



## Coronavirus (COVID-19) guidance for Roma

ĺ	Version	Date	Changes from previous version
- 1			

This guidance document gives general advice about preventing the spread of COVID-19 and dealing with cases of COVID-19 in the Roma community. It is part of the overall HPSC Guidance for vulnerable groups. It applies for Roma who live in the community often in overcrowded private housing or those in family hubs or hostels.





### **TABLE OF CONTENTS**

Background		3
General measures to	reduce the spread of infection in settings for vulnerable groups	4
1. Raise aware	ness:	5
2. Physical dist	ancing measures:	6
3. Hygiene mea	asures and cleaning regimes:	7
4. Plan		7
How to manage a sy	mptomatic person	8
Transport of a sympt	tomatic person, clinical care or to a self isolation facility	8
Decontamination	of transport vehicle	9
After the test		9
How to manage a sy	mptomatic person who is tested and COVID-19 is not detected	9
How to manage a pe	erson diagnosed with COVID-19 who is well enough to be cared for outside of the hospital setting	10
Environmental clean	ing/disinfection of self-isolation facilities	11
Cleaning of comm	unal areas	11
Laundry		11
Managing rubbish		12
How to manage an o	outbreak of COVID-19 in a congregate or residential setting such as overcrowded housing	12
How to manage a clo	ose contact of a confirmed case of COVID-19	12
How can persons pro	otect themselves	13
Safe use of face cove	erings	13
Further sources of in	formation:	15





#### **BACKGROUND**

There are approximately 5,000 Roma living in Ireland, with Roma families identified in every county in Ireland.1 The largest communities of Roma are estimated to be in Dublin, Louth, Kildare, Wexford, Cork, Kerry, Clare and Donegal. While the majority of Roma in Ireland are from Romania (approx. 80%), mapping from the Roma Needs Assessment also identified Roma from Czech Republic, Slovakia, Hungary and Poland. The Roma community have been recognised as one of the most marginalised and disadvantaged groups in Ireland. Roma in Ireland continue to experience poorer health outcomes, including higher rates of chronic health diseases, extreme poverty, poor housing and unemployment; and the lack of access to mainstream health services. This is further compounded by language barriers and lack of engagement with statutory agencies which is linked to experiences of discrimination, lack of trust in the State and fear of the State.

The COVID-19 pandemic has highlighted a number of significant challenges for Roma, especially those who are most vulnerable. In particular, Roma families who are living in severely overcrowded and unsafe accommodation, those who are unable to access social welfare payments due to the Habitual Residence Condition; and those without access to GP/health services.

COVID-19 is a new illness caused by a new coronavirus (SARS-CoV-2), which is spread mainly through droplets produced by coughing or sneezing, or shouting or singing loudly. Spread is most likely from a person who has symptoms, but can occur in the days before a person develops symptoms, or, in some cases from an infected person who has no symptoms. To infect you, the virus has to get from an infected person's nose or mouth into your eyes, nose or mouth. You could get the virus if you:

come into close contact (<2 metres/6 feet) with someone who has the virus and is coughing or sneezing, or shouting or singing OR,

**touch – with your hands** - surfaces or objects that someone who has the virus has coughed or sneezed on, and then touch your mouth, nose or eyes without having washed or sanitised your hands thoroughly.

COVID-19 can be a mild or severe illness. It can take up to 14 days for symptoms of coronavirus to appear after catching it. Common symptoms include:

- a fever (a high temperature 38 degrees Celsius or above)
- a cough this can be any kind of cough, not just dry
- a shortness of breath or breathing difficulties

loss of, or change to your sense of smell or taste.

