AN INFECTION CONTROL MODULE:







...Developing top-notch caregivers, one inservice at a time.







We hope you enjoy this inservice, prepared by registered nurses especially for caregivers like you!

Instructions for the Learner

If you are studying the inservice on your own, please do the following:

- Read through all the material. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask your supervisor.
- Take the quiz. Think about each statement and pick the best answer.
- Check with your supervisor for the right answers. You need <u>6</u>
 <u>correct</u> to pass!
- Print your name, write in the date, and then sign your name.
- Email In the Know at <u>feedback@knowingmore.com</u> with your comments and/or suggestions for improving this inservice.

After finishing this inservice, you will be able to:

Describe the new coronavirus (COVID-19) and discuss where it came from.

*

List the signs and symptoms of COVID-19.



Describe the infection control precautions that should be followed to prevent the spread of COVID-19.



List the steps to take if you or one of your clients begins to show symptoms of coronavirus.

THANK YOU!



Inside This Inservice:

What Is Coronavirus?	2
What Are the Symptoms?	3
Caring for Clients with CV	4-5
How to Prevent the Spread of Infection.	6
Understanding Social Distancing	7
Treating the Symptoms of Coronavirus.	8
FAQs About Cleaning	9-10
Anxiety Coping Strategies	11
Stop Touching Your Face	12
Final Thoughts	13

© 2020 In the Know www.knowingmore.com Expires 12/31/2022 IMPORTANT:

This topic may be copied for use within each physical location that purchases this inservice from In the Know. All other copying or distribution is strictly prohibited, including sharing between multiple locations and/or uploading the file or any portion thereof to the internet or to an LMS (unless a license to do so is obtained from In the Know).

In accordance with industry standards, this inservice material expires on December 31, 2022. After that date, you may purchase a current copy of the materials by calling 877-809-5515.



An Infection Control Module: Understanding Coronavirus

WHAT'S HAPPENING?

- Worldwide (as of July 7, 2020) more than 12 million people have become infected by the coronavirus.
- More than 550,000 have died.
- Schools and colleges remain uncertain as to whether they will be able to re-open in the Fall.
- European and Asian countries have seen a dramatic decrease in cases — as the numbers continue to climb in the United States.
- CORONAVIRUS
- Many states in the south and southwestern
 US have had to slow their re-opening strategies due to a drastic rise in cases.
- The virus has now infected more than 3.1 million Americans in all 50 states. Over 134,000 Americans have died.
- Half of the new COVID-19 cases detected in recent weeks have been in adults under 35.
- Hospitals in the hardest hit states are at (or near) full capacity.

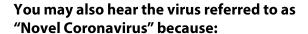
We are not out of the woods yet!

PLEASE NOTE: The guidance in this course is based upon limited information and is subject to change as more information becomes available. We will continue to update the course until COVID-19 is no longer a threat.

WHAT EXACTLY ARE CORONAVIRUSES?

Coronaviruses are a family of viruses that can infect both humans and animals. The first human coronavirus popped up in the mid-1960s. To date, there are seven (7) coronaviruses that can infect people.

It is believed that the newest (2019) coronavirus (aka COVID-19) was first detected in China in late December, 2019.



- NOVEL = NEW (never seen before).
- CORONA = CROWN (named for the crown-like spikes on the virus).

Other coronaviruses you may have heard of include:

- SARS (Severe Acute Respiratory Syndrome), and
- MERS (Middle East Respiratory Syndrome)

Where did COVID-19 come from?

Experts believe the newest coronavirus probably began in an animal. Many of the first documented illnesses were in Wuhan, China. However, it has since been discovered that the virus may have been present in Germany, Italy, and even the United States months before the outbreak in China. So, while the exact source is still unknown, researchers are fairly certain the virus was spread from animals to humans. The virus was then able to transmit from person to person, without animal contact.

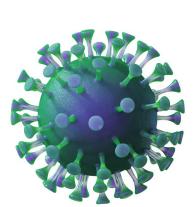
Who is at risk for infection?

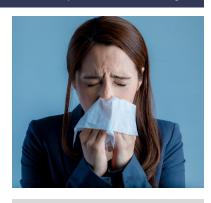
Everyone is at risk for getting COVID-19 if they are exposed to the virus and people of any age with the following conditions are at increased risk of severe illness from COVID-19:

- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Obesity (BMI of 30 or higher)
- Immunocompromised state (weakened immune system)
- Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- Sickle cell disease
- Type 2 diabetes



Grab your favorite highlighter! As you read this inservice, **highlight** five things you learn that you didn't know before. Share this new information with your co-workers!





