# Barwon Health COVID Response Roadmap



4 May 2023

Barwon Health's COVID Response Roadmap is a document that guides our preparation and response to COVID-19 in the community and within the health service.

The role of the roadmap is to set policies and procedures across the organisation, factoring in infection risk, resourcing, service capacity and operations.

These policies and procedures are in place as a central repository for guidance and advice, supporting our services in mitigating the risks of COVID-19 transmission, whilst at the same time acknowledging the easing of Victoria's restrictions and Barwon Health's priority towards care and safety for patients, staff and visitors.

This roadmap has been informed by information provided by the Department of Health, in consultation with our Public Health Unit.

Any questions, or further clarification please email:

INFECTION.PREVENTIONSERVICES@barwonhealth.org.au

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Audience: Organisation-wide

Policy / Program Area	Recommendations	Barwon Health considerations / requirement
People seekir	ng healthcare (inpatient or clinic appointments, eg outpatients, imagin visitors and should not be denied access to healthcare for ANY re	•
Visitors	Permitted Visitors (University Hospital Geelong and McKellar Centre Inpatient Rehabilitation Centre) :	Visitors Guidance & Advice
	<ul> <li>Visitors must wear the provided surgical mask, and additional PPE, as required, at all times.</li> <li>N95 masks are also available, should the visitor wish to wear one.</li> </ul>	
	<ul> <li>We ask the community to undertake a Rapid Antigen Test (RAT) before attending hospital to personally check their COVID-19 status. This will help to protect the person they are visiting, as well as other patients and staff. If they have a positive result, they must not attend unless it is for extenuating circumstances and appropriate approval has been granted.</li> </ul>	
	<ul> <li>Masks must be worn at all times, and at all locations across the health service.</li> </ul>	
	<ul> <li>Food and drink must not be consumed by visitors at the bedside to avoid the need for mask removal.</li> </ul>	
	<ul> <li>Exemptions are in place with regards to both the visitors and COVID-19 positive status of visitors in extenuating circumstances, such as for end-of-life care. Visitors should call the nurse-in-charge before arrival at hospital to seek approval.</li> </ul>	
	Wards and Inpatient Rehabilitation Centre (IRC):	
	o TWO visitors at a time per person.	
	Note: Children under 16 cannot visit in the Special care nursery. Children under the age of 16 may only visit for compassionate reasons, but must have Bed Manager or After Hours Manager approval in consultation with the relevant Nurse Unit Manager.	
	<ul> <li>Visitors cannot attend if they display either COVID-19 symptoms or are a CLOSE CONTACT of a COVID-19 positive case.</li> </ul>	
	<ul> <li>A COVID-19 close contact may only visit for compassionate grounds. Visitors who are COVID-19 positive may visit in extenuating circumstances (e.g. end-of-life of a loved one,</li> </ul>	

- birth partner); however, the visit must be discussed with the Access and Resource team by calling 03 4215 0640.
- COVID-positive visitors and visitors to COVID-positive patients are only permitted under very rare circumstances and this should be discussed with the relevant Nurse Unit Manager and be approved by the Access and Resource Manager in consultation with the hospital executive.
- Exceptions may be granted on a case-by-case basis for end-of-life-care, in consultation with the relevant Nurse Unit Manager or After Hours Hospital Manager.

#### Area specific restrictions:

#### o Residential Aged Care

- There are no limits on time, number, or age of visitors to aged care. If there is an outbreak of COVID-19 within the facility, this may be subject to change to protect the vulnerable residents.
- Each visitor must return a negative RAT and sign-in prior to access. Designated 'Partners in Care' are able to visit residents during outbreaks.
- A COVID-19 close contact may only visit for compassionate grounds. Visitors who are COVID-19 positive may visit in extenuating circumstances (e.g. end-of-life of a loved one); however, the visit must be discussed with the Facility Manager or Co-Director of Aged Care.
- COVID-19 positive visitors or 'partners in care' entering during an outbreak will be met at the main entrance and placed in appropriate PPE. They will then be escorted through the building to visit their relative. They must follow all directions from Barwon Health staff.

#### o Birth Suite

- o One primary support person for birth, plus one other support person.
- o All support persons in Birth Suite must wear the provided mask.
- A support person may accompany the birthing mother to theatre, but must wear the supplied mask and comply with all Barwon Health requirements.

