

Guidance on seeing patients at Alert Level 3

This guide is a living document and will be updated as information from the Ministry of Health is released during the Alert Level changes. Please check it regularly for updates and changes.

Under Alert Level 3 the Ministry of Health has stated:

‘Virtual appointments should be provided where possible and is the preferred method of service delivery. Face-to-face appointments may be provided for **urgent care only** so long as professionals can take appropriate measures to manage public health.’

Despite the easing for face to face appointments under Level 3, telehealth will still be used for the majority of patients. It is only urgent cases where you can consider in your clinical judgement that you will undertake a face-to-face consultation. This means osteopathic clinics cannot reopen their doors to see patients on a ‘business as usual’ basis.

If you are seeing a patient in the clinic or in the community that meets the urgent criteria (see below) for a face-to-face consultation, protocols and procedures need to be implemented by osteopaths and clinics to maximise patient and staff safety.

There are two broad questions which need to be answered when assessing whether patients require face-to-face consultations:

1. Does the patient need to be seen face-to-face? (consider patient selection via the flowchart). It is then your clinical judgement as to whether the presentation requires **urgent care** and cannot be provided via telehealth;

AND

2. How will the appointment be carried out, whether that be at a clinic, through a home visit or community based? It is preferable that patients are seen in the clinic where possible, to allow better control of health and safety concerns such as cleaning.

Criteria for seeing a patient for a face-to-face consultation

As stated above appointments will continue to be mainly provided via telehealth. Under Alert Level 3 some face to face appointments may be provided for **urgent care** appointments, but only so long as osteopaths can take appropriate measure to manage public health risks. We expect osteopaths to use a high level of clinical judgement when considering whether a patient meets the urgent criteria for a face-to-face consultation.

Under Alert Level 3 the Ministry of Health has stated the following criteria for seeing an *urgent care* patient face-to-face:

“Urgent care” for community allied health professionals is defined by the Ministry of Health as:

- a condition which is life or limb threatening; or
- treatment required to maintain the basic necessities of life; or
- treatment that cannot be delayed or carried out remotely without risk of significant harm or permanent and/or significant disability, or
- where failure to access services will lead to an acute deterioration of a known condition; or
- where delay in access to services will impact the consumer’s ability to maintain functional independence and significantly negatively impact quality of life

AND

- which cannot be delivered by a service which is currently operating or by clinicians that are already in contact with the patient for ongoing care.

Precautions to take when providing face-to-face care

The Ministry of Health has advised that under COVID-19 Alert Level 3, you do not need to register each face-to-face patient consultation with the respective authority (such as the Osteopathic Council), but that you do need to register your workplace with the NZ COVID Tracer app and clearly display the poster with the unique QR code.

Osteopaths must also keep their own accurate and up to date record of each patient whom they have seen face-to-face, including names, phone numbers and addresses of any carer, guardian or support staff who were present during the consultation or in the clinic. This is to aid contact tracing, if it is later required.

You should also take the following precautions:

- screening for COVID-19 symptoms prior to face to face appointment
- practice good [infection prevention control procedures](#)
- use the appropriate [personal protective equipment \(PPE\)](#)

Screening for COVID-19 Symptoms

Osteopaths must be aware of the current guidance regarding the [clinical criteria for COVID-19](#). The Ministry of Health has advised that the following symptoms are consistent with COVID-19:

Any acute respiratory infection with at least one of the following symptoms (with or without fever):

- fever (at least 38°C)
- new or worsening cough
- sore throat
- shortness of breath
- sneezing and runny nose (coryza)
- anosmia (loss of sense of smell) or dysgeusia (altered sense of taste).

Some people may present with less common symptoms such including diarrhoea, headache, myalgia (muscle aches), nausea, vomiting, or confusion/irritability.

Higher Index of Suspicion

The following criteria should also be considered when screening patients, and represent a Higher Index of Suspicion (HIS). People who meet the HIS criteria are those who have, in the 14 days prior to symptom onset:

- travelled internationally (excluding travel by air from a country/area with which New Zealand has quarantine-free travel (QFT)*),
- had direct contact with a person who has travelled internationally in the preceding 14 days (excluding travel by air from a QFT country/area). e.g. Customs and Immigration staff, staff at quarantine/isolation facilities,
- exited an MIQ facility (excluding recovered COVID-19 cases),
- worked on an international aircraft or shipping vessel (excluding aircraft from a QFT country/area),
- cleaned at an international airport or maritime port in areas/conveniences visited by international arrivals (excluding areas/conveniences for travellers by air from a QFT country/area),
- worked in cold storage areas of facilities that receive imported chilled and frozen goods directly from an international airport or maritime port, or
- travelled from an area with an evolving COVID-19 community outbreak (including in New Zealand and in any country/area with which New Zealand has QFT), or
- any other criteria requested by the local Medical Officer of Health.

Patients currently required to self-isolate or stay at home (for example, those designated Close Contacts, household members of a Close Contact, Casual Plus Contacts, or those with symptoms who are waiting for a COVID-19 test result) should not be offered a face-to-face appointment.

The use of Personal Protective Equipment (PPE)

The bar set by the Ministry of Health for seeing patients face-to-face under Alert Level 3 is still high as it is only for urgent care appointments. There should not be the need to order large amounts of PPE. We have been instructed by the MoH that clinics are not to stockpile large amounts of PPE.