The Facis!

- The number of active COVID-19 cases continues to grow each day.
- There is currently no vaccine for COVID-19, but researchers are working hard to make these available ASAP.
- We now have a couple of promising ways to treat people who are sick from COVID-19:
 - Dexamethasone (a steroid)
 - Convalescent Plasma (plasma from someone who recovered from COVID-19)
- About 80% of people who become infected will have a mild case and fully recover without complications.





Heiling Back To Work

You think (or you know) you've been exposed to the virus. When is it safe to go back to work?

The CDC just issued new guidelines for essential workers, like caregivers, for this exact situation:

The CDC advises that you can continue to work following exposure to COVID-19, as long as you don't have any symptoms and you follow a few extra precautions to keep your clients and your community safe.

You should:

- Check your temperature every day before work.
- Wear a face mask at all times.
- Maintain a social distance of 6 feet, as duties permit, while at work.
- Clean and disinfect all areas and items you routinely touch while on the job.

WHAT ARE THE SYMPTOMS OF COVID-19?

The CDC continues to add to the list of possible symptoms of COVID-19. Here is the most up-to-date list:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- **Fatique**
- Muscle or body aches

- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

And, it might be different for older adults.

Older adults may not have any of these recognizable symptoms at all. As with many conditions (particularly infections), older adults don't have the typical signs and symptoms. Here's what doctors and nurses on the front lines have seen in older adults with COVID-19:

- They seem "off" not acting like themselves
- Sleeping more than usual
- Not eating
- Unusually tired

- Confused
- Loss of orientation
- Dizzy
- Increase in falls

What should you do if your client shows symptoms?

Contact a doctor right away if you notice any of the symptoms listed above.

What should you do if YOU show symptoms?

Caregivers who have signs and symptoms of any respiratory infection should not report to work.

If you develop signs and symptoms while on-the-job:

- Immediately stop work, put on a face mask, and plan to self-isolate at home;
- Contact your supervisor so arrangements can be made to cover the client as necessary;
- Inform your supervisor of all individuals, equipment, and locations you came in contact with: and
- Contact and follow your local health department recommendations for next steps.

CARING FOR A CLIENT WITH COVID-19

As the number of COVID-19 cases grows, home care and assisted living facilities will begin to see more clients who are confirmed to have the virus. In addition, you may be asked to care for someone who is showing symptoms, but not confirmed by testing. How will you care for these people?

HERE ARE A FEW TIPS:

Provide symptom treatment:

- Encourage plenty of **fluids** to stay hydrated.
- Urge the client to get plenty of **rest**.
- Some **over-the-counter medicines** may help with symptoms. Be sure to check with the client's medical provider before recommending any medications.
- For most people, symptoms last a few days and get better after a week.

Monitor for emergency warning signs:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

For medical emergencies, call 911 and notify the dispatch personnel that they have or are suspected to have COVID-19.

FOLLOW ISOLATION PRECAUTIONS

Try to keep the person isolated in one room and away from other people as much as possible. If facemasks are available, have the client wear a facemask when other people, including you, are in the room.

FOLLOW BOTH CONTACT AND DROPLET PRECAUTIONS

FOR CONTACT PRECAUTIONS:

Wear gloves and gown for all contact with the client and the client's environment.

FOR DROPLET PRECAUTIONS:

- A mask, and if available, a face shield should be worn for all contact within three feet of the client.
- If available, use an N95 mask. If no N95 mask is available, use a surgical mask. If a surgical mask is not available, as a last resort, you can use a bandana, scarf, or homemade face covering.



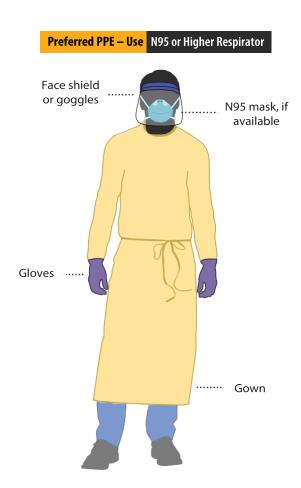
Use Personal Protective Equipment (PPE) When Caring for Patients with Confirmed or Suspected COVID-19

