SAFETY PRACTICES AND USE OF PERSONAL PROTECTIVE EQUIPMENT FOR COMMUNITY VISITS

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UPDATE ON INCIDENCE
APRIL 2

• Total Cases
  • 186,101 March 31
  • 216,000 April 1

• Deaths
  • 3,603 March 31
  • 5,137 April 2

• 18% are Healthcare providers
WHAT IS COVID-19

• Covid 19 is a virus that belongs to a large family of enveloped, positive-sense single-stranded RNA viruses. Coronaviruses are transmitted in most instances through large respiratory droplets and contact transmission, but other modes of transmission (i.e. airborne and fecal-oral) have also been proposed.

• The virus has a fatty outer layer which is what makes cleaning with soap and warm water effective in destroying the outer layer.
Total COVID-19 Cases by Health Care Occupation and by Scenario Models

Figure 3: Number of Positive COVID-19 Cases by Health Care Occupation Under Different Scenarios Based on 3/30/20 Rates

Source: Boston University COVID-19 Webinar, April 1, 2020
HOW TRANSMITTED

• Precautionary principle: any novel virus potentially transmitted by contact, droplet, and airborne (certainly short-range aerosol highly likely based on what known)

• Coughing, sneezing, laughing, talking
TRANSMISSION, CONT.

• Contact, or role of surfaces, not well understood yet
  • Wipe down frequently touched surfaces with EPA approved disinfectant or bleach solution (4 teaspoons + 1 quart water)

• Droplet, Airborne, Aerosol
  • Physical distancing
  • In healthcare settings, minimize use of procedures that create aerosol
  • PPE

All Disease Transmission Routes are Possible for COVID-19

- **Contact**
  - Transfer from infectious source or object to mucous membranes

- **Droplet**
  - Large droplets “propelled” onto face and mucous membranes (no inhalation)

- **Airborne**
  - Droplet nuclei inhaled ONLY when susceptible person is far from infectious source

- **Aerosol**
  - Aerosols inhaled near the source
HELP PROTECT SELF, YOUR CLIENTS AND OTHERS

• Wash hands often with soap and water (20-30 seconds, tops of thumbs, between fingers, fingertips sometimes overlooked)

• Use PPE when indicated

• Stay home when sick and alert your employer

• Cover coughs and sneezes with tissue and throw away immediately yourself (no one else handles) or if no tissues, cough into sleeve)

• Clean frequently touched surfaces and objects (refer to earlier slide)

• Take care of yourself: rest, drink fluids, eat healthy foods, and manage stress
  • Meditation (e.g., Calm.com)
  • Outside exercise
SURGICAL MASKS AND N95 RESPIRATORS

• Source and path controls
  • Selective visits … phone, FaceTime, email, telehealth
  • Physical distancing (≥ 6 ft.)
  • Handwashing/hand sanitizers
  • Conduct visit outside
  • Minimize what touch
  • Increased awareness to not touch face (nose, mouth, eyes) once have touched other surfaces
  • If person has symptoms they should wear surgical masks around others

Healthcare Workers Have Highest Risk
• Masks as source control on patients
• Airborne infection isolation rooms for suspected cases
• N95 filtering facepiece respirators for healthcare workers
• Respirators with higher levels of protection for patients with severe symptoms and aerosol-generating procedures

Workers with High Risk Not in Healthcare
• Implement as many source and path controls as possible before using PPE

Workers with Moderate or Low Risk
• Source and path controls
• No PPE

Public
• Stay home!
• No masks or respirators
ENHANCING CLIENT SAFETY

- Recognize your clients may be worried, scared, confused and often times alone
- Reinforce need to stay home
- If need to see health care provider, call first for instructions
- Call 911 if have difficulty breathing
- If available in community, 311 helpful alternative
- Suggest want to be physically isolated but not socially or emotionally
  - Explore options to stay connected with others when not sharing same space
WHAT MASKS TO USE

• Healthcare Workers: N95 and Respirators for Which Have Been Fitted

• Current debate about Role of Surgical Masks/Facemasks and “Home-made” Masks … issue is fit, materials, & proper handling - care putting on and taking off
  • ALSO science … what evidence do we have to date
DYNAMIC, CHANGING PANDEMIC

- Call ahead to make sure no one in house ill
- If take public transportation to work … apply what learned to navigating trip
- Can work be done “remotely”
- Recognition working with Vulnerable Populations Beyond COVID-19
- Balance
HOME VISIT SCREENING

• May want to attempt to call PRIOR TO VISIT to assess for the following
  • Have you or someone else been exposed?
    • Have you had close contact with a person with confirmed COVID 19 illness
  • Have you or someone else had symptoms in the last 14 days?
    • Fever, Cough, and Shortness of Breath (SOB)
HOME VISIT SCREENING

• When you arrive at the client’s door please assess again (Or the first time if not able to make phone contact)
  • Assess the previous 2 questions for the client and anyone in the home or accompanying them on the visit if at a different setting

• Remain a distance of 6 feet when screening

• If no one at the home is ill, proceed with the visit
HOME SCREENING

• If positive for exposure and/or symptoms
• CANCEL visit and make a plan for follow up
  • Encourage the client to call their Primary Care Provider (PCP) for further assessment
  • DO NOT GO TO URGENT CARE OR ER until instructed to
  • Notify your supervisor
• If no PCP, provide information on locations to receive care
TIPS FOR HOME VISIT

