

Chapter 3: Response and escalation framework

This chapter is part of COVID-19 Infection Prevention and Control Manual 2021, Clinical Excellence Commission, 2021.

The publication summarises current evidence about COVID-19 infection prevention and control strategies and interventions, and their implementation in healthcare settings.

The publication will continue to evolve with additional chapters over time that address infection prevention and control in other settings. As new resources become available, they will be added as hyperlinks of the resources section in each chapter or to the appendices.

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Key points

- NSW provides a risk assessment for the health system as a whole
- The COVID-19 Risk Monitoring Dashboard brings together data on cases, clusters, the public health response and the impact of COVID-19 on the workforce
- An expert panel reviews the dashboard and assigns a risk rating which influences infection prevention and control practices.

Acronyms and abbreviations

ACFs	Aged Care Facilities
ACI	Agency for Clinical Innovation
AGP	Aerosol-generating procedure
ARI	Acute respiratory infection
CEC	Clinical Excellence Commission
CHO	Chief Health Officer
DCF	Disability Care Facility
ED	Emergency Department
FAQs	Frequently asked questions
GP	General Practitioner
HW	Health worker
ICU	Intensive Care Unit
IPAC	Infection prevention and control
LHD	Local Health District
MoH	NSW Ministry of Health
MPS	Multi-Purpose Service
NSW	New South Wales
NSWA	New South Wales Ambulance
PHEOC	Public Health Emergency Operations Centre

PHO	Public Health Order
PPE	Personal protective equipment
RACF	Residential aged care facility
RERP	Risk Escalation Review Panel
SHN	Specialty Health Network
TB	Tuberculosis
WHS	Work Health and Safety

3.1 Introduction

This COVID-19 Infection Prevention and Control Response and Escalation Framework (risk matrix) has been developed to provide guidance to NSW health facilities on the various levels of COVID-19 transmission risk. The development of this framework has been informed by NSW, national and international experience and evidence. The intent is that any changes to risk level are state-wide, an approach informed by consultation with the Ministry of Health (MoH) and Local Health Districts (LHDs)/Speciality Health Networks (SHNs) and other health organisations such as NSW Ambulance.

3.2 Escalation principles

During situations of increased risk, it is important to be able to escalate and provide a proportionate response with specific infection prevention and control precautions to align with the level of community transmission and onward spread.

The level of risk and escalation or de-escalation is assessed and provided by the Risk Escalation Review Panel (RERP) which meets weekly and has the following members: MOH Deputy Secretary (Chair), the COVID-19 Public Health Response Branch (PHEOC), the Agency for Clinical Innovation (ACI), MoH Workforce, HealthShare and the CEC.

The RERP reviews a variety of data sets as follows:

1. Geographic clusters within LHDs/SHNs, Local Government Areas or State-wide
2. Level of community transmission and the Public Health Response
3. Number of COVID-19 tests/percentage of tests that are positive
4. Number of patients requiring hospitalisation and changes in the burden of COVID-19 within health facilities
5. Outbreaks in facilities e.g., residential aged care facilities, multi-purpose services and community residential care homes
6. Number of health worker infections
7. Number of sewage testing sites with positive results.

This information is summarised in the COVID-19 Risk Monitoring Dashboard available [here](#).

Transition between risk levels

Although the risk of community transmission and consequent impact on health services varies across LHDs/SHNs, the agreed approach is to have a state-wide decision-making process. The criteria used to transition between risk levels of green, amber and red are a composite of community transmission, the public health response and the burden of infection in the health system. Data supporting these is reviewed weekly by the RERP as above. Where an LHD/SHN local community risk warrants additional assessment, this should be escalated by the Chief Executive of the LHD/SHN to the Chief Health Officer (CHO) who will call an extraordinary meeting of the RERP to agree on an NSW Health response.

As information about the COVID-19 pandemic is continuing to evolve there may be additional advice provided by the CHO or other agencies which may result in enhancement of existing risk levels.

Escalating to higher transmission risk levels requires LHDs and SHNs to rapidly respond and implement the key controls aligning with each risk level. De-escalation may require additional communication and implementation of changes may take longer.

Additional precautions may apply through the COVID-19 [Public Health Order](#) (PHO) based on community transmission and epidemiological risks.

Private and independent health care providers may refer to our advice for guidance and to inform their own local risk assessments.

3.3 General principles for all settings and all scenarios

The following principles provide a robust framework for LHD/SHNs and other healthcare organisations to manage risk and apply to all settings and all scenarios. A key focus during escalation is to ensure that the hierarchy of controls are in place and to look at the use of PPE in response to the level of community transmission.

The fundamental principles of infection prevention and control must always be applied across all settings. These principles apply across all scenarios and are not outlined in detail in the tables below but are listed here:

1. Administrative and engineering controls
(refer to *Chapter 2 - section 2.4.6 Implement Transmission-Based Precautions*)
2. [Physical distancing](#)
3. Standard Precautions for all healthcare interactions
(refer to *Chapter 2 - section 2.4.5 Application of Standard Precautions for all patients at all times*)
4. [Hand hygiene](#)
5. Enhanced cleaning of high touch surfaces
(refer to *Chapter 2 - section 2.6 Environmental Cleaning*)
6. [Ensure relevant HW have completed donning and doffing of PPE training](#)
7. [Ensure there is on-site, readily available COVID-19 testing for HW](#)

8. [Health workers \(HWs\) stay at home if they are unwell](#)
9. Entry screening for visitors and HW as per [NSW Health guidelines](#).

