

**9 APRIL 2020**

## **Supplementary Advice Note:**

### **Social Care settings: Examples to inform implementation of the updated Infection Prevention and Control guidance – COVID 19**

Welsh Government have received requests for additional practical advice examples for social care providers in relation to the updated COVID-19: Infection Prevention and Control (IPC) guidance which was published on the 2 April 2020. <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control> ( last updated 7 April 2020).

#### **Changes to the IPC Guidance:**

An explanation of the main changes to the guidance was published by Public Health England (last updated 7 April 2020). <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/updates-to-the-infection-prevention-and-control-guidance-for-covid-19>

This explains the main changes to the updated IPC guidance which include:

- to clearly explain the [PPE required for different common clinical scenarios](#), 3 new tables have been added – one for hospitals, one for primary care, outpatient and community care ([Table 2](#)) and one for ambulance, paramedics and pharmacy staff
- an additional, fourth table ([Table 4](#)) describes when to use PPE for all patient encounters (not just patients with suspected or confirmed COVID-19) at a time when there is sustained community transmission of COVID-19, as is currently occurring in the UK, and the likelihood of any patient having coronavirus infection is raised  
[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877603/T4\\_Additional\\_considerations\\_of\\_COVID-19\\_poster.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877603/T4_Additional_considerations_of_COVID-19_poster.pdf)
- the guidance explains that in some circumstances PPE can be worn for an entire session (such as a ward round) and does not need to be changed between each patient
- patient contact is now defined as being within 2 metres (rather than within 1 metre) of a patient, which is more precautionary and is consistent with the distancing recommendations used elsewhere
- hand-washing advice has been updated to include washing of forearms, when forearms have been exposed or may have been exposed to respiratory droplets or other body fluids

**NB this guidance is evolving constantly as new evidence becomes available, it is therefore essential that all organisations continuously check the live web links and update their implementation accordingly.**

A number of the tables including the additional Table 4 are relevant to social care settings. The following practical examples are provided to facilitate discussion with health and social care providers across Wales, and to facilitate a consistent approach to implementation of the guidance, notably Table 4, in social care settings.

The updated IPC guidance highlights the need for a risk assessment based approach to implementation and as such all organizations are advised to undertake and document appropriate individual/organisation level risk assessments in relation to the implementation of the updated guidance.

## General Advice in implementing the updated guidance in Social Care Settings

It is very important that in using the PPE specified and provided, that all social care staff have had the appropriate training to [put it on \(donning\) and take it off safely \(doffing\)](#) to ensure they do not inadvertently contaminate themselves on removal of PPE or when going between service user or resident.

Standard infection prevention and control precautions (SICP) must be applied in combination with the Fluid Repellent Surgical Mask (FRSM) and eye protection to protect the carer from the infection risk.

Careful attention to hand hygiene is required before contact with the service user and after doffing then disposal of PPE. It is also important to apply the rules on social distancing of 2m wherever possible. This could be in a person's own home or in nursing and residential settings if no direct care is being given e.g. chatting or discussing their care.

Staff also need to maintain social distancing (remain at least 2 meters apart) between themselves, during their shift.

Phone triage should be used whenever possible to ascertain if any of those in their own home are known or suspected to have COVID-19 and service users should be encouraged to notify any risks to their provider.

Carers must be alert to any symptoms of infection during their visits or in their [daily assessment](#) within a residential or care home as the elderly may not present with typical fever and cough but may be displaying behaviour or signs that they are unwell (especially in dementia patients).

### PPE Practical Examples:

1. In caring for residents or services users with possible or confirmed COVID-19 please refer to PPE use in [Table 2](#).

Table 2 relates to the care of individuals **with possible and confirmed COVID-19** and should be **followed at all times**, whether the UK is or is not in a position of sustained community transmission of COVID-19.

2. Use of PPE for all residents or service user encounters (not just patients with suspected or confirmed COVID-19) at a time when there is sustained community transmission of COVID-19, **as is currently occurring in the UK**, please refer to PPE use in [Table 4](#).

Implementation of Table 4, is required as sustained community transmission of COVID-19 is currently occurring in the UK.

Under Table 4, practically, the PPE in Table 2 would be applied for all residents or service users not just those who are possible or confirmed COVID-19.

Therefore, in addition to **standard infection prevention and control precautions**:

PPE is recommended for **all social carers** providing **direct care** (within 2 metres) as follows:

**Carers in residential and nursing homes:**

Will be required to wear disposable single use gloves and aprons, the FRSM and eye protection can be sessional use e.g. providing ongoing care for a group of residents, medication round. The eye protection is used if there is likely to be splashes for example the resident is spluttering/coughing directly into the face of the carer. Hand hygiene as described above.

When COVID-19 is identified in a resident in a care home it is important that PPE is worn throughout the care environment of the home not just for those who are suspected or confirmed COVID-19 (Not in ancillary areas or offices).

**Carers visiting people in their own home:**

Will be required to wear disposable single use gloves and aprons and the Fluid Repellent Survival Mask (FRSM). The eye protection is used if there is likely to be splashes for example spluttering/coughing directly into the face of the carer. Staff must remove all PPE before leaving the house. Hand hygiene as described above.

**Carers visiting people at high risk (those under shielding guidance) in their own home:**

Will be required to wear disposable single use gloves and aprons and Surgical Face mask (not FRSM). The aim here is to protect the highly vulnerable person from the staff as the vulnerable person is at high risk of serious illness if infected.

If there is a risk that this vulnerable person has COVID-19 then an FRSM mask should be worn instead of a surgical mask.

**Carers visiting children in their own home:**

Will be required to wear disposable single use gloves, aprons and FRSM. The eye protection is used if there is likely to be splashes for example spluttering/coughing directly into the face of the carer. Staff must remove all PPE before leaving the house. Hand hygiene as described above

*Eye Protection can be reused if it not marked as single use. This can be cleaned with the routine disinfectant wipes or solution used in the social care settings.*

**Guidance Tables for Social Care**

PPE tables for Social Care:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877599/T2\\_Recommended\\_PPE\\_for\\_primary\\_outpatient\\_and\\_community\\_care\\_by\\_setting\\_poster.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877599/T2_Recommended_PPE_for_primary_outpatient_and_community_care_by_setting_poster.pdf)

Best Practice for Hand Hygiene:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877529/Best\\_Practice\\_hand\\_rub.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877529/Best_Practice_hand_rub.pdf)

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/877530/Best\\_Practice\\_hand\\_wash.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877530/Best_Practice_hand_wash.pdf)