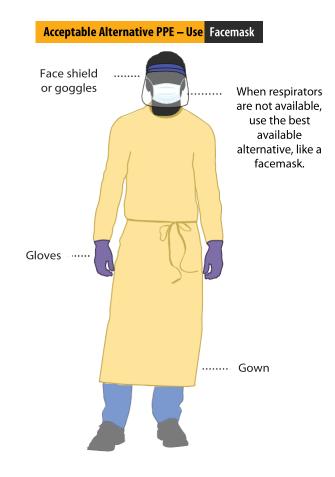
Before caring for patients with confirmed or suspected COVID-19, healthcare personnel (HCP) must:

- Receive comprehensive training on when and what PPE is necessary, how to don (put on) and doff (take off) PPE, limitations of PPE, and proper care, maintenance, and disposal of PPE.
- Demonstrate competency in performing appropriate infection control practices and procedures.

Remember:

- PPE must be donned (put on) correctly before entering the patient area.
- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination.







Donning (putting on the gear):

- 1. **Identify and gather the proper PPE to don.** Ensure choice of gown size is correct (based on training).
- 2. Perform hand hygiene using hand sanitizer.
- 3. **Put on isolation gown.** Tie all of the ties on the gown. Assistance may be needed by another HCP.
- 4. Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available). If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrubs pocket between patients.*
 - » **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator.
 - » **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.
- 5. **Put on face shield or goggles.** Face shields provide full face coverage. Goggles also provide excellent protection for eyes, but fogging is common.
- 6. **Perform hand hygiene before putting on gloves.** Gloves should cover the cuff (wrist) of gown.
- 7. HCP may now enter patient room.

Doffing (taking off the gear):

- 1. **Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak).
- 2. **Remove gown.** Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle.*
- **3.** HCP may now exit patient room.
- 4. Perform hand hygiene.
- 5. **Remove face shield or goggles.** Carefully remove face shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles.
- 6. **Remove and discard respirator (or facemask if used instead of respirator).*** Do not touch the front of the respirator or facemask.
 - » **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.
 - » Facemask: Carefully untie (or unhook from the ears) and pull away from face without touching the front.
- 7. **Perform hand hygiene after removing the respirator/facemask** and before putting it on again if your workplace is practicing reuse.

CARING FOR A CLIENT WITH COVID-19 — CONT.

Anyone who is confirmed to have COVID-19, or is showing symptoms but remains well enough to stay home, should be completely isolated from all other household members.

THE CDC RECOMMENDS:

A Separate Bedroom and Bathroom

The person who is sick should stay separated from other people and pets in the home (as much as possible).

- If a separate bedroom and bathroom are available, use these to limit contact. Wear a mask, face shield, gown, and gloves to provide personal care and to clean the area around the person who is sick.
- Provide personal cleaning supplies to the person who is sick (if appropriate). Give tissues, paper towels, and cleaners (such as Clorox wipes). If they feel up to it, the person who is sick can clean their own space.
- If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by the infected person.

Eating and Cleanup After Meals

The person who is sick should eat (or be fed) in their separate bedroom.

- Deliver meals to the room without making contact, if possible. For example, a tray can be left on a table outside the door.
- Wear a mask, face shield, gown, and gloves if you must help to feed the person who is sick.
- Wash dishes and utensils using gloves and hot water. Handle any used dishes, cups/glasses, or silverware with gloves. Wash them with soap and hot water or in a dishwasher.
- Clean hands after taking off gloves or handling used items.

Handling the Trash

The person who is sick should keep his or her trash separated from other trash in the home (as much as possible).

- Provide a dedicated trash can to the person who is sick. Place a disposable trash bag in the can.
- Use gloves when removing garbage from the room and carry the bag directly to an outside receptacle, if available.
- Remove gloves and wash hands afterwards.

Caring for Pets

The CDC recently announced the first confirmed cases of COVID-19 in household pets.

How can you keep pets and people safe?

- Any person who has symptoms or a confirmed diagnosis of COVID-19 should restrict contact with pets. If possible, have another member of the family care for pets while the person is sick.
- Do not let pets interact with people or other animals outside the household.
- Petting, snuggling, being kissed or licked by a pet should be discouraged at this time.
- If the person who is sick must care for the pet, remind her to wear a

facemask and wash her hands before and after she interacts with the pet.

HOW TO PREVENT SPREADING THE VIRUS

There are two ways to prevent the spread of infection:

- Prevent yourself from getting sick, and
- Prevent others from catching the virus from you.

