



## COVID-19: Guidance for Home Health Service Providers

This guidance is based on the best information currently available and will be updated when appropriate. Please visit [dshs.texas.gov/coronavirus](https://dshs.texas.gov/coronavirus) and [cdc.gov/coronavirus](https://cdc.gov/coronavirus) for updates.

This guidance is intended for healthcare workers and others who make home visits or provide health-related services in a home or community setting. This general safety guidance relates to the 2019 novel coronavirus disease (COVID-19).

### Client Assessment Prior to Visit

- Communicate with the client ahead of a scheduled visit, either by telephone, text message, or video conference, if you can.
- If possible, conduct the entire visit virtually, either by phone or video conference.
- Ask client to report their temperature by phone or show it to you via video conferencing. A fever is a temperature of 100.0° Fahrenheit or 37.8° Celsius or greater. Make sure they have not recently taken fever-reducing medication.
- If you plan to visit in-person, ask the client beforehand if they or a member of the household have a fever, cough, shortness of breath, fatigue, aches and pains, sore throat, diarrhea/nausea, or a runny nose or have been diagnosed with COVID-19. Ask the client and all other household members to wear a cloth face mask covering during the visit. Further information about cloth face coverings can be found on the DSHS website at <https://www.dshs.texas.gov/coronavirus/>.

### Recommended Action

- If you are unable to reach the client ahead of the visit, conduct the first contact at least six feet away and outdoors or outside the residence, such as in a hallway, if feasible. Ask the client to wear a cloth face covering if they are not already wearing one. Caregiver should always put on their mask prior to contact with client or entering the home.
  - Ask the client if they or a member of their household have been diagnosed with COVID-19 or have any of the symptoms associated with

COVID-19. Check the CDC information on [symptoms](#) for the latest information, but COVID-19 symptoms include:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
- You can instruct the client to check their own temperature. Then report the result. A fever is a temperature of 100.0° Fahrenheit or 37.8° Celsius or greater. Make sure they have not recently taken fever-reducing medication.
- If the client or household members have no fever or concerning symptoms , it remains appropriate to stay at least six feet away during the client visit, ask the client to wear a cloth face covering, and limit the time of interaction as much as possible. Ask other household members to wear cloth face coverings and move to another room during the visit. Always wear a cloth face covering or mask when in the home, unless a surgical mask or respirator is required.
- If the client or household members have fever, cough, shortness of breath, fatigue, aches and pains, sore throat, diarrhea/nausea, or a runny nose, you should suspect COVID-19 infection and adhere to the following:
- For all NON-CRITICAL services, reschedule until after the client or household members have been released from isolation, which means that:
  - At least ten days have passed since their symptoms first appeared AND
  - They have not had a fever for at least 24 hours (without the use of fever-reducing medicine) AND
  - Other symptoms have improved (for example, improved cough or shortness of breath)

People who are seriously immunocompromised may need to be in isolation for longer. They should consult their health provider.

- For all CRITICAL services that cannot be postponed, use all recommended personal protective equipment (PPE).

## Recommended PPE for a Home Where You Suspect COVID-19

Conventional capacity (when there is no shortage of PPE supply):

- A single pair of disposable patient examination gloves. Change gloves if they become torn or heavily contaminated.
- Disposable isolation gown.
- Respiratory protection (such as N95 or higher-level respirator if available, otherwise use a surgical facemask).
- Eye protection (such as goggles or disposable face shield that fully covers the front and sides of the face).

If there is a shortage of PPE, the following strategies can be implemented for PPE use:

- Gown: Consider use of coveralls or expired gowns beyond the manufacturer-designated shelf life, or gowns or coveralls that conform to international standards (see [CDC website](#)). If feasible, shift towards cloth isolation/reusable gowns that can be laundered. Always change gown between clients.
- Respiratory Protection (N95 respirators): Consider reuse of N95 respirators according to manufacturer's guidelines or CDC guidance (see [CDC guidelines on limited reuse of N95 respirators](#)).
- Eye Protection: Consider use of re-usable goggles or face shields. Disposable eye protection can be cleaned and reused if it remains intact. (See manufacturer guidelines for cleaning or [CDC website](#).)
- Refer to [Optimizing Supply of PPE and Other Equipment during Shortages](#) for more information.

## Guidance for PPE Use in the Home

- Use alcohol-based hand sanitizer with at least 60% alcohol before putting on and after removing PPE. Put on PPE outside of the home prior to entering the home. If you cannot put all PPE on before you enter the home, put on eye protection and facemask or respirator before entering.
- Alert those in the home that you will be entering the home and ask them to move to a different room, if possible. If that is not possible, ask residents to keep at least a six-foot distance in the same room and wear cloth face coverings. Once the entry area is clear, enter the home and put on a gown and gloves (if you were not able to put them on outside).
- Conduct the interview in the area with best ventilation (such as outdoors or apartment hallway if feasible, or in the largest room available).
- If you have surgical masks (not N95 masks), have the client wear one.

- Make the indoor visit as brief as necessary.
- Wash your hands with soap and water or use an alcohol-based hand sanitizer with at least 60 percent alcohol after an interview/visit.
- Ask the client if an external trash can is present at the home, or if one can be left outside for the disposal of PPE.
- Remove PPE outside of the home and discard in an external trash can before departing the location. Don't transport worn PPE in your vehicle.
- If you are unable to remove all PPE outside of the home, keep your face protection (such as respirator and eye protection) on after exiting the home.
- If you need to remove your gown and gloves in the home, ask residents to move to a different room, if possible. If that is not possible, ask residents to keep at least a six-foot distance in the same room and wear cloth face coverings. Once the entry area is clear, remove the gown and gloves and exit the home.
- Once outside the home, use alcohol-based hand sanitizer with at least 60 percent alcohol, remove face protection and discard PPE by placing in external trash can before departing the location. Clean your hands with sanitizer again.
- For visual aids on putting on and taking off PPE safely, see [CDC website](#) (Find out more by reading [CDC guidelines for putting on and taking off PPE](#)).

### **Concern about Exposure after Entering a Home without PPE**

If after entering the home there is someone with fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, runny or congested nose, nausea, vomiting, or diarrhea, or the client or family member reports a diagnosis of COVID-19, that staff member should:

- Immediately exit the home.
- Clean their hands with soap and water or an alcohol-based sanitizer.
- Notify their supervisor.

**Because the information regarding COVID-19 response is rapidly changing, this is interim guidance.**

### **Reliable Information Sources**

Find up-to-date COVID-19 information at [cdc.gov/coronavirus](https://cdc.gov/coronavirus), [dshs.texas.gov/coronavirus](https://dshs.texas.gov/coronavirus), and on DSHS's Facebook, Twitter and Instagram at @TexasDSHS.