

Minimizing Client and Staff's Chances for Exposure to the Coronavirus

Monitor Personal Health Condition

- If staff has fever 100.4°F or above, cough, upper respiratory infection or shortness of breath, staff is not to report to work
 - ✓ Staff calls supervisor/on-call supervisor at least two hours before shift is to begin
 - ✓ Staff may be advised to contact their healthcare provider
- Upon arrival for work, staff checks temperature and completes the COVID Screening form
 - ✓ If staff's temperature is below 100.4°F and all response are no, staff may work
 - ✓ If staff's temperature is 100.4°F or above and any response is yes, staff calls the supervisor/on-call supervisor
- If staff develops symptoms of a fever 100.4°F or above, cough, upper respiratory illness or shortness of breath while on duty, staff is to call the supervisor/on-call supervisor immediately
 - ✓ Staff remains at the program until a replacement staff arrives
 - ✓ Staff wears a face mask and tries to maintain 6 feet distance from clients or other staff in the program

Monitor Each Client's Health Condition

- At least once daily and anytime a client displays symptoms of illness, staff checks temperature and symptoms of all clients
 - ✓ Staff disinfects thermometer in between clients with alcohol wipe or alcohol-damped wipe
 - ✓ Staff documents temperature for each client in ECP under Vitals tab
 - ✓ If client's temperature is below 100.4°F and client has no symptoms of cough or shortness of breath, no further actions are needed
 - ✓ If client's temperature is 100.4°F or above or client has symptoms of cough, shortness of breath, or body aches, staff are to call client's physician (if physician is not available, call nurse advisor) who will provide instructions and then staff calls supervisor/on-call supervisor
 - ✓ If client is client struggling to breathe or has other emergency issue, call 911
- Staff monitors clients for symptoms and reminds clients to report anytime they don't feel well

Follow General Infection Control Strategies

- Staff enforces no visitors in the home
- Staff makes sure needed supplies are in the home (soap, tissues, hand sanitizer, gloves, gowns, eye protection, masks, bleach)
 - ✓ There is a soap dispenser at each sink and staff refills it as needed
 - ✓ Ideally, there is alcohol-based hand sanitizer with 60-95% alcohol in each client's room if personal cares are performed (and it is safe to leave in client's room) and in common areas
 - ✓ Staff notifies supervisor if supplies are running low
- Staff performs hand hygiene FREQUENTLY – washing hands for 20 seconds
 - ✓ After coughing or sneezing
 - ✓ Before preparing food
 - ✓ Before eating
 - ✓ After using bathroom
 - ✓ Before performing client cares
 - ✓ After performing client cares
 - ✓ After disinfecting hard surfaces

- Staff instructs client to perform hand hygiene FREQUENTLY – washing hands for 20 seconds
 - ✓ After coughing or sneezing
 - ✓ Before eating
 - ✓ Before preparing food
 - ✓ After using bathroom
- Staff has tissues in common areas for client who coughs, sneezes or blows nose
 - ✓ Staff instructs client to discard tissue in lined trash bin
 - ✓ Staff instructs client to wash hands after coughing or sneezing
- Staff follows standard precautions (i.e., using appropriate personal protective equipment (PPE), discarding PPE prior to exiting the room, performing hand hygiene after cares) when performing personal cares with a client
- Staff prepares a bleach solution of 1/3 cup bleach to 1-gallon water (or 4 teaspoons bleach to 1-quart water) and wearing gloves cleans high-touch surfaces FREQUENTLY (bleach solution to be prepared new every day)
 - ✓ Tables
 - ✓ Remotes
 - ✓ Keyboards
 - ✓ Doorknobs
 - ✓ Phones
 - ✓ Hard-backed chair arms
 - ✓ Light switches
 - ✓ Faucets
 - ✓ Other frequently touched surfaces
 - ✓ Countertops
 - ✓ Sinks
 - ✓ Kitchen handles
 - ✓ Toilets
 - ✓ Refrigerator handle
 - ✓ Desks

Report Client Symptoms of Coronavirus

- If a client has new or worsening symptoms of a fever (100.4°F or above), cough, sore throat, shortness of breath or body aches, staff asks the client to stay in his/her bedroom
- Staff calls the clinic of the client's primary care provider for direction
 - ✓ If the phone system gives a number to press for reporting COVID 19 symptoms and a different number to press to report other symptoms, staff presses the COVID 19 symptoms number
 - ✓ If the call goes to the Nurse Advisor line, staff may have to wait for a return call, so staff are to leave the phone number and extension for the program phone
- Immediately after calling the clinic, staff calls the supervisor/on-call supervisor to report the client's condition and the details of the call to the clinic
- Staff and supervisor follow the instructions given by the physician/nurse advisor for care of the client
- If the instructions are for the client to be tested for COVID-19, the supervisor will arrange for additional coverage and transportation then call the staff back with the information
- Staff will assemble the needed information to send with the client if going to the clinic/hospital
 - ✓ Physician report form
 - ✓ Current medication list
- Staff ensures the client wears a mask when being transported to and from the clinic/hospital or testing site and when in the clinic/hospital
- The supervisor/on-call supervisor will contact Area Director for direction on reporting client's symptoms and instructions from healthcare provider/nurse advisor
- Staff will complete the Client COVID 19 Symptom Reporting Checklist form and document in ECP