

# Guidance for Residential Care Facilities

## Webinar 12/06/2020

- Admissions
- Transfers
- Visiting

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# Admissions and transfers to RCFs



**Infection Prevention and Control (IPC) is  
about supporting safe care**

**How to do what we need to do with the  
lowest risk for everyone**

**NOT  
creating barriers to care**



# Infection Prevention and Control (IPC)

**Barriers to care can do as much or  
more damage as infection**

# Transfer and Admission of Residents to an RCF



Coronavirus  
**COVID-19**  
Public Health  
Advice

Clear processes are required in each RCF to facilitate the transfer of residents from an acute setting or admission of a new resident where it is clinically safe to do so.

Risk assessment for all new admissions and transfers is essential to ensure resources are available that support safe care, social distancing and isolation.

Accepting admissions and transfers does pose a risk but the risk can be managed.

Need to inform residents and relevant persons of the issues and risks and involve them in decisions related to their care with their preference taken into account when applying this guidance.



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# Standard Precautions First



## **Standard Precautions – all patients all the time**

Minimising the risk of transmission in the first instance.

Especially:

- Hand hygiene
- Respiratory etiquette
- Appropriate use of correct PPE when it help (not when it doesn't: for example gloves are for contact with blood or other body fluids)
- Frequent environmental cleaning

## **Additional current National Public Health recommendations**

- Social distancing (2 metres)
- Wearing of surgical face mask when in close contact with residents and if anticipated close contact with another healthcare worker exceeds 15 minutes

# Testing



## Two types of tests

1. **Detecting a part of the virus in a respiratory sample (virus gene)**
2. **Detecting the response to the virus (antibody testing) in a blood sample**

**We are only virus testing to diagnose infection – antibody testing has very little value for this at the moment**

# Testing of People who have previous positive COVID-19



-  
People who have COVID-19 - **Generally Do Not Retest**

**Detects a part of the virus**

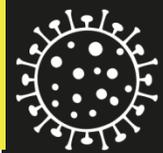
The test stays positive for many weeks in some people

The test is not a useful way to tell if a person is still infected

Retesting for patients who are known to have COVID-19 is very rarely useful

14 days post onset with no fever for 5 days - no longer infectious

# Testing of People who have NOT had a positive test



## 1. People with symptoms

Diagnostic testing because they have symptoms

Remembers “not detected” is not negative

## 2. People with no symptoms

Recommended for all patients who are for admission to an RCF

Coming from hospital – test before transfer

Coming from home – test on arrival

**[GPs do not organize this testing before admission]**

Why ? An extra check to identify most people with COVID-19

It may not detect everyone with infection

If not detected – still recommend 14 days isolation in own room after admission

# Testing of People who have not had a positive test



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What if test is positive on a person for admission

Admission can go ahead where risk is assessed and plan in place

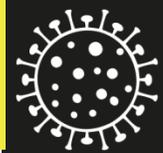
It is not easy to know if the person is still infectious but err on the side of caution

If there is any problem or suspected outbreak later knowing the person was positive coming in makes results easier to understand what is happening



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# Transfer and Admission of Residents to an RCF



## Recommendation for isolation

Residents transferred /admitted require single room isolation with contact and droplet precautions for 14 days and monitoring for any symptoms regardless of COVID -19 test result not detected.

- A resident who has been 12 hours or more in an acute hospital including overnight stay
- Residents admitted for short stay (convalescence and respite care)
- Residents who are transferring from hospital and recovering from COVID-19 within the 14 day period from onset of symptoms and are clinically fit to for hospital discharge

## Recommendation does not apply to

- A resident attending hospital day appointments/day procedures of less than 12 hours
- A resident who has recovered with confirmed COVID-19 ( 14 days since onset of symptoms and no fever for the last 5 days)

# Transfer and Admission of Residents to an RCF



If there are no known cases in the RCF, transfer of a COVID-19 resident not fully recovered should be delayed until 14 days post onset of symptoms and clinically recovered (no fever for 5 days)

On transfer from hospital the following details should accompany the resident:

- Date and results of all COVID-19 tests
- Date of onset of any symptoms
- Date of last documented fever whilst in hospital
- Details of any follow up monitoring or treatment required



Admission of residents from a hospital where there is no clinical suspicion or diagnosis of COVID-19

- Testing for COVID-19 should be carried out within 72 hours prior to discharge (if they are transferring on Thursday test can be done Monday)
- A single test is sufficient
- Results should be available and accompany resident on discharge

# Admission to RCFs from home /community settings



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Testing recommended within 72 hours before admission.

Before admission check if they have symptoms or a a COVID-19 Contact – if they have symptoms contact their doctor and defer admission. If a COVID-19 Contact – defer admission (note)

**If no symptoms & not a contact admission: resident may go ahead to a single room with contact and droplet precautions**

**and**

**Test within 24 hours after admission applies:**

Standard contact and droplet precautions apply for 14 days regardless of test results.



