

25 August 2020

Dear VisionWest Home HealthCare Support Workers,

First a word of thanks to everyone. Whether you've been in Alert Level 3 or Alert Level 2, thank you for the work you have been doing.

From Monday next week (August 31st) the Prime Minister has told us that we will all be in Alert Level 2. This letter explains how VisionWest Home HealthCare will be operating in Alert Level 2 and what you need to know. Most changes relate to Auckland who are moving down a Level.

### **What does the change in Alert Levels mean for VisionWest Home HealthCare?**

In Alert Level 2, all Home HealthCare supports can resume. However, we must ensure that:

- you and the people you support remain safe, and
- supports are resumed in a well-planned way so that no person is left out and that Support Workers get paid correctly.

### **How are VisionWest Home HealthCare helping everyone remain safe?**

We are employing a number of methods to ensure your safety. These include:

- Appropriate infection control measures.
- Client Screening.
- Assessing the workforce to ensure that you are safe to come back to work.

You should already be aware of correct infection control measures. Please ensure that:

1. where possible, you keep 2 metres between you and your client,
2. you use appropriate PPE for the situation, and
3. most importantly, **keep up the Hand Hygiene.**

**Alert Level 2 PPE guidance** is at the end of this communication to remind you of what you need to wear in each situation.

If you need more PPE, are unsure how PPE applies to any work you do or would like some more information about how to use PPE correctly, please phone your local branch.

Also at the end of this communication is the **client screening process** that you must use before entering a client's house. This process guides you through key questions you must ask each client to help you identify if, in supporting them, there is any risk to you.

We have previously **assessed risk for all support workers** who we put on COVID-19 Special Leave, who are over 70, or have already told us that they have a serious health condition. If nothing has changed then we will rely on the information we gained through the last assessment.

If you are in any of these categories and something has changed since we last did this assessment in May/June this year, please phone your local branch.

In Alert Level 2, people with caring responsibilities should be able to resume normal work. If there are any problems with your individual situation and you are unable to resume your caring responsibilities, please talk to your local branch.

**How are VisionWest Home HealthCare resuming cancelled and reduced supports?**

In preparation for the Auckland region moving to Alert Level 2, the Home HealthCare team have commenced re-rostering supports. To make sure that we do not miss anything, we are rostering each support worker one-by-one, based on the supports that have been cancelled or reduced.

Please be patient as we go through this process. It will take some time and **you will be contacted where we start adjusting your roster.**

We are continuing to pay support workers usual pay until we have adjusted the rosters of individual support workers. Once we have adjusted your roster, we will stop paying the usual pre-COVID-19 payments and start paying you based on Guaranteed Hours and the work you do.

**A final reminder if you use public transport as part of your transport options.**

The government has announced that it is mandatory to use masks in Alert Level 2 when using public transport. Please take note of this requirement and keep yourself safe.

Thanks again for the awesome work you do.

Kind Regards,



Murray Penman  
National General Manager, Home HealthCare

## ALERT LEVEL 2: GUIDELINES FOR PERSONAL PROTECTIVE EQUIPMENT (PPE) DISABILITY SUPPORT AND CARE WORKERS WHO WORK IN CLIENTS HOMES



### IMPORTANT REMINDER

For all patient care and interactions, staff should follow standard precautions and adhere to the '5 moments for hand hygiene'