To prevent yourself from getting sick:

- Wash your hands often with soap and water (preferred), or use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose, and mouth if your hands aren't clean.
- Avoid close contact (within 6 ft) with anyone who is sick.
- Avoid crowded places such as sporting events, concerts, or religious gatherings.
- To keep your immune system strong, get enough rest, eat a balanced diet, and perform some type of exercise each day.

To prevent others from catching the virus from you.

- Stay home from work, school, and public areas if you're sick, except for medical visits.
- If you must leave the house for a medical visit, call the doctor in advance and wear a face mask to protect others with whom you may come in contact.
- Separate yourself from other people and animals in the home as much as possible. In other words, try to stay in a separate room with the door closed.
- Cover your mouth and nose with your elbow or tissue when you cough or sneeze. Or use a clean tissue, then throw it away and wash your hands.
- Clean and disinfect surfaces you touch frequently.
- Avoid sharing dishes, glasses, bedding, and other household items if you're sick.



112113113

- Person-to-person: The virus is thought to spread mainly from person-to-person between people who are in close contact with one another. Droplets produced when an infected person coughs or sneezes can travel up to 6 feet away. These droplets can land in the mouths or noses (or become inhaled into the lungs) of people who are nearby.
- Contact with infected surfaces: Droplets from an infected person can also land on surfaces or objects. When an uninfected person touches the surface or object that has the virus on it, then touches their own mouth, nose, or eyes, the virus enters the uninfected person.
- COVID-19 may also be spread by **people who** are not showing symptoms (aka "asymptomatic"). According to the CDC, 35% of all people with COVID-19 are asymptomatic. However, those individuals are still as infectious as people with symptoms.

WHAT DOES SOCIAL DISTANCING REALLY MEAN?

Social distancing, self-quarantine, isolation, and shelter-in-place are all terms commonly used these days. You'll hear them from politicians, newscasters, and maybe even your own family. But, what do they mean? How are they different?

Here's a breakdown of what these terms mean to you:

Social distancing — Social distancing is when we purposely increase the space between people. Staying at least six feet away from other people can decrease your chances of catching COVID-19. Why six feet? Because that is how far the coronavirus droplets can travel when someone near you coughs or sneezes.

Social distancing will not stop the spread of coronavirus, but it can **slow it down** so that fewer people get sick all at once.

How do you maintain social distance during personal care with clients?

That's the tricky part. If you provide personal care for clients, you must get closer than 6 feet to interact with them.

Here are a few suggestions:

- Wash your hands and put on gloves before coming in contact with the client.
- Wear a mask for close contact with clients, even if you don't have symptoms. You can still carry and pass the virus to others even if you don't feel sick.
- Ask the client to put on a mask, even if they don't feel sick.
- Limit talking while in close contact with clients.
- Turn your head or walk away (if it's safe to do so) to cough or sneeze.
- Perform personal care quickly and efficiently to minimize the time you are in close contact.
- Wash your hands after removing gloves.
- Encourage clients to wash their hands frequently throughout the day.

MORE TERMS TO KNOW

Self-Quarantine — This is when you voluntarily stay in your own home to stay away from others for a period of time (such as two weeks) during the outbreak of a contagious disease.

> If you feel the need to self-quarantine, let your supervisor know. Ask if there are other tasks you may be able to do from home, such as make phone calls to clients or pack supplies for other caregivers.

Isolation — Isolation is <u>required</u> for anyone confirmed to have COVID-19. It's the only way to keep people who are infected with the virus away from those who are not infected. People can be isolated at home if their symptoms are mild. Hospitals have special "isolation rooms" for people who need more care.

> If you are asked to care for a client in isolation, be sure you understand how to use **standard** and transmission based precautions. Click **HERE** for instructions on putting on and taking off PPE in isolation situations. (https:// www.cdc.gov/coronavirus/2019-ncov/downloads/ A FS HCP COVID19 PPE.pdf)

Shelter-in-Place — Cities across the US issued "shelter-in-place" or "stay at home" orders when the pandemic first began. This order limited people from going out unless they had an essential reason, such as getting food or medicine and going to work.

> Most of the shelter-in-place orders across the US have been lifted. However, some areas that are seeing a surge in cases may have to bring the order back.

HOW TO MINIMIZE SOCIAL ISOLATION DURING SOCIAL DISTANCING

THINK ABOUT IT!