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# If you have a current outbreak of COVID-19



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Suspend new admissions until Public Health advise it is safe to recommence admissions



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# Visiting Guidance Arrangements from 15<sup>th</sup> June

# Visiting arrangements



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Overview of Guidance available on [www.hpsc.ie](http://www.hpsc.ie)

Guidance to management, staff, residents and relatives to facilitate visiting during these exceptional times.

Restrictions to visiting are aimed at protecting residents, staff and visitors from exposure to COVID-19.

Seeks to respect the autonomy of the residents while also mitigating the risk of exposure to COVID-19.



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# Services where the visiting guidelines applies



All residential care facilities including:

- Older persons
- Disabilities
- Mental Health (long stay)

Visits are at the discretion of Person in Charge of each facility who should ensure that visits do not compromise overall resident care or adherence to requisite infection control procedures.

# Key points on visiting in RCF with no ongoing COVID-19 outbreak



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- Visits need to be pre-arranged with person in charge of the facility
- 2 named visitors may visit BUT only one visitor per person to visit at a time
- Limited number of total visitors in each area at a time (generally 2)
- Consider suitable time that reduces footfall – determine capacity

# Visiting processes that apply to visitors



## Check the following before access to enter:

- Has the visitor had COVID- 19 or recent symptoms?
- Close contact with a person with COVID-19 / suspected COVID-19
- Undertake symptom and temperature-checking
- Visitors should sign in with own pen or be signed in by staff
- Ensure hand-hygiene is done correctly
- **Wearing of a cloth face covering or surgical mask if social distancing cannot be maintained (provide mask if needed)**

# Visiting arrangements in the facility



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The resident's own room

Multi-occupancy facility- a room away from other people or in an outdoor area (weather permitting)

Limited to less than 30 minutes

Visits should only take place during the day away from mealtimes with pre-arranged timings.



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# Key points on visiting during an outbreak of COVID-19



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All but essential pre-arranged visiting (for example end of life) is suspended in the interest of protecting residents, visitors and staff at this time

Visitors should be advised of the risks of personal transmission to them.

Any visitors with fever or respiratory symptoms will not be admitted. Visitors should declare that they have no symptoms and undergo a temperature check before being permitted to enter.

Visitors are advised of the requirement for PPE to be worn as part of the visit with assistance and guidance in relation to donning and doffing. Appropriate PPE should be provided by the RCF

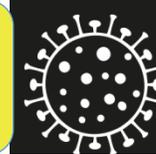
The messages around visiting during an outbreak should be reinforced with signage



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**As with all guidance it should be applied with compassion and good sense – the principles are critical but some flexibility may be needed in the context of individual resident's needs**



# Online resources and links





[www.hpsc.ie](http://www.hpsc.ie) is the central hub for nationally approved infection control guidance relating to COVID19. You should familiarise yourself with the relevant guidance.

All guidance has been approved by the COVID19 National Public Health Emergency Team (Expert Advisory Group) or the HSE Health Protection and Surveillance Centre.

**The critical guidance for all staff delivering care in a residential service is:**

Interim Public Health and Infection Prevention Control [Guidelines](#) on the Prevention and Management of COVID-19 Cases and Outbreaks in Residential Care Facilities and Similar Units

**The critical guidance for all staff delivering care in a person's home is:**

COVID-19 Infection Prevention and Control [Guidance](#) for Health and Social Care Workers who Visit Homes to Deliver Healthcare



Online training programmes are available on [www.hseland.ie](http://www.hseland.ie) This resource is accessible to any service public or private once they have registered online.

The key infection control resources on this site include videos to demonstrate:

- How to perform hand hygiene using soap and water
- How to perform hand hygiene using alcohol based rub
- Breaking the chain of infection – an online infection control course (with a knowledge test)
- How to put on and take off PPE in a community setting (with a knowledge test)
- How to put on and take off PPE in an acute hospital setting (with a knowledge test)



There are additional videos on HPSC relating to putting on and taking off the new overall type PPE and masks with loops. Also included are scenarios for managing patients in a GP clinic area that are useful for other settings

<https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/videoresources/>

Webinars: there are a number of education webinars on infection control and reducing the risk of transmission of COVID19 in health services.