#### Maternitu

 TWO visitors at a time per person. (Parents not counted as a visitor) All visitors must adhere to mask wearing and not eat or drink at the bedside to avoid having to remove their mask.

### Special Care Nursery o TWO visitors at a time per infant. All parents/quardians/visitors must adhere to mask wearing and not eat or drink at the bedside to avoid having to remove their mask. o Children under the age of 16 are not permitted as visitors unless for extenuating compassionate reasons. To visit, they must have Bed Manager or After Hours Manager approval in consultation with the relevant Nurse Unit Manager. o Children's ward – Health Wing 3 o TWO visitors at a time per person. (Parents are not counted as a Visitor) o All parents/quardians/visitors must adhere to mask wearing and not eat or drink at the bedside to avoid having to remove their mask. Emergency Department see below **Emergency** Emergency Department (ED) Department • ED consumers are permitted to be accompanied by **ONE** support person at a time where Visitors/Carers required. The support person must wear an N95 mask at all times. All children who are patients may be accompanied by **TWO** parents/carers. o Children under the age of 16 are not permitted as visitors unless for extenuating compassionate reasons. To visit, they must have Bed Manager or After Hours Manager approval in consultation with the relevant Nurse Unit Manager. We encourage consumers to limit the need for this support person for minor illness/injuryrelated presentations, to enable safe physical distancing in our waiting areas and treatment spaces in the ED. Adults in SCOVID/COVID-19 precautions are not permitted to have a support person unless authorised by the Nurse in Charge (e.g. End-of-life, significant behaviours of concern). Please encourage a support person to remain for those presenting with psychological distress and/or mental illness, those with a disability or sensory impairment, consumers with cognitive impairment or to enable trauma-informed care (e.g. Patients with bleeding in early pregnancy).

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Face Masks	<ul> <li>ALL visitors ARE REQUIRED to wear a minimum LEVEL 1 disposable surgical mask AT ALL TIMES at ALL Barwon Health sites.</li> </ul>	
	N95 masks are available should visitors wish to wear one.	
	<ul> <li>ALL staff ARE REQUIRED, at a minimum, to wear a LEVEL 2 disposable surgical mask AT ALL TIMES at all Barwon Health clinical sites, except in the Emergency Department, Urgent Care Centre and Aged Care Facilities where N95 Masks remain in place for all staff.</li> </ul>	
	<ul> <li>Masks are RECOMMENDED, but not mandatory in non-clinical areas such as offices or other non-public areas.</li> </ul>	
	Masks are HIGHLY RECOMMENDED in situations where you and your colleagues are unable to physically distance from those around you.	
	If you are returning to work post COVID-19 on Day SEVEN you must continue to wear an N95 until day 14.	
PPE	Healthcare workers <b>MUST</b> wear a P2/N95 respirator mask under the follow conditions:	PPE Guidelines Update on Personal Protective Equipment Requirements
	AT ALL TIMES for ALL staff in clinical areas of the Emergency Department, Urgent Care Centre and Aged Care Facilities	- appropriation respondences.
	AT ALL TIMES when caring for COVID-19 and SCOVID patients.	
	AT ALL TIMES for staff undertaking COVID-19 testing.	
	For ALL staff who are household or household like contacts or considered a social or	
	workplace contact for seven (7) days. Household contacts must also undertake a daily RAT.	
	<ul> <li>N95 mask is to be worn by staff who have returned to work after being positive with COVID-19 until day 14</li> </ul>	
	Staff are required to 'fit check' every time a P2/N95 mask is put on.	
	Staff required to wear a P2/N95 respirator mask are to book a 'fit test'. Fit tests need to be conducted ANNUALLY. Fit testing requires an appointment with the Respiratory Protection	
	Program team. Information on how to book a 'fit test' can be found via the <u>Respiratory Protection</u>	

<u>Program One Point webpage</u>. Whilst Staff await a 'fit test' appointment they are to continue to 'fit check'.

**DO NOT** use P2/N95 respirators masks with a valve. The air you exhale is unlikely to be filtered and may expose other healthcare workers and patients.

Eye protection (face shields where practical) to be worn under the following circumstances:

- AT ALL TIMES for ALL exposure, care or contact with patients/residents that are considered:
  - o SCOVID.
  - Confirmed COVID.
- As per standard and transmission-based precautions.
- AT ALL TIMES for staff undertaking COVID-19 testing.
- Prescription glasses are not considered as adequate eye protection.