Coronavirus (COVID-19) can make anyone seriously ill. But for some people, the risk of complications or severe illness is higher, due to underlying health conditions or age. These people fall into two different risk categories: people at high risk – who need to take extra care to protect themselves, e.g.

people with long-term medical conditions such as chronic heart disease, high blood pressure, diabetes, lung disease (e.g. asthma, COPD, emphysema), chronic kidney disease, liver disease, cancer, cerebrovascular disease (e.g. a stroke)

<sup>&</sup>lt;sup>1</sup> https://www.paveepoint.ie/wp-content/uploads/2015/04/RNA-PDF.pdf www.hpsc.ie





people at very high risk (also called extremely medically vulnerable) – who need to cocoon, e.g. Roma aged 60 years and older – even if fit and well

people with certain types of cancer or having treatment for cancer – see list on HSE website people with conditions or on medication that affect the immune system or make them more vulnerable to infection

people who have had an organ transplant.

Further information on COVID-19 is available on the HSE website at: https://www2.hse.ie/conditions/coronavirus/coronavirus.html

#### **Government measures**

Government measures in force <u>from 20<sup>th</sup>July</u> 2020 continue to remind people to avoid non essential travel to other countries. If you have to go abroad for essential reasons, a list of countries (called the green list) that are safer to visit will be available shortly. This list will be reviewed every 2 weeks.

Anyone travelling to Ireland from a green list country will not have to <u>restrict their movements</u>. For people living in Ireland, the advice is to avoid all non-essential travel overseas until further notice.

Family and friends arriving from a green list country should be treated as visitors. This means you should follow <u>social</u> <u>distancing</u> and other public health guidelines. You should not interact with them in the same way as the people in your household that you live with every day.

Within Ireland the Government has removed the restrictions to travel within Ireland. The measures include advising the general public to continue to follow advice to protect our community. The Health Service Executive (HSE) has produced Stay Safe Guidelines, including a booklet and posters with advice for various situations. In particular people are asked to only have gatherings that follow public health advice such as up 50 people indoors or 200 people outdoors. In households this is limited to a maximum of 10 people and a maximum of 4 family groups.

#### **ARRIVING IN IRELAND FROM ANOTHER COUNTRY**

By law, if you arrive in Ireland from any other country you will need to fill in a form called the Covid-19 Passenger Locator Form. You'll also be asked to restrict your movements for 14 days.

COVID-19 PASSENGER LOCATOR FORM

Covid-19 Passenger Locator Form (PDF, 549 KB, 2 pages).

This form can be filled out before you travel. If you need help, let border personnel know when you arrive in Ireland.

#### **RESTRICTED MOVEMENTS**

You are also asked to <u>restrict your movements</u> for 14 days if you arrive in Ireland from any overseas country. This includes Irish citizens coming home.

Restricting your movements means staying indoors and avoiding contact with other people and work and social situations as much as possible.

www.hpsc.ie





Further advice for people who have <u>recently returned from abroad</u> is available from the HSE.

#### GENERAL MEASURES TO REDUCE THE SPREAD OF INFECTION IN SETTINGS FOR VULNERABLE GROUPS

Current information suggests that COVID-19 can spread easily between people and could be spread from an infected person even before they develop any symptoms. For these reasons we suggest greater attention to cleaning and general hygiene and social distancing (see latest advice at www.gov.ie) as well as greater support to those with chronic illness/ disability.

The following are some general recommendations to reduce the spread of infection in a facility:

