

A large, light blue graphic in the top left corner consisting of a heart shape with a cross inside it, both rendered in a thick, rounded line style.

Care of people with COVID-19 symptoms living in their own home or in residential/nursing care

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The information in this guide was correct at the time of publication. Unless specific changes are requested to be made this guide will be reviewed every six months and only republished if changes have been made.

Contents

Content	Page
Introduction	2
Care planning, local and organisational policy	3
Covid-19 Symptoms	3
Managing Cough	3
Managing Breathlessness	5
Managing Fever	6
Managing Anosmia	6
Managing Delirium	7
Managing Pain	8
Managing Diarrhoea	8
Resources	9

Introduction

The coronavirus global health threat and the national response has resulted in many people with COVID-19 symptoms being supported in their own homes or in a residential care setting by social care workers.

This guide is for adult social care managers to support their teams where they are providing care and support to someone with COVID-19 symptoms in residential care, supported living services or in a person's own home. It provides some practical tips for managing symptoms of COVID-19 based on clinical guidance and can be used to guide workers whilst taking into consideration each person's individual wishes, preferences, health and specific needs. Personal assistants (PAs) and unpaid carers may also find it useful.

The Social Care Institute of Excellence (SCIE) have produced a guide 'Providing care and support at home to people who have had COVID-19 - a quick guide to support home care workers and personal assistants (PAs) to provide care and support to people who have left hospital after having COVID-19' which can be found on their [website](#).

Care planning, local and organisational policy

IMPORTANT for managers and organisations

Please note that this guide provides general information to support a person with COVID-19 symptoms and any direct support provided must be in line with:

- The person's wishes needs and capacity.
- The person's individual care and support plan taking into consideration any other health or support needs.
- Guidance from the person's GP and/or healthcare professionals involved.
- Organisational and local policy such as palliative care for people at the end of their lives and medication administration, including homely remedies. A homely remedy is a non-prescribed medicine used to treat minor ailments which can be purchased over the counter.
- Organisational and local safeguarding policies.

COVID-19 Symptoms

Common symptoms for COVID-19 include a new cough, fever, loss of or change in normal sense of taste or smell, breathlessness, anxiety, delirium and agitation. Some people may also experience other symptoms such as fatigue, muscle aches, diarrhoea and headaches. In older people, symptoms may present differently to that described as typical in younger people. Symptoms can vary in severity. For some people they are mild but for others they can be severe and very distressing. Those with mild symptoms are likely to feel much better in a week but if they get worse, it is important to be able to recognise and know who to contact, for example NHS 111 online or their GP.

Managing cough

COVID-19 Cough Characteristics

The characteristics of a COVID-19 cough are a new continuous cough for more than an hour or several episodes in a 24-hour period. It may sound different to other coughs and may have no mucous or phlegm.

There are several things that may help with the cough:

- **Step 1:** A teaspoon of honey or honey and lemon in warm water can be helpful. Some people find sucking cough drops or hard sweets helpful, if they can do so safely. Avoid sweets with anyone who has any kind of swallowing difficulty, are confused or are not fully alert and awake. For people with diabetes, follow the recommended dietary advice.
- **Step 2:** If honey is not working and the cough is causing distress, simple over-the-counter cough medicine can be used following the dose guidance on the packaging and guidance from the person's GP or pharmacist as required.
- **Step 3:** If cough medicine is not helping and the cough is distressing, contact the person's GP or pharmacist as required for further guidance.

Other advice:

- Encourage the person to avoid lying on their back, if possible, because this makes coughing ineffective.
- If the person smokes, advise them that smoking can make coughing worse and advise others around them not to smoke in their presence.
- Other irritants to avoid where possible include dust, perfumes and other chemicals. The use of steam inhalation or humidifiers can help.

Be aware that older people or those with other health conditions, people who are frail or have a weakened immune system and a reduced ability to cough and clear secretions are more likely to develop severe pneumonia. Pneumonia is swelling (inflammation) of the tissue in one or both lungs and can be caused by coronavirus (COVID-19).

Seek **urgent** medical advice if you are concerned that a person may be showing signs of pneumonia.

Common symptoms of pneumonia include:

- a **cough** - which may be dry or produce thick yellow, green, brown or blood-stained mucus (phlegm)
- **difficulty breathing** - the person's breathing may be rapid and shallow and they may feel breathless, even when resting
- rapid heartbeat
- high temperature
- feeling generally unwell
- sweating and shivering
- loss of appetite
- **chest pain** – which gets worse when breathing or coughing.