**Disposable gowns** to be worn under the following circumstances:

- Per standard precautions for exposure, care or contact with:
  - o SCOVID patients.
  - $\circ \quad \text{Confirmed COVID patients.}$
- Per standard precautions for staff undertaking COVID-19 testing
- As per standard and transmission-based precautions for all other patients

**Disposable gloves** to be worn under the following circumstances:

- **Per standard precautions** for exposure, care or contact with:
  - o SCOVID.
  - o Confirmed COVID patients.
- Per standard precautions for staff undertaking COVID-19 testing.
- As per standard and transmission-based precautions for all other patients.
- Gloves to be removed and hand hygiene performed between all patient contacts.

## Process for COVID-19 positive visitors COVID-19 positive visitors will be met at the main entrance to University Hospital Geelong/service and placed in appropriate PPE by a representative of the Access and Resource team or a designated staff member. They will then be escorted through the building to visit their relative. They must follow all directions from Barwon Health staff. COVID-19 positive visitors for McKellar Centre Aged Care or Inpatient Rehabilitation Centre (IRC) will be met at the main entrance and placed in appropriate PPE by a designated staff member. They will then be escorted through the building to visit their relative. They must follow all directions from Barwon Health staff. Patient testing Testing patients/residents: 1. All <u>asymptomatic</u> new admissions to BH will now have COVID testing with RAT rather than PCR. 2. For sumptomatic BH inpatients (excluding ED) COVID testing will be performed on the Biofire at the Geelong ACL Lab - please use Biofire specific request -this NO longer requires ID approval. Ensure the request is fully completed with patient identifiers /location and signed to ensure optimal TAT and notification process. Requests are located on wards or can be printed from https://onepoint.barwonhealth.org.au/clinical/Documents/Pathology%20docume nts/UHG-BioFire-RV0%20no%20ID%20approval%2021.04.23.pdf Biofire Testing Available Monday to Friday 0800 -1900 Weekend/Public Holiday 0900-1600 If test is critical ensure this is documented on the request If test sent out of hours it will be performed next day Exclusions to this are COVID clearance testing which requires a COVID PCR sent to ACL, with expected turnaround times <24 hrs. Request can be printed at

	https://onepoint.barwonhealth.org.au/clinical/Documents/Pathology%20d ocuments/ACL%20COVID%20PCR%20request.pdf  Critical out of Hrs COVID testing can be performed on Qiagen as per Respiratory Testing Criteria On Barwon Health Syndromic PCR  3.All symptomatic patients in the Emergency Department will continue to be tested for COVID-19 using Qiagen  Until further advised, pre-operative testing applies to all surgical procedures requiring a general anaesthetic, Gastroscopy or Bronchoscopy (includes all paediatric patients).  For time critical/emergency general anaesthetic testing subject to risk assessment.  Patients can provide text message results or a photo confirming a negative COVID-19 test to health services as evidence of result.  Additional patient testing as per risk assessment.  Routine Rapid Antigen surveillance testing may be undertaken onwards. For stock of RAT's please follow your normal ordering procedures.
HCW surveillance testing	Testing of staff working in clinical areas, including residential aged care:  Available to any staff member involved in the direct care of confirmed COVID-19 patients and those who interact with any hospital ward treating a confirmed case or cases of COVID-19  • At least three Rapid Antigen Tests, with <72 hour interval between tests per week or 1x throat-nose swab PCR if advised by Infection Prevention Services.
Volunteers	Volunteers can return to roles as prescribed by the volunteer services, as long as they are fully vaccinated and wear the prescribed mask.  Volunteers can access the cafeteria and food outlets at any site.