#### 1. RAISE AWARENESS:

- Promote good hand and respiratory hygiene as described below and distribute and display relevant posters and information leaflets in residents' own language throughout the facility.
- Advise persons who are *at high or very high risk* of severe illness from COVID-19 infection including those over 60 years, to *stringently practice* hand hygiene, respiratory etiquette, physical distancing measures and wearing a face mask or face covering according to the <u>guidance</u>
- Advise on the symptoms of COVID-19 infection and ensure people/staff understand what to do if
  they have symptoms—in terms of (a) taking care of self (access to testing/healthcare) (b) protecting
  others (self-isolation this means staying indoors and completely avoiding contact with other
  people including those in your own household)
- Advise how to manage and reduce the risk in day to day activities (e.g. <u>shopping safely</u>, <u>getting prescriptions</u>) and to exercise a common sense approach to interaction with others e.g. avoid shaking hands; avoid making close contact if possible, especially with those who are coughing and sneezing; reduce cash handling
- Advise what coronavirus means for <u>travelling</u> and for gatherings (e.g. <u>funerals</u>, <u>visiting in hospitals</u>, visiting others or having visitors at home)
- Ensure staff who are ill know not to attend work and to follow HSE guidance.
- Advise residents to let staff know if they develop any of the symptoms described above and not to attend crowded areas if they are ill.
- National Roma helpline up and running since 27/3/20 by Cairde supported by HSE SI
- Translated materials in Romanian, Czech and Slovak available https://www.hse.ie/eng/services/news/newsfeatures/covid19-updates/partner-resources/covid-19-translated-resource/
- HSE Social Inclusion website resource page for Roma created which includes additional specific translations and communication tools amongst a host of other relevant detail. Roma COVID 19 resource sharing page.





 HSE Information video on COVID 19 in Romanian for Roma https://www.youtube.com/watch?v=7Yh1aeUvaVk&feature=youtu.be

#### Hand hygiene:

Wash your hands regularly. This is the most important thing you can do. Wash your hands with soap and hot running water for at least 20 seconds when hands are visibly dirty. If your hands are not visibly dirty, wash them with soap and hot water for at least 20 seconds or use an alcohol-based (at least 60%) hand sanitiser if water is not available. Services to support these measures will be needed.

#### You should wash your hands:

after coughing or sneezing

before, during and after you prepare food, including baby milk feeds

before feeding a baby or young child

after changing nappies

after wiping children's noses and faces

before eating

after using the toilet

before and after caring for sick individuals

when hands are dirty

after handling animals or animal waste

See HSE hand hygiene guidance at <a href="https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html">https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html</a>

#### Respiratory hygiene:

Cover your mouth and nose with a clean tissue when you cough and sneeze, and then promptly dispose of the tissue in a bin and wash your hands with soap and water or use an alcohol-based hand sanitiser. If you don't have a tissue, cough or sneeze into the bend of your flexed elbow instead, not into your hands. Posters on preventing spread of infection are available on the HPSC website.

#### 2. PHYSICAL DISTANCING MEASURES:

- Advise staff and service users to keep a distance of at least one meter, where possible 2 metres (6.5 feet) from others.
- Advise staff and service users to avoid making close contact with people (i.e. do not shake hands).
- Implement a queue management system with correct distance marking using brightly coloured tape.





- Restrict or stagger the use of canteen or other communal facilities (bringing food/drinks to people).
- Remove tables/chairs from the canteen or other communal facilities to limit number of people per table and preserve physical distancing.
- Restrict visitors to the facility.

#### 3. HYGIENE MEASURES AND CLEANING REGIMES:

It is thought that the COVID-19 coronavirus can stay alive for hours to days on some surfaces – so take a pro-active approach in doing more cleaning of visibly dirty surfaces, followed by disinfection.

Clean and disinfect regularly touched objects and surfaces using a <u>household cleaning</u> <u>product/bleach/ Milton</u> (follow label instructions)

- a. especially all hard surfaces in common areas and locations that are touched frequently by people throughout the day, such as door handles, grab rails/hand rails in corridors/stairwells, plastic-coated or laminated worktops, access touchpads, telephones/keyboards in offices, and toilets/taps/sanitary fittings, wear rubber gloves when cleaning surfaces, wash the gloves while still wearing them, then wash your hands after you take them off
- b. make sure you have good ventilation (windows open) while using the cleaning/ disinfecting product
- c. make sure that you have enough bins available for easy disposal of tissues (preferably covered bins, lined with a bin bag, replace when three-quarters full).

