

	Authorised: Registered Manager	Date: 30 th April 2020
CORONAVIRUS (COVID-19) MANAGEMENT FOR DOMICILLIARY CARE POLICY		

This policy has been written to cover the operational procedures necessary for this domiciliary care organisation to protect its service users and staff from the risks presented by coronavirus (COVID-19) infection.

It includes:

- information provision
- travel requirements
- infection control and prevention procedures
- staff health and social distancing
- personal protective equipment (PPE)
- self-isolating service users
- business continuity procedures
- pandemic recovery planning.

What is Coronavirus?

The World Health Organisation defines coronaviruses as a family of viruses that cause infectious illness ranging from very mild to very severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV). COVID-19 is a new strain which originated in China at the end of 2019. It has since spread worldwide, initiating a global pandemic public health emergency.

How is Coronavirus Spread?

People can catch COVID-19 from others who have the virus.

It is understood that the virus is highly infectious and moves from person to person in droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. In addition, the virus can survive for up to 72 hours out of the body on surfaces.

People can catch COVID-19 if they breathe in the droplets or touch infected surfaces and then touch their eyes, nose or mouth.

What Are the Symptoms?

The most common symptoms are fever, tiredness and dry cough. Some people may have aches and pains, nasal congestion, runny nose, sore throat or diarrhoea. Symptoms begin gradually and are usually mild.

Most people (about 80%) recover from the disease without needing special treatment. A small percentage can become seriously ill and develop difficulty breathing. This is particularly dangerous for people with weakened immune systems, for older people, and for those with long-term conditions such as diabetes, cancer and chronic lung disease.

Some domiciliary care service users will clearly be vulnerable to being seriously ill if they are infected by the virus.

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Information

Blueboard Care Services will keep up to date with the latest public health and government information about the risk of coronavirus in the UK. The infection control lead for Blueboard Care Services will maintain close links with local health protection teams and will be responsible for circulating essential information to staff and, where necessary, to service users and their families. They will also update Blueboard Care Services's management team.

Blueboard Care Services will comply fully with official advice, including *COVID-19: guidance on home care provision*, published by Public Health England.

Infection Control and Prevention Procedures

Blueboard Care Services believes that general adherence to high standards of infection prevention and control is the best way to prevent the person-to-person spread of pathogens such as coronavirus and maximise the safety of staff, service users and their families. To achieve this Blueboard Care Services infection control policies and procedures will be implemented in full, especially those related to effective hand hygiene, sanitisation and environmental cleaning.

Care managers and supervisory staff should make sure that people:

- cover their mouth and nose with a tissue or their sleeve (not their hands) when they cough or sneeze
- put used tissues in the bin immediately
- wash their hands with soap and water regularly for 20 seconds and use hand sanitiser gel (at least 60% alcohol) if soap and water are not available
- try to avoid close contact with people who are unwell
- avoid touching their eyes, nose, and mouth with unwashed hands
- clean and disinfect frequently touched objects and surfaces.

Staff should comply fully with hand sanitisation policies and procedures. Managers will ensure that policies are supported by the provision of appropriate resources such as hand sanitiser gels that contain at least 60% alcohol for home care staff.

The advice should be passed on to service users. It is important that care staff adhere to high standards of infection control practice while in services users' homes and that they ask service use users to do so too. Regular cleaning of frequently-touched hard surfaces with a suitable disinfectant and cleanser should be carried out.

Blueboard Care Services will comply fully with all existing infection control and prevention guidance, including the *Health and Social Care Act 2008: Code of Practice for Health and Adult Social Care on the Prevention and Control of Infections and Related Guidance*.

Staying Home and Social Distancing

People have been told by the Government that for the time being they must stay at home to prevent the spread of the virus. This is not a request but a rule. Everyone should comply.

People should only go outside:

- if they are shopping for necessities, such as food and medicine
- to carry out one form of exercise a day, alone or with household members

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- for medical or care needs, for example to help a vulnerable person
- when travelling to and from work, but only where work cannot be done from home.

Key workers are still free to travel to and from work. This includes healthcare and social care workers, ambulance and fire personnel, the police and those involved in food production and distribution.

People staying home should not have visitors, not even from friends or family. If they do have to go out they should do so for only short periods and go straight home afterwards. While out they must observe “social distancing” rules. This involves keeping a safe distance of at least two metres (about three steps) from others. Public venues such as pubs, theatres, restaurants, cafes and non-essential shops have been closed.

Vulnerable people, including those aged 70 and over, are being advised to be particularly stringent in following social distancing measures. People have been asked not to visit their elderly relatives for the time being. This is considered the safest way to ensure that they do not pass on the virus.

Blueboard Care Services will ensure that all public health messages relating to staying home and social distancing are passed on to staff, service users and relatives. Staff and service users should observe social distancing where possible when not providing direct personal care and when interacting with each other.

Staff Health and Self-isolation

Government strategy is to ask people to self-isolate in their homes where they have symptoms of COVID-19 infection or think that they might have the virus.

Staff who are unwell with suspected COVID-19 or who have come into contact with an infected individual or who share a household with someone who is unwell should not come to work but must comply with the latest government advice about self-isolating themselves in their home.

The guidance states that:

- people who have symptoms of infection (new continuous cough and/or high temperature - however mild) and live alone should self-isolate by staying at home and not leaving their house for 7 days from when the symptoms started
- those who live with others and one person has symptoms should self-isolate as a household for 14 days from the day when the first person in the house became ill.

All staff who are self-isolating must inform their line-manager as soon as possible that they will not be in to work.