Return to work post COVID-19 positive status	Staff who are well and not displaying ANY symptoms can be released from isolation on day 5 but cannot return to work until DAY SEVEN. They must continue to wear an N95 mask at all times, not just for patient facing activities, until Day 14.  The recent change to isolation (from seven days to five) does NOT apply to healthcare workers (both clinical and non-clinical)	
Repeated COVID-19 Exposure	If you have recently had COVID-19 and then become a contact of someone who has COVID-19:  Within FOUR weeks of your release from isolation  If you are not immunocompromised and you become a contact of a confirmed case within four weeks of your release from isolation, you will NOT need to follow guidance for either household or household like contacts, social contacts or workplace contacts.  After FOUR weeks from your release from isolation  If you become a contact of a confirmed case after four weeks from your release from isolation, you will need to follow the guidance for either household or household like contacts, social contacts or workplace contacts.	
Access to Rapid Antigen Tests (RAT's)	Access to Rapid Antigen Tests is available for NUMs or department heads to order via Oracle. These tests will be for both staff surveillance and patient use. The oracle code is 80967 (five tests per pack). Patient RAT result stickers can be ordered via the PMG catalogue on One Point.	
Vaccination	Staff are encouraged, if eligible to seek out a fourth dose COVID-19 Vaccination. More information: https://onepoint.barwonhealth.org.au/news/Pages/Fourth-dose-for-staff.aspx	
Access to UHG Cafeteria	The community are permitted to access the University Hospital Geelong Cafeteria between the hours of 10am and 2 pm 7 days a week.	

Cafeteria crockery	Reusable crockery and utensils are able to be used in the cafeterias.	
Keep Cups	Keep cups are able to be used at Barwon Health coffee outlets. Please note that staff reserve the right to not use a keep cup if it is not clean.	
Specialist outpatient consulting and Imaging	<ul> <li>All healthcare consumers should be asked to wear the provided mask. If a consumer refuses to wear a mask stating they have a mask exemption, your next step is to ask them to wear the provided face shield. Please note that we cannot refuse entry to a consumer if they refuse both the mask and/or the shield.</li> </ul>	
	Healthcare consumers cannot be refused entry based on their vaccination status.	
	A support person is able to attend for support to any clinic, imaging or outpatient appointment. As long as they wear the provided surgical mask at all times.	
Vulnerable workers (high-risk employees	Where possible, high-risk employees should be considered for redeployment on a case-by-case basis, based on Infectious Diseases input	Vulnerable Workers Advice
Working from home	There is no recommendation for staff to work from home. If you have any concerns around this, please raise them with your direct line manager.	
Student clinical placements	Vaccination requirements - students undertaking clinical placements must comply with relevant COVID vaccination requirements. Worker vaccination requirements   Coronavirus Victoria	
	<b>Personal protective equipment (PPE)</b> - students must wear appropriate levels of PPE for the setting of their clinical placement and be fit-tested for N95/P2 PPE when undertaking clinical placements in areas where the service requires employed staff to wear N95/P2 PPE.	
	<b>Compliance with COVIDSafe principles</b> - students are required to comply with all COVIDSafe principles within the workplace including:	
	<ul> <li>Requirements to use designated site entry/exit points or specified breakrooms.</li> <li>Physical distancing.</li> </ul>	

	Infection prevention and control practices, including hand hygiene.	
Education, Training and Meetings	Meetings, education and training can resume face-to-face as required; as long as attendees wear the appropriate mask, do not consume shared food in the meeting and practice social distancing. It is acceptable to continue virtual meetings as an alternative if you wish.  • All face to face meetings, education or training - Level 2 surgical mask required.	
Lifts	There are no density limits in lifts as all passengers are wearing masks and the time in the lift is minimal.	
Organisational events and staff team social gatherings	Consideration should be given to the timing of events and gatherings to minimise the risk of impacting on a large number of staff from one area.  • Hold events outdoors or in well ventilated venues (outdoor dining, e.g. outdoor restaurants and beer gardens) or in restaurants that have appropriate COVID-safe measures in place.  • Maintain social distancing and mask wearing requirements.  Shared food platters are not recommended.	
Tea Rooms	Staff are asked to continue to practice social distancing in tea rooms and to ensure any crockery or utensils used are properly cleaned.	