• Bring only items necessary for visit into the home
• Avoid placing belongings on tabletops and counters that might have high levels of germs or disinfect before setting down
• Store personal items securely in your vehicle prior to arriving at the location
• Review current agency policy if available about supplies and equipment
• Greet family verbally
• Avoid physical contact
  • Handshakes
  • Hugging
  • Kissing
  • If possible, maintain the recommended 6 feet distance between people
• Avoid doorknobs
  • Allow family members to open the door or use a barrier
SANITARY TOOL KIT

• Ziploc bag that holds materials
• Hand soap
• Paper towels (Fold several into the bag, do not take the roll in)
• Hand sanitizer (at least 60% alcohol)
• Disinfectant wipes
CLEANING AND SANITIZING DURING AND BETWEEN VISITS

• Washing Hands
  • Wash hand at arrival, at departure and as needed
  • Use supplies brought in your toolkit
  • Use hand sanitizer

• Clean and Sanitize the following items between home visits and/or as needed
  • Cell phone
  • Pen (dedicated to home visits only)
  • Name badge
  • Clipboard
  • Any additional supplies
PPE AND HOME VISITS

• Follow agency policy

• Influenced by availability of PPE
  • Masks, gloves, goggles, gowns

• If MUST reuse, there are now standards being developed
  • For example, need to store your mask if reusing in paper bag, not plastic
  • Mark paper bag as Front
  • Put the outside of the mask (side of mask away from mouth) into the paper bag facing the side marked front of the bag
PUTTING ON THE MASK

- Wash your hands with soap & water for at least 20 seconds. Dry your hands with a clean paper towel & throw the paper towel away.
- Check the mask for any defects such as a tear or missing tie or ear loop. Throw away any that are defective.
- Make sure the exterior (usually yellow or blue) side of the mask is facing out, away from your face.
- Place the mask on your face with the blue side facing out and the stiff, bendable edge at the top by your nose.
- If the mask has ear loops, put one loop around each ear.
- If the mask has ties, pick up the mask by the ties and tie the upper ties behind your head with a bow.
- Once the mask is in place, use your index finger & thumb to pinch the bendable top edge of the mask around bridge of your nose.
- If the mask has a lower tie, then once the mask is fitted to the bridge of your nose, tie the lower ties behind your head with a bow.
- Make sure the mask is completely secure. Make sure it covers your nose and mouth so that the bottom edge is under your chin.
- Wash your hands.
REMOVING THE MASK

- Wash your hands before removing the mask.
- Do not touch the inside of the mask (the part over nose and mouth). It may be contaminated from your breathing, coughing or sneezing.
- Untie or remove the ear loops and remove the mask by the straps.
- Throw the mask in the trash.
HOW TO DON AND REMOVE/DISPOSE OF PPE

• Gowns
  • For those who are using check cdc.gov website

• Face Masks
  • For those who are using check cdc.gov website

• Goggles
  • For those who are using check cdc.gov website

• Gloves
  • For those who are using check cdc.gov website

• Do Not Remove or Handle Your Contacts without proper handwashing
KEEPING VEHICLE VIRUS FREE

• Wipe your materials with disinfectant prior to entering the vehicle
• Disinfect the door handle after each visit
• Put a barrier where you are placing your supplies
  • Trash bag etc. that can be discarded daily
• Disinfectant
  • EPA Approved Disinfectant
  • 4 teaspoons bleach per quart of water
• Hand Sanitizer (at least 60% alcohol)
  • Local pharmacies making to assist with shortages
KEEPING YOUR LOVED ONE SAFE

To be prudent until more science known …

• Wear Washable clothing
• Remove clothing in garage or in foyer
• Place clothes in basket with a liner, trash bag or directly into washer
  • Wash on the hottest water possible
• Shower immediately
• Limit contact with others in household until steps taken
• Pets not found to be an issue
• Try to talk about non-COVID issues
MENTAL HEALTH AND COVID-19

- Emerging Evidence: It is anticipated that there may be an increase in Anxiety, Depression, Insomnia, Distress
- Clients and Workforce
- Physical Health and Mental Health Linked
  - Economic Downturn
  - Health System Functioning
- Ongoing stressors are key piece of mental health
- Long lasting mental health impacts (echoes of pandemic)
- Mitigating consequences
  - Education
  - Surveillance
  - Stepped Care Approaches
  - Improving Social and Economic Conditions
MENTAL HEALTH

• Recognize ways to be engaged at a distance
  • Sharing books, puzzles
• Share humor
• Share optimism that will emerge from this
SOURCES OF INFORMATION

- Coronavirus Call Center
  - 1-800-525-0127

- CDC hot line
  - 1-800-232-4636
SOURCES OF INFORMATION

Centers for Disease Control and Prevention

- Interim Guidance for Implementing Home Care of those with Coronavirus

- Preventing the Spread of Coronavirus Disease 2019 in Homes and Residential Communities

National Association for Home Care and Hospice Resources (includes links to CMS guidance documents)

- https://www.nahc.org/resources-services/coronavirus-resources/

Healthy Families America Guidance


OSHA

National Institutes of Health COVID-19 Website

- Under development now
- Specifically to provide educational resources for coronavirus workers