



HEALTH HOLDING

HAFAER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Infection Prevention and Control Department		
Document:	Departmental Policy and Procedure (DPP)		
Title:	IPC Guidelines for Home Care		
Applies To:	Home Care Staff		
Preparation Date:	December 12, 2024	Index No:	IPC-DPP-091
Approval Date:	December 29, 2024	Version :	2
Effective Date:	January 29, 2025	Replacement No.:	IPC-DPP-091(1)
Review Date:	January 29P, 2028	No. of Pages:	3

1. PURPOSE:

- 1.1 To provide guidelines needed for health services be provided to individuals and families in a manner that would achieve the desired outcomes while protecting the health and safety of the patient, healthcare personnel, and community.

2. DEFINITONS:

- 2.1 **Home healthcare (HHC)** is defined as healthcare provided to individuals and families in their places of residence for the purpose of promoting, maintaining, or restoring health or for maximizing the level of independence while minimizing the effects of disability and illness, including terminal illness. The complexity of the patients may be very high, as the incidence of chronic diseases is increasing and the care needed may include advances in technology.

3. POLICY:

- 3.1 The focus of HHC is to provide not just patient care but also preventive care (i.e., promoting vaccine-preventable diseases such as influenza) and to prevent complications of chronic diseases.
- 3.2 The home environment must be assessed to determine whether the HHC agency can safely provide the services needed. The setting should be assessed for cleanliness, temperature control, running water, toilet facilities, and infestation with insects or rodents.
- 3.3 To reduce the risk of infection, patient and family education should include information about hand hygiene and infection prevention practices specific to the patient's care (i.e., wound care, indwelling urinary catheters, intravenous lines, etc.).
- 3.4 In addition, education should be provided on the signs and symptoms of infection and what to do if infection or other poor outcome is suspected.

4. PROCEDURE:

- 4.1 Precautions for preventing the transmission of infectious agents in the home
 - 4.1.1 Practice Standard Precautions
 - 4.1.1.1 Use PPE (i.e., gloves, gowns, face mask, eye protection) when dealing with blood and/or body substances of any patient.
 - 4.1.1.2 Use gowns and gloves for patients with uncontrolled secretions, pressure ulcers, draining wounds, stool incontinence, and ostomy tubes/ bags to prevent transmission of MDROs.
 - 4.1.2 Observe proper hygiene. Use alcohol-based hand rubs in the home care setting but if hands are visibly soiled or contaminated with proteinaceous materials such as blood or feces, then hand wash with soap and water is recommended.
 - 4.1.3 Observe respiratory cough etiquette to prevent droplet and fomite transmission of respiratory pathogens especially during seasonal outbreaks of viral respiratory tract infections.

