

Isolation of Client or Patient

INFECTION CONTROL/COVID-19 EDUCATION

Updates and New Resources- 4/17/20

New CPR Process for COVID-19 Infected Adults

- Cover victims mouth and your mouth
- No rescue breaths
- Compressions only

COVID-19 and Adult CPR

If an adult's heart stops and you're worried that they may have COVID-19, you can still help by performing Hands-Only CPR.



Step 1



Phone 9-1-1 and get an AED.

Step 2



Cover your own mouth and nose with a face mask or cloth.



Cover the person's mouth and nose with a face mask or cloth.

Step 3



Perform Hands-Only CPR.
Push hard and fast on the center of the chest at a rate of 100 to 120 compressions per minute.

Step 4



Use an AED as soon as it is available.

Updates and New Resources- 4/17/20

Two new resources are available on REACH.







These go step by step on how to put on and remove a regular surgical mask and a respirator type mask.

Using Respirator Masks Without Fit Testing Availability



N 95 and K95 Masks may differ in shape and color but are both respirator type masks









1  Wash Hands with soap and water or alcohol based gel	2  For mask with 2 headband straps: Position the lower headband at the base of neck and the upper around the crown of your head. For mask with ear loops: Place elastic ear loops over ears	3  Press firmly on both sides of the nosepiece to create a secure, comfortable fit.
4  Press around edges of mask to assure good contact with face Inhale or exhale to help determine any areas that need additional pressure to assure contact	5  Remove headbands or ear loops to remove without touching the front of the mask. Dispose in trash.	6  Wash Hands with soap and water or alcohol based gel

Using Surgical Masks for Respiratory Protection



Surgical or "Procedure" masks may differ in shape and color and Should be used if a N95 Mask is not available



1  Wash Hands with soap and water or alcohol based gel	2  For mask with 2 ties: Tie the lower tie at the base of neck and the upper around the crown of your head. For mask with ear loops: Place elastic ear loops over ears	3  Pull the mask from the top and bottom to fully open the folds of the mask and adjust around the face.
4  Gently form (do not pinch) the nose wire over the bridge of the nose .	5  Release ties or ear loops to remove without touching the front of the mask. Dispose in trash.	6  Wash Hands with soap and water or alcohol based gel

Updates and New Resources- 4/17/20

- ▶ The CDC released new recommendations regarding COVID-19 infected employees to return to work sooner than our policy. However, our current return to work policy and process after infection **will not change**. Due to the fragile persons we serve, we will continue to use extra precautions in order to prevent any spread or risk of infection to them and other employees.

The Return to Work Guidelines for Quarantined or Isolated Employees Procedure can be found on the REACH website.

Starting next Monday, these calls will change to a shorter once a day call at 11 am EST. It will give only new updates, information and resources regarding COVID-19 and infection control, then provide a time for open Q&A. This call will be for all lines of business that we serve. The registration and call in numbers will remain the same.

Updates and New Resources 4/17/20

Residential Post Isolation Cleaning Checklist is now available on the REACH website. It is important for us to thoroughly clean the environment and dispose of PPE, trash and wash linens after isolation has been discontinued.

PPE and trash from isolation rooms that are not soaked or dripping with body fluids (blood, sputum, urine, feces) can be double bagged in sturdy trash bags, tied closed and put into regular trash per OSHA.

Any PPE or trash that could leak soaked or dripping body fluids must be red bagged and disposed of using medical waste pick up or destruction available to your Operation.

Resources and References

Isolation Procedure: Residential Client Tests Positive for COVID-19

This procedure has been developed to provide high-level guidance when an individual in one of our Residential homes tests positive for COVID-19.

Upon notification of the positive test result. Note: A positive test means a laboratory-confirmed positive test.

