

COVID-19

Provincial Guidance and Screening Tool for Management of Home Visits

This document links to current Shared Health and MHSAL resources on screening for COVID19 symptoms in community health setting. **This document is intended to supplement clinical judgement, not supersede it.**

Recommendations

- Health provider initiates call for service as per usual (discuss role, reason for call, focused assessment).
- There is no need to screen if no in-person services are planned.

In an effort to reduce community transmission, screening criteria to identify risk and reduce unnecessary visits in the community should be used. For full details, refer to the following: <https://sharedhealthmb.ca/files/covid-19-guidance-for-outpatient-care-delivery.pdf>

Where screening identifies no criteria that would indicate the home worker could be exposed to COVID-19, **home visits will be offered as routine.**

Where the screening shows potential exposure to COVID-19, home visits should be limited to those where there is imminent risk for health, harm or deterioration unless a provider in-person visit is completed. *Clinical Nurse Specialists, CD Coordinators/Coordinators, Case Manager, Team Managers will collectively provide general guidance and clarification as needed in your practice area.*

Prior to arranging services or providing a service visit (in office, in home, elsewhere in community) ask client the following:

- In the past 14 days have you - or anyone in the household - returned from travel outside Manitoba, including travel within Canada? (If yes – public health officials have directed them to self-isolate for 14 days following their return to Manitoba. If they are symptomatic [respiratory symptoms] refer to Health Links-Info Santé at 204-788-8200 or toll-free at 1-888-315-9257 for further direction); **OR**
- In the past 14 days have you - or anyone in the household – had *exposure to a confirmed case of COVID-19? (If yes – public health officials have directed them to self-isolate for 14 days. If they are symptomatic [respiratory symptoms] refer to Health Links-Info Santé for further direction). **NOTE - *Exposure** may include scenarios like: large events or settings with confirmed case(s) of COVID-19; **OR**

- In the past 14 days have you – or anyone in the household – had laboratory exposure to biological specimens known to contain COVID-19 (specific to people who work directly with biological specimens); **OR**
- Is anyone in the household on self-isolation due to COVID-19 (even asymptomatic).

If yes to any of the screening criteria outlined above, the health care worker must don droplet/contact PPE if service visit is necessary. If there is someone in the home who is on self-isolation for COVID-19, even if they are asymptomatic and not in the same room, the health care worker must don [droplet/contact](#) PPE in addition to [routine practices](#).

If no to screening criteria outlined above, the health care worker may proceed to offer the home visit as per routine using routine practices even if anyone in the household have cold/flu symptoms (fever, new cough, runny nose, sore throat).

Avoid inviting symptomatic clients (i.e. cold/flu symptoms such as fever, new cough, runny nose, sore throat) into public service spaces. Offer home visit instead for necessary services.

If the client is symptomatic and has questions about COVID-19 (e.g. test sites, who can be tested) please use the most up to date materials available at <https://www.gov.mb.ca/covid19/> for reference.

If recent history suggests potential exposure (yes to cold/flu symptoms AND another screening criteria outlined above) – direct the client for to use the online COVID-19 Screening Tool: <https://sharedhealthmb.ca/covid19/screening-tool/> OR to call **Health Links-Info Santé (204-788-8200 or 1-888-315-9257)** for further screening and instruction on next steps.

Clients with severe symptoms are directed to go to an emergency department OR to call 911 and should advise of their potential exposure to COVID-19 to ensure appropriate precautions are taken.

Home Visits Where Droplet/Contact PPE is Indicated:

Implement [routine practices](#) and [droplet/contact precautions](#)
See resources: How to [don](#) and [doff](#) PPE.

Please explain to the client the need for provider to don PPE during the visit as a requirement of Occupational and Environmental Health Services.

For home visits supplies needed: PPE to Go bag (gown, gloves, procedure mask, eye protection (or mask/face shield); trash bag; bag for coat:

Donning PPE:

- Prior to entering the client home/suite, provider performs hand hygiene then dons procedure mask and eye protection.
- Upon entering the client home/suite, provider removes coat and places in designated bag.
- Provider performs hand hygiene and dons remaining PPE (gown, gloves).

Doffing PPE:

- Prior to exiting the home, provider to remove gloves and gown, and discard into trash bag.
- Provider to perform hand hygiene.
- If coat worn – provider to remove from bag and discard bag BEFORE putting coat on
- After exiting the home/suite, provider to perform hand hygiene
- Provider to remove eye protection and face mask and discard into trash bag.
- Provider to perform hand hygiene.

Initial contact and assessment

Screening questions prior to arranging services or providing a service visit

Have you – or has anyone in the household:

- In the past 14 days returned from travel outside Manitoba; OR
- In the past 14 days had *exposure to a confirmed case of COVID-19; OR (NOTE - *Exposure may include scenarios like: large events or settings with confirmed case(s) of COVID-19).
- In the past 14 days returned had laboratory exposure to biological specimens known to contain COVID-19; OR
- Are you on self-isolation due to COVID-(19). (even asymptomatic)

NO

YES

Provide in-person visit using routine practices

NO

Do NOT provide in person home visit

Is there imminent risk for health, harm or deterioration unless an in person provider visit is completed?
(Contact your Supervisor/Team Manager if unsure and requiring advice)

YES

Provide in-home care using routine practices and droplet/contact PPE

NOTE:

*Exposure may include scenarios like: large events with confirmed case(s) of COVID-19.