- 4.1.4 Handle waste in the home setting as if it could transmit infectious agents. Dispose sharps according to applicable laws and regulation. Suggest the use of hard plastic container such as bleach container for disposal of sharps to improve safety in dealing with sharps.
- 4.1.5 Supply and equipment
 - 4.1.5.1 Transport and store clean and sterile supplies in the home in a manner that will keep them dry and protected from contamination.
 - 4.1.5.2 Use plastic storage containers in a heavily soiled environment.
 - 4.1.5.3 Assess the integrity of an item stored at home before each use.
 - 4.1.5.4 Discard an item purchased as clean or sterile if the packaging/wrapper is no longer intact or has water stains.
 - 4.1.5.5 Store and handle supplies kept in the provider's home care bag or vehicle without compromising the integrity of the supplies.
 - 4.1.5.6 Perform hand hygiene before reaching into the home care bag to prevent contamination of the supplies kept in the home care bag.
 - 4.1.5.7 Clean all non-disposable patient care equipment or items per manufacturer's guidelines, regardless of the patient's infectious status.
 - 4.1.5.8 Limit the amount of non-disposable patient care equipment brought into the home if patient is known to be infected or colonized with MDROs. Whenever possible, leave this equipment in the home until the patient is discharged from home care services.
 - 4.1.5.9 If noncritical patient care equipment (i.e., stethoscope) cannot remain in the home, clean and disinfect items before taking them from the home using a low-to intermediate-level disinfectant. Alternatively, place contaminated reusable items in a plastic bag for transport and subsequent cleaning and disinfection.
- 4.1.6 Environment: Educate patient and family on maintaining a clean environment especially high touch areas.
- 4.1.7 Prevention of occupational-related infections
 - 4.1.7.1 HHC agencies should provide education and safety needle devices to their employees
 - 4.1.7.2 Provide appropriate immunization to HCWs for their protection and prevention of HAIs.
 - 4.1.7.3 HHC agencies must ensure that there are arrangements for TB screening with appropriate follow up for positive results, provision of recommended immunizations, health and safety education, surveillance for occupational exposures and management of exposures to communicable disease.
 - 4.1.7.4 Follow policy for work restrictions for infected or exposed HCWs.
- 4.1.8 Managing infectious disease disasters: bioterrorism, emerging infections, and pandemics. In the event of an infectious disease disaster, the resources of HHC agencies will be overwhelmed. Planning for such a disaster is essential to ensure sustainable healthcare response.
 - 4.1.8.1 HHC agencies should contact patients and families before the home visit to determine whether anyone in the household has an influenza-like illness. If anyone does, then non-essential services planned for the home visit should be postponed.
 - 4.1.8.2 If this is not feasible, then assign a personnel who is not at an increased risk for complication of pandemic influenza to care for these patients
 - 4.1.8.3 HHC providers must wear appropriate respiratory protection to prevent transmission.
 - 4.1.8.4 Environmental controls when planning a scheduled visit to a patient in the home setting:
 - 4.1.8.4.1 Environmental controls when planning a scheduled visit to a patient in the home setting:
 - 4.1.8.4.2 Place the patient in a separate room with closed door.
 - 4.1.8.4.3 Minimize contact with others in the home
 - 4.1.8.4.4 Have patient follow respiratory hygiene and cough etiquette. Mask a patient at a minimum, cover cough with tissue or elbow

4.1.8.4.5 Request patient to perform frequent hand hygiene and place alcohol hand rub within reach of the patient.

5. MATERIALS AND EQUIPMENT:

5.1 **Forms and Records:**

5.1.1 N/A

5.2 **Materials and Equipment**

5.2.1 N/A

6. RESPONSIBILITIES:

6.1 Home Care Staff

7. APPENDICES:




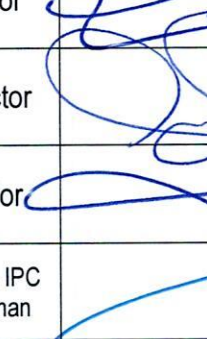



7.1 N/A

8. REFERENCES:

8.1 Association for Professionals in Infection Control (APIC) and Epidemiology, Inc. (2014). Chapter 56: Home Care. In APIC Text of Infection Control and Epidemiology (4th ed.)

8.2 GCC Infection Prevention and Control Manual. 3rd Edition 2018

9. APPROVALS:

	Name	Title	Signature	Date
Prepared by:	Ms. Marilou C. Magallano	IPC Practitioner		December 12, 2024
Prepared by:	Ms. Wadha Mohd Al Shammari	IPC Coordinator		December 12, 2024
Reviewed by:	Ms. Awatif Hamoud Al Harbi	IPC Director		December 16, 2024
Reviewed by:	Mr. Sabah Turayhib Al Harbi	Nursing Director		December 19, 2024
Reviewed by:	Mr. Abdullellah Ayed Al Mutairi	QM & PS Director		December 22, 2024
Reviewed by:	Dr. Thamer Naguib	Medical Director		December 26, 2024
Approved by:	Mr. Fahad Hazam Al Shammari	Hospital Director & IPC Committee Chairman		December 29, 2024