Supporting patients with hygiene care during coronavirus (COVID-19)

Coronavirus (COVID-19) update – 1 October 2020

Who should read this?

Aged care staff, allied health, nursing and other personal care attendants who are responsible for the assessment, supervision and maintenance of personal hygiene care of patients, residents and clients in aged care facilities, disability homes, hospitals, palliative care services and private residences.

This should also be read by those managing healthcare facilities to ensure that there is clear understanding of the requirements to keep staff safe and that staff are appropriately supported to apply the principles of this document consistently.

What is this document about?

This guidance provides information on how to minimise the risk of exposure to coronavirus (COVID-19) when assisting patients, residents or clients with their personal hygiene needs.

The nature of providing personal hygiene care to a patient, resident or client in wet and enclosed spaces (such as bathrooms) where physical distancing cannot be maintained may pose a risk of transmitting coronavirus (COVID-19) to healthcare workers.*

The maintenance of personal hygiene care is a core right and efforts must be made to ensure the needs of patients, residents or clients are met, while maintaining the safety of healthcare workers by minimising safety risks.

Patient hygiene activities in the bathroom include bathing, dressing, grooming, toilet support and washing.

What are the risk factors to healthcare staff?

The risk factors to your personal safety are:

- being in close proximity to patients or residents suspected or confirmed with coronavirus (COVID-19) where a distance of 1.5 metres cannot be maintained
- being in a wet and enclosed space with the patient or resident over a prolonged period of time, i.e. longer than 15 minutes at less than 1.5 metres distance, or longer than two hours in an enclosed space**
- contact with contaminated objects and surfaces
- exposure to bodily fluids from showering, sink washing or tub bathing patients or residents, particularly from splashes and sprays of water
- poor ventilation and high humidity in an enclosed space
- personal protective equipment (PPE) becoming damp or soiled


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How to reduce the risk of transmission of coronavirus (COVID-19) when assisting a patient or resident with their personal hygiene care

Staff are advised to exercise judgement by assessing the level of risk posed by the patient's or resident's coronavirus (COVID-19) status and environmental factors. For all levels of patient or resident assistance, please follow the risk minimisation strategies below.

Minimising your risk from coronavirus (COVID-19) requires that you consistently apply multiple risk minimisation strategies. The more strategies you use to protect yourself, the lower your risk of infection.

General principles for minimising your risk

Where possible, follow these principles for all patients and residents requiring assistance:

- Use aids and equipment to increase independence of patients and residents where appropriate.
- Ensure the bathroom is well-ventilated with a working exhaust fan. Keep the windows open and bathroom door open (if it opens to a single room) to reduce humidity and to improve air flow.
- Use the largest bathroom available to maintain physical distancing.
- Limit the number of staff with a patient or resident in a bathroom to comply with the 4x4 square metre rule.
- Minimise the time spent in the bathroom with the patient or resident to less than 15 minutes.
- Clean the bathroom after every patient or resident use.
- Perform hand hygiene before and after removing and replacing your mask.

Patients or residents with low risk of coronavirus (COVID-19)

Patients or residents with low transmission risk include those not suspected or confirmed to have coronavirus (COVID-19), and those not in quarantine being close contact to a confirmed case or linked to an outbreak.

For showering and other bathroom activities, continue with usual routine care while guided by the general principles above.

Patients or residents with suspected or confirmed coronavirus (COVID-19)

- Patients or residents who are able to safely care for their own hygiene independently without assistance or supervision from staff can continue to do so.
- Patients or residents requiring direct physical support with their bathroom activities can be assisted by staff, noting:
  - bed bath is the preferred option for patients or residents who require physical support until they are cleared of their coronavirus (COVID-19) status
  - a commode or bed pan is the preferred option, if physical support is required and physical distancing cannot be maintained and requires staff being in the wet and enclosed space for a prolonged period, i.e. longer than 15 minutes
- Patients or residents requiring supervision with their bathroom activities can be assisted by staff, including:
  - using aids and equipment
  - where possible, carry out most activities outside of the bathroom such as changing and drying
  - staff should wait outside the bathroom if it is safe for the patient or resident to be left alone. If it is not safe, then follow the advice above for requiring direct physical support
  - for showering or sink washing, advise the patient or resident to use the lowest temperature possible that is comfortable to reduce humidity in the air
  - moving the patient or resident in and out of the bathroom
  - positioning and setting up the patient or resident in the bathroom
  - placing bathroom items within easy reach
• Where possible, minimise the time spent in wet and enclosed spaces with a patient or resident, i.e. less than 15 minutes.

• Dispose and replace your PPE after assisting the patient or resident in the bathroom once you are:
  – outside a patient or resident’s room
  – in the corridor outside a patient bay
  – in a designated doffing zone
  – outside the anteroom if showering a patient or resident in a negative pressure room.

• Change any damp or soiled gowns and remove aprons.

For shared bathrooms

• Residents or patients with confirmed coronavirus (COVID-19) must have a designated shower, separate to suspected and non-coronavirus (COVID-19) patients or residents.
• Reduce the number of patients or residents using the same bathroom.
• Patients and residents should stagger bathroom use with a 30-minute break in between showers.

Patients or residents that are asymptomatic and are identified as a close contact to a confirmed case or in quarantine

Staff are advised to follow the same precautions as with a patient or resident suspected or confirmed with coronavirus (COVID-19) until the results of their swabs are known and they have completed their quarantine period.


If you need an interpreter, call TIS National on 131 450


For any questions

Coronavirus hotline 1800 675 398 (24 hours)
Please keep Triple Zero (000) for emergencies only

To receive this document in another format phone 1300 651 160 using the National Relay Service 13 36 77 if required, or email Emergency Management Communications <COVID-19@dhhs.vic.gov.au >.

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