1. The individual is placed in a private room with the door closed (if possible). A mask is placed on the individual.
2. Contact the Executive Director.
3. ED logs the case in the Company [COVID-19 Tracker](#) under Patient/Client Cases.
4. ED notifies the Department of Health.
 - a. [Local Health Departments Directory](#)
 - b. [State Health Departments Directory](#)
5. ED is responsible for immediately sending Isolation PPE kits to the home.
6. Contact the Regional Director of Clinical Practice for additional direction, training, and support in implementing isolation procedures.
7. Regional Director of Clinical Practice logs into the Company COVID-19 Tracker and views the case entered by the ED and makes a note in "Disposition – Director Clinical Practice Notes."
8. ED notifies the primary physician (if not already aware) and secure needed orders.
9. ED notifies family/guardian (if not already aware).
 - a. Where appropriate, encourage the family to take the individual home.
10. Notify the family/guardians of other individuals living in the home.
11. Implement full visitor restriction to the home by posting [this sign](#).
12. Staff who enter the room must wear a mask, gloves, gown and eye protection.
13. Begin [Isolation Procedure/Droplet Precautions](#).
 - a. Note: The CDC has provided guidance that surgical masks are acceptable.
 - b. Individuals in the home are always separated from others by a minimum of 6 feet.
 - c. Individual with COVID-19 infection should be assigned their own bathroom. NO ONE ELSE should use this bathroom. Disinfect the bathroom after each use.
 - d. DO NOT share household items.
 - e. Encourage the individual with COVID-19 infection to wear a mask, if coughing, and to wash their hands frequently.
 - f. Staff in close contact should wear PPE (mask, gown, gloves, eye protection).
 - g. PPE is disposed of inside the individual's room.
 - h. Common surfaces should be cleaned twice daily.
 - i. Refer to the process flow for symptom management process.
14. The individual is not to attend work, school or community events.
15. Other individuals in the home will be educated and reminded to practice social distancing.

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COVID-19 (Coronavirus) Update

Updated March 24, 2020 – We continue to monitor developments surrounding the respiratory outbreak caused by a new coronavirus.

[READ MORE](#)

Isolation Procedure: Residential Client Tests Positive for COVID-19

Criteria for Discontinuing Client/Patient Isolation Protocol

When Should A Client or Patient Be Isolated?



- ▶ Upon notification of a positive COVID-19 test result.
- ▶ A positive test means a laboratory confirmed positive test.

Notifications



- ▶ Executive Director
- ▶ Director of Clinical Practice
- ▶ Local & State Health Departments
- ▶ Primary Physician
- ▶ Family/Guardian of Client
- ▶ Family/Guardian of others living in the home

Isolation of Client

- ▶ Client is placed in a private room with door closed (if possible)
- ▶ Client wears a mask (as tolerated)
- ▶ Client is assigned their own bathroom or bedside commode