Overarching Requirements

Osteopaths must:

- continue to deliver services via telehealth unless the criteria within the flowchart for face-to-face clinic, community or home visits are met
- where possible, undertake an initial telehealth consultation to establish the need for a face-to-face consultation
- consider safety for themselves and their own bubble as well as the patient's safety
- screen patients for COVID-19 signs or symptoms when making the appointment and again on arrival
- carefully consider the risks and benefits of a face-to-face consultation if patients are 70 years of age or over or have significant co-morbidities
- know and understand relevant Health and Safety procedures and latest advice from Ministry of Health including '[advice for all health professionals](#)'
- carry out a risk assessment and have a plan in place for the location of the treatment
- adapt their practise to allow enough time between appointments to rebook patients, clean equipment and surfaces before another patient is brought into the clinic
- keep staffing numbers within the clinic to a minimum. This includes a minimal number of support staff, if any
- establish a plan of how to minimise contacts with multiple patients especially if working at different clinics

Further resources and information

Further and more detailed guidance, once it has been established a face-to-face consultation is necessary for **urgent care**, can be found below as **Appendix 1**. Please use it to guide your practice under Alert Level 3.

Resources from the Ministry of Health

- [Personal Protective Equipment \(PPE\) requirements](#)
- [Donning and removing PPE](#)
- [Advice for all health professionals'](#)
- [General cleaning information following a suspected, probable or confirmed case of COVID-19](#)
- [General hand hygiene \(scroll to bottom of link page\)](#)

Appendix 1: Guidance for the Five Stages of face-to-face contact appointments

This guidance applies once you have established via the flowchart that an appointment is for **urgent care** and a face-to-face consultation is necessary.

The key requirements are to have strict hygiene measures and physical distancing measures in place and to use personal protective equipment (PPE) when required.

Pre preparation

- have knowledge and understanding of relevant and current Health and Safety procedures and advice from Ministry of Health including '[advice for all health professionals](#)'
- carry out a risk assessment and have a plan in place for your premises e.g. identifying which door patients will enter and leave from
- [select PPE as recommended](#) by Ministry of Health, source PPE via DHBs, and train staff on its use, including [donning, removing and disposing of PPE](#)
- have cleaning materials and PPE sourced and in stock at the clinic
- cleaning plan developed and implemented
- all osteopaths and support staff trained in new clinic procedures and all procedures provided to them
- plan in place for how appointments will be handled if there is more than one patient to be seen in a session e.g. one patient in / one out, time between appointments or staggered times if there is more than one practitioner working in the clinic
- ensuring no patient to patient contact; patients wait outside clinic and are contacted by phone to come in (i.e. no waiting area patients)
- set up a register of who has been in the clinic with current contact details confirmed (including staff members) in case contact tracing is later required.

Preparation

- patient screened for COVID-19 signs or symptoms by phone or telehealth prior to offering a consultation in the clinic
- determine if the patient requires input from any other service such as A&E or urgent care/radiology, prior to coming into the clinic
- when making the appointment give clear instructions to patients regarding where to come, what to expect when they arrive, and how things may differ from their usual visits
- ensure that your place of work is registered with the NZ COVID Tracer App and that the poster with the unique QR code is clearly displayed at the entrance to your premises
- ensure appropriate PPE is in place ready to be used (all staff to be trained as above)
- only have one osteopath using each room (no sharing on other days)

- limit points of entry to the clinic – preferably patients can enter one door and leave from another
- all unnecessary items should be removed from the waiting room and surfaces kept clear and clean, including excessive furniture, wall hangings/posters, waste bins, water coolers etc.
- areas of known contamination should be cleaned and disinfected
- make it clear at the entrances that no walk-in appointments off the street are available.

During Clinic visit

- patient again screened for any COVID-19 signs or symptoms prior to entering the clinic
- require patient, and others, to 'hand sanitise' on arrival and departure from the clinic
- osteopaths fill out any paperwork and forms for the patient (sign with cleaned pen)
- allow only the patient to be present in the clinic; a carer or guardian may be allowed to accompany the patient in appropriate circumstances so long as they are screened first and are free from COVID-19 signs or symptoms
- confirm contact details for the patient and each person accompanying the patient and inform them that these details may be used for contact tracing, if required
- maintain 2 metre separation where possible, for instance, during the subjective examination
- follow PPE protocol as advised by the Ministry of Health
- minimise contact time closer than 2 metres
- follow all hand and hygiene practices
- keep doors open (to the clinic, treatment doors if possible ajar)
- close the clinic toilet to patients, and advise patients when making the appointment
- minimise the use of equipment such as pillows for instance, which are not easy to clean or replace.

Post Clinic Visit

- clean all equipment, pillows and plinths after each patient contact .
- carry out [correct steps for safe removal and disposal of PPE](#)
- follow cleaning protocol - wiping down all hard surfaces with detergent and water and then use a disinfectant
- appropriate PPE should be worn for cleaning the room
- PPE and waste should be disposed in a closed clinical waste bin and in accordance with clinical waste requirements

After clinic finished

- osteopath showers, changes clothes and shoes at clinic
- osteopath leaves clinic through different doors if possible (the clean side of clinic)
- alternatively the osteopath showers at home, cleans the shower before contacting anyone in their home bubble and hot washes their clothes and towels etc.

Further resources from the Ministry of Health

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