

# COVID -19: how to work safely in home care

<https://www.gov.uk/government/publications/covid-19-how-to-work-safely-in-domiciliary-care>

When providing close personal care in **direct contact with the client** e.g. touching (feeding, dressing, bathing, toileting, assisting in and out of bed and or when unintended contact with clients is likely eg caring for clients with challenging behaviour) OR you are within 2 metres of anyone in the household who is coughing (even if you are not providing care to them).

This applies whether the client has symptoms or not and includes those in the “extremely vulnerable” group.

These recommendations assume that care workers are not undertaking aerosol generating procedures (AGP’s)

PPE	Explanation
Disposable gloves ✓	Single use
Disposable Plastic Apron ✓	Single use
Fluid repellent (Type IIR)surgical mask ✓	Can be used continuously while providing care, unless you need to remove the mask from your face (e.g. to drink, eat, take a break from duties). You may wear the same mask between different homecare visits (or visiting different people living in an extra care scheme), if it is safe to do so whilst travelling. The mask is worn to protect the care worker, and can be used while caring for a number of different clients. You should remove and dispose of the mask if it becomes damaged, soiled, damp or uncomfortable. You need a new mask when you restart your duties after a break.
Eye Protection	Recommended for care of clients where there is risk of droplets or secretions from the client’s mouth, nose, lungs or from body fluids reaching the eyes (e.g. caring for someone who is repeatedly coughing). Eye protection can be used continuously while providing care, unless you need to remove the eye protection from your face e.g. to take a break from duties. The continued use of eye protection is not recommended when driving or cycling. Use of eye protection should be discussed with your manager

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When within 2 metres of a client but not delivering personal care or needing to touch them and there is no-one within 2 metres who has a cough e.g. removing medicines from packaging, preparing food for clients who can feed themselves. This applies to all staff (care workers, cleaners etc.). These principles are also suitable for extra-care housing schemes.

PPE	Explanation
Disposable gloves ✘	Required if for other reasons set out in standard infection prevention and control measures e.g. contact with bodily fluids or if your task involves anyone in the household is shielding.
Disposable Plastic Apron ✘	Required if for other reasons set out in standard infection prevention and control measures e.g. contact with bodily fluids or if your task involves anyone who is shielding.
Type II surgical mask ✔ A fluid repellent (Type IIR) surgical mask can be used if you are already wearing this or only Type IIR are available.	Can be used continuously while providing care for a number of different clients regardless of their symptoms until you take a break from duties. You can wear the same mask between different homecare visits (or visiting different people living in an extra care scheme) if it is safe to do so whilst travelling providing you do not need to take the mask off or lower it from your face and does not compromise your safety in any way (e.g. driving ability).
Eye Protection ✘	Not required

## Remember:

PPE is only effective when combined with hand hygiene, respiratory hygiene and avoiding touching your face with your hands, and following standard infection prevention and control precautions.

You should remove and dispose of the mask if it becomes damaged, soiled, damp or uncomfortable. You need a new mask when you restart your duties after a break.


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**Any other work situation when in a client's home; or in your work premises; or with other staff members.**

These recommendations apply:

- when 2 metres or more away from clients and their household members
- when in your work premises; or with other staff; or in client's home and not meeting conditions set out in Tables 1 or 2
- e.g. when visiting or working in work at your organisation's office, staff -only areas, staff common rooms or communal areas
- whatever your role in care (i.e. applies to all staff, care workers, cleaners etc.)
- if you interact with or share a work environment or office space with care workers who deliver care to clients, even if you yourself do not deliver care (see here for further explanation.)

PPE	Explanation
Type I or Type II surgical mask 	<p>Type I or Type II surgical masks can be used continuously unless you need to remove the mask from your face (e.g. to drink/eat/take a break from duties/at end of shift). You can wear the same mask between different homecare visits (or visiting different people living in an extra care scheme), if it is safe to do so whilst travelling. This may be appropriate when travelling between households on foot or by car or by public transport, so long as you do not need to take the mask off, or lower it from your face and providing it does not compromise your safety (e.g. driving ability) in any way. You should not touch your face mask unless it is to put it on or remove it. You should remove and dispose of the mask if it becomes damaged, visibly soiled, damp, or uncomfortable to use. If removed, you would then need to use a new mask when you start your next homecare visit.</p> <p>If you have been providing care duties to clients (wearing PPE as per Table 1 or 2) and are changing your activity (or taking a break) and will be in staff only-areas (including visiting your work office), you should remove your gloves, apron and FRSM, clean your hands and put on a new Type I or Type II face mask.</p> <p>Note: if only fluid-repellent Type IIR or Type II surgical masks are available then these may be used in this scenario if stocks are sufficient. Type IR surgical masks can also be used as an alternative.</p>

Note: this is not considered PPE, i.e. mask use in this scenario is not used for protection of the staff member but is to prevent them passing on COVID-19 from their mouth and nose to other people in the care home.

All other measures to protect staff and others should continue i.e. hand hygiene, respiratory hygiene, avoiding touching the face with hands, following standard infection prevention and control precautions and cleaning of frequently touched surfaces. Ensure social distancing.