

## **Interim guideline on infection prevention & control measures for residential aged care facilities during COVID-19 pandemic [1–6]**

*Note: This interim guideline is based on Malaysian aged-care settings.*

### **WHEN TO SUSPECT COVID-19?**

Fever **OR** acute respiratory infection (sudden onset of respiratory infection with at least one of the following: shortness of breath, cough or sorethroat)

**AND**

Travel to affected areas or attendance of a mass gathering in the 14 days before the onset of illness

**OR**

Having close contact 14 days before illness onset with a confirmed case of COVID-19

### **RESIDENTS WITH SUSPECTED COVID-19 SYMPTOMS SHOULD BE ISOLATED IMMEDIATELY AND NOTIFIED TO THE NEAREST HEALTH AUTHORITIES**

#### **EMERGENCY WARNING SIGNS OF COVID-19**

People who develop **emergency warning signs** for COVID-19 should get **medical attention immediately**.

Emergency warning signs include\*:

- Difficulty breathing or shortness of breath
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

\*This list is not all-inclusive.

Limitations in effective infection control and prevention can contribute to infection spread. Proactive measures are needed to protect the health of the residents and to preserve the care-providers based on the following guiding principles. Care-providers and staff members should ideally be trained in infection control measures.

- **Restrict non-essential visitations**
- **Recognise potentially infected residents**
- **Identify and exclude infected care-providers**
- **Implement appropriate infection control measures**

## HOW TO STOP THE SPREAD OF INFECTION FROM VISITORS?

First and foremost, it is important to limit visitations from friends and loved ones. Only emergency visitations should be allowed. Non-essential visitations should be strongly discouraged.

### (i) Perform hand hygiene

The most important thing visitors can do is to perform hand hygiene.

**Soap and water** should be used preferentially if hands are visibly dirty.

Hand hygiene should be performed using soap and water for **at least 20 seconds** or using an alcohol-based hand rub that has a final concentration of 80% Ethanol or 75% Isopropyl alcohol, covering all surfaces of your hands, rubbing them together until they feel dry.

Gloves do NOT substitute hand hygiene. Hand hygiene should be performed before and after removing gloves.

Perform hand hygiene **before**:

- Touching or eating food or putting anything in the mouth (e.g. feeding, serving medication)
- Preparing food
- Touching eyes, nose or mouth
- Touching a dressing
- Touching and/ or providing routine care for another person who needs assistance
- Wearing gloves
- Wearing face mask

Perform hand hygiene **after**:

- Going to the bathroom/toilet
- Sneezing, coughing or disposing of tissues
- Touching a dressing
- Handling dirty clothes or linen
- Feeding, serving medication
- Providing routine care for another person who needs assistance
- Removing gloves
- Removing face mask

**(ii) Advice visitors to practice respiratory/ cough etiquette**

Visitors should cover their nose and mouth with a tissue when coughing, sneezing, wiping or blowing nose.

It is important to throw the used tissue into the trash bin, followed by hand hygiene (washing hands with soap and water or using alcohol-based hand rub).

If no tissue is available, cough or sneeze into elbow rather than into the hand.

**(iii) If visitors are UNWELL**

RESTRICT those who are unwell from visiting their friends and loved ones in aged-care facilities, these includes those having a cold, or have been vomiting or diarrhoea.

**(iv) Advice on linen handling by visitors**

Examples of linens are: towels, bags, napkins, bed linens, men and women's wear, blankets, etc.

Visitors should perform hand hygiene immediately after handling linens.

Do not shake dirty linen to minimize the possibility of dispersing any germs through the air.

## WHAT CAN CARE-PROVIDERS DO TO STOP THE SPREAD OF INFECTION?

### (i) Hand hygiene

The most important thing is to perform hand hygiene.

**Soap and water** should be used preferentially if hands are visibly dirty.

Care- providers are advised to use hand cream regularly (e.g. before going on a break or when off duty) to prevent cracking and dry skin.

