Introduction

This Technical Briefing Note details the recommended actions for WASH actors in contributing to infection prevention and control (IPC) measures in Quarantine Centres (or sometimes called isolation centres) during the Covid-19 pandemic. Although Oxfam does not carry out medical interventions, it may be appropriate in the current context to partner with a medical organisation, government or public health body to support these facilities to limit human-to-human transmission in such centres, using Oxfam’s core skills of WASH service provision and community engagement alongside a medical partner who would take responsibility for clinical work and medical team management.

Definitions:

Quarantine: Separating and restricting the movement of people exposed (or potentially exposed) to Covid-19 and not necessarily showing symptoms

Isolation: Separating individuals confirmed to be ill with Covid-19 from healthy people around them

Shielding: Separating individuals at higher risk of severe Covid-19 infection from the wider population to minimise their risk of infection

Quarantine Centre: A space designated – usually by a government or national public health body - to separate exposed or potentially exposed individuals for up to 14 days to assess whether they show symptoms of Covid-19 infection. Referred to onwards as ‘Centres’

Prior to supporting within these centres, a thorough risk assessment must be conducted to ensure such spaces do not put people at risk of further harm, including protection risks.

The advice in this technical briefing note assumes that Oxfam is supporting established centres; if asked to support in the construction of centres, further guidance on siting, community acceptance and environmental considerations can be found in the ‘Medical Isolation Facilities’ Technical briefing note.

IPC Measures: Zoning

Regardless of whether Oxfam has constructed the facility or not, WASH teams must check that appropriate zoning has been considered to minimise transmission risk between isolating, recovering and quarantined individuals within the centre.

Centres should have the following spaces clearly designated:

Green zone: Administrative spaces accessed mainly by staff who do not have contact with Covid-19 patients

Amber zone: Quarantine area for those potentially exposed. These areas should have plenty of space, good ventilation, allow for physical distancing, have WASH facilities that are cleaned regularly throughout the day and allow families to stay privately, live with dignity, and minimise protection risks.

Red zone: An area for those who exhibit symptoms. These areas should have plenty of space, good ventilation, allow for physical distancing between patients, maintain strong IPC procedures and PPE requirements for medical staff, and have WASH facilities that are cleaned regularly throughout the day. Such areas may be appropriate for those with mild Covid-19 infections, however more severe cases should be referred to hospital.

Example of Zoning: more designs can be found in the ‘Medical Isolation Facilities’ Technical Briefing Note.

Facilities should be designed so that the flow of people and equipment – whether WASH related (such as maintenance or cleaning staff), medical or patient –
moves from areas of lower risk of contamination to higher risk to reduce transmission risks.

IPC Measures: Hand Hygiene
Centres must be equipped with multiple points for handwashing with soap, particularly at entry/exit points and at latrines. Chlorine solution should not be used for handwashing due to the risk of dermatitis and asthma which may exacerbate Covid-19 transmission. Hand sanitiser may also be used, as long as the alcohol content is above 60% and hands are visibly clean, however soap and water is the preferred method.

IPC Measures: Use of PPE
WASH staff should follow the PPE guidance given in the ‘Protecting Community Facing Staff and Volunteers’ document, however, given the nature of the centres, it is advisable that all WASH staff needing to access the centre wear a cloth face mask in addition to maintaining physical distance and regular handwashing.

Where reusable PPE is worn, areas for donning, doffing and disinfection of these items with 0.5% chlorine solution must be set up.

IPC Measures: Cleaning and Maintenance of WASH infrastructure
Latrines, showers, water points, door and window handles, grab-rails, work surfaces need to be cleaned regularly with a 0.5% chlorine solution. Cleaners should wear PPE as per Oxfam’s ‘PPE Specifications’.

Bedding and items from infected patients should be washed at 60° or above where possible, and then left to soak in 0.05% chlorine solution.

Further guidance on IPC measures can be found here: UNICEF: WASH and Infection Prevention and Control (IPC) Measures in Households and Public spaces

Water supply:
Water supply to centres should be constant and maintain a residual concentration of free chlorine of ≥0.5 mg/L after at least 30 minutes of contact time. In piped systems, chlorine residual should be maintained throughout the distribution system.

Sanitation facilities:
Plan for additional latrines and showers to minimise the numbers of people using each facility. Where an individual is infected with Covid-19, they should have a dedicated own latrine.

Covid-19 has not been shown to survive in the stool, however, those cleaning, emptying or otherwise handling faecal matter should ensure the use of PPE as per Oxfam’s ‘PPE Specifications’ and ensure that these are disinfected regularly.

Medical waste:
Best practices should be followed. Handling of waste associated with quarantine centres should be treated as medical waste, and follow the guidance recommended by WHO.

Community Engagement:
Engaging with families and individuals using the centre and their wider communities is key to building acceptance and to promote positive treatment seeking behaviour. Regular discussions with different groups within the centre and community helps to understand fears, rumours and negative coping mechanisms that may affect the running of the centre. Centres should be designed with an understanding of human emotional needs, and continuously adapted with feedback from users to make them more comfortable and reassuring.

References and Resources

WHO technical guidance pages on IPC: https://www.who.int/infection-prevention/publications/

Oxfam: Medical Isolation Facilities Technical Briefing Note: https://oxfam.box.com/s/khlvb8zl8uiplug1l6hs52p6t8cele9pa