Those of us isolating at home with kids or spouses can enjoy the **LUXURY** of making flippant jokes about "having a little too much family time," or "being fired from that new homeschooling position for napping on the job."

IMAGINE!

Those of us who can get out in the Spring air for a walk or a jog have the **LUXURY** of complaining about "cabin fever" and how this quarantine is wrecking our waistlines.

IT'S TRUE!

Those of us who have access to technology and can video chat with our co-workers and friends have the **LUXURY** of turning off our cameras during calls because of a messy hairdo.

NOT EVERYONE IS SO LUCKY.

While we complain, joke, tweet, and zoom, we must remember that there are real people, many of whom are "at-risk seniors," living at home all alone with no one to talk to, unable to get out for fresh air, and lacking the technology to even see a familiar face now and then.

While the virus itself will take the lives of so many, the social isolation of this quarantine will sadly lead to much more collateral loss. These tragic losses will go uncounted as "COVID-19 deaths." However, they are distinctly related.

Loneliness increases the likelihood of death in the elderly by 26 percent.

And lacking social connections is as damaging to a senior's health as smoking 15 cigarettes a day.

How can you help? Here are five tips you can use to help ward off the loneliness your clients may experience during this difficult time:

1. Continue with regular visits.

If it is safe to do so (and the client requests it) continue to visit the client in the home. Make sure you and your client have the PPE and infection control knowledge needed to keep you both safe.

2. Interact socially during visits.

You are required to wear a mask and limit talking while in close contact with clients and while delivering personal care. This probably feels unnatural and awkward. So, take a few minutes to socialize from a safe distance before and after these duties, to put the client at ease and provide the important social interaction he or she needs.

3. Teach seniors how to use technology.

Statistics continue to show that more and more older adults have access to smartphones, tablets, and the internet. However, the problem isn't owning them, it's using them. Take time to teach clients how to use their

devices for video chatting, email, texting, and even social media. Those who have a device and access to the internet can try some free online classes developed just for them. Click <u>HERE</u> for a list of free classes.

4. Do front porch visits.

For clients who refuse services at this time, offer "no contact" front porch visits. This is when you visit with the senior from a safe distance on the porch. This "nocontact" visit can include a delivery of groceries or other needed supplies to make the trip more efficient.

5. Check-in every day.

If daily, in-person visits are out of the question, ask your supervisor if it would be okay to call the client at a certain time every day – just to check in and chat. During these chats, try not to talk too much about the crisis. Ask about everyday things the person is interested in, such as "Are the flowers blooming in your yard now?" Or, "Have you put out your bird feeder yet?"



אוסה ויוחה ביו YZZEM ETEGW

The CDC recommends **EVERYONE** wear a cloth face covering "in public settings where other social distancing measures are difficult to maintain especially in areas of significant community-based transmission."

It's crucial to wear a mask if ...

- You are a healthcare worker providing close, personal care to clients, whether or not you have symptoms.
- You are a home care client receiving close, personal care, whether or not you have symptoms.

HOW IS COVID-19 TREATED?

Supportive measures are recommended for asymptomatic and mild cases. More severe cases should be treated in hospitals that have access to ventilators. Guidelines are as follows:

SEVERITY	SUPPORTIVE MEASURES
Asymptomatic	 Contact a doctor (and follow the doctor's orders). Follow isolation precautions. Monitor for symptoms.
Mild	 Contact a doctor (and follow the doctor's orders). Follow isolation precautions. Monitor for worsening symptoms. The CDC reports, "some observations suggest that respiratory symptoms may worsen in the second week of illness." Get plenty of rest and fluids. Tylenol or Motrin can ease discomfort associated with mild, cold-like symptoms.
Severe	 Get emergency help for difficulty breathing. Hospitalization is likely required. Follow isolation precautions.
Critical	 Life-saving measures are required at this stage. Isolation precautions remain.

FAQS ABOUT CLEANING DURING THE COVID-19 CRISIS

Q: Can coronavirus droplets survive on clothing?

- Scientists at Harvard found that the virus is more likely to survive on hard services, like plastic and steel, than on softer ones like clothing fabric.
- Still, experts suggest that you remove your shoes and change out of your work clothes to prevent outside germs from coming into your home.

Q: To combat the virus, what's the best practice for doing laundry?

