

# COVID-19: PROTECTING HEALTH CARE WORKERS' (HCW) FAMILIES AT HOME



A Rapid Guidance Summary from the Penn Medicine Center for Evidence-based Practice  
 Last updated April 22, 2020 10:00 pm All links rechecked April 21 unless otherwise noted.

## Key questions answered in this summary

- What steps should health care workers (HCW) caring for COVID-19 patients take to protect their family members and housemates from risk of transmission?

## Summary of major recommendations

- HCW should sanitize all items carried during their shift (e.g. cell phone, ID badge, keys, etc.) before leaving the hospital and upon returning home.
- HCW may consider changing their clothes after a shift, either at the hospital or immediately upon arriving home. They may also consider immediately washing their clothing and having dedicated shoes for COVID-19 care that do not enter the home.
- Upon arriving home, HCW may consider bathing immediately.
- HCW should reduce physical contact with family/housemates and use separate utensils, plates, etc., but **not** fully separate unless ill with COVID-19 or protecting vulnerable family/housemates, due to concerns about HCW's mental health.
- HCW may consider a hotel stay or other residence outside of the home setting for the duration of COVID-19 patient care, especially to protect vulnerable family members or housemates, or when ill with COVID-19 if other means of self-isolation are not feasible.

## Public health agency and professional society guidelines on protection of family members at home

Source	Recommendations
<a href="#">ACEP</a> April 16	<ul style="list-style-type: none"> <li>• Prepare a "home decontamination space"</li> </ul> <p><u>Before leaving hospital:</u></p> <ul style="list-style-type: none"> <li>• Sanitize items carried during shift: phone, identification badge, pens, etc.</li> <li>• Change into clean scrubs/clothes. If soiled clothes must come home, store in an easily washed tote bag</li> <li>• During commute, minimize touched surfaces and physically distance from other people</li> </ul> <p><u>After arriving home:</u></p> <ul style="list-style-type: none"> <li>• Immediately go to decontamination space</li> <li>• Sanitize items brought home from the hospital: phone, identification badge, keys, etc.</li> <li>• Remove shoes and clothes. Keep them away from others. Launder immediately or sunbathe beforehand</li> <li>• Shower or bathe, taking shortest pathway and touching minimal surfaces en route (lights, doorknobs, etc.)</li> </ul>
<a href="#">AMA</a> April 8	<ul style="list-style-type: none"> <li>• Thoroughly wash hands immediately after arriving home</li> <li>• Consider changing clothes and showering immediately after arriving home</li> <li>• Use a separate set of utensils, kitchenware, toothbrush, etc., than family/housemates.</li> <li>• Unless the health care worker has a confirmed case, do <b>not</b> completely separate from family/housemates; social and emotional support are important for maintaining health care workers' mental health.</li> </ul>

<a href="#">ACS</a> April 1	<ul style="list-style-type: none"> <li>• Consider changing clothes and showering immediately after arriving home</li> <li>• Sanitize cell phone before/during/after patient contact and/or keep in plastic bag during hospital service</li> <li>• Keep hand sanitizer and disposable gloves for contact with public surfaces, e.g. ATM, vending machines</li> <li>• Consider reducing physical contact with family members</li> <li>• Consider hotel accommodations for time-limited hospital service</li> </ul>
<a href="#">ECDC</a> March 31	<ul style="list-style-type: none"> <li>• During patient care, wear scrubs and special shoes that remain in the hospital</li> <li>• After shift, remove PPE, meticulously wash hands, and, if possible, shower before leaving the hospital</li> <li>• Regularly disinfect electronic devices in hospital, especially if used by many people</li> <li>• At home, health care workers and family/housemates should practice physical distancing</li> <li>• At home, frequently wash hands and clean shared surfaces, especially in car</li> <li>• At home, high-risk family/housemates may consider sleeping in separate room and using separate bathroom</li> </ul>
<a href="#">IDSA</a> April 21	<i>Infection prevention guidelines pending</i>

At present, the Association of Professionals in Infection Control, American Hospital Association, American College of Physicians, American Thoracic Society, and Society for Healthcare Epidemiology in America offer no specific guidelines for family protection.

ACEP–American College of Emergency Physicians

IDSA–Infectious Disease Society of America

AMA–American Medical Association

ECDC–European Centers for Disease Control

ACS–American College of Surgeons

## Evidence reviews on protection of family members at home

Source	Recommendations
<a href="#">CEBM</a> April 20	<ul style="list-style-type: none"> <li>• “We found no evidence regarding self-isolation of asymptomatic healthcare workers from their household.</li> <li>• “In a high-quality review that included social distancing and respiratory viruses in various settings and using various methods, it was concluded that ‘The handful of studies (mostly conducted during the SARS epidemic) do not allow us to reach any firm conclusions regarding social distancing.’”</li> <li>• “There may be some healthcare workers who might consider self-isolation if they work in a particularly high-risk setting or whose family are considered by the NHS to be at ‘increased risk’ or ‘extremely vulnerable’. Of course, heed must be paid to the possible harms of such an approach, such as the potential impact on mental wellbeing, as well as the fact this may not be practically possible depending on individual circumstances.”</li> <li>• “The comparatively low rates of transmission to household members that were reported in previous coronavirus outbreaks should also provide some reassurance.”</li> <li>• “Current evidence does support hand hygiene, facemasks (both at home and work) and adequate PPE as well as potentially efforts to reduce the number and spread of patient contacts at work to end the risk of onward COVID-19 transmission.”</li> </ul>