3.4 NSW Risk Matrix

LOW TRANSMISSION (GREEN ALERT)	MODERATE TRANSMISSION (AMBER ALERT)	HIGH TRANSMISSION (RED ALERT)
<p>Standard Precautions</p> <p>Transmission-Based Precautions</p> <p>All Emergency Department (ED) staff to wear surgical masks in clinical areas during patient care and eye protection when within 1.5m as per droplet precautions</p> <p>All patients with an ARI to wear a mask on presentation and transit</p> <p>Aged Care Facilities (ACFs), Disability Care Facilities (DCFs) and home care services should take extra precautions including the use of masks where there are areas for increased testing*</p> <p>Risk assessment of cases and community transmission will be determined by the Risk Escalation Review Panel</p>	<p>Escalate PPE controls</p> <p>HWs to wear surgical mask within clinical area in addition to Standard Precautions</p> <p>Eye protection when within 1.5m as per droplet precautions</p> <p>All ED staff to wear surgical masks in clinical areas</p> <p>Patients presenting directly from the community, inter- and intra-hospital transfers wear a mask</p> <p>Visitors must wear a mask before entering facilities</p> <p>Risk assessment of cases and community transmission will be determined by the Risk Escalation Review Panel</p>	<p>Escalate PPE controls</p> <p>Universal mask use by HWs</p> <p>Eye protection when within 1.5m as per droplet precautions</p> <p>Patients presenting directly from the community, inter- and intra-hospital transfers wear a mask</p> <p>Risk assessment of cases and community transmission will be determined by the Risk Escalation Review Panel</p> <p>Visitors by risk assessment and to wear mask</p> <p>Participants in care to be risk assessed to be able to continue providing care and support. A participant in care can be described as someone actively providing care, physical and/or emotional support</p>

* <https://www.health.nsw.gov.au/Infectious/covid-19/Pages/aged-care.aspx>



Ensure screening and triage processes are in place to manage patients with suspected or confirmed COVID-19

Risk Matrix		LOW (GREEN ALERT) TRANSMISSION	MODERATE (AMBER ALERT) TRANSMISSION	HIGH (RED ALERT) TRANSMISSION
Patients	All patients in hospital	Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene Exclude outpatients if suspected or confirmed COVID-19 unless urgent	All patients to wear a mask (surgical or own approved cloth mask) on presentation and during transit if possible Manage suspected or confirmed COVID-19 patients in a single room where possible	All patients to wear a surgical mask on presentation and during transit if possible Manage suspected or confirmed COVID-19 patients in a single room where possible Prioritise single rooms based on patient's clinical condition and risk of transmission level or cohort confirmed cases if no single rooms available. Minimise patient movement where safe to do
	Presenting directly to Emergency Department (ED)	Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene All patients with an ARI to wear a mask on presentation and transit	All patients to wear a mask (surgical or own approved cloth mask) on presentation and during transit if possible	All patients to wear a mask (surgical or approved cloth mask) on presentation and during transit if possible
	Patient presenting directly to Birth Suite, medical imaging, outpatients, rehabilitation groups and community health services	Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene Patients to wear a mask if ARI suspected or confirmed	All patients to wear a mask (surgical or own approved cloth mask) on presentation and during transit if possible	All patients to wear a mask (surgical or own approved cloth mask) on presentation and during transit if possible
	Maternity & paediatric patients	Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene	Mother and baby to stay together Children 12 years and under are not required to wear a mask	Mother and baby to stay together All adult patients to wear a mask during presentation and transit if possible Children 12 years and under are not required to wear a mask
	Home based care (patients seen in their own home)	Standard Precautions: hand hygiene, physical distancing, cough etiquette,	Standard Precautions (as per Green Alert level) and mask (surgical or own approved	All patients to wear a mask (surgical or approved cloth mask) when receiving care if possible

Risk Matrix		LOW (GREEN ALERT) TRANSMISSION	MODERATE (AMBER ALERT) TRANSMISSION	HIGH (RED ALERT) TRANSMISSION
Patients		respiratory hygiene and personal hygiene	cloth mask) should be worn by patients at their discretion	
	Residents of residential aged care facilities	Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene ACFs, DCFs and home care services should take extra precautions including the use of masks where there are areas for increased testing NSW Health advice for RACFs	Standard Precautions (as per Green Alert level) or local decision based on case locations risk level see NSW Health advice for RACFs	Patient mask use should be based on facility risk assessment and NSW Health PHO recommendation
Health workers		Standard Precautions Physical distancing to apply at all HW breaks/meetings where possible Droplet Precautions (surgical mask and eye protection) if within 1.5m of patients Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for: <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU 	HWs to wear surgical mask within clinical area Droplet Precautions (surgical mask and eye protection) if within 1.5m of patients Physical distancing to apply at all HW breaks/meetings where possible Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for: <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU 	Universal surgical mask use by all HW when in the facility Droplet Precautions (surgical mask and eye protection) if within 1.5m of patients Physical distancing to apply at all HW breaks where possible Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for: <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU
Standard Precautions and physical distancing apply at all times	Healthcare facility (see next section for HW working in ED)			






















Risk Matrix		LOW (GREEN ALERT) TRANSMISSION	MODERATE (AMBER ALERT) TRANSMISSION	HIGH (RED ALERT) TRANSMISSION
Health workers	HWs working in ED	As above PLUS All ED HW to wear surgical masks in clinical areas during any patient care	As above	As above
	Home based care (patients seen in their own home)	Standard Precautions HWs who work in DCFs and home care services should take extra precautions including the use of masks where there are areas for increased testing see NSW Health advice for RACFs	Surgical mask within 1.5m of patient/client	Surgical masks (universal mask use)
	Residential aged care facility (RACF)	HWs who work in RACFs should take extra precautions including the use of masks where there are areas for increased testing see NSW Health advice for RACFs	HWs who work in RACFs, DCFs and home care services should take extra precautions including the use of masks where there are areas for increased testing see NSW Health advice for RACFs	Surgical masks (universal mask use)
Visitors	All visitors	Standard Precautions No restrictions if meets the COVID-19 screening criteria on entry Visitor numbers as per local policy	Visitors must wear a mask before entering the facility (surgical or own approved cloth mask) Children 12 years and under are not required to wear a mask Consider limiting number of visitors (acknowledgement of individual patient needs)	Restrictions should be based on the NSW Health PHO Visitors must wear a mask before entering the facility (surgical or own approved cloth mask) Children 12 years and under are not required to wear a mask Visitor restrictions should be based on risk assessment and individual patient needs and circumstances

Risk Matrix		LOW (GREEN ALERT) TRANSMISSION	MODERATE (AMBER ALERT) TRANSMISSION	HIGH (RED ALERT) TRANSMISSION
Visitors	A participant in care can be described as someone actively providing care, physical and/ or emotional support	Standard Precautions No restrictions if meets the COVID-19 screening criteria on entry	Carers and support person(s) must wear a mask before entering the facility (surgical or own approved cloth mask) Participants in care to be risk assessed to be able to continue providing care and support	Surgical masks (universal mask use) Participants in care to be risk assessed to be able to continue providing care and support
	Visitors to RACF	Visitation should be based on the latest advice from COVID-19 Public Health Response Branch see NSW Health advice for RACFs	Visitation should be based on the latest advice from COVID-19 Public Health Response Branch see NSW Health advice for RACFs	Visitors, including any children will require an exemption to visit

Note: Although these principles apply across healthcare environments, when caring for vulnerable patients/residents, individual circumstances should be considered.

