# Agency Based In-Home Caregivers & Workers (e.g. Home Health Agencies, Personal Care Management Agencies, Home Care Agencies, Adult Foster Care, etc.)

## 2019 Novel Coronavirus (COVID-19) Guidance

March 12, 2020

#### Intended Audience: In-home agency administrators

This guidance is based on what is currently known about the transmission and severity of 2019 novel Coronavirus Disease (COVID-19). The Massachusetts Department of Public Health is working closely with the federal Centers for Disease Control and Prevention (CDC) to provide updated information about the COVID-19 outbreak.

This guidance will be updated as needed and as additional information is available. Please regularly check <a href="mass.gov/2019coronavirus">mass.gov/2019coronavirus</a> for updated interim guidance. Additionally, if you are a CMS-certified agency, please review and stay <a href="mass.gov/2019coronavirus">updated on CMS guidance</a>.

Each organization faces specific challenges associated with implementation based on its population, physical space, staffing, etc., and will need to tailor these guidelines accordingly. **This guidance is intended to supplement, not supplant, provisions from regulatory agencies that oversee health care organizations.** Organizations may develop their own policies, but these policies should be based on current science and facts and they should never compromise a client's or employee's health.

#### **Background**

#### What is Coronavirus Disease 2019 (COVID-19) and how does it spread?

- COVID-19 is a respiratory virus. Current symptoms have included mild to severe respiratory illness with fever cough, and difficulty breathing.
- According to CDC, the virus is spread mainly from person-to-person, between people who are in close contact with each other (within about 6 feet).
- Spread is from respiratory droplets produced when an infected person coughs or sneezes.

#### Who should be most cautious?

• Those considered "high risk" include people over the age of 60, anyone with underlying health conditions or a weakened immune system, and pregnant women.

#### What should agencies be doing to mitigate the risk of spreading COVID-19?

- Screen yourself, staff, vendors, and clients for any of the conditions below:
  - o Sick with fever (higher than 100.3 °F) or newly developed respiratory illness such as cough, shortness of breath, or sore throat
  - o Recent international travel (i.e., within the past 14 days) from COVID-19-affected geographic areas
  - o Close contact with a person diagnosed with COVID-19 in the past 14 days

#### • Preparing and Educating Staff

O During times of COVID-19 circulation in the community, ensure employees are able to stay home if they have symptoms of acute respiratory illness or if they need to care for a sick family member.

- Make sure your employees are aware of these policies. Do not require a healthcare providers' note to validate illness or return to work, as healthcare provider offices and medical facilities may be extremely busy and not able to provide this documentation.
- o If employees become ill with respiratory symptoms while at work, they should be sent home as soon as possible.
- Make sure your employees are aware of these policies. Sick persons should cover their noses and mouths with a tissue when coughing or sneezing (or cough into their elbow or shoulder if tissues are not available) and perform hand hygiene immediately after.
- Those with symptoms of acute respiratory illness should stay home and not return to work until they are free of fever (oral thermometer temperature of less than 100.3 degrees) and any other symptoms for at least 24 hours, without use of fever-reducing or other symptom altering medicines (e.g. cough suppressants).
- o If an employee is diagnosed with COVID-19 they cannot return to work until they have been authorized to leave their home by their local board of health.
- Identify ways to limit direct person-to-person contact by leveraging technology, where appropriate.

#### • Provide access to personal protective equipment (PPE), such as facemasks and gloves, as available.

- o CDC recommends universal use of Standard Precautions when caring for any client.
- o Reinforce the importance of strict adherence to Standard Precautions during all client encounters.
- O Standard 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.
  - For example, a facemask and 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.

#### • Avoid unnecessary out of state or international travel and avoid large gatherings or crowds.

- O Agency staff, and especially caregivers, provide essential services that help others to function throughout their daily lives. Agency staff health and the health of those you serve is of utmost importance.
- o Agencies should set up ways to appropriately limit staff travel and possible exposure.
- o Cancel large and do not attend large gatherings of more than 250 people.

#### • Reinforce the practice of good daily hygiene with all staff.

- o Wash your hands often with soap and water for at least 20 seconds, especially:
  - After going to the bathroom;
  - Before eating;
  - After blowing your nose, coughing, or sneezing; and
  - Upon entering and exiting the client's home.
- o If soap and water are not available, use an alcohol-based hand sanitizer with at least 60% alcohol.
- O Cover a cough or sneeze with a tissue and dispose of tissue.
- O Don't touch your eyes, nose or mouth without first carefully washing your hands.
- o Properly clean all frequently touched surfaces on a regular basis using everyday cleaning products.
- O Avoid sharing dishes, drinking glasses, eating utensils, or towels.
- O Wash dirty dishes in a dishwasher or, if by hand, with warm water and soap.
- O Laundry can be washed in a standard washing machine with warm water. It is not necessary to separate laundry used by a client from other household laundry.
- o In order to avoid germs, do not shake dirty laundry or "hug" dirty laundry to your chest to carry it.

