

# Health and disability services at Alert Level 3

23 April 2020

This information sheet has details of health and disability services at Alert Level 3. The breadth of the health system means it is a guide only. Certain providers will be able to provide more service offerings, for example, contactless, while others may not. At all alert levels, infection prevention and control principles must be adhered to across the system. There must also be physical distancing, unless it would be impossible to deliver health and disability services without it. In such cases, mitigating steps must be taken where appropriate. Testing for COVID-19 is done at community-based assessment centres (CBACs), designated practices, and general practice where appropriate to do so.

## Hospital

It is important to note that the Government's COVID-19 alert levels and the National Hospital Response Framework alert levels serve different purposes. The Government's COVID-19 alert levels are being implemented as a response to help break the chain of transmission across all New Zealanders. It is appropriate that district health boards (DHBs) continue to operate services as per the National Hospital Response Framework. This should enable DHBs to continue to deliver as much clinical care and surgery as possible, while preparing for the next level of readiness.

The National Hospital Response Framework sets out the matters that must be considered when making decisions to defer non-urgent treatment or to change service models to online/telephone. Decisions must consider equity and the clinical risk associated with delay or changes to treatment and take steps to mitigate harm or deterioration, for example, regularly reviewing the waiting list for planned care to assure that risks remain manageable for patients.

Hospitals will remain open for the acute and emergency health needs of the population at all levels. Planned care, including elective surgery and radiology, will be provided in order of clinical priority. Depending on the demand for hospital services (including as a result of both COVID-19 and other non-COVID conditions and needs), some non-urgent services or treatment may be deferred in order to manage pressures. Outpatient appointments will continue dependant on demand but should be managed wherever possible via online/telephone/contactless methods.

The National Hospital and Clinic Visitors Policy describes changes to visiting arrangements for DHB hospitals and clinics that will come into effect for each level of the National Hospital Response Framework. These changes are necessary in order to protect the safety of patients, visitors and staff. The policy states that visitors with no suspicion of COVID-19 will be able to enter. In high-risk hospital areas (ED/ICU/NICU/SCBU/Maternity (Antenatal Inpatient and Postnatal ward)/Aged Care or any ward with COVID-19 positive patients), the policy is only one visitor per patient per day, and only one visit per day. In other hospital areas, the patient may have more than one visitor per day, but only one visitor at a time, and each visitor can only visit once per day at Hospital Response Level Orange; two visitors at a time at Hospital Response Level Yellow and Green. Discretion may be applied on a case by case basis.

Formal visiting hours are to be recognised, unless by prior arrangement with the ward. When visiting relatives in hospitals it is important to follow Alert Level 3 precautions such as ensuring hand hygiene, sneezing/coughing into tissue/elbow, and physical distancing of 2 metres. Inpatient services must record visitors to ensure contact tracing can be conducted if necessary. Expectant mothers in the birthing suite will be allowed one support partner, from their extended bubble.

## Primary and community health services

## General Practice

General practices are open at Alert Level 3. Appointments will be conducted online/by telephone where possible, with face-to-face consultations available if required. Essential primary care continues – this includes the assessment and treatment of urgent issues, the management of long-term conditions and routine health needs (including mental health consults, prescription of contraception and other medication, treatment of common illnesses), and the referral of patients to secondary/tertiary care according to clinical need and status

of hospital sector. Essential preventative care will continue eg, influenza vaccinations and primary care-administered childhood immunisations. Cervical and breast screening programmes will gradually resume at Level 3, but bowel screening will not resume at this stage.

## Community Health Services

Pharmacies remain open. Pharmacies will use telehealth for medicine management where possible and may deliver medications for vulnerable groups.

Midwifery appointments will be provided through variety of methods which include face-to-face and virtual appointments, where appropriate. High-risk groups continue to receive scheduled face-to-face appointments. Antenatal and newborn screening programmes will continue.