The evidence shows that SARS-CoV-2 can spread from hand-to-hand contact from inanimate objects and highly touched fomites, including medical equipment. There is also growing evidence on the transmission of COVID-19 in common areas when masks are off, in tea rooms, changing rooms, and crowded transport to and from the hospital where physical distancing cannot be maintained. The importance of hand hygiene, physical distancing, enhanced cleaning for shared equipment and environment remains critical to ensure the safety of HWs.

Summary Table: COVID-19 risk assessment guide for PPE selection for direct care of patients

Patient Characteristics		Precautions Required							
				 Frequent hand hygiene	 Surgical mask ³	 P2/N95 Respirator ^{3,4}	 Eye Protection	 Fluid Resistant Gown	 Gloves
No acute respiratory infection (ARI) symptoms AND no recognised COVID-19 epidemiological risk ²	STANDARD PRECAUTIONS FOR ALL ¹	Subject to current NSW Risk Level and/or Public Health Order				As per standard precautions	As per standard precautions	As per standard precautions	
ARI without COVID19 epidemiological risk ² (important to test for other respiratory viruses)		CONTACT + DROPLET							
Patients with suspected ² or confirmed COVID-19 OR as identified as a close contact by NSW Public Health Unit ⁵		CONTACT + DROPLET + AIRBORNE ⁴							

Notes:





1. Standard precautions always include a risk assessment of the need for PPE. All health workers require COVID-19 vaccination
2. COVID19 epidemiological evidence (in the past 14 days) as specified by CDNA COVID019 SoNG <https://www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm>
3. For extended use, masks or respirators can be worn for up to 4-8 hours respectively. Eye protection can also remain on between patients. Masks/respirators and eye protection should be discarded (or reprocessed in the case of reusable eye protection) if they are moist or contaminated with blood or bodily fluids and after removal
4. Health workers required to wear P2/N95 respirators should be trained in the correct use including fit checking, donning and doffing. This also applies to the use of reusable respirators
5. Latest COVID-19 case locations and alerts in NSW <https://www.health.nsw.gov.au/Infectious/covid-19/Pages/case-locations-and-alerts.aspx>

Adapted from *Personal Protective Equipment (PPE) for patient care with symptoms of acute respiratory illness* including COVID-19 HNELHD



3.5 Green Alert poster

Mask use NOT required on entry

STANDARD PRECAUTIONS ALWAYS APPLY	
Patients	<p>Ensure screening and triage processes are in place to manage patients with suspected COVID-19</p>
	<p>Standard Precautions: hand hygiene, physical distancing, cough etiquette, respiratory hygiene and personal hygiene</p> <p>Unless urgent, exclude outpatients with suspected or confirmed COVID-19</p> <p style="text-align: center;">All patients with an acute respiratory infection to wear a mask on presentation and transit</p>
	<p style="text-align: center;">Standard Precautions</p> <p>Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for:</p> <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU <p style="background-color: yellow;">All ED HW to wear surgical masks in clinical areas and eye protection when within 1.5m as per droplet precautions</p> <p style="text-align: center;">Physical distancing to apply for all HW breaks</p>
Visitors	<p>No restrictions if approved during the COVID-19 entry screening criteria</p> <p>Promote hand hygiene and physical distancing at entry to health facility and patient rooms</p>

OR

3.6 Green Alert frequently asked questions

The frequently asked questions (FAQs) provide an explanation of when masks need to be worn by HWs, patients, visitors, carers and other people coming into NSW Health facilities.

HEALTH WORKERS	
When should I wear a mask?	<p>A decision about using a mask for patient care should be considered as part of the risk assessment for Standard Precautions (see Risk Assessment in the Infection Prevention and Control Practice Handbook).</p> <p>Part of the risk assessment is the anticipated exposure risk of blood or body fluid to eyes/mouth/nose.</p> <p>Surgical masks should still be worn when assessing or providing care to any patient with acute respiratory symptoms.</p> <p>Respirators (P2/N95) and eye protection is required when caring for patients with suspected or confirmed COVID-19.</p>
Why do I need to wear a mask when working in the ED?	<p>Although the risk of COVID-19 infection is very low in the community, the emergency departments are thought to be a higher risk environment and a surgical mask and eye protection is recommended for all patient care within 1.5 metres of a patient.</p> <p>Respirators (P2/N95) and eye protection are required when caring for patients with suspected or confirmed COVID-19.</p>
When in crowded areas of the hospital e.g., eating areas/cafeteria, do HWs need to wear a surgical mask?	<p>This will be at the HW's discretion.</p> <p>Physical distancing, cough etiquette, respiratory hygiene and hand hygiene is always to be practiced.</p>
During this PPE GREEN Alert, should HWs with conditions that place them in a 'vulnerable' group be redeployed?	<p>Vulnerable HWs should be individually risk assessed to determine their suitability for clinical areas.</p> <p>Vulnerable HWs may choose to wear a surgical mask when within 1.5 metres of any patient to reduce this risk and this should be considered in the risk assessment.</p>
If a HW is in a non-clinical area or office, should they wear a surgical mask?	<p>No, masks do not need to be worn in these settings.</p> <p>Physical distancing, cough etiquette, respiratory hygiene and hand hygiene are always to be practiced.</p>
If a visitor asks why a HW is not wearing a surgical mask, how should the HW respond?	<p>Masks are not required for routine patient care.</p> <p>Information about the risk levels should be placed in public spaces for patients and the relatives and carers.</p>