#### • Monitor staff emotional health.

- o Emotional reactions to stressful situations such as new viruses are expected. Remind staff that feeling sad, anxious, overwhelmed, or having trouble sleeping or other symptoms of distress is normal.
- o If symptoms become worse, last longer than a month, or if they struggle to participate in their usual daily activities, have them reach out for support and help.

- If one is available, encourage employees to call their Employee Assistance Program. The National Disaster Distress Helpline is available with 24/7 emotional support and crisis counseling for anyone experiencing distress or other mental health concerns. Calls (1-800-985-5990) and texts (text TalkWithUs to 66746) are answered by trained counselors who will listen to your concerns, explore coping and other available supports, and offer referrals to community resources for follow-up care and support.
- Complete the Coronavirus COVID-19 In-Home Care Agency Checklist Tool on pages 4-8
- **Organizational Preparedness.** These preparedness steps may help protect your agency while minimizing disruption to your important services.
  - Develop or review business continuity plans for how to keep critical services going if staffing levels drop due to illness or taking care of ill family members or children that may be temporarily out of child care or school settings.
  - Be prepared to change your practices as needed to maintain critical operations (e.g., prioritize clients or temporarily suspend some services, if needed).
  - You may also wish to refer to <u>CDC</u>: <u>Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)</u>
  - o Cross-train personnel to perform essential functions so the site can operate even if key staff are absent.
  - Assure you have adequate supplies of soap, paper towels, tissues, hand sanitizers, cleaning supplies, and garbage bags. If possible, a supply of disposable gloves and paper facemasks will be useful if persons become ill while at your program site.

#### Steps to follow if staff, or someone they know or care for is sick:

- If staff are sick:
  - o They should stay home and not come to work. Do not schedule them to work if they are sick.
  - o Follow the steps outlined on page 9.
- Follow the flow chart on page 9 to determine the best care path for an individual for whom your agency provides care and who is diagnosed with COVID-19 or is experiencing symptoms.
- If you have staff that live with a sick individual some general guidance to share with them includes:
  - Keeping the sick person in a separate, well-ventilated room and apart from other people and pets as much as possible.
  - o If a separate space is not available, keeping a distance of at least six feet from people who are well.
  - A sick person who is coughing or sneezing should wear a mask when around other people. If the sick person cannot wear a mask, the caregiver should wear a mask. The bathroom should be cleaned every day using a household disinfectant according to the directions on the label. Wear gloves while cleaning.
  - o Providing the sick person with a separate bathroom if available and a trash bag within reach.
  - o Limiting activities outside the home until the sick person is feeling well for at least one day.
  - o Limiting outside visitors.

## **Coronavirus COVID-19 In-Home Care Agency Checklist Tool (Page 1 of 4)**

ACTION	YES	NO	COMPLETION DATE	COMMENTS		
	PLAN					
Review your Emergency Plan/Continuity of Operations Plan.						
2. Update your Plan to reflect changes based on your review and current situation.						
3. Update all workforce contact information.						
4. Coordinate with local emergency operations/ local health department/health care coalition						
5. Review personnel policies with regard to use of personal time, sick time, overtime. Develop contingency policies.						
6. Check with your vendors about supply chain especially those that provide you with medications for your clients.						
7. Plan to address workforce shortages. Contract with other agencies for additional workforce.						
8. Develop a plan to cross train workforce wherever possible.						
9. Develop a questionnaire to identify which workforce members are available to work extra and flexible hours. Also identify workforce members that may be employed by another health care provider as they may have a commitment to that organization in an emergent situation.						

## **Coronavirus COVID-19 In-Home Care Agency Checklist Tool (Page 2 of 4)**

ACTION	YES	NO	COMPLETION DATE	COMMENTS		
10. Communicate your plan with partner agencies.						
11. Help your workforce develop a plan for their families.						
	CLIENT CARE					
1. Assess your Client Classification Levels for possible triage and keep hard copy easily accessible. Do this on a regular basis while we are in this current situation.						
2. Identify client family members who may be able to take on more care responsibility if necessary.						
3. Develop a Back Up Care Plan.						
a. List names and responsibilities.						
b. Get governing authority approval.						
<ol> <li>Begin to develop plans for possible surge capacity based on staffing and client classification levels.</li> <li>This means forecasting with a possible significantly reduced workforce.</li> </ol>						
5. Develop alternate staffing patterns such as longer days						
6. Ask screening questions before each visit and identify responsible person for conducting screening (scheduler, supervisor, worker, etc.).						

