

Precautions for household members (e.g. caregivers, roommates) when caring for COVID-19 patient.

For caregivers of a case/PUI (Patient Under Investigation), it is important to take appropriate steps to protect yourself and others in the home environment from contracting COVID-19.

- **Perform regular hand hygiene.** The ill person and the household members should perform hand hygiene regularly.
- **Practice good respiratory etiquette followed by hand hygiene.**
- **Limit the number of caregivers.** Ideally, the ill person should be able to care for themselves. Caregiving within 2 meters of the ill person should be limited to a minimal number of people.
- **Prevent exposure to contaminated items and surfaces.** Do not use personal items that belong to the case/PUI such as toothbrushes, towels, washcloths, bed linen, cigarettes, unwashed eating utensils, drinks, phones, computers, or other electronic devices. The lid of the toilet should be down before flushing to prevent contamination of the environment.
- **Frequent cleaning and disinfecting.** High-touch areas such as toilets, bedside tables and door handles should be disinfected daily using a store bought disinfectant, or if not available, a diluted bleach solution (0.5% sodium hypochlorite).
- **Disposing of waste.** All used disposable contaminated items should be placed in a lined container before disposing of them with other household waste.
- **Use precautions when doing laundry.** Contaminated laundry should be placed into a laundry bag or basket with a plastic liner and should not be shaken. Gloves and a medical or procedural mask should be worn when in direct contact with contaminated laundry. Clothing and linens belonging to the ill person can be washed together with other laundry, using regular laundry soap and hot water (60-90°C). Laundry should be thoroughly dried. Hand hygiene should be performed after handling contaminated laundry and after removing gloves. If the laundry container comes in contact with contaminated laundry, it can be disinfected using a store bought disinfectant, or if not available, a diluted bleach solution (0.5% sodium hypochlorite).
- **Use of personal protective equipment.** If household members have direct contact with the case/PUI, they should wear a medical or procedural mask and eye protection when within two meters and should perform hand hygiene after contact. Caregivers should wear disposable gloves when in direct contact with the ill person, or when in direct contact with the ill person's environment as well

as soiled materials and surfaces. Hand hygiene should be performed before putting gloves on and after removing them.

Respiratory etiquette

Respiratory etiquette describes a combination of measures intended to minimize the dispersion of respiratory droplets when coughing, sneezing and talking.

- Cover coughs and sneezes with a medical or procedural mask or tissue. Dispose of tissues in a lined waste container and perform hand hygiene immediately after a cough or sneeze OR
- Cough/sneeze into the bend of your arm, not your hand

Hand hygiene

Hand hygiene refers to hand washing or hand sanitizing and actions taken to maintain healthy hands and fingernails. It should be performed frequently with soap and water for at least 15-20 seconds:

- Before and after preparing food;
- Before and after eating;
- After using the toilet;
- Before and after using a medical or procedural mask
- After disposing of waste or handling contaminated laundry;
- Whenever hands look dirty.

Handwashing with plain soap and water is the preferred method of hand hygiene, since the mechanical action is effective at removing visible soil and microbes.

If soap and water are not available, hands can be cleaned with an alcohol-based hand sanitizer (ABHS) that contains at least 60% alcohol, ensuring that all surfaces of the hands are covered (e.g. front and back of hands as well as between fingers) and rub them together until they feel dry. For visibly soiled hands, remove soiling with a wipe first, followed by use of ABHS.

When drying hands, disposable paper towels are preferred, but a dedicated reusable towel may be used and replaced when it becomes wet.

Avoid touching their eyes, nose, and mouth with unwashed hands.

Eye Protection

Eye protection is recommended to protect the mucous membranes of the

eyes during case/PUI care or activities likely to generate splashes or sprays of body fluids including respiratory secretions.

- Eye protection should be worn over prescription eyeglasses. Prescription eyeglasses alone are not adequate protection against respiratory droplets.
- Protective eye wear should be put on after putting on a mask.
- After applying eye protection, gloves should be donned (see above).
- To remove eye protection, first remove gloves and perform hand hygiene. Then remove the eye protection by handling the arms of goggles or sides or back of face shield. The front of the goggles or face shield is considered contaminated.
- Discard the eye protection into a plastic lined waste container. If the eye protection is not intended for single use, clean it with soap and water and then disinfect it with a store bought disinfectant , or if not available, a diluted bleach solution (0.5% sodium hypochlorite), being mindful not to contaminate the environment with the eye protection.
- Perform hand hygiene.

Gloves

Disposable single use gloves should be worn when in direct contact with the ill person, cleaning contaminated surfaces, and handling items soiled with body fluids, including dishes, cutlery, clothing, laundry, and waste for disposal. Gloves are not a substitute for hand hygiene; caregivers must perform hand hygiene before and after putting on and taking off gloves.