SUPPORT IN THE COMMUNITY			Wash Hands (Before and After)	Physical Distancing (1 metre)	REMEMBER TO ASK THE KEY RISK ASSESSMENT QUESTIONS BEFORE DECIDING TO WEAR PPE			
					Surgical Mask	Gloves	Apron	Eye Protection <sup>3</sup>
PUBLIC AREAS (e.g. supermarkets, pharmacies, essential services)	Care Workers, Clients	Avoid if possible - stay home (arrange home delivery)	✓	✓				
	PRIVATE GARDEN/ OUTDOORS	Care Workers	Walking in garden (keeping 1m distance)	✓	✓			
Walking in garden (closer than 1m distance e.g. providing balance support)			✓		✓ <sup>1</sup>			
PUBLIC TRANSPORT (e.g. Taxi) or PRIVATE VEHICLE	Care Workers, Clients	Avoid if possible - stay home (arrange home delivery)	✓		✓ <sup>1</sup>			
		Driving to an essential service (with client)	✓		✓ <sup>1</sup>			
<b>SUPPORT AT HOME</b>								
HOME CARE MANAGEMENT Care Workers	Entering the premises		✓	✓				
	Housework (dusting and vacuuming)		✓	✓				
	Food preparation and/or dishes (alongside person)*		✓		? <sup>4</sup>	✓ <sup>2</sup>	BAU	
	Food preparation and/or dishes (alone)*		✓	✓		✓ <sup>2</sup>		
	Laundry or making/changing beds		✓	✓				
	Cleaning (bathroom and toilet)*		✓	✓	BAU	✓ <sup>2</sup>	✓ <sup>6</sup>	
PERSONAL CARES Care Workers	Close contact with those with excessive saliva, or behaviours such as spitting and choking		✓		✓	✓	✓	✓
	Assisting a person with transfers in/out of bed or chair		✓		✓ <sup>1</sup>			? <sup>5</sup>
	Assisting a person to use or remove a mask for a nebuliser, home oxygen, CPAP or NIV machine		✓		✓ <sup>1</sup>	✓ <sup>8</sup>	✓ <sup>8</sup>	? <sup>5</sup>
	Feeding a person, providing nutritional support, or gastro feeds (if pt gags or has swallowing difficulty etc wear PPE)		✓		✓ <sup>9</sup>	✓	✓	? <sup>5</sup>
	Direct medication administration (i.e. nose, mouth, eyes, etc). If carer exposed to mucous membranes (ie oral, eyes or rectal medications) then wear PPE		✓		✓ <sup>9</sup>	✓		? <sup>5</sup>
	Bathing/Toileting - showers, bowel & bladder support		✓		✓ <sup>9</sup>	BAU	BAU	BAU

**YOU NEED TO USE THE PPE SUITABLE FOR ALL OF THE TASKS YOU WILL BE PERFORMING, RATHER THAN CHANGING BETWEEN EVERY TASK.**

- ▶ **Hand Hygiene** - This includes the use of either soap and water or a hand sanitiser. If soap and water is used the hands need to be dried thoroughly with either a clean cloth or paper towel.
- ▶ **Gloves** - disposable medical gloves should be used for personal cares involving any contact with blood or body fluids. General purpose household gloves are suitable for cleaning and home care management.
- ▶ **Surgical masks** - are single use. One per Care Worker, for each client (or 4 hourly or until moist or soiled [whichever is sooner])
- ▶ **Eye protection** - Prescription glasses do not count as eye protection. Thorough cleaning of any reusable eye-protection equipment is necessary between each visit.

\* Follow business as usual processes

**BAU:** Business As Usual PPE is if carer is required to wear PPE if exposed to blood or body fluids, or as part of their normal duties

1. Undertake risk assessment, if unable to maintain physical distancing - consider wearing mask.
2. Standard household gloves only needed when doing home care management tasks
3. Face shield or goggles.
4. Mask not required when conducting house work, if working directly alongside client, assess the risk of needing to wear before putting mask on
5. Eye protection only required if risk of splashing or exposure to blood or body fluids.
6. Apron is only required when exposed to blood or body fluids
7. N95s only required if pt COVID +ve and aerosol generating procedures are being performed
8. Use provider guideline for this activity
9. Need to assess risk before putting on PPE or use if BAU

## GUIDELINES FOR PERSONAL PROTECTIVE EQUIPMENT (PPE) DISABILITY SUPPORT AND CARE WORKERS

### Who is this guidance for?

Support and Care Workers (both formal Care Workers and informal support people) providing disability support cares for, or in close contact with, disabled clients of unknown COVID-19 status within the clients homes.

The guideline reinforces the importance of:

- ▶ for all patient care and interactions, staff should follow standard precautions and adhere to the '5 moments for hand hygiene'
- ▶ which includes washing and drying hands before and after every activity
- ▶ the Support and Care Worker minimises taking any of their personal belongings into the clients home

### Why has this guidance been produced?

Community-based and Residential Disability Supports are an essential way of ensuring the health, wellbeing, dignity, and independence of the disabled community. These interactions are often quite different in nature and setting from other health interactions. Clients, Support and Care Workers need detailed and specific information to provide clarity of expectations and support to achieve best practice.

This document is designed to be used alongside other guidance that has been produced, particularly:

- ▶ *Alert Level 2: Health and disability sector risk assessment for interactions with people of unknown COVID-19 status to determine Personal Protective Equipment (PPE)*
- ▶ *COVID-19 Frequently Asked Questions about PPE*

### When does this Guidance Apply?

This guidance is for **anyone** providing or receiving community-based disability supports, (including individualised funding, enhanced individualised funding or personal budgets), or informally (as friends, family, and neighbours etc) for at-risk disabled individuals. This guidance does not refer to the specific needs of clients or their likely need or uses of PPE outside of the disability support carer-client interaction.