## **Coronavirus COVID-19 In-Home Care Agency Checklist Tool (Page 3 of 4)**

ACTION	YES	NO	COMPLETION DATE	COMMENTS		
SITUATIONAL AWARENESS						
Communicate with local emergency preparedness organizations.						
2. Assign one person to monitor daily updates from CDC, DPH, and World Health organization.						
3. Be aware of state updates, resources and communications.						
INFEC	INFECTION CONTROL AND PREVENTION					
Educate/re-educate workforce in the following:						
a. Standard Precaution						
b. Transmission- based precautions such as						
1) contact						
2) droplet						
2. Review Nursing Bag Technique with all field personnel.						
3. Download multi-lingual client seasonal influenza information and distribute to clients and their family members.						
4. Re-educate workforce on handwashing protocols using running water and waterless hand sanitizers.						
5. Offer seasonal influenza vaccination to workforce and clients.						

### **Coronavirus COVID-19 In-Home Care Agency Checklist Tool (Page 4 of 4)**

ACTION	YES	NO	COMPLETION DATE	COMMENTS
6. Check PPE supplies and dates. Move outdated to back and label as outdated but do not discard at this time.				
7. Educate workforce again in donning and doffing of PPE and in sequential order.				
8. Review your infection control policies for surveillance, recognition, identification and reporting requirements for workforce and clients.				
9. Have a process to monitor and report any workforce or client illnesses in your organization.				
10. Develop an occupational health plan and policies for any workforce members with an exposure to COVID-19.				

## Agency Based In-Home Caregivers Screening Flow Chart Start Here

If staff answered No to ALL of these questions:

NO

YES

Staff or agency personnel should call the client or representative ahead of a visit and ask the client or representative if they or anyone who lives in their house:

- Has a fever (Higher than 100.3 degrees) or new respiratory symptoms such as cough, shortness of breath, or sore throat?
- Has travelled to a <u>COVID-19-affected</u> <u>area</u> (outside of U.S.) in the past 14 days?
- Has had contact with a person (live with or are within 6 ft. of for over 15 minutes) diagnosed with COVID-19 in the past 14 days?
- 4. Has been diagnosed with COVID-19 or told by a healthcare provider that they may or do have COVID-19?

√NO

If they answered No to ALL of these questions:

Staff should continue to provide care to this individual in the home, using strategies of prevention including:

√ NO

- 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
- Limiting physical contact with your client to only what is needed for care tasks

Perform a self-check screening and client screening every day, even if you are a livein caregiver Before staff provide care for an individual in the home, they should ask themselves:

- Do I have a fever (Higher than 100.3 degrees) or new respiratory symptoms such as cough, shortness of breath, or sore throat?
- 2. Have I travelled to a <u>COVID-19-affected area</u> (outside of U.S) in the past 14 days?
- 3. Have I had close contact with a person (live with or are within 6 ft. of for over 15 minutes) diagnosed with COVID-19 in the past 14 days?
- 4. Have I been diagnosed with COVID-19 or told by a healthcare provider that you may or do have COVID-19?

If the client answered Yes to ANY of these questions:

The client should call their health care provider and follow the provider's guidance. If the client needs your help to make this call, a staff member should provide assistance.

THEN

If the client answered Yes to question 1 *only* 

If the client answered Yes to questions 1, and 2 or 3; or question 4:

Staff are expected to continue to provide services to this individual using prevention strategies and personal protective equipment (PPE) including:

- Having the individual wear a face mask;
- Wearing gloves when touching the individual;
- Limiting physical contact; and
- Maintaining personal hygiene for yourself and the individual as described in this guidance

Agency clinical staff should make a decision on whether it is appropriate for staff with PPE to visit client

If the agency does not have access to PPE and if the client requires immediate care, emergency services should be contacted

If care cannot be provided, the agency should **contact the client's other providers** (ASAP, case manager, SCO, etc.)

If staff answered Yes to ANY of these questions:

YES

BUT

**Staff should not go in to work.** Direct them to call their health care provider for further guidance

Agency should provide alternative/back-up staff to visit client, if applicable. Call the individual(s) for whom the sick staff member provides care to explain change of care.

If the client is in an emergency, call 9-1-1

If the staff member providing care is over the age of 60, has underlying health conditions or a weakened immune system, or is pregnant, they are at high risk for COVID-19 and should not provide care to this individual

Agency should provide alternative/backup staff to visit client, if applicable. Call the individual(s) for whom the sick staff member provides care to explain change of care

If the client is in an emergency, call 9-1-1