<p>If a HW travels in a shared health vehicle with another HW, do they need to wear a surgical mask?</p>	<p>Masks are unlikely to be required.</p> <p>Please refer to <i>Chapter 2: section 2.13 Transport</i></p>
<p>Should HWs entering a school for the provision of a service wear a mask? (e.g., immunisation or school within a health facility)</p>	<p>For school-based programs, masks are not routinely recommended. However, a risk assessment must always be performed and there may be situations where a mask is worn.</p> <p>For schools located within health facilities, HWs can wear a mask if they are required to provide direct care for high-risk person/client (ARI) within 1.5 metres.</p>
<p>PATIENTS</p>	
<p>When should a patient wear a mask? (see also questions regarding approved cloth masks below)</p>	<p>A mask should be worn if the patient is attending a health facility and has acute respiratory symptoms (whether they have had a COVID-19 test or not). e.g., Emergency Department, Outpatient Clinic, Birth Suite, Medical Imaging, Pathology Collection.</p>
<p>Once a patient is admitted to a clinical area, are they required to wear a surgical mask while they are an inpatient?</p>	<p>Patients will not usually be required to wear a mask.</p> <p>If they have acute respiratory symptoms or are suspected or confirmed COVID-19, they are required to wear a surgical mask if they are leaving their room (for example going to the medical imaging department).</p> <p>Remember: Some patients will not be able to tolerate wearing a mask.</p>
<p>Why don't children 12 years and under need to wear a mask if they have respiratory symptoms?</p>	<p>In general, it is not practical for children to be fitted with a mask.</p> <p>There appears to be limited transmission of COVID-19 from children to adults.</p> <p>If a child is wearing a mask, then this can continue while the child is inside a health facility.</p> <p>Masks can be choking hazards for children under two and are not suitable for this age group.</p> <p>This advice is consistent with other jurisdictions.</p>

<p>Can a patient with suspected or confirmed COVID-19 wear a P2/N95 respirator?</p>	<p>Patients should not wear a P2/N95 respirator but may be asked to wear a surgical mask when in a shared space.</p>
<p>APPROVED CLOTH MASKS</p>	
<p>Can a HW wear an approved cloth mask at work?</p>	<p>No, approved cloth masks vary in quality and effectiveness and they are not fluid resistant. This means they will not prevent blood, body fluids and respiratory droplets penetrating the mask.</p> <p>An approved cloth mask can be worn by HWs outside the health facility e.g., travelling to and from work.</p>
<p>If a visitor comes in wearing an approved cloth mask, should it be changed to a surgical mask?</p>	<p>No, visitors are not required to wear masks.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask and cough etiquette, respiratory hygiene are to be provided.</p> <p>If the visitor has acute respiratory symptoms or fever, they should not be allowed entry as per screening criteria.</p>
<p>If a patient/client, without any COVID-19 symptoms, comes in wearing an approved cloth mask, should it be changed to a surgical mask?</p>	<p>No, they are not required to wear a mask but may continue to wear based on personal choice.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask, cough etiquette and respiratory hygiene are to be provided.</p>
<p>If a patient/client, with ARI or COVID-19 symptoms, comes in wearing an approved cloth mask, should it be changed to a surgical mask?</p>	<p>Yes, an approved cloth mask will become damp very quickly when someone has an acute respiratory symptom, fever or COVID-19 symptoms.</p> <p>The mask will be much less effective when damp and may be touched frequently by the patient.</p> <p>A surgical mask should be provided for the patient and usual admission/discharge processes for suspected or confirmed COVID-19 patients are to be followed.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask, cough etiquette and respiratory hygiene are to be provided.</p> <p>Access to tissues, ABHR and a bin is to be provided.</p>

<p>If a member of the community wears a towel, scarf, tea towel etc. into the health facility, is this classified as a approved cloth mask?</p>	<p>No, these are not classified as approved cloth masks.</p> <p>NSW Health has released general guidance for approved cloth masks. This information should be followed.</p>
<p>HOME VISITS</p>	
<p>Do HWs need to wear a surgical mask when they are visiting a patient in their home to provide healthcare?</p>	<p>A surgical mask is recommended only if the patient has respiratory symptoms or is in self-isolation.</p> <p>A P2/N95 respirator is recommended if in an area of increased testing.</p> <p>HWs should maintain physical distancing whenever possible.</p> <p>Patients are not required to wear a mask if they are not showing ARI symptoms but may choose to wear one.</p>
<p>CARER IN A HEALTHCARE SETTING</p>	
<p>Should carers wear a surgical face mask if within 1.5 metres of a patient?</p>	<p>Yes, if the person has an ARI and COVID-19 has not been ruled out by testing.</p>
<p>VISITORS</p>	
<p>Are visitors required to wear a mask if they come to a health facility?</p>	<p>No, they are not required to wear a mask.</p> <p>If they have ARI symptoms, they need to defer their visit.</p> <p>If they are already wearing a cloth or surgical mask, they can continue to wear this. See section on Approved cloth masks.</p>
<p>What should be done if a visitor appears to have ARI symptoms?</p>	<p>Offer an alternative such as a virtual visit.</p> <p>The visitor should be asked to defer their visit if possible.</p> <p>They must be referred for COVID-19 testing and told to isolate until negative test result is obtained.</p>
<p>AGED CARE FACILITIES/MULTI-PURPOSE SERVICE (MPS)</p>	
<p>Does a resident in an ACF or MPS need to wear a surgical mask?</p>	<p>No, this is classified as their home.</p>

PATIENTS WITH A DISABILITY, COGNITIVE IMPAIRMENT, BEHAVIOURAL ISSUES AND/OR MENTAL HEALTH CONDITIONS

Should a HW/carer/visitor wear a surgical mask if within 1.5 metres of a patient?

A HW/carer/visitor in a DCF should take extra precautions including the use of masks where there are areas for increased testing see [NSW Health advice for RACFs](#)

A surgical mask is recommended only if the patient has respiratory symptoms.

HWs should maintain physical distancing whenever possible.