Care Planning

During the pandemic crisis Blueboard Care Services will keep service user care plans under constant review to ensure that their needs are being met. Vulnerable service users will be identified and plans put in place to ensure their safety. Blueboard Care Services will work closely with relatives/carers and with care and health partners and charities/community support groups. Where necessary arrangements for mutual aid will be established with reference to our existing information sharing and adult safeguarding policies.

Providing Care

In all cases care staff must follow infection control best practice, desanitising/washing hands frequently and using PPE appropriately.

The following government guidance will be followed:

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1. Service user not symptomatic

If the service user is not symptomatic then normal good hygiene/infection control/PPE practices should be employed.

General interventions should include increased cleaning activity and keeping property properly ventilated by opening windows whenever safe and appropriate.

2. Service user part of a household that is isolating

If the individual being cared for and the member of staff can remain at a safe protected distance (at least two metres) from the symptomatic member of the household, then care can be provided without additional precaution.

Symptomatic members of a household should be advised to use separate bathroom facilities and isolate themselves within the home wherever possible.

Where this is not possible care should be provided as in 3 below.

3. Service user has COVID-19 symptoms

If the service user has symptoms of COVID-19 then risk of transmission should be minimised through the following safe working procedures.

- a. Use new PPE for each episode of personal care (aprons/gloves/fluid repellent surgical masks).
- b. Use eye protection if risk of splashing.
- c. Double bag PPE/care waste/used tissues/continence pads, etc and leave for 72 hours before placing in household waste bin.

Frequently touched surfaces should be cleaned regularly with household detergent and/or bleach.

People who develop symptoms are advised by the Government to use the NHS 111 online service if they need advice. They should call NHS 111 if they do not have internet access. In an emergency they should call 999 if seriously ill. They are advised not to visit the GP, pharmacy, urgent care centre or a hospital.

“High-Risk” Individuals

Blueboard Care Services is aware that the Government has published guidance on the protection of people who have conditions that make them “high-risk”. *Guidance on shielding and protecting people defined on medical grounds as extremely vulnerable from COVID-19*, will be circulated to care staff and its action points incorporated in care planning and care provision as required.

Personal Protective Equipment (PPE)

Within Blueboard Care Services, care staff should use all personal protective equipment (PPE) as directed in the organisation’s infection prevention and control policies. Blueboard Care Services will also comply with the following Public Health England (PHE) guidance:

- *COVID-19 personal protective equipment (PPE)*
- *Considerations for acute personal protective equipment (PPE) shortages*

Government guidance states that if neither care workers nor the individual receiving care and support is symptomatic with COVID-19, then no personal protective equipment is required above and beyond normal good hygiene practices.

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Testing

Blueboard Care Services will support staff and their families to access coronavirus testing. All frontline social care staff are classified as “essential workers” and are eligible for such tests. Those who are self-isolating can book a test directly, selecting a regional test site drive-through appointment or a home test kit. Employers can book tests through an employer referral test booking route.

Travel Restrictions

Travelling is now much reduced due to countries around the world closing their borders.

Latest travel advice can be found on the GOV.UK web platform at www.gov.uk/guidance/wuhan-novel-coronavirus-information-for-the-public#information-about-the-virus.

Blueboard Care Services requires staff to comply with any advice given and to inform their line manager wherever the guidance may apply to them. People are being advised to stay indoors and avoid contact with other people (self-quarantine) for 14 days if they have travelled recently to the UK from specified countries.

Business Continuity Procedures and Pandemic Recovery Planning

In addition to Blueboard Care Services’s general business continuity and recovery planning policies, the organisation recognises the need to have a separate pandemic recovery plan and procedure. This is because a general continuity recovery plan focuses on a short-term recovery programme. In contrast, the effects of the pandemic could last many months.

The following contingency measures will be implemented:

- A communications strategy will be developed to ensure that staff, service users and their families are provided with up-to-date and accurate information on the status of the pandemic and on Blueboard Care Services’s response.
- Every effort will be made to provide the information to service users in a format that they can understand. Blueboard Care Services recognises that the current crisis will be upsetting and worrying for residents and relatives.
- Information will be provided to staff via e-mail and through text where practical and unnecessary face-to-face meetings will be cancelled — where meetings are held social distancing will be observed.
- Training will utilise online e-learning and other electronic forms where possible — any face-to-face training will be conducting conforming to social distancing rules.
- Blueboard Care Services’s leave and absence policies will be continuously reviewed as the status of the pandemic changes, for instance, it may become necessary to cancel leave in case of serious short-staffing.
- Staff will be informed of any additional measures to limit the spread of disease in a pandemic situation — this might include the following:
 - avoiding unnecessary travel
 - cancellation of face-to-face meetings
 - plans to reduce the impact of absentees
 - working from home where possible for managers and office staff
 - systems to lessen the impact of supply chain disruption.

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- Essential services will be prioritised.
- Advice will be provided for vulnerable service users on steps to take to protect themselves.
- Care plans will be reviewed to identify service users most at risk in case of service disruption.
- As a contingency measure, staff will be cross-trained in various functions to ensure that adequate cover is provided in different roles should sickness rates rise.
- Staff who perform roles that can be done from home will be encouraged to.

The management of Blueboard Care Services will link with any local resilience forums relevant to health and social care provision.

Line managers and supervisors will be responsible for ensuring that staff understand Blueboard Care Services's pandemic recovery plan policy and procedure. Staff should familiarise themselves with the procedure and should speak to their line manager if they have any questions or concerns.

The procedure aims to ensure that Blueboard Care Services will be able to continue to provide care to its service users during any disruption caused by a pandemic.

Monitoring and Review

This policy will be continuously monitored and updated to take account of any changes to the official advice provided about coronavirus.

Signed: BLUEBOARD SENIOR MANAGEMENT