

## Commentary Article

## The new norm in the management of COVID-19 positives: Home-based care

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### Abstract

**Background:** The Coronavirus disease (COVID-19) has disrupted health systems globally and locally. The increasing number of COVID-19 positives has overwhelmed healthcare facilities and health workers. Home-based care (HBC) is a new norm in the management of COVID-19 positives. We aimed to give insight into the HBC of COVID-19 positives in Nigeria.

**Methods:** We conducted a descriptive review of the existing literature and summarized the authors' opinions regarding HBC in Nigeria.

**Results:** HBC has increasingly gained recognition for the management of COVID-19 positives. The HBC of COVID-19 positives provides the opportunity for patient management under an atmosphere of emotional, physical, and spiritual fulfillment as required for quick recovery. Guidelines have been developed for HBC of COVID-19 positives; however, negligence to these measures has been noted.

**Conclusion:** To ensure compliance and harness HBC's benefits, community leaders, religious organizations, civil-based organizations, and opinion leaders should be actively involved in HBC activities. Also, enforcement authorities such as the Civil Defence Corps could help to improve adherence to HBC restrictions.

**Keywords:** COVID-19; Home-based care, COVID-19 positives, Management of COVID-19 positives, Nigeria.

### Background

The Coronavirus disease outbreak 2019 (COVID-19) has signaled a disruption in health systems across the globe [1,2]. The increasing number of COVID-19-infected persons have placed great pressure on the health system with resulting exhaustion of available health facilities, non-admittance of new COVID-19 positives, and increased workload for health workers (HW) [1,3]. Therefore, it becomes necessary to explore other options that assure adequate patient management and reduce the burden placed on the health system. This, therefore, justifies the evolution of home-based care (HBC) of positives during the COVID-19 pandemic.

The HBC has been defined as any form of care provided to ill individuals in their homes while drawing on the sound and evidence-based recommendations and support from HW [4,5]. Contrary to the management at isolation centers, HBC of COVID-19 positives provides the opportunity for patient management under an atmosphere of emotional, physical, and spiritual fulfillment as required for quick recovery [3]. As of 1st

November 2020, COVID-19 cases have risen to 46,156,540 globally, with Nigeria accounting for 62,853 [6]. The pre-existing weakness of Nigeria's health system provides substantial evidence to prove that the country's existing health facilities are insufficient to serve these ones [1]. Therefore, in line with the World Health Organization recommendations, the Nigeria Center for Disease Control (NCDC) has issued an advisory for the management of severe COVID-19 positives in treatment centers [5,7]. On the other hand, mildly symptomatic or asymptomatic COVID-19 positives are to be placed on HBC. The HBC of COVID-19 positives is not a venture which could be haphazardly coordinated or poorly implemented [7]. For this cause, HBC guidelines are required to be developed by each of the 36 states in Nigeria as well as the Federal Capital Territory. The development of these local guidelines considers the peculiarities of each State and the adaptability of HBC in each setting, a feat that may not be possible on a general platform.

The decision on home isolation and care of COVID-19 positives critically depends on the results obtained from the assessment of the following factors, namely; the clinical condition of each COVID-19 positive, the availability of HBC personnel to monitor the clinical progression of the COVID-19 positive in his/her home, and an assessment of the feasibility of

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home care in the proposed home setting where the COVID-19 positive is to be managed. After that, subsequent visits are made by HWs, including community HWs, to these sites to ascertain the compliance of COVID-19 positives and relatives to homecare restrictions [7,8]. These include the isolation of patients into single ventilated rooms where possible or a portion of a room with a minimum of two meters from other persons. Infection prevention and control (IPC) materials such as face masks and hand gloves are used and discarded after each use. Wastes generated by the COVID-19 patients should be handled as contaminated materials, which should be properly disposed of. In addition, visitors are not expected to enter such rooms, and patients are not expected to be seen in public places as a strategy to forestall onward transmission of COVID-19 [7].

Despite restrictive measures that have been put in place to reduce the risk for onward familial transmission of COVID-19, anecdotal evidence has reported non-adherence to these directives among COVID-19 patients on HBC. Such disregard of recommended guidelines compromises the HBC's effectiveness in breaking the epidemic chain of COVID-19 [7].

## Conclusion

The HBC strategy offers a promising approach to the effective management of COVID-19 positives from the home settings. To maximize the potential benefits presented by the HBC strategy for COVID-19 positives, the services of enforcement authorities such as the Civil Defence Corps could help improve adherence to HBC restrictions. Also, community leaders, religious organizations, civil based organizations, and opinion leaders could both serve as authorities for maintaining COVID-19 guidelines and as focal persons in case of non-adherence. Besides, the roles of community HWs should clearly include strategies to ensure accurate reporting of HBC activities to present a true reflection of the COVID-19 infection in communities. Furthermore, the development of HBC guidelines should be hastened in states that are lacking to assess the HBC strategy's effectiveness on a national level.

## Abbreviation

COVID-19: Coronavirus Disease; HW: Health Workers; HBC: Home-Based Care; NCDC: Nigeria Centre for Disease Control; IPC: Infection Prevention and Control

## Declaration

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## Availability of data and materials

Data will be available by ileolasteve@yahoo.co.uk

## Authors' contributions

Olayinka S. Ilesanmi (OSI), Abolanle A. Oguntoye (AAO), and Aanuoluwapo A. Afolabi (AAA) are the principal investigators of this manuscript. All authors have equally participated in the study concept, design, writing, reviewing, editing, and approving the manuscript in its final form. All authors have read and approved the final manuscript.

## Ethics approval and consent to participate

We conducted the research following the Declaration of Helsinki. However, Commentary Articles need no ethics committee approval.

## Consent for publication

Not applicable

## Competing interest

The author declares that he has no competing interests.

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