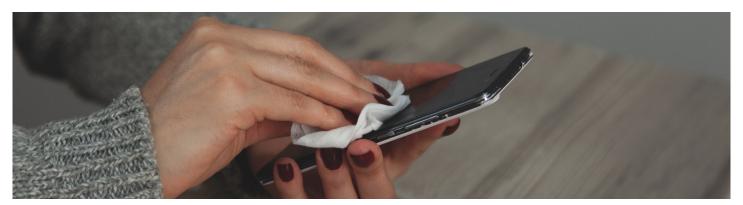
- The CDC recommends washing your own clothes using the warmest appropriate water setting, making sure to dry them completely. They also suggest cleaning and disinfecting clothes hampers. Better yet, if possible, use a disposable bag to line the hamper.
- When you are on the job, follow standard precautions for handling your client's laundry. Wear disposable gloves. To reduce the chances of spreading the virus through the air, never shake dirty laundry. Be sure to remove your gloves properly (to avoid exposure to germs) and throw them out after each use. Then wash your hands.

Q: Does it matter what type of soap I use to wash my hands?

 Fortunately, no, the type of soap does not matter. And, remember, since COVID-19 is a virus, there is no advantage to using antibacterial hand soap. The most important thing is to wash your hands for at least 20 seconds so that the combination of the soap and the friction of your hands rubbing together disrupts the germs.

Q: I always have my cell phone with me when I care for clients. Do I need to clean it?

- Yes, experts recommend that you clean your cell phone regularly. Since you can't use soap and water on a phone, they recommend something like a Clorox or ethanol wipe something with at least 70% alcohol. Be sure to clean the back and sides as well...but avoid the ports.
- However, DO NOT use a wipe that contains bleach as it may ruin the surface of your phone.
 If you are unable to find wipes, try filling a spray bottle with rubbing alcohol. Spray the phone carefully, avoiding getting any liquid in the ports. Whatever cleaner you use, just make sure it has time to sit and work its magic before you wipe it off with a single use cloth.
- **NOTE:** Your best bet to protect your phone from harsh cleaners may be to first put a screen protector on your screen.



MORE FAQS ABOUT CLEANING DURING THE COVID-19 CRISIS

Q: Is there a difference between cleaning and disinfecting?

 Yes! Cleaning removes germs, dirt, and impurities from surfaces, lessening the risk of spreading infection by reducing the number of germs. However, cleaning does not kill germs.

Disinfecting involves using chemicals to *kill* germs on surfaces.

Your best bet to lower infection spread is to first <u>clean</u> a surface and then follow up by <u>disinfecting</u> it.

For clients who are isolating at home (and in your own home), the CDC suggests cleaning and disinfecting high-touch surfaces daily in household common areas. These items include: counters, tables, hard-backed chairs, doorknobs, light switches, TV remotes, cell phones, handles (such as the refrigerator and microwave handles), desks, toilets, and sinks.



Q: What products can I use to disinfect surfaces in my clients' homes (or my own home)?

 First, remember your standard precautions. Wear gloves while cleaning and disinfecting client areas. When you are finished, remove them properly, dispose of them, and wash your hands. NOTE: At home, if you don't have gloves, be sure to wash your hands before and after you clean.

If surfaces are dirty, CLEAN them first by scrubbing with soap/detergent and water. Then, if possible, DISINFECT. You can use a diluted bleach solution, an alcohol solution with at least 70% alcohol or one of these CDC-approved disinfectants: www.americanchemistry.com/Novel-Coronavirus-Fighting-Products-List.pdf (In general, look for sprays or wipes that promise to kill 99.9 percent of germs.) Be sure to follow the manufacturer's instructions on the container.

You can prepare a bleach solution by mixing 4 teaspoons of bleach to one quart of water. However, please remember to:

- Check the expiration date on the bottle of bleach.
 If it has expired, it will not be effective against the coronavirus.
- Ask your client or a family member if any household surface will be harmed by bleach. For example, some laminate countertops will discolor if cleaned with bleach.
- Never mix household bleach with ammonia or any other cleanser, including vinegar. It may create a poisonous gas.
- Be sure to label the bleach solution container and keep it away from children and adults with dementia or Alzheimer's disease.
- Only make as much bleach solution as you need for one day of cleaning. It will lose its effectiveness after 24 hours.
- To discard the solution, dilute with water and pour it down a sink drain.

The COVID-19 scare has many people on edge. And all of its effects on society, such as schools closing, the stock market crash, and declared states of emergency can cause extreme anxiety.