#### 4. PLAN

- Have a plan for dealing with persons who become ill with symptoms of COVID-19 including a space for isolating them from other people and seeking medical advice (e.g. phone a GP/ Emergency Department for clinical advice and Public Health Department for public health advice).
- Have a plan to assist extremely medical vulnerable persons to cocoon including appropriate facilities and ongoing support. A list of those considered extremely medically vulnerable can be found <a href="here">here</a>.
- Capuchin, via the helpline, are assisting families with essential needs such as food, medicine, baby supplies.
- Have a plan for dealing with persons who are close contacts of a confirmed case of COVID-19.
- Have a plan for how the setting will manage core services (e.g. accommodation, food, meals, laundry, cleaning, showers, toilets) in the event of someone becoming ill with COVID-19.





#### HOW TO MANAGE A SYMPTOMATIC PERSON

If they **feel unwell with symptoms of COVID-19** (e.g. cough, shortness of breath, difficulty breathing, high temperature) then they should:

- Isolate themselves (i.e. stay indoors and completely avoiding contact with other people or at least 2 metres distance away from them) preferably in a single occupancy room with own bathroom
- If they are at a facility they should contact the centre manager or nurse and tell them their symptoms. A translator should be arranged if required.
- They should be advised to call a GP or the ROMA helpline to seek medical advice and arrange testing as they are in a priority group for testing.
- Roma may also be tested through Capuchin /Safetynet support (mobile health screening unit or through Public health as part of investigation. (PPSN number is not essential for COVID test).
- If it is an emergency please call 112 or 999 and tell the ambulance the person has symptoms of COVID-19.
- All Emergency Departments have been contacted with detail of translated materials and details of interpreters.
- HSE call centres have interpreter list and script has been changed to reflect same.
- If an individual is unable to self-isolate at home arrangements can be made for them through their GP or local Social Inclusion/Public Health. A special facility for Self Isolation suitable for Roma Families has been set up in Dublin through local Social Inclusion (<a href="https://homeless.nrpf@hse.ie">homeless.nrpf@hse.ie</a>)
- They should remain in isolation until the test results are back.

#### TRANSPORT OF A SYMPTOMATIC PERSON, CLINICAL CARE OR TO A SELF ISOLATION FACILITY

- If it is an EMERGENCY, and the person is acutely unwell, please call 112 or 999 to arrange an ambulance for transport to hospital for clinical assessment and care tell the call operator that the person has symptoms of COVID-19 so the ambulance team can be prepared
- If WELL, the symptomatic individual should travel to the testing centre by themselves for their appointment. If this isn't possible because the person doesn't have their own transport, the person can let the testing centre know and transport can be arranged by either a mobile team (SafetyNet in Dublin and the East) or through the National Ambulance Service (NAS).
- The symptomatic individual should wear a face mask for transport if tolerated and should engage in regular hand washing or cleaning with alcohol-based hand sanitiser and appropriate respiratory etiquette.
- The symptomatic individual should maintain a distance of at least 1 metre and where possible 2 metres throughout transport.





- If the person is unable to tolerate a face mask, the driver should wear one if available.
- If possible use a vehicle where the drivers compartment is separated from the symptomatic individual e.g. by perspex sheet
- If possible, windows should be kept open to ensure adequate ventilation of the vehicle.

#### **DECONTAMINATION OF TRANSPORT VEHICLE**

- Gloves and plastic apron should be worn for cleaning and decontamination, if available.
- Clean and disinfect the environment and furniture after use with a household detergent containing bleach.
- Products with these specifications are available in different formats including wipes.
- Pay special attention to frequently touched sites e.g. door handles and to horizontal surfaces.
- Remove gloves and plastic aprons and place in a waste bag. Wash hands thoroughly after removal.
- Waste should be disposed with double plastic bags and bag sealed for disposal.
- Maintain open window if possible.