This guidance assumes that neither the client nor the Support and Care Worker meet the case definition for COVID-19.

This means that if the Support and Care Worker has any symptoms of an acute respiratory infection, including:

- ▶ Cough
- ▶ Runny nose
- ▶ Sore throat
- ▶ Shortness of breath
- ▶ Temporary loss of smell
- ▶ Fever

They should **not** be performing any disability support cares. They are a suspected case of COVID-19 until proven otherwise. The Support and Care Worker should notify their employer immediately, self-isolate, and arrange to be tested for COVID-19. They should not resume any care duties until their test result has been confirmed negative to indicate they do not have COVID-19, and have been symptom free for 48 hours.

The Support and Care Worker, prior to commencing any care duties, should also enquire with their client or person they are supporting whether they have any of the above symptoms. This forms part of a set of key questions to ask the client to identify any risk:

### Key risk assessment questions

**What key risk assessment questions should I ask to determine the need for PPE use if I don't know someone's COVID-19 status?**

When you do not know someone's COVID-19 status, ask the following risk assessment questions prior to the interaction where possible, or maintain physical distancing at the start of the interaction while they are asked:

1. Does the patient/client have new or worsening respiratory symptoms including one of the following: cough, sore throat, shortness of breath, coryza (runny nose) or temporary loss of smell, with or without fever?  
**If 'yes,'** this person has a small chance of having COVID-19. They need to be provided a surgical mask to wear while supporting them to have a formal assessment to determine their COVID-19 status. If you need to provide direct care while awaiting this assessment, please consider additional PPE requirements. If you do not need to provide direct care while awaiting this assessment, please only put on a surgical mask.
2. In the last 14 days has the person had close contact with a confirmed or probable COVID-19 case, had international travel, had direct contact with a person who has travelled overseas, worked in an international aircraft or shipping vessel or cleaned at an international airport or maritime port or in areas/conveniences visited by international arrivals?
3. Is the patient/client at higher risk of severe illness from of COVID-19 (as per [www.health.govt.nz/covid-19-health-advice-general-public](http://www.health.govt.nz/covid-19-health-advice-general-public))?

**If the answer is 'yes' to question 2 or 3 and maintaining physical distancing of at least 1 metre is not possible, the care provider should wear a surgical mask, irrespective of the type of care to be provided.** This guidance provides an additional level of protection for the very low risk of potential asymptomatic or pre-symptomatic transmission between the health care worker and patient/client. Unlike contexts where emergency or urgent care is provided, there is no need to provide the patient/client with a surgical mask to wear if they answer 'yes' to question 2 when you are providing care in their place of residence. Additional PPE may be required depending on the nature of the care to be provided.

## GUIDELINES FOR PERSONAL PROTECTIVE EQUIPMENT (PPE) DISABILITY SUPPORT AND CARE WORKERS

### Why is the PPE guidance provided for each task separately?

There are a number of different job titles, roles, and informal supports that disabled people receive from a range of formal and informal Support and Care Workers. In order to remove the need for clinical judgements and rationalising the use of PPE to tasks for which it will be safe and effective, the guidance table can help each Support and Care Worker or client work out what is recommended in most community care situations. The table also highlights what should be business as usual prior to the identification of COVID-19, as a standard precautions approach.

If a Support and Care Worker performs more than one task, the PPE should be selected to meet the requirements of the task that needs the **highest** protection of those to be performed, rather than changing PPE between each task. However, the usual basic hygiene principles still apply i.e. gloves should be changed after toilet/ bathroom cares and before meal preparation etc.

The PPE should be used and disposed of at the client's home or place of residence. PPE should not be transferred or reused from one client to another (unless those clients are already within a single residence).

These guidelines only refer to Support and Care Worker requirements during their care interactions, and not to their requirements in other non-contact aspects of their role, interactions with other staff, during their travel to and from the client's residence, or in their non-work life.

### How do I use PPE?

Many Support and Care Workers may not have had to use PPE in their usual duties before. Using PPE does not guarantee that you cannot get COVID-19. Correct use is vital to ensure the equipment is effective. If PPE is used, the Support and Care Worker needs to assume when wearing it, and especially when removing it that it has been contaminated with Coronavirus. This means taking it off needs to be done very carefully, with the PPE disposed of safely.