HWs, visitors and/or carers wearing a respirator or a surgical mask may cause some patients distress or trigger changes to their behaviour or mental health condition. This will require a risk assessment and ongoing monitoring to determine the best way to manage the risk of transmission of COVID-19 when providing care within 1.5 metres of the patient.

If a risk assessment determines that a mask will pose a physical risk to the patient, alternatives such as physical distancing and full-face shield should be considered. The risk assessment should determine the appropriate PPE for the HW.

All decisions regarding the risk assessment should be documented in the patients' healthcare record.

VOLUNTEERS IN A HEALTHCARE SETTING

Are volunteers required to wear a mask?

Volunteers are not required to wear a mask.

If they are in a vulnerable group, they may choose to wear a mask while in the healthcare setting.

If volunteering in ED a mask should be worn within 1.5 metres of a patient.

Reminders regarding hand hygiene, physical distancing, cough etiquette, respiratory hygiene and not coming to the facility if unwell are to be provided.

Volunteers should not be interacting with patients with an ARI or suspected or confirmed COVID-19

CONTRACTORS

When should a contractor wear a mask?

They are not required to wear a mask while in the facility unless they require one for dust/gas/environmental exposures.

If working within ED a mask should be worn within 1.5 metres of patients.

Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.

It is expected that contractors maintain adequate supplies of PPE and ABHR as part of their work, health and safety (WHS) obligations.

STOCK DELIVERY TO CLINICAL AREAS – EXTERNAL DELIVERY/COURIER COMPANIES

Do delivery/courier HW need to wear a mask (surgical or own cloth) if they are making a delivery to clinical areas?

No, masks are not routinely required unless within 1.5 metres of patients in the ED setting.

ABHR should be made available to delivery/courier HW.

Reminders regarding physical distancing, cough etiquette, respiratory hygiene and not being onsite if they have ARI symptoms or fever.

VALVE MASKS

If a patient or a visitor is wearing a mask with a valve, do we need to change it to a surgical mask?

Yes, if the patient/visitor is wearing a mask because of respiratory symptoms, this should be changed.







These masks should not be worn as the exhalation valve is generally not filtered and particles are able to be exhaled via the valve.

3.7 Amber Alert poster

Targeted surgical mask use for all health workers caring/working within all clinical area

STANDARD PRECAUTIONS ALWAYS APPLY

Ensure screening and triage processes are in place to manage patients with suspected COVID-19

Patients	<p>Patients presenting directly from the community, inter and intra hospital transfers are required to wear a mask where able to do so</p> <p>Children 12 years and under are not required to wear a mask</p> <p>Note: Although these principles apply across healthcare environments when caring for vulnerable patients/residents, individual circumstances should be considered</p>	 
Health workers	<p>Health workers are required to wear a surgical mask within clinical area Eye protection when within 1.5m as per droplet precautions</p> <p>Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for:</p> <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU <p>Non-patient areas (e.g., tea rooms) physical distancing, hand hygiene and regular cleaning are important. Wear mask unless eating or drinking.</p>	  <p style="text-align: center; font-size: small;">OR</p> 
Visitors	<p>Visitors must wear a mask before entering the facility (own mask or provided by the facility)</p>	

3.8 Amber Alert frequently asked questions

The FAQs provide an explanation of when masks need to be worn by HWs, patients, visitors, carers and other people coming into NSW Health facilities.

HEALTH WORKERS	
<p>What does our clinical area do if we have a limited number of surgical masks for a short period of time?</p>	<p>All issues related to PPE should be escalated immediately through usual organisational structures. This should be addressed at LHD/SHN PPE Governance Committees.</p> <p><i>Chapter 4: Personal Protective Equipment</i> provides guidance on extended or sessional use of PPE. HW are not expected to complete a task if the PPE required is unavailable. See question below.</p>
<p>Can a HW wear the same surgical mask for multiple patient interactions?</p>	<p>Yes, this is called extended or sessional use of PPE.</p> <p>If a surgical mask can be worn without pulling it down or removing it, for example to speak, it can be worn for up to four hours. If it is pulled down or removed to speak, it must be discarded immediately, and hand hygiene performed.</p> <p>If the mask is touched, hand hygiene should be performed immediately. The mask should be removed if it becomes damp or loose.</p> <p>Extended or sessional use of a mask or respirator can be used across different clinical areas if it is not contaminated. Contamination is likely when providing care for patients with COVID-19 or other infections transmitted via the respiratory route and must be changed prior to entering a different clinical area.</p> <p>Patient transport or NSW Ambulance (NSWA) HW who move patients between facilities can wear the same mask for the duration of the transport but must discard and change their mask before the next patient transport. Ensure a comfortable fit if driving a vehicle.</p> <p>Safe mask use must always be considered.</p>
<p>When in crowded areas of the hospital e.g., eating areas/cafeteria, do HWs need to wear a surgical mask?</p>	<p>Yes, where 1.5 metres cannot be maintained</p> <p>Physical distancing, cough etiquette, respiratory hygiene and hand hygiene is always to be practiced.</p> <p>Masks should be worn if distancing is not possible.</p>
<p>When should HWs wear a P2/N95 respirator?</p>	<p>P2/N95 respirators including eye protection are worn when:</p> <ul style="list-style-type: none"> • Providing care for suspected or confirmed COVID-19 patients • Providing care for close contact of COVID-19 cases as determined by the PHU • Providing care or treatment to a patient with a communicable disease that is spread by the airborne route e.g., Tuberculosis (TB), measles

Should HWs be wearing masks in safety huddles, meetings, family conferences etc on the ward/other designated area?	Yes, if distancing cannot be maintained. The decision should depend on the size of the room, number of people in the space, ability to physical distance, ventilation and the duration of safety huddles.
What should be done if a HW declines to wear a surgical mask when within 1.5 metres of a patient?	This is a WHS risk and should be managed within this legislation. Surgical masks, like other PPE are provided to protect HWs, patients and visitors. Where masks are prescribed for use, they must be consistently used by HWs and as such are not optional.
Should a HW wear a surgical mask when they are talking to a patient and can maintain a 1.5 metre physical distance?	Yes, A surgical mask is required within clinical areas and when providing direct care to patients.
During this PPE Amber Alert, should HWs with conditions that place them in a 'vulnerable' group be redeployed?	Vulnerable HWs should be individually risk assessed to determine their suitability for clinical areas. Wearing a surgical mask when within 1.5 metres of any patient will reduce this risk and should be considered in the risk assessment.
If a HW is in a non-clinical area or office, should they wear a surgical mask?	If you are in an office on your own or not within 1.5 metres of a patient or other people, a surgical mask is not required. Also refer to PHO Physical distancing, cough etiquette, respiratory hygiene and hand hygiene are always to be practiced.
If a HW travels in a shared health vehicle with another HW, do they need to wear a surgical mask?	Depending on the situation. Please refer to <i>Chapter 2: Transport</i>
Should a HW wear a surgical mask when they are examining a baby or toddler?	Yes, a baby or toddler will always be accompanied by a parent or guardian. Our protection is for everyone. HWs providing direct care within 1.5 metres of any patient must wear a surgical mask.