# **Key Definitions**

Term	Definition	
Confirmed COVID case	A person who tests positive to a validated SARS-CoV-2 test.	
Low risk SCOVID case	Includes persons awaiting the results of a test, where there may be symptoms that could be consistent with coronavirus (COVID-19) but no epidemiological risk factors. Where a patient/resident's history cannot be obtained, they should be considered as a low-risk suspected case until further screening information can be obtained, at which point a revised diagnosis of the patient/resident's condition can be made and appropriate changes to PPE implemented.	
High risk SCOVID case	• A person in quarantine for any reason (including; being a close contact of a confirmed case or coronavirus (COVID-19) or a returned traveller from overseas, or a relevant interstate area with outbreaks as defined by public health, in the last 14 days) with or without a compatible clinical illness. This group of people is also referred to as 'at-risk'.	
	• A person who has a compatible clinical illness and meets one or more of the following epidemiological risk factors, in the 14 days prior to illness onset:	
	<ul> <li>Contact with a confirmed case or an exposure site as defined by public health.</li> </ul>	
	<ul> <li>Was employed in an area where there is an increased risk of coronavirus (COVID-19) transmission for example:</li> </ul>	
	<ul> <li>Hotel quarantine workers or any workers at ports of entry.</li> </ul>	
	<ul> <li>Aged care workers/ healthcare workers working in a location where there are active outbreaks.</li> </ul>	
	<ul> <li>Other high-risk industries (such as abattoirs) where there are known cases /or high levels of community transmission.</li> </ul>	
	<ul> <li>Lived in or visited a geographically localised area at high risk as determined by public health.</li> </ul>	
	<ul> <li>Has been released from a quarantine facility.</li> </ul>	
COVID negative	A person who tests negative to a validated SARS-CoV-2 nucleic acid test.	
	A person who is a cleared case.	
	• A person who screens negative and/or has no clinical or epidemiological risk factors for COVID-19.	
Routine healthcare worker testing	Any worker involved in the direct care of confirmed COVID-19 patients and those who interact with a high risk hospital work premises, which includes any hospital ward treating a confirmed case of SARS-CoV-2.	
Clinical risk factors	Clinical compatible symptoms with COVID-19, such as fever, cough, shortness of breath, sore throat, loss of smell or taste.	
Physical distancing	1.5 mtrs physical distancing continues to be recommended in all instances.	
	Density quotients recommendations:	
	<ul> <li>4 sq mtrs in clinical spaces where possible including birthing rooms, emergency department, patient wards and clients.</li> </ul>	

Term	Definition
	<ul> <li>4 sq mtrs for staff in non-public facing areas (offices, meeting rooms, lecture theatres &amp; hallways).</li> <li>4 sq mtrs per person in shared public spaces.</li> </ul>
Epidemiological risk factors	• A person in quarantine for any reason (including; being a close contact of a confirmed case of coronavirus (COVID-19) and/or a returned traveler from overseas, and/or a relevant interstate area with outbreaks as defined by public health, in the last 14 days).
	• Contact with a confirmed case of COVID-19 and/or visited an exposure site as defined by public health.
	Lived in or visited a geographically localized area at higher risk, as determined by public health.
AGP	Aerosol Generating Procedure. Procedures performed on patient/residents that are more likely to generate higher concentrations of infectious respiratory aerosols. Examples include bronchoscopy, tracheal intubation, non-invasive ventilation (e.g. BiPAP, CPAP), high flow nasal oxygen therapy, manual ventilation before intubation, intubation, cardiopulmonary resuscitation, suctioning, sputum induction, nebuliser use.
AGB	Aerosol Generating Behaviour. Behaviours that are more likely to generate higher concentrations of infectious respiratory aerosols. Examples include persistent and/or severe coughing, screaming and shouting, women in active labour who exhibit heavy breathing and panting.
Enhanced Screening	Additional screening over and above the Department of Health guidance, which could include local hospital-specific requirements such as temperature checks, previous exposure to COVID-19, determining whether a HCW works at other locations, etc.
Higher risk employee	Aboriginal and Torres Strait Islander people 50 years and older with one or more chronic medical conditions.
categories	People 65 years and older with chronic medical conditions.
	People 70 years and older.
	People with compromised immune systems.
	Pregnant women >28 weeks gestation.
High risk hospital work premises	High-risk hospital Work Premises means any hospital ward treating a confirmed case or cases of SARS-CoV-2.
High-risk hospital work premises worker	Any worker involved in the direct care of patients in high-risk hospital Work Premises AND those workers who interact with a high-risk hospital Work premises.
Exceptions to workforce mobility	Includes those who work in hotel quarantine and care facilities - see the Workplace Additional Industry Obligations Directions for more information.
Visitor Restrictions	Based on local risk assessment, services may determine their own requirements, conditions or restrictions for visitors.

#### References

Victorian State Government Health and Human Services. (2022, February 14). <u>Victorian health services guidance and response to COVID-19 RISK</u>