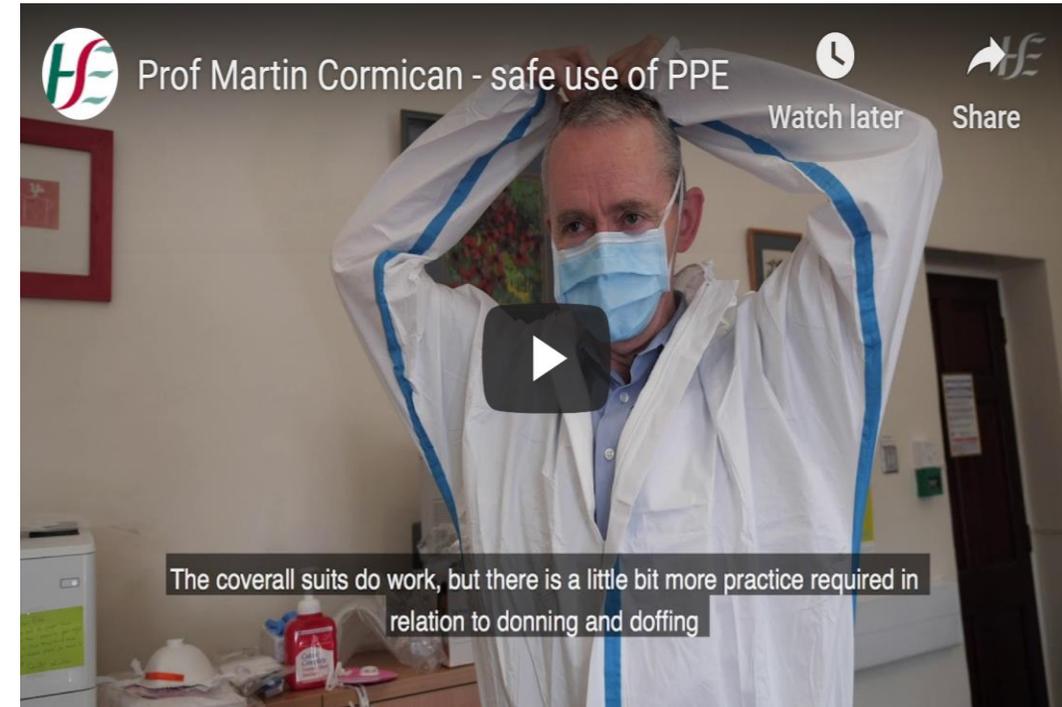
<https://bit.ly/34YccbT>





There are additional videos on HPSC relating to putting on and taking off the new coverall type PPE and masks with loops. Also included are scenarios for managing patients in a GP clinic area that are useful for primary care settings

<https://www.hpsc.ie/az/respiratory/coronavirus/novelcoronavirus/videoresources/>





There is a considerable amount of online information for clients, families, the public. All of this information is available on the HSE website and the link is listed below.

There are many pieces of translated materials, videos in Irish sign language and specific materials for patients who have intellectual disability or who have dementia.

Please familiarise yourself with the range of materials accessible here:

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>



Some samples of online posters available for download – use this link

<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

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## Visitors

**PROTECT YOUR LOVED ONES**

Don't visit if you feel unwell with a cough, breathing difficulties, fever or shortness of breath.

<b>Wash</b> your hands well and often to avoid contamination	<b>Cover</b> your mouth and nose with a tissue or sleeve when coughing or sneezing and bin used tissue	<b>Avoid</b> touching eyes, nose, or mouth with unwashed hands	<b>Clean</b> and disinfect frequently touched objects and surfaces

For more information visit [hse.ie/coronavirus](https://www.hse.ie/coronavirus)

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Cosain tú féin agus daoine eile ó thinneas

### Nigh do lámha

- Tar éis casacht nó sraoth
- Nuair a bhíonn tú ag tabhairt aire do dhuine tinn
- Roimh agus tar éis bia a ullmhú
- Sula n-itheann tú
- Tar éis an leithreas
- Nuair atá do lámha salach
- Tar éis lámh a leagain ar ghearradh, spuaic nó créacht oscailte
- Is féidir cuimilteoir alcóil lámhe a úsáid mura bhfuil cuma shalach ar na lámha

**RESIST** [www.hse.ie/handhygiene](https://www.hse.ie/handhygiene)

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## COVER YOUR COUGH AND SNEEZE

STOP THE SPREAD OF GERMS THAT MAKE PEOPLE SICK

When you cough or sneeze cover your nose and mouth with a tissue

**OR** Cough or sneeze into your elbow, not your hands.

Throw away your tissue!

Clean your hands after coughing or sneezing.

**THANKS!**

**HE** **RESIST**



<https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/>

es > [COVID-19 updates](#) > [Partner Resources](#)

## Coronavirus (COVID-19) posters and resources

Use these posters, booklets and videos in workplaces and communities to raise awareness about preventing the spread of coronavirus.

These assets are available for download and printing.

You can also find [COVID-19 information that has been translated into various languages](#).

You can also find [COVID-19 Irish Sign Language \(ISL\) resources](#)

- Booklets +
- Posters +
- Videos +
- Audio resources +

**This link will take you to the HSE website which contains links to translated COVID-19 materials, audio and video resources, posters and booklets**