Hand hygiene should be performed using soap and water for **at least 20 seconds** or using an alcohol-based hand rub that has a final concentration of 80% Ethanol or 75% Isopropyl alcohol, covering all surfaces of your hands, rubbing them together until they feel dry.

Gloves do NOT substitute hand hygiene. Perform hand hygiene before and after removing gloves.

Perform hand hygiene **before**:

- Touching or eating food or putting anything in the mouth (e.g. feeding, serving medication)
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**(ii) Screening and restrictions**

- ***Restrict non-essential visitations***
- Background/history check of visitors and care-providers
- Document body temperature and ascertainment of respiratory symptoms of visitors
- Document body temperature and ascertainment of respiratory symptoms of care-givers (daily)
- Ideally, care-providers and visitors should remove and keep jewellery to a minimum
- Avoid wearing gel, acrylic nail or false fingernails

**(iii) Social distancing**

Social distancing involves remaining out of congregate settings and avoiding mass gatherings.

Ideally, maintain **3 feet (about 1 metre)** between people.

If feasible, practice **“1 person every 2 seats”**.

**(iv) Respiratory/ cough etiquette**

Prepare a plastic bag or a trash bin near each resident so that used tissues can be disposed of straight away.

Cover nose and mouth with a tissue when coughing, sneezing, wiping or blowing nose. Throw the used tissue into the trash bin, followed by hand hygiene (washing hands with soap and water or using alcohol-based hand rub).

If you don't have a tissue, cough or sneeze into your elbow rather than your hand.

**(v) Maintain good air circulation**

Open outside doors and windows to increase air circulation in the area.

Make sure that shared spaces in aged-care facilities have good air flow.

**(vi) Surgical masks**

Surgical mask are used to protect a care worker's nose and mouth from exposure to infectious agents.

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Don't touch the front of the mask with hands once the mask is in place.

Do not use mask a long period of time, if it is moist or dirty.

Don't leave mask dangling around your neck.

Discard after use and perform hand hygiene after discarding.

Symptomatic residents should also wear surgical mask.

### (vii) Cleaning and disinfecting

**Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. ***Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.***

**Disinfecting** refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, ***but by killing germs on a surface after cleaning***, it can further lower the risk of spreading infection.

Clean and disinfect high-touch surfaces **daily** (e.g. tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks, **phones**).

Dirty surfaces should be cleaned using a detergent or soap and water prior to disinfection.

For disinfection, use:

Unexpired diluted household bleach solutions, or  
Alcohol solutions with at least 70% alcohol.

**Prepare a bleach solution by mixing:**

**5 tablespoons (1/3<sup>rd</sup> cup) bleach for 3.8 litres (about 4 litres) of water, or  
4 teaspoons bleach for 950ml (about 1 litre) of water**

### (viii) How to handle food?

Perform hand hygiene before handling food and before putting on gloves.

Avoid serving meals in 'buffet-style' or through communal dining, instead, prepare and serve meals to each individual. Food should be plated out by one assigned person only, and serving implements should not be handled by more than one person.

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Use gloves or cover cuts or sores on hands with a waterproof dressing before handling food.

For cooked and raw foods, use a different chopping board and kitchen utensils or wash the single board well with soap and warm water.

Do not touch food after touching earrings, body parts (hair, nose, ear, eye), skin lesions, saliva, mucus, sweat, blood, money without first performing hand hygiene.

Cover hair and tie back long hair.

Do not wear jewellery during food preparation and serving.

Do not sneeze, blow, cough over unprotected food or surfaces likely to come into contact with food/ medication.

### **(ix) Linen and laundry handling**

If feasible, wear gloves when handling linen and laundry.

Perform hand hygiene immediately after handling linen and laundry.

Take laundry basket to the bedside and put linen directly in the basket.

Immediately remove and wash clothes or bedding that have blood, stool, or body fluids on them.

Do not shake dirty laundry to minimize the possibility of dispersing any germs through the air.

If possible, use the warmest appropriate water setting.

Dry items completely before keeping.

Clean and disinfect clothes hampers according to guidance above.

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