BOSTON PUBLIC HEALTH COMMISSION | GUIDANCE



Home Care Workers

2019 Novel Coronavirus Disease (COVID-19) is a new respiratory virus. COVID-19 spreads mainly from person to person. It is spread through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land on people who are nearby (within 6 feet). It may also be possible for a person to get COVID-19 by touching a contaminated surface or object and then touching their own mouth, nose, or eyes. An infected person without any symptoms can also spread COVID-19, but it is still unclear how this works. This is one reason people are encouraged to wear a face covering when social distancing is not possible.

This guidance applies to all home care workers, including personal care aides, home health aides, hospice workers, home health nursing assistants, home health therapists, and home health nurses. At this time, we are recommending that community health workers who provide non-medical, home-based services find alternative and creative ways to meet the needs of their clients, for example through phone or video-based check-ins.

Home care workers at higher risk of complications from COVID-19 (above 60 years in age or has an underlying health condition) need to have a conversation with their health care provider to assess the risk of conducting home visits.

This guidance is based on what is currently known about COVID-19. The Boston Public Health Commission (BPHC) is working with the Massachusetts Department of Public Health (MDPH) and the Centers for Disease Control and Prevention (CDC) to provide up-to-date information. Please check BPHC's <u>website</u> for the latest information and guidance.

Before a Home Visit:

- I. Review the purpose of the visit: Before reaching out or visiting the home, the home care worker should review the purpose of the visit. Could the visit be postponed, or could technology be used to meet the needs of the client? If possible, consult with the client's medical providers and/or your agency to determine whether the visit is needed.
- II. Complete a self-check health screening: Each day before work, home care workers should ask themselves:
 - Have I been diagnosed with COVID-19 or told that I may have it, or have I been tested and found to be positive for the virus that causes COVID-19?
 - Do I have a fever (38°C/100.4°F or greater) or any respiratory symptoms, such as cough, shortness of breath, chills or body aches?

If the answer is 'yes' to the self-check screening questions, the home care worker should work with the client and/or agency to reschedule, cancel the visit, or have another worker provide care to the client.

If the answer is 'no' to the self-check screening questions, the home care worker can proceed with the client health screening.

- III. Complete a Client Health Screening: Before any home visit, the home care worker should call and ask if the client or any of the client's household members:
 - **I.** Have a fever (38°C/100.4°F or greater) or respiratory symptoms such as cough, shortness of breath, or sore throat?
 - 2. Have had contact (live with or were within 6 feet of for more than 10 minutes) with a person diagnosed with COVID-19 in the past 14 days?
 - **3.** Have been diagnosed with COVID-19 or told by a healthcare provider that they may have COVID-19?

If the client (and household members) answered 'no' to all of the screening questions, the home care worker can continue to provide care to the client in the home, following the guidance below.

If the client (or a household member) answered 'yes' to any of the screening questions, the client should contact their healthcare provider to determine follow-up actions. If the client needs help making this call, the home care giver should provide assistance. You can only discuss the client's medical situation with their provider with their permission. Based on discussion with the healthcare provider, the home care worker can provide care with appropriate Personal Protective Equipment (PPE), following the guidance below.

Based on your assessment or the recommendation of the client's healthcare provider, the client may need to receive care outside the home. Work with the client, your agency, and other healthcare providers to take the needed action to transport the client to a healthcare facility.

In an emergency situation, call 9-1-1 and alert the operator about any respiratory symptoms or potential COVID-19 exposures.

Conducting a Home Visit: Scenario A

'No' answers to all screening questions.

