



**Louisiana Department of Health**  
**Informational Bulletin 20-13**  
**May 1, 2020**

*Due to the COVID-19 emergency declaration, temporary changes in provider policy and managed care practices are reflected herein to respond to the emergency. All other non-COVID-19 related policy remains in effect and shall be followed.*

**Infection Control Guidance for Home Health Agencies**

Healthcare personnel (HCP) who work in multiple locations may pose a higher risk for acquiring and/or transmitting COVID-19. Therefore, shifts at the same member's home should be consolidated when possible and covered by the minimum number of HCP allowable with respect to HCP availability while adhering to overtime limits.

**Healthcare Personnel and Member Screening**

In accordance with current CDC guidance, it is recommended that all HCP assigned to provide care in a member's home be screened at the beginning of their shift for fever and respiratory symptoms. If the HCP has a temperature of 100 degrees Fahrenheit or greater, or has symptoms such as cough, shortness of breath, new or change in cough, or sore throat, they should not enter the member's home and should instead contact their primary care provider. For testing, when determined to be necessary, HCP and their primary care providers can locate a site on the Louisiana Department of Health [directory](#), available at <http://ldh.la.gov/index.cfm/page/3934>. Information about when HCP with confirmed or suspected COVID-19 may return to work is available from the CDC's [Interim Guidance on Criteria for Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19](#).

At the start of a new shift HCP should also screen the member for fever and respiratory symptoms. If the HCP is concerned that the member in their care has developed signs or symptoms consistent with COVID-19 they should help facilitate contact with the member's physician and notify the home health agency. HCP who are at higher risk for severe illness from COVID-19 (e.g., 65 years and older or have serious underlying medical conditions) should not be designated as caregivers for members who have confirmed or suspected COVID-19. Flexible job duties for these higher risk HCP should be identified so they can continue working while minimizing direct contact with members.

## **Precautions While in the Member's Home**

**Handwashing** is one of the most important ways people can protect themselves from COVID-19. While in the member's home HCP are encouraged to wash their hands frequently, for at least 20 seconds. HCP should **clean their hands** according to CDC guidelines (<https://www.cdc.gov/handhygiene/providers/index.html>) before and after contact with members, after contact with contaminated surfaces or equipment, and after removing personal protective equipment (PPE). Alcohol-based hand rub should be available for use by HCP and the member. Tissues should also be available, and any sink should be well-stocked with soap and paper towels for handwashing. HCP belongings brought into the member's home should be disinfected.

HCP should **wear a facemask** while in the member's home. Cloth face coverings are not considered personal protective equipment (PPE) because their capability to protect HCP is unknown.

HCP should **clean and disinfect** frequently touched objects and surfaces (e.g., counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, bedside tables), and equipment such as wheelchairs, scooters, walkers, canes, oxygen tanks and tubing, communication boards and other assistive devices. Refer to CDC's [General Recommendations for Routine Cleaning and Disinfections of Households](#). Management of laundry, food service utensils, and medical waste should also be performed in accordance with routine procedures.

## **Precautions for Nebulizer, Tracheostomy, Ventilator and Suctioning Care**

Members who use nebulizers, have tracheostomies, use ventilators, or are suctioned are not necessarily at higher risk of contracting COVID-19 simply by using those devices. However, these devices, if used by someone who IS infected, may spread the infection to others nearby due to their potential for creating aerosolized viral particles. It is not always easy to know when a person is infected since they may be infected and contagious even without symptoms, therefore, precautions should be used with every member's care. For example, HCP should wear an N95 mask and gloves when closely interacting with members who use a ventilator or have a tracheostomy.

Some common **aerosol-generating procedures and devices** used in home health may include: ventilator use with a tracheostomy, especially with a significant leak; changes to or close contact with unfiltered ventilator exhalation limbs, valves, or ports; other ventilator circuit changes; non-invasive ventilator use with a mask, including CPAP and BiPAP; high-flow oxygen

use; tracheostomy procedures such as replacing the trach; open suctioning; cough assist device use; and nebulizer use, especially via mask.

When performing procedures or care involving the above aerosol-generating procedures or devices, HCP should adhere to the following infection control measures, as recommended by CDC and in accordance with home-based ventilation and tracheostomy standards of care:

- Use a separate room with the door closed whenever possible.
- Minimize the number of people in the room during the procedure to as few as possible.
- Wear full PPE, including an N95 mask or other higher-level respirator, eye protection, gown, and gloves, during procedures. Refer to the [CDC Sequence for Donning and Removing PPE](#).
- Clean and disinfect procedure room surfaces promptly.
- Regarding ventilators: avoid opening or disconnecting ventilator circuits as much as possible.
- Regarding suctioning:
  - Use a closed suctioning system if possible.
  - Make sure all filters on suction machines are in place and in good condition.
  - Keep the suction system clean and disinfect the canister and tubing with 50% hydrogen peroxide/water or equivalent daily.
  - Do not reuse sterile suction catheters.
- Regarding cough assist:
  - Use a well-fitting mask to reduce leaks for cough assist.
  - Clean the mask daily.
- Regarding nebulizers:
  - Consider using an inhaler (MDI) instead of a nebulizer to administer inhaled medications.
  - Administer nebulizers inline if the beneficiary is on a ventilator.
  - Clean all disposable nebulizer parts daily.