Non-stop coverage in the media, misinformation on social media, and the general uncertainty of where all this is going can make matters worse.

 Experts advise that anxiety is a normal, protective human response. It's when your brain scans your body and the environment for potential threats so that you can get prepared to react, if necessary.

The problem is that stress and anxiety can easily spiral into panic. Panic is NOT productive.

- For people who already suffer from anxiety, the loudest message coming through is that everyone is powerless to an invisible threat that has the potential to devastate individuals, families, and even entire communities. This fear can lead to irrational behaviors such as fixating on handwashing or wearing a mask when it's not necessary to do so.
- On the other side of the spectrum, there are those who refuse to see the virus as a threat at all. They may block it out completely, downplay the risk, and even ignore basic advice to wash hands and avoid public gatherings.
- Both of these are stress-related responses.
 And neither is productive. Problems can arise when stress spirals out of control and leaves a person to obsess over protective measures—or ignore them altogether.

The healthiest response lies somewhere in the middle of these two extremes!

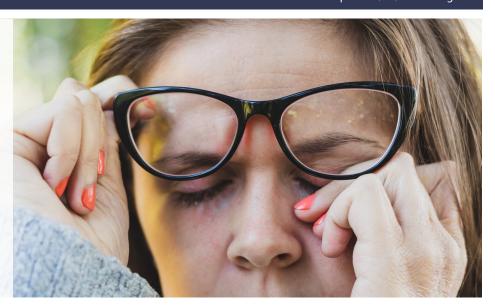


If you, or someone you know seems to suffer from one of these stress responses, here are five easy steps that can help keep stress and anxiety at a healthy level:

- 1. **Try to stay "in the moment."** Anxiety can spiral out of control when your mind begins to predict catastrophic future events. Just know that all you can do is take measures to protect yourself from what is happening right now. You can't predict the future.
- 2. Stay informed but know when to turn off the news (and log out of social media). It's important to stay up-to-date and know the facts. You should tune in for that. But there's a point at which news and social media stop being helpful. You could spend hours listening to headlines or scrolling tweets for alerts, but none of that makes you any safer.
- 3. **Get prepared.** Don't feel silly, weak, or embarrassed to follow reasonable safety advice from trusted sources. In fact, feeling prepared can give you a sense of control, which can also decrease anxiety.
- 4. **Practice self-care.** Get a good night's sleep. Eat a balanced diet. And get a little bit of exercise each day. These things help boost your immune system and can help decrease anxiety as well.
- 5. Reach out for help if you need it. There is no shame in reaching out to a friend, family member, your doctor, or even a mental health expert if you feel your anxiety spiraling out of control. Help is available. You are not alone.



STOP TOUCHING YOUR FACE!



Research shows that most of us touch our faces at least 16 times a day.

WHY IS THAT A PROBLEM?

Under normal circumstances, it wouldn't be that big of a deal to touch your face 16 times a day.

But we are NOT living under normal circumstances right now!

Think of your face as the onramp to your body. The mucous membranes on your face (eyes, nose, and mouth) are super-highways to your respiratory system. So, if the virus is on your hand when you touch your eyes, nose, or mouth (even once), it will surely hitch a ride to your lungs and make you sick. It's that simple.

IT'S A HARD HABIT TO BREAK.

Most of us touch our faces throughout the day without even realizing it. We rub our tired eyes, itch our tickly noses, and bite off ragged fingernails without much thought at all.

So, how do you break a habit that you are hardly aware you even do?

Here are a few tips you can use:

- Wash your hands with soap and water often throughout the day. But keep in mind, this is not the ONLY solution. It's nearly impossible to keep your hands completely germ-free. As soon as you wash your hands, you will likely re-contaminate them by touching surfaces such as doorknobs, countertops, or light switches that may hold the virus.
- Pay close attention to your urge to touch your face. Becoming more aware of the habit can help you catch yourself before you do it.
- Use pleasant scents to remind you. Rub a pleasant smelling lotion on your hands after washing them.
 When you bring your hand to your face, the scent will bring your awareness to what you are about to do.
- Tie a string around your finger. Remember the old trick of tying a string around your finger to help you remember something? It can help you break your face touching habit too. It doesn't have to be a string. You could put a rubber band on your wrist, wear a different ring, or even draw a heart on the back of your hand to remind you! Do whatever works for you.
- **Use a clean tissue.** If you just can't fight the urge to scratch your itchy nose, grab a tissue to use as a barrier.
- Keep your hands busy. Find something to fiddle with to keep your hands occupied, like a stress ball, fidget spinner or rubber band.

