

Keeping Safe and Staying in Touch

Covid 19 Guidance November 2021

The current level of COVID-19 in the community is significant and is impacting upon the health of our citizens, in particular, our most vulnerable. These levels are also impacting upon our health system and staffing levels.

The vaccination rollout in service users and staff which has taken place in Michaels House over the past 10 months has greatly reduced the risk of Covid 19 in our settings.

Covid 19 has not gone away and with numbers rising we must be mindful on how we keep ourselves and others safe.

Please note this is subject to change in accordance HSE & Public Health Guidance

Signs & Symptoms of Covid 19

Most common symptoms:	Less common symptoms:	Serious symptoms:
fever cough tiredness loss of taste or smell	sore throat headache aches and pains diarrhoea a rash on skin, or discolouration of fingers or toes red or irritated eyes	difficulty breathing or shortness of breath loss of speech or mobility, or confusion chest pain

Physical Distancing

- Physical distancing across all work activities of at least 2 metres as much as possible. (Staggering breaks, or place teams in pods, put in place arrangements for meetings and meal times, no sharing of cups or pens, adapt sign in or sign out systems). This advice came from public health.
- Staff should maintain a 2m distance from each other where possible
- Staff should maintain a 2m distance from service users where possible

As with all health and social care settings it is not always possible to maintain physical distancing of 1metre or more based on the support needs of an individual and the

appropriate risk assessments/support plans and IPC measures should be in place. (This advice has come from the HSE.)

Back to Basics

Are all staff familiar with and up to date with:

- Hand Hygiene and the use of alcohol gel
- The wearing of masks when at work – this is mandatory in all health care settings
- MY COVID HOUSEPLAN and are they able to implement it
- All IPC policies
- IPC Training-?put in link

Do all staff know the following :

- All staff should have temperatures checked twice daily as per policy
- All staff are responsible for reporting any service users who are symptomatic to Infection Prevention & Control or Nurse Manager on Call if out of hours
- All staff are responsible for being up to date with their COVID19 training and have the knowledge to Donn and Doff PPE safely
- All staff should be aware of the isolation protocols in the unit
- All staff should know how to take service users observations if they are unwell
- All units should have an SPO2 monitor and all staff trained in how to use it
- All Day Service units should have an area they can isolate suspected cases of Covid 19 until the person can be brought home/picked up
- Ventilation can still happen even though the weather is changing – rooms can be ventilated for 10/15 minutes before service users enter and when they are finished
- The room should be ventilated during the visit in so far as practical taking account of weather and comfort. The goal is gentle air circulation not a breeze or draught that causes discomfort.
- Opening top windows will prevent cross draughts in the unit
- Pre screening is still to be carried out
- Enhanced environmental cleaning is still to be carried out

Suspected Case of Covid

- If a service user (vaccinated or unvaccinated) presents with symptoms they should be isolated and testing arranged
- If possible dedicate a staff member to work with the that service users, staff should wear full PPE, ensuring they donn and doff PPE safely and never wear PPE used with a suspected covid19 positive person around others
- Staff (vaccinated or unvaccinated) who present with symptoms should not come to work but contact their manager and HR immediately

Outbreak of COVID 19 in a unit (two or more cases of Covid 19)

- Unit is closed to all visitors
- Do you have a “buddy” system with another house – someone who can help by cooking meals; emergency run to the pharmacy etc
- Can you do your grocery shopping on line
- Can you ask change around the way you audit – would it be easier to audit at night when things are a little quieter

All HSE Guidance to be followed but please note: **Please note that if there is an outbreak in your unit, public health advice may differ from and supersedes the HSE Guidance and must be adhered to.**

Guidance for Visits to SMH Residential Houses

- Talk with service users about the current visiting conditions and work together with them to ensure an individualised visiting plan is in place for each resident.
- A risk assessment should be in place for visits to the SMH Residential House – a generic template (**RA- visitors (family and friends) to SMH residential houses**) is available on the downloads or can be accessed here http://bcms01.smh.ie/index.php?option=com_phocadownload&view=category&id=172:easing-of-restrictions&Itemid=129
- Please remind families that all staff and visitors are required to complete a Daily Health Declaration From when entering the Residential house to ensure the safety of service users
- Visitors should declare that they have no symptoms and undergo a temperature check before being permitted to enter the residential house
- In addition, they should be made aware that any visitors with fever or respiratory symptoms will not be admitted regardless of their vaccination status or previous COVID-19 infection.
- People who **do not** have a COVID-19 vaccination pass or proof of immunity as a result of prior infection (up to 9 months post-covid infection) can continue to visit although these must take place in the garden. Window visiting may also take place.