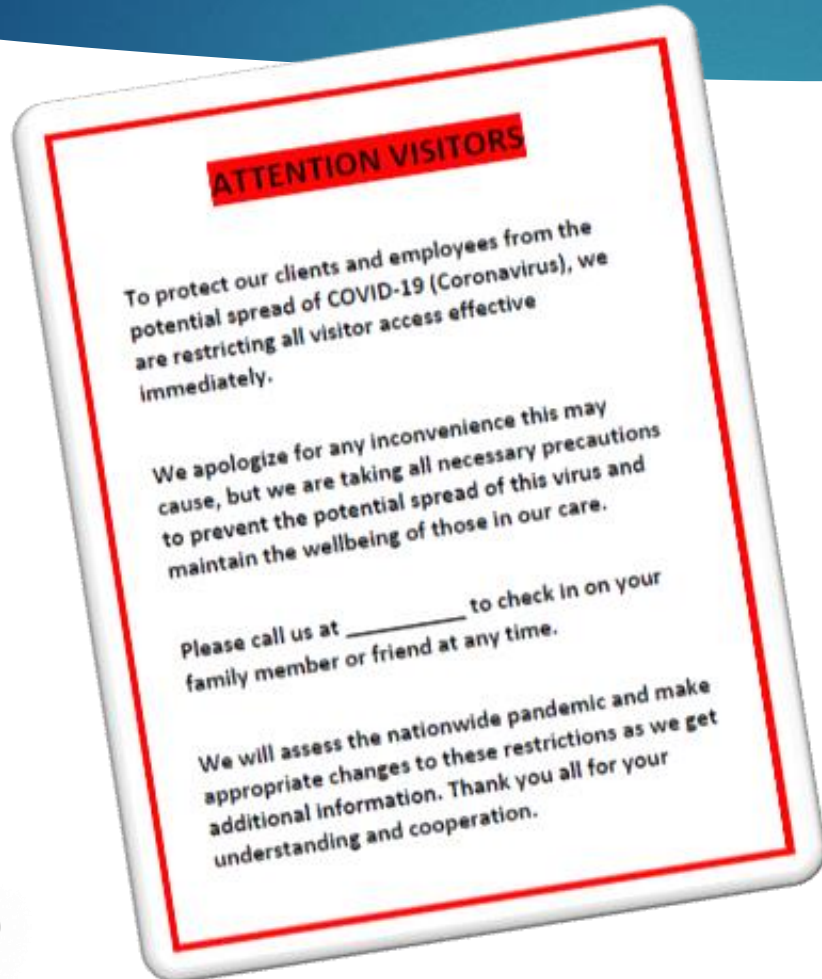


PPE Requirements



- ▶ ED sends isolation PPE kits to the home
- ▶ All Staff who enter the room must wear a mask, gloves, gown and eye protection
- ▶ Surgical masks are acceptable
- ▶ Common surfaces should be cleaned twice a day
- ▶ Bathroom of client is disinfected after each use

Precautions



- ▶ Other individuals in the home should always be a minimum of 6 feet away from each other
- ▶ All staff and individuals in the home should wash their hands frequently
- ▶ All visitors are restricted from the home and signage posted

Important Things To Avoid

- ▶ Do not share household items
- ▶ Do not use bathroom of infected client
- ▶ Do not enter isolated client's room without wearing a mask, gloves, gown and eye protection
- ▶ Do not wear dirty PPE outside of isolation room



Additional Considerations

Due to individual abilities, isolation procedures may not be well tolerated, creating a potential safety issue for staff or individuals living in the home.

- ✓ Notify Regional Quality Director for guidance
- ✓ Hold an IDT meeting to discuss and resolve issues
- ✓ Consider moving the client to another home
- ✓ Consider moving other clients to another home
- ✓ Contact state/case manager about alternatives
- ✓ Consider nearby home with a vacancy

Putting On PPE



- ▶ Gown
- ▶ Mask or Respirator
- ▶ Goggles or Face Shield
- ▶ Gloves

Taking Off PPE

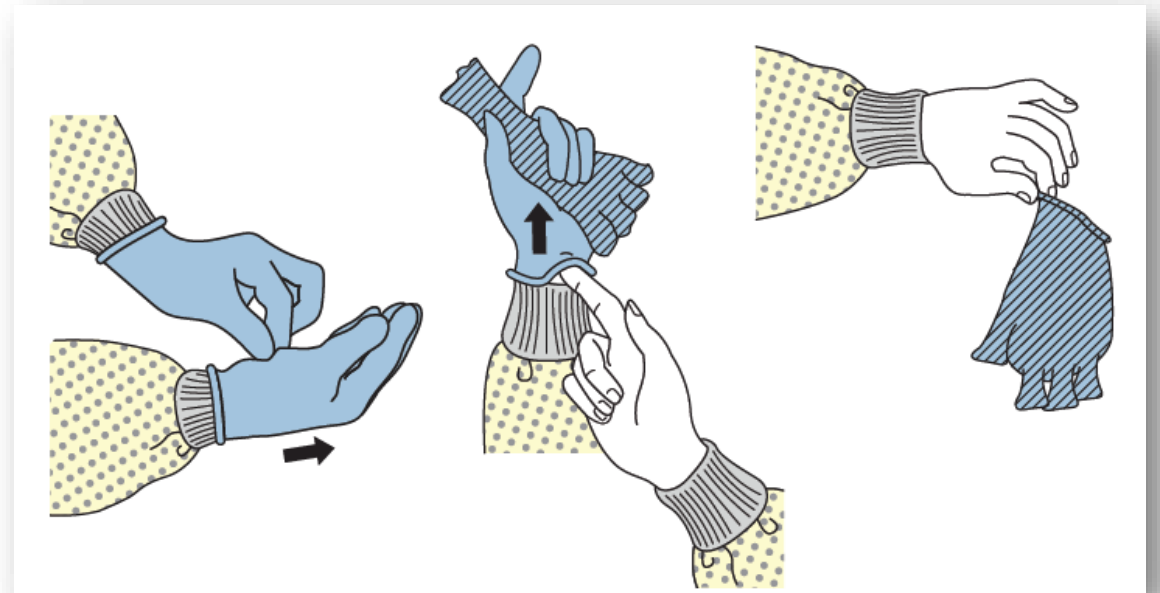


- ▶ Gloves
- ▶ Goggles or Face Shield
- ▶ Gown
- ▶ Mask or Respirator
- ▶ Wash Hands

Taking Off Gloves

Gloves

- ▶ With one gloved hand, grasp palm area of other gloved hand and peel off first glove
- ▶ Hold removed glove in gloved hand
- ▶ Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove in first glove
- ▶ Discard in waste container



Remember that the gloves are contaminated!

