

## **Appendix 19: Home Isolation and Quarantine**

### **Isolation**

A patient may require home isolation either because they are considered to be only mildly ill and therefore do not need admitting to hospital or because they have recovered sufficiently in hospital to be discharged but cannot yet be regarded as non-infectious. However, home isolation should only take place if the following are available:

- separate bedroom and bathroom;
- a competent carer trained in preventing SARS transmission or twice-daily contact by a community nurse, trained in preventing SARS transmission (initially this could be by telephone followed by home visit if necessary); and
- a telephone

### **Quarantine**

A person requiring quarantine would normally be placed in quarantine in their own home. The only criteria that needs to be fulfilled is that there should be access to a telephone (mobile or landline) in the home. (If someone does not have a phone consideration should be given to supplying them with a mobile for 10 days – this is likely to be cheaper than having to admit them to hospital.)

In addition to the above, whilst most people either in isolation or quarantine will be able to get friends/family to undertake tasks such as shopping, there will, for various reasons, be those who cannot arrange such support. Community Trusts should therefore, at level 0, develop plans to provide support in helping people find a solution to these problems if they arise. These might include enlisting the help of voluntary organisations, establishing if local supermarkets will deliver from telephone orders and using staff such as home helps.

Community Trusts should also include in these plans how they would provide training to relatives of patients in isolation who are going to act as their carers.