<p>Should HWs entering a school for the provision of a service wear a mask? (e.g., immunisation or school within a health facility)</p>	<p>For school-based programs, the decision to wear a mask should be based on a risk assessment considering the proximity, intensity and duration of contact with children in the school.</p> <p>For schools located within health facilities, HWs are to wear a mask if they are required to provide direct care within 1.5 metres.</p>
<p>PATIENTS</p>	
<p>When should a patient wear a mask? (see also questions regarding approved cloth masks below)</p>	<p>On arrival to a health facility e.g., Emergency Department, Outpatient Clinic, Birth Suite, Medical Imaging, Pathology.</p> <p>After they are admitted as an inpatient, patients are required to wear a surgical mask if they leave their room for any reason.</p> <p>Refer to the scenario table under the heading 'Patients'.</p>
<p>Once a patient is admitted to a clinical area, are they required to wear a surgical mask while they are an inpatient?</p>	<p>Patients will not usually be required to wear a mask once in their room.</p> <p>If they have acute respiratory symptoms, fever or are suspected or confirmed COVID-19, they are required to wear a surgical mask if they are leaving their room (for example going to the medical imaging department).</p> <p>If patients are to leave the room and physical distancing is not possible, then they will be asked to wear a surgical mask (not a respirator).</p> <p>Remember: Some patients will not be able to tolerate wearing a mask.</p>
<p>When a patient is discharged from a health facility (Emergency Department or as an inpatient) are they required to wear a mask?</p>	<p>Yes, while in the health facility (surgical or approved own approved cloth mask).</p>
<p>What should be done when a patient does not want to wear a mask on arrival (and is not confused or have cognitive impairment or other conditions that might cause difficulty with mask wearing)</p>	<p>Check the reasons for declining to wear a mask and determine if there are alternatives that may be suitable for this patient.</p> <p>If they continue to decline the alternative, the patient should be placed 1.5 metres away from other patients and informed that they are not to walk around the clinical area until they are either discharged from the ED or admitted to their clinical area.</p> <p>Be mindful of the practicalities of wearing a mask for certain patient groups e.g., those with behavioural disorders or mental health conditions, cognitive impairment.</p> <p>Women in labour may find mask wearing difficult and may be unable to comply.</p>

	Where there are no obvious barriers to mask-wearing, the patient should be informed of the current Amber Alert recommendations and their risk for COVID-19.
Why don't children 12 years and under need to wear a mask?	<p>In general, it is not practical for children to be fitted with a mask. There appears to be limited transmission of COVID-19 from children to adults.</p> <p>Parents/guardians are expected to wear a mask and to assist children in this age group with hand hygiene.</p> <p>If a child is wearing a mask, then this can continue while the child is inside a health facility.</p> <p>Masks can be choking hazards for children under two years; therefore, masks are not suitable for this age group.</p> <p>This advice is consistent with other jurisdictions.</p>
Can a patient with suspected or confirmed COVID-19 wear a P2/N95 respirator?	Patients should not wear a P2/N95 respirator but may be asked to wear a surgical mask when in a shared space.
APPROVED CLOTH MASKS	
Can a HW wear an approved cloth mask at work?	<p>No, approved cloth masks vary in quality and effectiveness and they are not fluid resistant. This means they will not prevent blood, body fluids and respiratory droplets penetrating the mask.</p> <p>An approved cloth mask can be worn by HWs outside the health facility e.g., travelling to and from work.</p>
If a visitor comes in wearing an <u>approved cloth mask</u> , should it be changed to a surgical mask?	<p>No, a visitor can wear an approved cloth mask while visiting the health facility.</p> <p>If the visitor can wear the approved cloth mask without discomfort, they should continue to wear it.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask and cough etiquette, respiratory hygiene are to be provided.</p> <p>If the visitor has acute respiratory symptoms or fever, they need to defer their visit and have COVID-19 testing. They should be asked to change to a surgical mask.</p>
If a patient/client, <u>without</u> any COVID-19 symptoms, comes in wearing an <u>approved cloth mask</u> , should it be changed to a surgical mask?	<p>No, if the patient/client can wear the approved cloth mask without discomfort, they should continue to wear it.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask, cough etiquette and respiratory hygiene are to be provided.</p>

<p>If a patient/client, <u>with</u> an ARI or COVID-19 symptoms, comes in wearing an approved cloth mask, should it be changed to a surgical mask?</p>	<p>Yes, an approved cloth mask will become damp very quickly when someone has an ARI, fever or COVID-19 symptoms.</p> <p>The mask will be much less effective when damp and may be touched frequently by the patient.</p> <p>A surgical mask should be placed on the patient and usual admission/discharge processes for suspected or confirmed COVID-19 patients are to be followed.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask, cough etiquette and respiratory hygiene are to be provided.</p> <p>Access to tissues, ABHR and a bin is to be provided.</p>
<p>If a member of the community wears a towel, scarf, tea towel etc. into the health facility, is this classified as a 'approved cloth mask'?</p>	<p>No, these are not classified as approved cloth masks</p> <p>NSW Health has released general guidance for approved cloth masks. This information should be followed.</p>
<p>HOME VISITS</p>	
<p>Do HWs need to wear a surgical mask when they are visiting a patient in their home to provide healthcare?</p>	<p>Yes, a surgical mask should be worn if providing care within 1.5 metres.</p> <p>Wear a P2/N95 respirator if the patient suspected or confirmed COVID-19.</p> <p>If physical distancing can be maintained during the visit, a surgical mask is not required.</p> <p>Patients are not required to wear a mask but may choose to wear one.</p>
<p>CARER IN A HEALTHCARE SETTING</p>	
<p>Should a carer wear a surgical face mask if within 1.5 metres of a patient?</p>	<p>Yes, they can also wear an approved cloth mask.</p> <p>If a carer is accompanying a patient/client into a health facility they should wear a mask (surgical or approved cloth mask).</p>
<p>VISITORS</p>	