#### **AFTER THE TEST**

- If the test result is NOT DETECTED, the person will get a text message to say so
- If the test result is POSITIVE for COVID-19, the person will be contacted by the HSE to inform them of the result and to proceed with **CONTACT TRACING**. This will involve:
  - asking the person about people they have been in contact with since, and immediately before they became unwell
  - this information is needed so that close contacts can also be followed up to check if they could also have COVID-19 coronavirus, and to organise COVID-19 testing for them
  - close contacts will be asked to <u>restrict their movements</u> (quarantine) until their test results are known – in case they also have coronavirus
  - o a person's contacts will NOT be told who the person is that now has COVID-19 they will only be told that they have been in contact with a suspected or confirmed case of COVID-19. Personal details (name etc) of the case will not be shared by the HSE with any contacts
  - o Roma can self-identify their ethnicity when contacted by the HSE Contact Tracing Team.
- The person with COVID-19 will need to continue **self-isolation for 14 days** from when symptoms first started.





- Symptomatic persons who are tested for COVID-19 but where the virus is not detected should continue self-isolation up until 48 hours after their symptoms have resolved. This is to reduce the spread of infection because they may have another viral illness.
- Their close contacts can stop restricting their movements, and follow current government advice, straight away.

## How to manage a person diagnosed with COVID-19 who is well enough to be cared for outside of the hospital setting

When an individual has been diagnosed with COVID-19 and their symptoms are mild, their doctor may agree to manage them in the community. This means they should self-isolate for **14 days** from symptom onset. <u>Self-isolation</u> means avoiding contact with other people, including those in the same accommodation/ household. There are a number of important instructions to follow in this case to limit the spread of infection to others:

- In general, if single occupancy rooms are available they should be used. If this is not feasible, multiple patients with laboratory confirmed COVID-19 can be cohorted or grouped into the same room or unit of accommodation.
- The person with COVID-19 should be advised to stay in their room as much as possible and avoid contact with others until they have had no temperature for five days AND it's been 14 days since they first developed symptoms.
- Their symptoms should be checked regularly by telephone. If they become more unwell their GP should be contacted by phone. If it is an emergency, an ambulance should be called and told of their COVID-19 diagnosis.
- If they have to go into the same room with other people they should try to be in the space for as short at time as possible, wear a face mask, keep at least a metre (3 ft) away from them and should clean or use hand sanitiser on their hands regularly.
- If they can, they should use a toilet and bathroom that no one else uses. If this is not possible, the toilet and bathroom should be cleaned with bleach-containing household detergent after each time they use it (focusing on door handles, sanitary ware etc).
- They should clean or use hand sanitiser on their hands before entering, before they leave the room and after using the toilet.
- All the surfaces they have touched should be cleaned and disinfected.
- They should be advised to clean their hands regularly with soap and water or with an alcohol-based (at least 60%) hand sanitiser and follow respiratory hygiene practices as outlined previously.
- They should not share food, dishes, drinking glasses, cups, knives, forks and spoons, towels, bedding or other items with other people in the facility until they have been washed.





- The items should be washed in a dishwasher if one is available or with washing up liquid and hot water. Rubber gloves should be worn to wash the items.
- They should not share mobile phones, tablets, computers, games consoles or remote controls with others without them being first cleaned/wiped down with a disinfectant wipe.
- Try to identify a primary/ main carer within the family for the person who is ill, so that other family/household members can reduce their physical contact with that person.