## Medical center guidance on protection of family members at home

Source	Recommendations
<a href="#">Penn Medicine</a> Not dated	<ul style="list-style-type: none"> <li>• Be selective about the number of items brought to work; only bring home disposable or easy-to-clean items</li> <li>• Consider avoiding wearing ties, long sleeves, watches, jewelry, and items not often washed</li> <li>• Consider carrying essential cards, IDs, etc., in a plastic bag, rather than in a wallet/purse</li> <li>• Minimize touched surfaces on commute and regularly disinfect surfaces, e.g. steering wheel</li> <li>• Upon arriving home, consider cleaning or disposing of all items before entering home or directly after; for example, undress outside home, place clothing in washable bag, and immediately place bag in washer</li> <li>• Consider establishing “zones” in the home to place work items that family/housemates avoid</li> </ul>
<a href="#">UCSF</a> April 6	<ul style="list-style-type: none"> <li>• Provides facilities for showering and changing clothes before returning home from shift</li> <li>• Scrubs are available for COVID-19 care if desired</li> </ul>

Source	Recommendations
<a href="#">Mt. Sinai</a> March 29	<ul style="list-style-type: none"> <li>• Only workers involved in procedures (i.e. with bodily fluids) should change clothes before leaving the hospital</li> <li>• If asymptomatic, the health care worker may interact normally with family/housemates and pets</li> <li>• Encourage family/housemates to engage in regular hand hygiene and cover nose/mouth when sneezing</li> </ul>
<a href="#">MGH</a> March 24	<ul style="list-style-type: none"> <li>• There is no evidence of transmission via clothing when wearing proper PPE or via shoes</li> <li>• Changing clothes before/after shifts is not necessary for infection control</li> </ul>
<a href="#">Cornell</a> March 22	<ul style="list-style-type: none"> <li>• Work with family/housemates to reduce their facial touching; consider encouraging them to wear masks to “train” them to reduce facial touching (not for transmission prevention)</li> <li>• Vigilantly monitor symptoms; treat simple colds as if infected with COVID-19 and self-isolate, if possible</li> </ul>
<a href="#">Nebraska</a> March 21	<ul style="list-style-type: none"> <li>• Scrubs are not required or specially indicated for COVID-19 care</li> <li>• Shoe coverings and head coverings are not recommended PPE</li> <li>• Contaminated clothing should be specially laundered by hospital; if at home, use warm water</li> </ul>

### Medical center guidance relating to temporary support housing

Source	Recommendations
<a href="#">Penn Medicine</a> April 21	<p>For front-line staff who do <b>not</b> have COVID-19:</p> <ul style="list-style-type: none"> <li>• Free housing at a nearby hotel up to 3 days/2 nights; intended for time-limited service</li> <li>• Discounted housing at other nearby hotels</li> <li>• Discounted housing at nearby extended-stay hotel or apartment (physicians/nurses only)</li> </ul>
<a href="#">Beth Israel</a> April 21	<ul style="list-style-type: none"> <li>• Free housing in a hotel for all staff who <b>have</b> COVID-19 or who do <b>not</b> have COVID-19 but have special circumstances at home (e.g. person in house who is elderly, immunocompromised, pregnant, or infant)</li> <li>• Discounted housing for staff who prefer to stay outside the home, <b>regardless</b> of infection status</li> </ul>
<a href="#">Georgetown</a> April 21	<ul style="list-style-type: none"> <li>• Discounted housing in a hotel for staff; relevance of infection status unclear</li> <li>• Intended for being closer to work or protecting vulnerable family/housemates</li> </ul>
<a href="#">Mt. Sinai</a> April 21	<ul style="list-style-type: none"> <li>• Free housing in a hotel up to 25 days or in an apartment for 30–60 days for front-line staff, <b>regardless</b> of infection status (although offerings may vary by status); discounted housing also available</li> </ul>
<a href="#">UCSF</a> April 21	<ul style="list-style-type: none"> <li>• Free housing in a hotel up to 4 days/3 nights for front-line staff, <b>regardless</b> of infection status</li> <li>• Intended for being nearer to work, preference to self-isolate, or symptomatic self-isolation</li> </ul>
<a href="#">Cleveland</a> April 13	<ul style="list-style-type: none"> <li>• Free housing in a hotel up to 7 days for front-line staff, <b>regardless</b> of infection status</li> <li>• However, staff that become ill during their stay are reassigned hotels</li> <li>• Intended for protecting family/housemates</li> </ul>
<a href="#">USC</a> April 1	<ul style="list-style-type: none"> <li>• Free housing in a hotel or apartment for front-line staff, <b>regardless</b> of infection status</li> <li>• intended for self-isolation, protecting family/housemates, or “workers needing a respite”</li> </ul>
<a href="#">GWU</a> March 23	<ul style="list-style-type: none"> <li>• Discounted housing in a hotel for staff, <b>regardless</b> of infection status</li> <li>• Intended for being nearer to work, protecting family/housemates, or self-isolation</li> </ul>

### Definition of terms

**Guideline:** Guidance developed by a professional society or government agency, intended for use at multiple hospitals.

**Policy:** Guidance developed at a hospital for use at that hospital. It may be based on guidelines or on expert opinion.

## **About this report**

A Rapid Guidance Summary is a focused synopsis of recommendations from selected guideline issuers and health care systems, intended to provide guidance to Penn Medicine providers and administrators during times when latest guidance is urgently needed. It is not based on a complete systematic review of the evidence. Please see the CEP web site for further details on the methods for developing these reports.

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