

CAC Services During COVID - 19

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Objectives of the Session

How to give CAC Services with
Desired Changes to Prevent COVID Infection

Define Protection Protocols for Self, Women
and Support Staff

Ensuring Services during COVID-19

Early identification and proper screening of cases, medical abortion may be prioritised.

Detailed history and keen observation of any probable symptoms of covid19 in women

Routine testing for COVID 19 to be discouraged as abortion is a time sensitive procedure

Ensuring routine and post abortion family planning services

Promote teleconsultation for services

Checkpoints for Safety



Presence of Early Symptoms



**History of Exposure/
Contact with a positive patient or history of contact with anyone travelling from outside**



Thermal Scanning



Follow Standard precautions

Protect yourself with 3Ws



WASH YOUR HANDS



WATCH YOUR DISTANCE



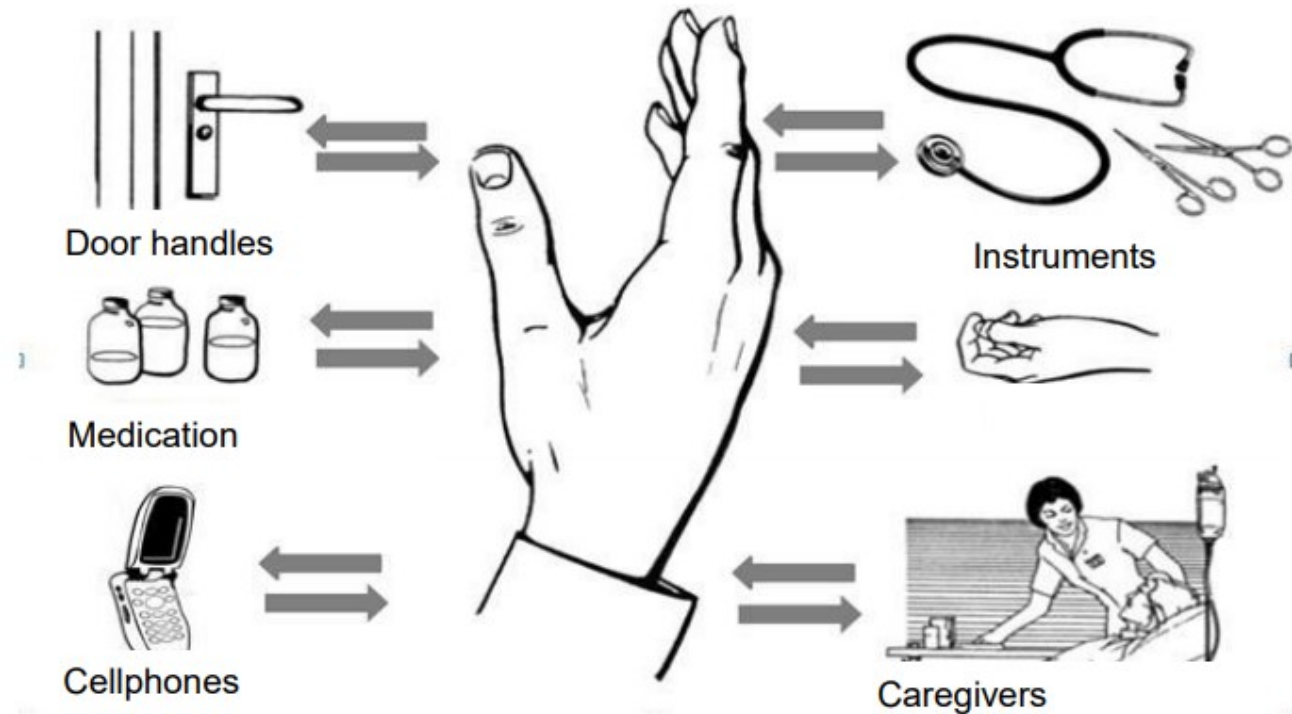
WEAR YOUR MASK

Standard Precautions

- Hand hygiene
- Respiratory hygiene (cough etiquette)
- PPE according to the risk
- Safe injection practices, sharps management and injury prevention
- Safe handling, cleaning and disinfection of patient care equipment
- Environmental cleaning
- Safe handling and cleaning of soiled linen
- Waste management