#### **ENVIRONMENTAL CLEANING/DISINFECTION OF SELF-ISOLATION FACILITIES**

- All surfaces that the person has come into contact with must be cleaned.
- The person assigned to clean the room should wear Personal Protective Equipment (PPE) gloves (disposable single use nitrile or household gloves) and a disposable apron (if one is available) and then physically clean the environment and furniture using a household detergent solution followed by a disinfectant or combined household detergent and disinfectant, for example one that contains a hypochlorite (bleach solution)
- Products with these specifications are available in different formats including wipes.
- No special cleaning of walls or floors is required
- Pay special attention to frequently touched flat surfaces, backs of chairs, couches, door handles or any surfaces that the affected person may have touched.
- Discard waste including used tissues and disposable cleaning cloths into a healthcare waste bag. If
  one is not available, a normal waste bag can be used, placed into a second bag (when threequarters full) and tied.
- Remove the disposable plastic apron (if worn) and gloves and discard into a waste bag. Wash hands thoroughly after removal of gloves.
- Once this process has been completed and all surfaces are dry the room can be put back into use.

If a person with COVID-19 leaves the room where they were isolated – the room should not be used for one hour and the door to the room should remain shut.

#### **CLEANING OF COMMUNAL AREAS**

If a person with COVID-19 spent time in a communal area then these areas should be cleaned with household detergent followed by a disinfectant (as outlined above) as soon as is practicably possible. Pay special attention to frequently touched sites including door handles, backs of chairs, taps of washbasins, toilet handles. Once cleaning and disinfection have been completed and all surfaces are completely dry, the area can be put back into use. No special cleaning of walls or floors is required.

#### **L**AUNDRY





- Laundry should be washed at the highest temperature that the material can stand (preferably 60C).
- Items can be tumble-dried and ironed using a hot setting/ steam iron if required.
- Household/rubber gloves can be worn when handling dirty laundry and items should be held away from your clothing. The gloves can be washed prior to removal and dried for reuse. Hands should be washed thoroughly with soap and water after removing the gloves
- If gloves are not available, hands should be washed thoroughly after handling laundry.
- If laundry facilities are not available, close the laundry in a plastic bag for 72 hours (3 days) after use prior to sending to laundrette for washing.

#### MANAGING RUBBISH

- All personal waste including used tissues and all cleaning waste should be placed in a plastic rubbish bag.
- The bag should be tied when it is three-quarters full and then place it into a second bin bag and tied.
- Once the bag has been tied securely it should be left somewhere safe for three days before collection by the waste company.

# How to manage an outbreak of **COVID-19** in a congregate or residential setting such as overcrowded housing

An outbreak of COVID-19 is defined as two or more cases of confirmed COVID-19 in the same residential setting.

All outbreaks of COVID-19 must be reported to the regional Medical Officer of Health (MOH) at the Department of Public Health at the earliest opportunity. An outbreak control team, led by Public Health is to be set up where clusters are detected.

For further guidance on how to manage an outbreak please see <u>Preliminary Coronavirus Disease (COVID-19) Infection Prevention and Control Guidance including Outbreak Control in Residential Care Facilities (RCF) and Similar Units.</u>

An outbreak of COVID-19 in a vulnerable groups congregate setting can be declared over when there have been no new cases of infection (resident or staff) which meet the case definition for a period of 28 days (two incubation periods).





A close contact of a case of COVID-19 is someone who has had direct contact with them for >15 min and < 2 meters away from them. Examples of this are household contacts or people who share same sleeping space.

If a person has been identified as a close contact of a confirmed case of COVID-19, a Public Health doctor or HSE Social Inclusion Specialist will advise them to <u>restrict their movements for 14 days</u> and will actively monitor them for symptoms.

#### This means:

- They should restrict their movements and stay in the facility as much as possible.
- They should not have visitors.
- They should avoid social gatherings, group events and crowded settings.
- They should not go to work.
- They should not use public transport.
- They should avoid contact with the elderly, those with chronic health problems and pregnant women.

#### HOW CAN PERSONS PROTECT THEMSELVES

There are things EVERYONE can do to protect themselves, their families and communities from COVID-19.