MYTHS & FACTS SURROUNDING COVID-19

MYTH: Exposing yourself to the sun or to warmer temperatures can prevent the coronavirus disease.

⇒ **FACT:** You can catch COVID-19, no matter how sunny or hot the weather is. Countries currently experiencing the summer season have reported cases of COVID-19.

MYTH: Everyone who catches COVID-19 will become severely ill and possibly die.

⇒ **FACT:** Most people (about 80%) who become infected will have a mild case and fully recover without complications.

MYTH: Being able to hold your breath for 10 seconds or more without coughing or feeling discomfort means you don't have COVID-19.

⇒ **FACT:** The best way to confirm if you have COVID-19 is with a laboratory test. You cannot confirm it by holding your breath. In fact, this practice can even be dangerous.

MYTH: Coronavirus can be transmitted through mosquito bites.

⇒ **FACT:** There is NO evidence that suggests coronavirus could be transmitted by mosquitoes. COVID-19 is a respiratory virus which spreads primarily through droplets generated when an infected person coughs or sneezes.

MYTH: Spraying alcohol or chlorine on your body can kill the new coronavirus.

⇒ **FACT:** Spraying alcohol or chlorine on your body cannot kill viruses that have entered your body. These chemicals can also be harmful to clothes, skin, or mucous membranes such as eyes or mouth.

MYTH: Vaccines against the flu and pneumonia can protect you against the new coronavirus.

⇒ **FACT:** Neither the yearly vaccine against the flu nor the pneumococcal vaccine against pneumonia provide protection against the new coronavirus.

MYTH: If you've had the virus you are immune and can't get it again.

⇒ **FACT:** Scientists are unsure about this. In several cases, people who have tested positive and recovered have tested positive again at a later date. It's unclear if they still had the same infection or if they were re-infected.



HELPFUL RESOURCES

Trusted sources of information include:

The CDC at www.cdc.gov

The World Health Organization at www.who.int

Locate your local Health Department at www.naccho.org/ membership/lhddirectory

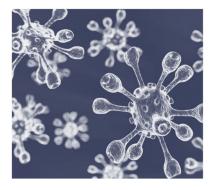
Dial 211

for referrals or to be connected to agencies and community organizations.

Dial 911

for emergencies only.

Call Your Doctor if you think you have symptoms of COVID-19





EMPLOYEE NAME (Please print):

___Luidmilla Androsova

DATE:

_3/27/2020

- I understand the information presented in this inservice.
- I have completed this inservice and answered at least 6 of the test questions correctly.

EMPLOYEE SIGNATURE:

SUPERVISOR SIGNATURE:

Inservice Credit:	
Self Study	1 hour
Group Study	1 hour

File completed test in employee's personnel file.

An Infection Control Module:

Understanding Coronavirus

Are you "In the Know" about COVID-19? <u>Circle the best choice or fill in your answer.</u>

<u>Then check your answers with your supervisor!</u>

- 1. Coronaviruses are a family of viruses that can infect:
 - A. Humans only.

C. Humans and animals.

B. Animals only.

- D. None of the above.
- 2. Which of the following place people at greater risk of getting COVID-19:
 - A. Heart disease.

C. Lung disease.

B. Diabetes.

- D. All of the above.
- 3. While working in a client's home, you begin to run a fever. You also have a sore throat and feel achy. You should:
 - A. Finish your shift and then go home.
 - B. Finish seeing all of your clients before going home.
 - C. Stop working, put on a mask, contact your supervisor and go home.
 - D. Put on a mask and continue working your entire shift.
- 4. Possible symptoms of COVID-19 include:

A. Fever.

C. Sore throat.

B. Cough.

D. All of the above.

5. True False

About 80% of people who become infected with COVID-19 will have a mild case and fully recover without complications.

6. T True False

It's possible to pick up the COVID-19 virus by touching an infected surface such as a doorknob or light switch.

7. True False

During the Coronavirus crisis, you should wear a mask for all close personal contact with clients, even if you don't feel sick .

8. The CDC recommends routine cleaning of frequently touched surfaces to prevent the spread of COVID-19. Which of the following are considered "frequently touched surface?"

Tables Desks

Doorknobs Cell phones Sinks

Light switches Toilets TV Remotes

Faucets