Taking Off Goggles or Face Shield

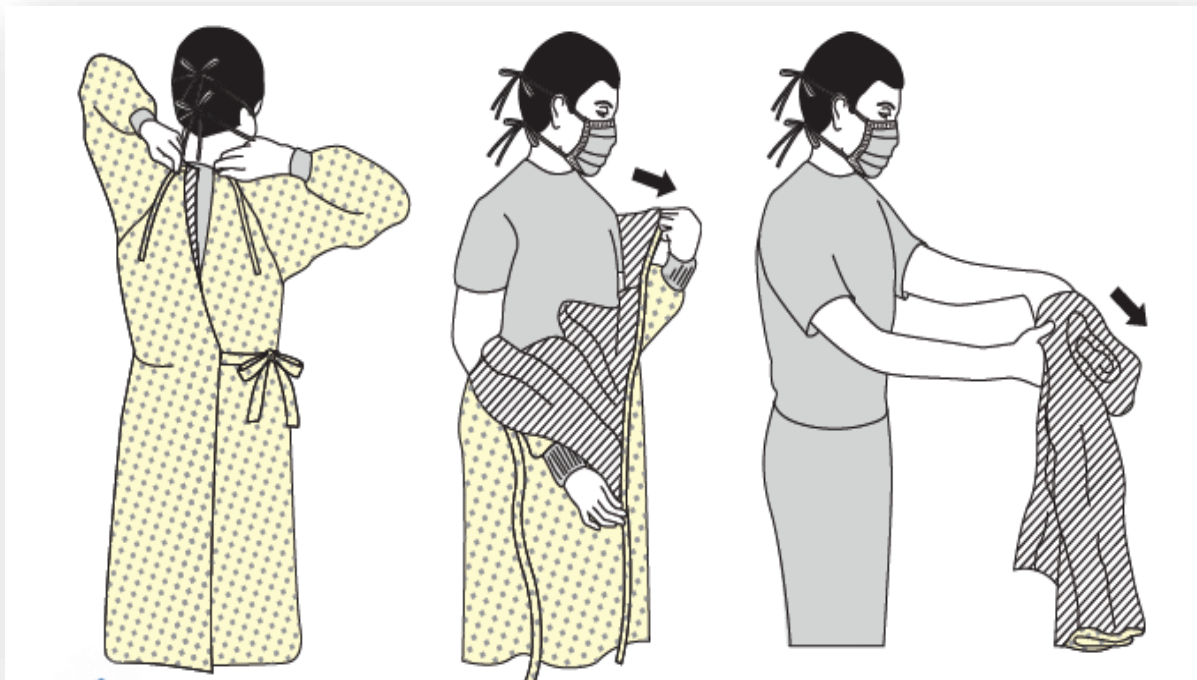


Goggles or Face Shield

- ▶ Remove from the back by lifting head band or ear pieces
- ▶ If reusable, place in receptacle to be cleaned. Otherwise discard in waste container.

Remember that the goggles or face shield is contaminated!