The most important aspects of you (and your client's) personal protection are a whole system of actions, not just one aspect. These include (in order from most important):

1. Maintaining your own COVID-19 safety when you are not at work (practising physical distancing when out of your home) – so you don't come into contact with COVID-19;
2. The honest assessment of your health, and that of your client (i.e. not performing disability cares if you are unwell);
3. Thorough hand hygiene before, after, and throughout your care duties;
4. Avoiding touching of your face or eyes;
5. Physical distancing wherever possible;
6. The appropriate selection and use of PPE equipment; and
7. The safe removal and disposal of used PPE.

There are useful resources and training videos on how to remove PPE safely. All Support and Care Workers need to be thoroughly familiar with this process before using PPE for the first time. If not removed correctly contaminated PPE can actually increase a Support and Care Worker's exposure to the virus from which the equipment was intended to protect.

Some useful links are below:

#### Hand Hygiene:

- ▶ [www.health.govt.nz/your-health/healthy-living/good-hygiene/hand-washing](http://www.health.govt.nz/your-health/healthy-living/good-hygiene/hand-washing)

#### Minimising Personal Belongings:

- ▶ [www.health.govt.nz/system/files/documents/pages/how-to-keep-your-home-bubble-safe.pdf](http://www.health.govt.nz/system/files/documents/pages/how-to-keep-your-home-bubble-safe.pdf)

#### Wearing and Removing PPE:

- ▶ [www.tepou.co.nz/resources/Te-Pou-PPE-Guide/943](http://www.tepou.co.nz/resources/Te-Pou-PPE-Guide/943)
- ▶ [teawakairangihealth.org.nz/wp-content/uploads/2020/03/Don-Doff-PPE-PRIMARY-Health.pdf](http://teawakairangihealth.org.nz/wp-content/uploads/2020/03/Don-Doff-PPE-PRIMARY-Health.pdf)

#### Other useful COVID-19 information can be found at these trusted websites:

- ▶ [www.health.govt.nz](http://www.health.govt.nz)
- ▶ [www.covid19.govt.nz](http://www.covid19.govt.nz)



# COVID-19 SUPPORT WORKER PRECAUTIONS

## Higher Index of Suspicion Criteria for COVID-19

### Person has (in last 14 days)

- Had contact with a confirmed or probable case of Covid-19.
- Travelled overseas.
- Had direct contact with a person who has travelled overseas (e.g. Customs and Immigration staff).
- Had contact with staff at quarantine/isolation facilities or international aircraft/shipping vessel, international airport or maritime port.

### NOTE:

If you or any members of your household are unwell with respiratory symptoms or meet the Higher index of suspicion criteria – notify your Coordinator immediately and Healthline for medical advice.

## Safety Procedure When Visiting Clients:

**On arrival, while maintaining social distancing of 2metres, the support worker must ask the client if they, or any household member:**

- Has a confirmed or suspected case of COVID-19?
- Is unwell with respiratory symptoms including cough, sore throat, shortness of breath, coryza (runny nose) or temporary loss of smell, with or without fever?

**Ask, in the past 14 days, have your or any family member:**

- Had contact with a confirmed or probable case of Covid-19?
- Meet any of the criteria for Higher Index of Suspicion (above)

NO

**Support Workers to use standard precautions, including fresh mask for every visit**

**During the visit:**

- If possible, maintain physical distancing from the client and household members (remain more than 2 metres away).
- Perform hand hygiene.
- If <2 metre contact is required use appropriate PPE.
- Reinforce cough, sneeze and hand hygiene with the client.
- If using PPE, change after each client. Seal used PPE in a plastic bag and dispose safely.

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**The Support Worker advises the client that the Clinical Manager will be in contact and the appointment rescheduled. Apologise and leave.  
Notify your Coordinator immediately.**

## Standard Precautions

Standard precautions are used to prevent spread of diseases that can be acquired by contact with blood, body fluids, non-intact skin and mucous membranes and should be used for all personal care tasks.

They're based on a risk assessment and make use of common-sense practices and personal protective equipment use that protect healthcare workers from infection and prevent the spread of infection from patient to patient.

**Standard precautions in homecare settings include:**

1. Hand hygiene – frequent washing of hands between tasks and clients (20 seconds) or hand sanitizer.
2. PPE – Use of personal protective equipment as indicated (e.g. gloves, masks, eyewear, gown/apron).
3. Respiratory hygiene / cough etiquette.
4. Safe handling of linen and laundry- wear gloves and apron if soiled linen.
5. Cleaning and disinfection of environmental surfaces.

**How to wear a mask: Refer MOH document**