Less common symptoms include:

- coughing up blood (haemoptysis)
- headaches
- fatigue
- feeling sick or being sick
- wheezing
- joint and muscle pain
- feeling confused and disorientated, particularly in elderly people.

Taken from: <https://www.nhs.uk/conditions/pneumonia/>

Reducing spread of infection

In order to reduce the spread of any infection, encourage the person to:

- cover their nose and mouth with a disposable tissue when sneezing, coughing, wiping and blowing the nose. Dispose of used tissues promptly into a waste bin (in a person's own home) or clinical waste bin used for infectious or contaminated waste (in a residential home).
- Support the person to clean their hands with soap and water, alcohol hand rub or hand wipes after coughing, sneezing, using tissues, or after contact with respiratory secretions or objects contaminated by these secretions.

Use appropriate PPE if you are in close contact with the person, make sure you wash your hands thoroughly and follow infection control guidance to keep yourself safe.

Breathlessness

Breathlessness is a sensation of shortness of breath or difficulty breathing. It can be distressing and frightening for the person and those caring for them.

Things which may help:

- Try and keep calm yourself and calm the person as anxiety and distress can make breathlessness worse. Relaxation techniques may be useful.
- Encourage calm breathing techniques for the person to breathe in through their nose for several seconds with their mouth closed, then breathe out slowly through pursed lips over 4 to 6 seconds.

If the person is able to move around the following can help:

- Relaxing and dropping the shoulders reduces the 'hunched' posture that comes with anxiety
- Relaxing the jaw
- Sitting upright helps breathing and reduces airway obstruction
- Leaning forward with arms round a chair or knees and the upper body supported may also help.
- Open a window if possible and safe to do so to improve air circulation, making sure the person is not in an uncomfortable draught.
- Some people may be prescribed oxygen and this should be given as directed following all safety guidance. [General information about using oxygen at home](#).
- Support the person to manage their mouth care if their mouth is very dry when breathless. Seek guidance from the person's GP and/or pharmacist. [NHS information about dry mouth care](#)

Medicines can also be prescribed which may help breathlessness.

Pulse oximeters can be used with clinical guidance to help monitor and detect early deterioration of people with COVID-19.

Fever

Fever is when a person's body temperature goes above the normal range of 36–37° Centigrade (98–100° Fahrenheit). It is a common medical sign that something is the matter. As the body temperature goes up, the person may feel cold, until it levels off and stops rising.

Medication:

- Paracetamol is the drug most used for fever. It should be given as directed on the packaging and in line or as prescribed by the person's GP. If the person is unable to swallow tablets, seek advice about alternative administration methods with the person's GP or pharmacist.
- Anti-inflammatory drugs e.g. Ibuprofen may also be suggested or prescribed to help.

Practical things which may help:

- Lower the room temperature
- Encourage the person to wear loose clothing
- Cool the face by using a cool flannel or cloth
- Encourage the person to drink sufficient fluids if possible, e.g. the recommended 6-8 glasses of water a day
- Advise the person to avoid alcohol where possible, as this can increase dehydration
- Cooling fans should not be used as these can spread the COVID-19 infection by dispersing the virus wider.

Anosmia - loss of, or change in, normal sense of taste or smell

People with COVID-19 may lose their normal sense of taste or smell because the virus injures the nerve endings which deal with these sensations. Around 90% of people improve in the first 2-3 weeks, so they do not require specific treatment. About a third recover within 6 months and another third will have recovered at 18 months. Some of those who still have symptoms at 18 months may never get their normal sense of taste or smell back.

- Here are some things that may help. Seek clinical and/or nutritional guidance for people who have specific diets, allergies and/or food intolerances, or swallowing difficulties.
- Encourage the person to keep eating and drinking even if they don't feel like it. It's important to stay hydrated and nourished.
- Try food and drink ingredients which have sharper or stronger smells and taste, e.g. lemon juice, ginger, garlic, herbs and spices, etc. Chutneys, pickles or relishes may help.
- Stronger versions of favourite foods, such as smoked meats or strongly flavoured cheese, may be preferred.
- Encourage good mouth care – brush teeth, keep tongue and mouth clean, keep mouth moist.