Taking Off Gown

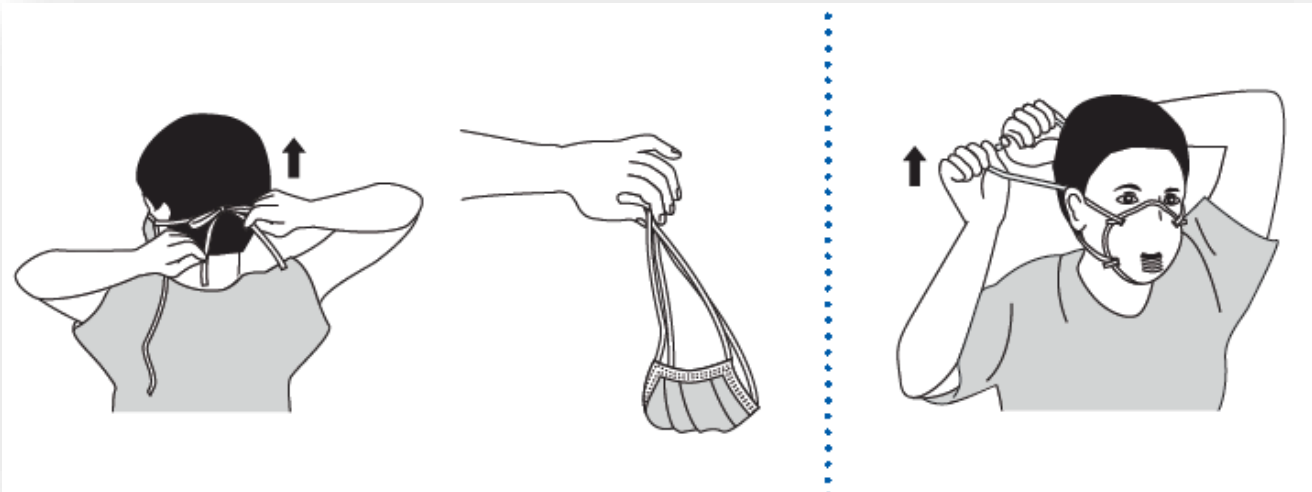


Gown

- ▶ Unfasten gown ties, taking care that sleeves do not contact your body when reaching for ties.
- ▶ Pull gown away from neck and shoulders, touching inside of gown only
- ▶ Turn gown inside out
- ▶ Fold or roll into a bundle and discard in waste container.

Remember that the gown is contaminated!

Taking Off Mask or Respirator



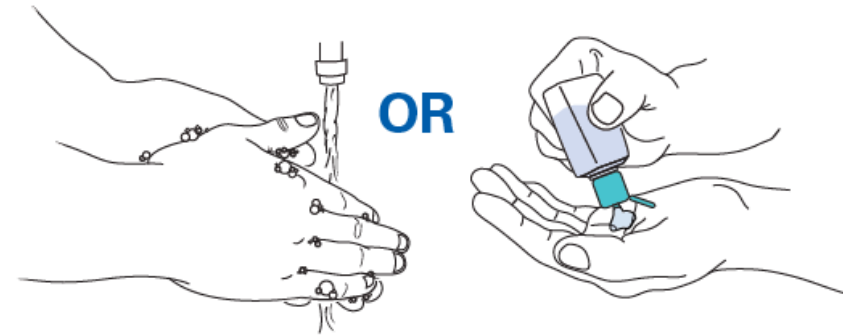
Mask or Respirator

- ▶ Grasp bottom ties or elastics of the mask/respirator, then the ones at the top and remove without touching the front.

Remember that the mask or respirator is contaminated!

Taking Off Goggles or Face Shield

**WASH HANDS OR USE AN
ALCOHOL-BASED HAND SANITIZER
IMMEDIATELY AFTER REMOVING
ALL PPE**



When to Discontinue Isolation

If repeat lab testing is NOT available:
(All the following criteria must be met)



3 days (72 hours) without fever (without using fever-reducing meds)

AND

Improvement in cough or shortness of breath



At least 7 days have passed since symptoms first appeared

When to Discontinue Isolation

If repeat lab testing is available:
(All the following criteria must be met)



Resolution of fever (without
using fever-reducing meds)

AND

Improvement in cough or
shortness of breath



Two consecutive
nasopharyngeal swab
specimens collected > 24
hours apart (total of 2
negative specimens)

Disinfecting the Environment

Once Isolation has been discontinued, thorough cleaning with an EPA registered disinfectant of all surfaces of the isolation room must be completed.



- ☒ Floor, rugs, carpet
- ☒ Bedding, linens, pillow
- ☒ Doorknobs, light switches, lamps
- ☒ Blinds, curtains, shades
- ☒ Furniture, hard surfaces, chairs

[illegible]

A Post Isolation Checklist is available on the REACH website.



Disposing of PPE and Isolation Waste



Sharps or PPE soaked with body fluids that could potentially leak must be disposed of in red bags with medical waste disposal



PPE or isolation trash that is dry can be double bagged in sturdy garbage bags, tied and put in with regular trash disposal

Disposing of PPE and Isolation Waste



Our company has a national contract with Stericycle for medical waste disposal.

David Hames is the Stericycle
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Questions?