Hand Hygiene

- Best way to prevent the spread of germs in the health care setting and community
- Our hands are our main tool for work as health care workers- and they are the key link in the chain of transmission



Hand Hygiene: five moments



Respiratory hygiene (cough etiquette)

5 STEPS
to stop the spread of respiratory illnesses

- 1** Cover your mouth and nose with tissues when coughing, sneezing, blowing and/or wiping your nose
- 2** Dispose of tissues in the nearest waste bin after use
- 3** If no tissues are available, cough or sneeze into your inner elbow rather than your hand
- 4** You may be asked to put on a face mask to protect others
- 5** Wash your hands with soap and water or alcohol based handrub after coughing or sneezing into hands or tissues

NSW GOVERNMENT
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Infection Prevention Measures

Face Mask



Nose + mouth

N95 Mask



Nose + mouth

Face shield



Eyes + nose + mouth

Goggle



Eyes

Coverall



Gown



Body

Apron



Body

Gloves



Hands

Head cover



Head + hair

Recommended Protective Gear

Doctor / Nursing staff in OPD	<ul style="list-style-type: none">• Mask (N95 pref)• Face shield (if possible)• Gloves
Support staff	<ul style="list-style-type: none">• 3 ply Mask• Gloves
Cleaning staff	<ul style="list-style-type: none">• Mask• Gown• Heavy duty gloves• Face shield• Boots
Labour/procedure Room	<ul style="list-style-type: none">• Mask (N95 pref)• Face shield• Gown• Sterile gloves



Use of PPE Kit

During procedures on COVID positive/suspected/untested cases

During indoor care when there is a possibility of blood/body fluid splash

During disposal of the PPE kits after use (support staff)

Processing of the equipment used

Environmental disinfection of COVID areas/wards

Principles of Using PPE Kit

- PPE kit, once fully worn should not be touched or adjusted on the face, during patient care
- Change PPE immediately if it is contaminated or damaged
- NEVER reuse disposable PPE kit components
- Dispose off the different PPE kit components in appropriate bins

Cleaning of Surfaces

Hospital disinfectants

- 70% ethyl alcohol for small areas – reusable dedicated equipment (e.g., thermometers)
- Sodium hypochlorite at 0.5% (equivalent 5000 ppm) for surface disinfection

Staff dealing with soiled bedding, towels and clothes

- Wear appropriate PPE – gloves, mask, eye protection (goggles/face shield), long-sleeved gown, apron (if gown is not fluid resistant), and boots or closed shoes
- Never carry soiled linen against body; place soiled linen in a leak-proof bag or bucket
- Perform hand hygiene after blood/body fluid exposure and after PPE removal

Spill Management

- Worker assigned to clean the spill should wear gloves and other personal protective equipment
- Most of the organic matter of the spill to be removed with absorbent material
- Surface to be cleaned to remove residual organic matter
- Use disinfectant: hypochlorite
 - 1% for small spills
 - 10% for large spills



Key Points

- Adequate ventilation in the procedure area as per the guideline
- Avoid crowding of waiting area and OPD
- Universal masking for all including support staff
- Self monitoring of health and that of other staff
- Early noting and reporting of symptoms:
 - Fatigue
 - Muscle aches
 - Altered smell or taste sensation
 - Cough or sore throat
 - Mild fever

Key Points



Standard Precautions:

- Personal protective barriers for nose, mouth, eyes
- Wash/Sanitize hands frequently and thoroughly
- Waste management, as per protocol

Avoid touching:

- Your face
- Outer surface of the mask

Periodic disinfection of devices and surfaces between uses

Effective use of Teleconsultation to minimize spread of infection

Expected Outcome

Acknowledge

Acknowledge the changed scenario in the state/country, but we have to move on and provide abortion services

Define

Define steps for being safe while giving services and also keeping our colleagues (& family) safe

Guide

Guide the support staff on standard safety protocols and remove the barrier of considering abortion services as lesser important

Address

Address various myths and misconceptions of staff and clients

Be

Be equipped strongly to deal with the current situation

THANK YOU