- Avoid touching your eyes, nose and mouth; respiratory viruses need access to these body sites
  in order to cause infection.
- Clean your hands regularly using an alcohol-based (at least 60%) hand rub (if hands are not visibly soiled) or by washing with soap and water.
- Keep your distance when possible from those who are coughing, sneezing and/or have a fever by leaving a distance of at least 1 metre (3 feet), preferably 2 meters where possible, between yourself and others.
- Avoid making close contact with people (i.e. do not shake hands).
- Observe respiratory hygiene and cough etiquette; for example, when coughing and sneezing, cover your mouth and nose with a tissue. Discard the tissue immediately into a closed bin and clean your hands with alcohol-based hand rub or soap and water.
- If you do not have a tissue cough into your upper arm or the crook of your elbow -do not cough into your hand.
- Restrict visitors to all homes
- Masks should be worn when staying 2 metres apart from people is difficult for example, in shops, shopping centres or public transport





The COVID-19 virus is spread mainly through droplets produced by coughing, sneezing or shouting/singing loudly, particularly in close (less than 2 metres/6 feet) contact. As COVID-19 can be spread by infected people who don't have symptoms and don't know that they have the virus, wearing cloth face coverings which cover the mouth and nose may help prevent people from unknowingly spreading COVID-19 to others. This is most important in close or confined settings or in situations where it is difficult to practise 2 metres (6 feet) physical distancing (social distancing), for example, in shops or on busy public transport.

#### It is therefore recommended that:

- where possible, when visiting persons on halting sites or in houses, meet or socialise outdoors, where it is easier to maintain 2 metres distance from each other
- those entering or visiting Traveller homes should wear a cloth face mask if they are going to be in close contact (less than 2 metres) for more than 15 minutes in an enclosed indoor space those visiting the homes of Travellers who are cocooning or are at more risk from COVID-19 because they are over 60 or medically vulnerable should wear a cloth face mask during the visit
- if wearing a cloth face covering, you should still do the other important things necessary to prevent the spread of the virus, such as frequent hand-washing, good cough hygiene etc.

A cloth face covering should cover the nose and go under the chin - and

- fit snugly but comfortably against the side of the face and on the nose
- be secured with ties or ear loops
- include at least 2 layers of fabric (cotton or silk)
- allow for breathing without restriction.

The HSE has advice on making cloth face coverings at <u>How to make one</u> on the HSE website.

#### Do:

- ✓ wash hands before and after using the mask/face covering.
- cover your mouth and nose with it, and make sure that it fits comfortably and securely with no gaps between your cloth face covering
- ✓ tie it securely
- carry unused disposable masks or your clean cloth face covering in a sealable clean waterproof bag (for example, a ziplock bag)
- ✓ carry a second similar type bag to put used cloth face coverings in
- ✓ remove it from behind or using the loops do not touch the front of the mask
- ✓ do not touch your eyes, nose and mouth while removing the mask
- ✓ clean your hands properly after removing the mask (with soap and water or hand sanitiser)
- ✓ put disposable masks in a bin straight away





✓ put a reusable cloth mask back in the ziplock bag and wash it in a hot wash over 60 degrees with detergent when you get home; you don't need to sterilise it

#### Do NOT:

- touch a mask or face covering while wearing it if you do, clean your hands properly
- do not use a wet or soiled face mask or covering
- do not share your mask or face covering with others
- do not lower your mask to speak, eat or drink, and smoke or vape if you need to uncover your nose or mouth take the face covering off and put it in the bag for used face coverings
- do not discard face coverings in public places if you don't plan to wash and reuse it, dispose of it in a bin.

#### **FURTHER SOURCES OF INFORMATION:**

Further information on COVID-19 on the HSE website at: https://www2.hse.ie/conditions/coronavirus/coronavirus.html

and the HPSC website at: https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/

https://www2.hse.ie/conditions/coronavirus-and-pregnancy.html

DSGBV COVID 19 Sharing Resources http://www.drugs.ie/resources/covid/

Roma COVID 19 resource sharing page

https://www.paveepoint.ie/wp-content/uploads/2015/04/RNA-PDF.pdf