People with prolonged symptoms may need referral to the ear, nose and throat specialist. They may benefit from smell training. There are charities which advise people on how to do smell training and access to support groups:

- Fifth Sense
- Abscent

Delirium

Delirium is an acute state of confusion that can happen when someone is ill. It is a sudden change over a few hours or days and tends to vary at different times of day. People may be confused sometimes and then seem their normal selves at other times. People who become delirious may start behaving in ways that are unusual for them – more agitated than normal or feel sleepier and more withdrawn.

If somebody has any of the following, they are more susceptible to developing delirium:

- dementia or suspected dementia
- their hearing or eyesight is affected
- had recent surgery
- a terminal illness
- an infection
- had a stroke
- or head injury.

If someone is showing signs of delirium, it is important to seek urgent medical advice to identify and manage the possible underlying cause or combination of causes.

This can include things like:

- not enough oxygen in the blood stream
- urinary tract infection
- infection (generally)
- chest infection
- dehydration
- liver or kidney problems
- fever
- constipation.

After seeking medical advice, here's some tips that can help to support the person:

- Speak calmly and quietly to the person in short simple sentences.
- Reassure and orientate them, for example: remind them who they are, where they are, who you are, what your role is, what time of day it is.
- Gently ask them what they are worried about.
- Where possible and where it is safe to do so consider involving family, friends and carers to help with this.
- Try to keep things as familiar as possible for the person with delirium – for example, the same person supporting them as far as possible, avoid moving them between rooms, have some familiar belongings around them, etc.
- Make sure there is adequate lighting so they can clearly see their surroundings and avoid shadows which may come across as frightening.
- Observe the person to see if they are in any pain.
- Make sure there's nothing affecting their senses and if the person has glasses and/or hearing aids, that they are using them correctly.
- Use familiar photos and objects to distract the person and provide familiarity.
- Help the person to find the toilet if needed.
- Avoid too much stimulation and having too many people around if possible.
- Keep a low light on at night.
- If they talk about unusual things or ideas, try and change the subject and direct onto other things.
- Offer them drinks and food to maintain hydration and nourishment.
- The person may be prescribed medication to help with any underlying cause.

Pain

People may experience pain due to existing conditions but can also develop pain with COVID-19 as a result of excessive coughing, immobility or headache. The person must be assessed by their GP or a nurse prescriber who can ensure correct treatment is prescribed.

Diarrhoea

Although diarrhoea is not an official symptom which defines COVID-19, it has been reported to occur quite frequently, especially in older people. If diarrhoea is severe or prolonged, it is important to prevent dehydration. Sometimes what appears to be diarrhoea is when a person is severely constipated, so that faecal fluid escapes around the side of the constipated stool. Check when the person last had a normal bowel movement and seek medical advice as required. The person may be prescribed anti-diarrhoea drugs or a homely remedy such as an oral rehydration solution like Dioralyte may help. Care workers must seek guidance from their line manager and follow organisational procedures for homely remedies.

Simple measures include:

- Avoid foods that are high in fibre, such as beans, broccoli, cabbage, cauliflower, fruit and cereals.
- Aim for smaller meals and snack in between meals.
- Keep yourself and others safe from potential infection by making sure you (and others) wash your hands thoroughly and dispose of contaminated materials safely.

Resources

Social Care Institute of Excellence - Providing care and support at home to people who have had COVID-19. A quick guide to support home care workers and personal assistants (PAs) to provide care and support to people who have left hospital after having COVID-19
<https://www.scie.org.uk/care-providers/coronavirus-covid-19/home-care/recovering-at-home>

Association of Palliative Medicine (APM) COVID-19 and Palliative, End of Life and Bereavement Care in Secondary Care
<https://apmonline.org/wp-content/uploads/2020/04/COVID-19-and-Palliative-End-of-Life-and-Bereavement-Care-20-April-2020-2.pdf>

Care Quality Commission, Managing oxygen in care homes
<https://www.cqc.org.uk/guidance-providers/adult-social-care/managing-oxygen-care-homes>

NICE COVID-19 rapid guideline: managing symptoms (including at the end of life) in the community: <https://www.nice.org.uk/guidance/ng163>

NHS Home Oxygen Therapy
<https://www.nhs.uk/conditions/home-oxygen-treatment/>

Coronavirus COVID-19 - Government official site <https://www.gov.uk/coronavirus>