Are visitors required to wear a mask if they come to a health facility?	<p>Yes, visitors are required to wear a mask if they are coming into a health facility for any reason.</p> <p>If they are already wearing an approved cloth or surgical mask, they can continue to wear this. See section above on Approved cloth masks.</p>
<p>Birth room</p> <p>If a partner or family member from the same household is supporting the woman during labour, do they need to wear a mask when they are in the room?</p>	<p>If the patient is in a single room, a mask is not required.</p> <p>When the visitor leaves the room, they are to wear a mask until they leave the hospital as per the current risk framework.</p> <p>During labour the partner would carry the same risk as the patient and therefore would not be required to routinely wear a mask.</p>
What should be done if a visitor declines to wear a mask?	<p>The visitor should be informed of the current Amber Alert recommendations and the risk to the patient, themselves and others in the facility they are visiting.</p> <p>If they continue to decline to wear a mask, they should be risk assessed to determine the location of their visit and the patient they are visiting.</p> <p>Offer an alternative such as a virtual visit.</p> <p>They should only be asked to leave the health facility if it is determined that there will be a COVID-19 risk for the patient, themselves or to the clinical area they will be visiting.</p>
Who will teach visitors how to wear a mask?	<p>As visitors are screened at entry areas, HWs who are responsible for these areas should provide assistance on the correct mask use.</p> <p>Posters and information on mask use are available.</p>
AGED CARE FACILITIES/MULTI-PURPOSE SERVICE (MPS)	
In a NSW Health operated RACF/MPS, do these rules for mask wearing apply to HWs?	<p>Yes, HWs who work in RACFs should take extra precautions including the use of masks where there are areas for increased testing see NSW Health advice for RACFs for more detailed information. This includes aged care areas within an MPS.</p> <p>An ACF can recommend the wearing of surgical masks by HWs within 1.5 metres of residents. Approved cloth masks are not recommended for HWs.</p> <p>Refer to ACFs/MPS in the scenario table below.</p>
Does a resident in an ACF or MPS need to wear a surgical mask?	No, this is classified as their home.

PATIENTS WITH A DISABILITY, COGNITIVE IMPAIRMENT, BEHAVIOURAL ISSUES AND/OR MENTAL HEALTH CONDITIONS

Should a HW/carer/visitor wear a surgical mask if within 1.5 metres of a patient?

If possible.
 P2/N95 respirator is recommended for HWs when providing care for patients with suspected or confirmed COVID-19.
 HWs, visitors and/or carers wearing a respirator or a surgical mask may cause some patients distress or trigger changes to their behaviour or mental health condition. This will require a risk assessment and ongoing monitoring to determine the best way to manage the risk of transmission of COVID-19 when providing care within 1.5 metres of the patient. If a risk assessment determines that a mask will pose a physical risk to the patient, alternatives such as physical distancing and full-face shield should be considered. The risk assessment should determine the appropriate PPE for the HW.
 All decisions regarding the risk assessment should be documented in the patients' healthcare record.

VOLUNTEERS IN A HEALTHCARE SETTING

Are volunteers required to wear a mask?

Volunteers should not be within 1.5 metres of patients suspected or confirmed COVID-19.
 If a volunteer provides support or assistance for non-COVID-19 patients in the following areas, they are required to wear a surgical mask:

- Patient areas and within 1.5 metres of patients
- Concierge services, if they are unable to maintain physical distance from people entering the healthcare facility (surgical or an approved cloth mask)
- Selling food or other items (surgical or approved cloth mask)

They are not required to wear a mask in administrative areas if they have no patient contact.
 Reminders regarding hand hygiene, physical distancing, cough etiquette, respiratory hygiene and not coming to the facility if unwell are to be provided.
 A risk assessment of vulnerable volunteers should be conducted based on community transmission case locations.
 Volunteers should not be interacting with patients with an ARI or suspected or confirmed COVID-19

CONTRACTORS



<p>When should a contractor wear a surgical mask?</p>	<p>When they are working in patient areas, they are required to wear a surgical mask.</p> <p>This should be risk assessed depending on where they present to in the healthcare facility and where they will be working e.g., engineering, security, enquiry desk, clinical areas.</p> <p>If they are not going to inpatient/outpatient areas and will not be within 1.5 metres of patients, they are not required to wear a mask. Also check latest PHO</p> <p>Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.</p> <p>It is expected that contractors maintain adequate supplies of PPE and ABHR as part of their WHS obligations.</p> <p>Refer to 'Contractors' in the scenario table below</p>
<p>If a cafeteria is located within a health facility (contracted by the LHD/SHN), should the HW wear a mask when interacting with patients, HW and visitors?</p>	<p>If a physical distance of 1.5 metres CAN be maintained, a mask is not required.</p> <p>If a physical distance of 1.5 metres CANNOT be maintained, a mask (surgical or approved cloth mask) is required</p>
<p>STOCK DELIVERY TO CLINICAL AREAS – EXTERNAL DELIVERY/COURIER COMPANIES</p>	
<p>Do delivery/courier HW need to wear a mask (surgical or cloth) if they are making a delivery to clinical areas?</p>	<p>Yes, masks and ABHR should be made available to delivery/courier HW, if they do not have their own approved cloth mask.</p> <p>Reminders regarding physical distancing, cough etiquette, respiratory hygiene and not being onsite if they have acute respiratory symptoms or fever.</p>
<p>VALVE MASKS</p>	
<p>If a patient or a visitor is wearing a mask with a valve, do we need to change it to a surgical mask?</p>	<p>Yes, these masks should be changed.</p> <p>These masks should not be worn as the exhalation valve is generally not filtered and particles are able to be exhaled via the valve.</p>