All non-essential and elective care dentistry will remain suspended. Face-to-face appointments for urgent/emergency care may be provided so long as dental professionals can take appropriate measures to manage public health risks. Aerosol treatment will be avoided where possible (eg, hand instrumentation only) and precautions taken as per **guidelines**.

Community allied health professions (eg, physiotherapy, podiatry, optometry) and Well Child Tamariki Ora will continue to use virtual appointments where possible. Face-to-face appointments may be provided for urgent cases so long as professionals can take appropriate measures to manage public health risks.

## Disability and aged care services

### Disability Residential Care

Residential care facilities operate within level 3 restrictions on entry/exit so there are essential (emergency) moves only and strict visitor policies. They ensure infection prevention and control guidance is adhered to, isolation areas are maintained, and mental health and wellbeing is supported. Staff movement is minimised between homes and activities are reduced to those that maintain physical distancing.

**Disability residential care visiting policy:** Controlled visits with agreed and named family and whānau and close friends are allowed. This is an important mechanism to ensure people's wellbeing and safety and will be managed by the provider. Visitors with known COVID-19 contact or symptoms will not be granted access. All essential visitors, such as essential carers and tradespeople, must follow Level 3 precautions. A maximum of one visitor at any one time may visit the disabled person in their home. All visitors are to be recorded to aid with contact tracing. No non-essential visitors are allowed at Level 3.

### Aged Residential Care

Aged residential care facilities operate within level 3 restrictions on entry/exit so there are essential (emergency) moves only and strict visitor policies. They ensure /infection prevention and control is adhered to, isolation areas are maintained, and mental health and wellbeing is supported. In aged residential care, planned respite services are suspended, while urgent respite care is provided. Options are being developed to further reduce the risk of staff members introducing COVID-19 into aged care settings and tightening up measures to protect residents, staff and families where there is infection. Measures include daily staff health checks and alternate accommodation options for staff.

**Aged residential care visitor policy:** Family visits only for palliative care residents – on a case-by-case basis, subject to public health direction and provider assessment. There will be no general family visits.

## Home-based support

Home-based essential personal care services are provided as normal (eg, toileting, washing, feeding) under Alert Level 3. Home management such as house cleaning may be reduced depending on individual circumstances (where not providing this service would place a client at risk and the services can be provided safely). The substitution of other workers where the usual workforce is unavailable means continuity of care worker(s) may not be possible. There should be agreement between disabled people, family and whānau and providers on who is in the extended bubble and how the bubble will be protected. Ensure infection prevention and control is adhered to for essential care services that require close physical contact and minimising staff movement between homes. Staff movement is minimised between homes and activities are reduced to those that maintain physical distancing. Urgent in-home equipment will also be provided where needed.

## Mental health and addiction services

Mental health and addiction inpatient and residential services continue to operate under Alert Level 3, however overall bed capacity may be reduced to enable good infection prevention and control measures or to enable consolidation of clinical staff. Clinical pathways to care must exist to enable access to essential care for those that need it. Some inpatients may be considered high-risk and therefore may have additional steps taken to reduce movement within/outside the facility. Inpatient units must have separate COVID-19 positive/suspected and non-COVID-19 areas for patient care with no staff crossover between these areas. Any inpatient trips will be postponed where they do not meet restrictions on travel/gatherings for Alert Levels 3 and 4.

The visiting policy is as per the intent in the general guidance for hospitals during Alert Levels 3 and 4, with accompanying physical distancing and infection prevention and control protocols. Where visitors are permitted, inpatient services must record visitors to ensure contact tracing can be conducted if necessary.

Community mental health services continue to use virtual/telephone appointments where possible. Face-to-face appointments may be provided so long as the health professionals and support staff can take appropriate measures to manage public health risks as per Ministry guidance. Urgent/crisis services will operate as usual, with appropriate measures to manage public health risks as per Ministry guidance for Alert Levels 3 and 4

There are a range of welfare, mental health and wellbeing programmes underway to minimise harm to the community as part of the Governments psychosocial response.