- Visitors should be guided in performing hand hygiene when they arrive.
- Visitors are required to wear a surgical mask during their visit to the unit
- If a designated room is available, this may be used for visits by family and friends to meet in the residential house.
- The designated room should have minimal furnishings to prevent spread of infection (if there is no designated room, the service users bedroom could be used for family visits) preferably with own exit or closest to exit. Rooms must be thoroughly cleaned after visits.
- **All rooms where visiting has taken place must be thoroughly cleaned and ventilated after each visit.**
- Visits need not be scheduled in advance with the house, **however**, visiting should be managed to avoid visitors congregating and interacting with other visitors or with residents other than the person they have come to visit.
- Visits should only take place during the day when the main cohort of staff is on duty and away from mealtimes with pre-arranged timings.
- Having a time table where all staff can see it may be beneficial.
- The service user's right to decline a visitor shall be respected.
- Outdoor visits (weather permitting) are always allowed
- Visitors and service users are not required to wear masks outdoors, but close congregation of large groups of visitors and residents should be avoided.
- Testing of prospective visitors in advance of visiting is not required at present.
- Visitors should be discouraged from interacting socially with other visitors indoors in the house.
- There is no requirement to limit the total number of different people who can visit a resident or to maintain lists of nominated visitors although there is a limit * (see below) to the number of people who can visit at one time.
- They should be aware of the visiting processes that apply which include:
 - A check for symptoms of COVID-19,
 - A check if they have been diagnosed with COVID-19 in the past 10 days,
 - A check if they have been advised to self-isolate or restrict their movements for any reason.
 - A check to determine if they fulfil the requirement to have immunity through
 - vaccination or prior infection
- They can be advised that if they are fully vaccinated and the person they are visiting is fully vaccinated that they do not need to wear a mask or avoid contact when they are alone.

- The duration of the visit should not be limited for IPC reasons.
- There is not an IPC restriction on gifts of goods or other items for visitors.
- There is no requirement for a period of storage of the item before the resident receives it.

Visits to family homes

Things to consider for Service users going home for family visits

- If the service user becomes unwell at home, are the family able to keep the service user at home until it is confirmed that the service user does not have Covid 19
- If there is a suspected case of Covid 19 in the unit any service users at home will be unable to return to the unit until it is declared clear of covid. Please bear in mind if there is an outbreak of COVID in a residential unit it will not be declared over until the 28 days after the last service user/staff member tests positive.
- Prior to the visit, the PIC/staff team will seek assurance from family members that neither they nor other members of their household have had any exposure to, or symptoms of Covid 19 for the previous 14 days
- It is important that the above points are taken seriously because if there is a suspected case of covid either in the family home or the unit – all movement stops and service users must remain where they are until any risk passes/there is a negative covid test. It is important that families are aware of this when organising visits to family homes over the Christmas period.
- Consideration must be given into how the unit can support a service user who may have to isolate/restrict their movement on return from home i.e. will additional staffing be necessary to support the service user
- Where there is a high level of people who are fully vaccinated in the house there is no requirement to limit the movement of a resident after return from an outing or hospital attendance regardless of the duration of the absence.
- Where there is NOT a high level of vaccination; non-vaccinated residents who leave the house for more than 12 hours should be advised to limit their contact with other residents. Such non-vaccinated residents should be offered testing on day 5 (or as soon as possible thereafter) after their return and if they test not-detected and are asymptomatic they may return to normal activities at that time.
- For those who are fully vaccinated in such a house there is no requirement to limit the movement after return from an outing or hospital attendance.

Essential and Important Service Providers

ESPs who access SMH houses and centres should be fully vaccinated (similar to healthcare workers) and should have appropriate training and follow necessary infection prevention and control precautions. All services should comply with any legal or public health restrictions on the provision of services in effect at the time.

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Close Contacts

Household close contacts who are fully vaccinated and showing no symptoms should now restrict their movements until they have 3 negative antigen test results within 5 days.

Antigen testing

The HSE advise that you should do 3 antigen tests in total. You can do them at any time of the day.

You should do your 3 antigen tests in this order:

- First test on the day you get your tests/advice re close contact
- Second test 2 days after your first test
- Third test 2 days after your second test

Working From Home

- Everyone should revert to working from home unless it is necessary to attend the workplace in person

Additional requirements for Covid Certs in Settings

- You will need COVID-19 passes (based on vaccination or up to 9 months post -covid illness) for cinemas and theatres

New Closing Time in Recreational Settings

- Closing times for all pubs, restaurants and settings that sell alcohol (except for guests staying in hotels) will close at midnight.

Vaccine booster programme

Booster vaccinations are currently being administered to those aged over 60 in the community and residents in long-term care facilities, such as St Michaels House, the immunocompromised, and healthcare workers

- The COVID-19 booster vaccine programme is expected to provide additional protection therefore residents and healthcare workers should accept booster vaccination as soon as it is offered to them.
- Influenza vaccination for residents, healthcare workers and eligible visitors is also recommended and helps to protect residents from introduction and spread of influenza virus.

* Limit to the number of people who can visit at one time.

- Minimum level of routine indoor visiting in the absence of a high level of vaccination of residents Two visits by one person per week
- Minimum level of routine indoor visiting in the presence of a high level of vaccination of residents Four visits by up to 2 people at a time.