a mask. Care should be taken not to touch the inside of the mask. Used cloth masks or face coverings should be placed carefully in a sealable plastic container until disinfected. Containers used for dirty masks should be clearly marked and only used for that purpose.
- B.) If an N95 mask is being re-used by an individual employee, it should be stored in a labeled breathable bag or container. Care should be taken not to touch the inside of the mask. If possible, the mask should be disinfected by one of the following methods before being placed in the storage container.
- Place mask in a gallon size sealable plastic storage bag. Mist it with 70% alcohol solution until wet. Seal the bag for 10 min, then open and allow to dry.
 - Place in oven at 150-160 degrees Fahrenheit for at least 30 min.
 - Place mask in a heat proof container. Pour hot water (at least 180-190 degrees) over the masks and allow to sit for 10 min before hanging to dry.
 - Alternative method may be used if effectiveness has been documented and method is approved by PDHH nurse supervisor.
- C.) Masks should be inspected for damage prior to wearing. Damaged masks or masks contaminated with patient body fluids should be discarded.
- D.) If a face shield or eye protection is in use, it should be wiped down with a disinfectant and stored in a clean location between use.
- E.) Disposable gowns if used should be discarded when soiled. Reusable gowns should be kept isolated until laundered and care should be taken not to touch contaminated fabric.

Questions / Concerns / Changes:

- Employees who have questions or concerns about the PDHH COVID 19 policy should contact the PDHH office and speak directly to a nurse supervisor.
- COVID 19 is a rapidly evolving situation. This policy reflects the PDHH position as of 10/26/2020 and should not be interpreted to prohibit changing practices to align with CDC or local health department recommendations or to accommodate limited availability of PPE.

I have read the PDHH COVID 19 POLICY and understand the expectations for my work. I will complete the symptom screening survey each day and notify my supervisor immediately of any fever or respiratory symptoms in myself, my clients, or our households. I will use PPE as outlined in this policy and notify my supervisor if I am unable to do so for any reason. I understand that I am expected to abide by the PDHH COVID 19 POLICY until notified of official policy changes by the PDHH office.

Employee Name: _____

Employee Signature: _____

Date: _____