- Gloves should be removed, hand hygiene performed, and new gloves applied when they become soiled during care.
- To remove gloves safely, with one of your gloved hands pull off your glove for the opposite hand from the fingertips, as you are pulling, form your glove into a ball within the palm of your gloved hand. To remove your other glove, slide your ungloved hand in under the glove at the wrist and gently roll inside out, and away from your body. Avoid touching the outside of the gloves with your bare hands.
- Gloves must be changed and [hand hygiene](#) performed when they are torn.
- Discard the gloves in a plastic-lined waste container.
- Perform hand hygiene.
- Double-gloving is not necessary.

Reusable utility gloves may be used; however, they must be cleaned with soap and water and decontaminated after each use with a store bought

disinfectant, or if not available, a diluted bleach solution (0.5% sodium hypochlorite).

Monitor symptoms

The case/PUI (Patient Under Investigation) should monitor their symptoms and immediately report worsening of symptoms to a health care provider or PHA for further assessment. If it is determined that transfer to an acute care facility is required, instructions will be provided regarding transportation (e.g. by ambulance or private vehicle). If calling an ambulance, the dispatcher should be notified that the case/PUI may have COVID-19. If the person is transferred by private vehicle, the receiving facility should be notified to ensure that appropriate infection prevention and control measures are in place. During travel, the ill person should wear a medical or procedural mask if tolerable or cover their nose and mouth with a tissue. Those transporting the ill person should use appropriate personal protective equipment when within 2 metres of the ill person (details below).

Limit contact with other people

The case/PUI should avoid being in close proximity (within 2 metres) of other people, including household members and visitors who do not have an essential need to be in the home, with the exception of individuals providing care or delivering supplies or food.

When interactions within 2 metres are unavoidable, these should be as brief as possible, and the case/PUI should wear a medical or procedural mask. If possible, the ill person or caregiver should arrange to have supplies dropped off at their front door to minimize direct contact. If the case/PUI must leave the home setting, a medical or procedural mask should be worn.

Medical or procedural Masks

Face masks (medical or procedural) provide a physical barrier that may help prevent the transmission of the virus from an ill person to a well person by blocking large particle respiratory droplets propelled by coughing, sneezing and talking. However, using a mask alone is not guaranteed to stop infections and should be combined with other prevention measures including respiratory etiquette and hand hygiene.

Applying a consistent approach to putting on and taking off a mask are key in providing overall protective benefits. The following steps will help to ensure masks are used effectively:

- Before putting on a mask, wash hands with soap and water or ABHS. The mask should be worn with the coloured side facing out.

- Cover mouth and nose with mask and make sure there are no gaps between your face and the mask, press the mask tight to your face using your fingers to secure along the perimeter of the mask, pressing firmly over the bridge of your nose. Wash hands again with soap and water or ABHS.
- Avoid touching the mask while using it; if you do, clean your hands with soap and water or alcohol-based hand sanitizer.
- Replace the mask with a new one as soon as it is damp or dirty with secretions. Do not re-use single-use masks.
- To remove the mask, remove both straps from behind the ears. Do not touch the front of mask, and ensure that the front of the mask does not touch your skin or any surfaces before you discard it immediately in a closed waste container. Wash hands with alcohol-based hand rub or soap and water.

Limit contact with pets

Due to the theoretical possibility that animals in the home could be infected by COVID-19, it is recommended that cases also refrain with contact with pets, if possible.

Avoid Sharing Personal Household Items

The Case/PUI should not share personal items with others, such as toothbrushes, towels, washcloths, bed linen, cigarettes, unwashed eating utensils, drinks, phones, computers, or other electronic devices.

Clean all high-touch surfaces

High-touch areas such as toilets, bedside tables and door handles should be disinfected daily using a store bought disinfectant, or if not available, a diluted bleach solution (one part bleach to 9 parts water to make a 0.5% sodium hypochlorite solution). If they can withstand the use of liquids for disinfection, high-touch electronics such as phones, computers and other devices may be disinfected with 70% alcohol (e.g. alcohol prep wipes).

Disinfectants can kill the virus making it no longer possible to infect people. Disposable gloves should be used when cleaning or handling surfaces, clothing, or linen soiled with body fluids. Dormitories and co-living settings where ill persons are convalescing should be cleaned and disinfected daily.

All used disposable contaminated items should be placed in a lined container before disposing of them with other household waste.

Supplies for the home when isolating



- Medical or procedural masks for case and others in the home
- Disposable Gloves
- Eye protection
- Thermometer
- Fever-reducing medications
- Running water
- Hand soap
- Alcohol based hand sanitizer (ABHS) containing at least 60% alcohol.
- Tissues
- Waste container with plastic liner
- Regular household cleaning products
- Store bought disinfectant, or if not available, bleach and a separate container for dilution.
- Alcohol (70%) prep wipes
- Regular laundry soap
- Dish soap
- Disposable paper towels

<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html>