If both the caregiver and client answered 'no' to all screening questions, the home care worker can continue to provide care to the client in the home, using the following PPE and prevention strategies:

- Confirm the client health screening answers upon arrival at the home.
- Strictly follow the CDC-recommended <u>Standard Precautions</u> when caring for your client. These precautions are based on the principles that all blood, body fluids, secretions, excretions (except sweat), nonintact skin, and mucous membranes may contain transmissible infectious agents.
 - Face coverings should be worn by caregiver and by the client.
 - Eye protection should be worn during the care of any client if splashes, sprays or coughs could occur during the client encounter.
 - Similarly, gloves should be worn if contact with body fluids, mucous membranes, or nonintact skin is anticipated.
- Limit physical contact with your client to only what is needed for care tasks.
- Following a client encounter, remember to follow all proper procedures such as proper handwashing and proper disposal of any PPE like facemasks, gloves or gowns.

- Practice good hygiene throughout your visit and encourage your client and household members to always practice good hygiene, including:
 - Washing your hands often with warm water and soap for at least 20 seconds or use alcohol-based hand sanitizer.
 - o Practice hand hygiene before putting on and after taking off gloves.
 - Covering your mouth when you cough or sneeze, using a tissue or the inside of your elbow. Immediately throw away the tissue and wash your hands with soap and water for at least 20 seconds.
 - o Regularly cleaning and disinfecting surfaces in the home
- Perform a self-check screening and client screening every day, even if you are a live-in home care worker.

Conducting a Home Visit: Scenario B

'Yes' answer to client health screening question I only. The client has fever and/or respiratory symptoms, but no COVID-19 diagnosis, known exposures, or close contacts with someone diagnosed with COVID-19.

The home care worker can continue to provide services to the client using the following prevention strategies and personal protective equipment:

- Strictly follow the CDC-recommended <u>Standard Precautions</u> when caring for your client. These precautions are based on the principles that all blood, body fluids, secretions, excretions (except sweat), nonintact skin, and mucous membranes may contain transmissible infectious agents.
 - A medical facemask should be worn by caregiver and by the client. If one is not available, face coverings can be utilized.
 - Eye protection should be worn during the care of any client if splashes, sprays or coughs could occur during the client encounter.
 - Similarly, gloves should be worn if contact with body fluids, mucous membranes, or nonintact skin is anticipated.
- Beyond standard precautions:
 - Wear gloves when touching the individual. Wash hands for at least 20 seconds with soap and water after removing gloves.
 - Ensure that the client receiving services is wearing a face mask, as much as possible.
- Limit close and physical contact with your client to only what is needed for care tasks.
- Following a client encounter, remember to follow all proper procedures such as proper handwashing and proper disposal of any PPE like facemasks, gloves or gowns.
- Practice good hygiene throughout your visit and encourage your client and household members to practice good hygiene at all times, including:
 - Washing your hands often with warm water and soap for at least 20 seconds or use alcohol-based hand sanitizer.
 - Covering your mouth when you cough or sneeze, using a tissue or the inside of your elbow. Immediately throw away the tissue and wash your hands with soap and water for at least 20 seconds.
 - o Regularly cleaning and disinfecting surfaces in the home
- Perform a self-check screening and client screening every day, even if you are a live-in home care worker.

Conducting a Home Visit: Scenario C

'Yes' answer to Client Health Screening Question 2, or 3. The client has been diagnosed with COVID-19 or has been in close contact with someone with COVID-19.

The home care worker should only provide services with the following precautions:

- The Home Care worker and client follow <u>CDC's infection control guidance for healthcare workers</u> for appropriate PPE, including:
 - o Medical Facemask or N-95
 - o Gloves
 - o Gowns (if appropriate)
 - Eye Protection (if appropriate)
- Limit close and physical contact with your client to only what is needed for care tasks.
- Share with your client and/or household, <u>CDC's guidance for reducing the spread of coronavirus in homes.</u>

If the home care worker does not have the needed PPE or does not feel comfortable, they need to discuss alternative options with their agency and/or the client's other medical providers to determine a plan for meeting the patients needs.

Supporting Information:

- 1. If you are working for an agency or company, always adhere to your company's safety measures and policies.
- 2. MDPH has released guidance for home health agencies that includes additional information for managing home care and staff leave and screening policies.