3.9 Amber Alert scenarios





AMBER ALERT SCENARIOS		
PATIENTS		
Scenario 1	Scenario 2	Scenario 3
<p>Patient transferring from the ward to the operating theatre.</p> <p>Patient to wear a surgical mask from the ward to the operating theatre or until anaesthetic given. A surgical mask should be put on the patient before leaving the recovery room and removed when returning to their bed.</p>	<p>A patient attending a community health centre.</p> <p>Patient to wear a mask on presentation. If accompanied by any children aged 12 years and under, they do not need to wear a mask unless specified by the parent or guardian.</p>	<p>Home visit by a community HW.</p> <p>Wear P2/N95 respirator for patients with suspected or confirmed COVID-19.</p> <p>HW to wear a surgical mask and eye protection when within 1.5 metres of the patient/client.</p> <p>Patient/client can wear a mask (surgical or approved cloth mask) at their own discretion.</p>
AGED CARE FACILITIES/MULTI-PURPOSE SERVICE (MPS)		
Scenario 1	Scenario 2	Scenario 3
<p>A Registered Nurse works at an MPS that has acute, aged care and the 24 hour drop in/urgent care service. They are asked to see a patient in the 24 hour drop in/urgent care service with suspected COVID-19 and they are currently providing wound care in the aged care area.</p> <p>The P2/N95 respirator and eye protection must be worn to see the suspected or confirmed COVID-19 patient but must be removed and discarded after the completion of the consultation before moving to another area.</p> <p>A surgical mask and eye protection to be worn when providing wound care in the aged care area.</p>	<p>A General Practitioner (GP) has been asked to see patients/residents in both the acute care and aged care areas. No one has suspected or confirmed COVID-19.</p> <p>The GP can implement extended use of the surgical mask and keep it on to see all patients/residents. Safe use of the mask must be applied.</p> <p>Standard Precautions must be adhered to.</p>	<p>Patient transport/NSWA have been requested to transport a patient between a hospital facility and MPS.</p> <p>HW should wear a P2/N95 respirator if the patient is suspected or confirmed COVID-19. If not then a surgical mask should be worn for the duration of the transport and the patient should be offered a mask before leaving to be transported.</p> <p>Standard Precautions must be adhered to.</p>

Standard Precautions must be adhered to.		
CONTRACTORS		
Scenario 1	Scenario 2	Scenario 3
<p>A contractor is coming into the facility to perform work on the air handling unit located in the roof space. They present to the Engineering Department which is located away from clinical and patient areas. A mask is not required. Usual sign on procedures to be completed. Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.</p>	<p>A contractor is coming into the facility to perform work on the air handling unit located in the roof space. They present to the Engineering Department which is located within the main hospital building and entry will be through the main door. A mask is required as they are in the main hospital building, which is accessed by HWs, patients and visitors. Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.</p>	<p>A contractor enters through the main hospital entry and is visiting the Environmental Cleaning Services Manager. They will be providing a demonstration on new equipment. A mask is required as they are in the main hospital building, which is accessed by HWs, patients and visitors. Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.</p>



3.10 Red Alert poster

Mask use for everyone entering a health facility

STANDARD PRECAUTIONS ALWAYS APPLY	
Patients	<p>Ensure screening and triage processes are in place to manage patients with suspected COVID-19</p> <p>Patients presenting directly from the community, inter- and intra-hospital transfers, waiting areas wear a mask when able</p> <p style="padding-left: 40px;">Minimise patient movement where safe to do</p> <p>Community Health Centre – patient/client to wear a mask</p> <p style="padding-left: 40px;">Home visit – patient/client to wear a mask</p>
Health workers (HW)	<p>Universal surgical mask use by all HW when in the facility Eye protection when within 1.5m as per droplet precautions</p> <p>Contact and Airborne Precautions (P2/N95 respirator) and eye protection are required when providing direct care for:</p> <ul style="list-style-type: none"> patients with suspected or confirmed COVID-19 close contact of a COVID-19 case as determined by PHU
Visitors	<p>Visiting restricted – visitors based on risk assessment</p> <p>Participants in care to be risk assessed to be able to continue providing care and support</p> <p>All family members, carers and support services to wear a mask when entering and remaining in the health facility</p>

OR

3.11 Red Alert frequently asked questions

The FAQs provide an explanation of when masks need to be worn by HWs, patients, visitors, carers and other people coming into NSW Health facilities.

HEALTH WORKERS	
What does our clinical area do if we have a limited number of surgical masks or P2/N95 respirators for a short period of time?	<p>All issues related to PPE should be escalated immediately through usual organisational structures. This should be addressed at LHD/SHN PPE Governance Committees.</p> <p><i>Chapter 4: Personal Protective Equipment</i> provides guidance on extended or sessional use of PPE. HW are not expected to complete a task if the PPE required is unavailable. See question below.</p>
Can a HW wear the same mask or P2/N95 respirator for multiple patient interactions?	<p>Yes, this is called extended or sessional use of PPE.</p> <p>If a P2/N95 respirator can be worn without pulling it down or removing it for example, to speak, drink or eat, it can be worn for up to 8 hours continuously; 4 hours for a surgical mask. If it is pulled down or removed, it must be discarded immediately, and hand hygiene performed. HW need to be allowed to take breaks so 4 hours is the maximum period of continuous wear that is recommended.</p> <p>If the mask/respirator is touched, hand hygiene should be performed immediately. The mask/respirator should be removed if it becomes damp or loose.</p> <p>Extended or sessional use of a mask or respirator can be used across different clinical areas if it is not contaminated. Contamination is likely when providing care for patients with COVID-19 or other infections transmitted via the respiratory route and must be changed prior to entering a different clinical area.</p> <p>Patient transport or NSW HW who move patients between facilities can wear the same mask/respirator for the duration of the transport but must discard and change their mask before the next patient transport. Ensure a comfortable fit if driving a vehicle.</p> <p>Safe mask/respirator use must always be considered.</p>
When in crowded areas of the hospital e.g., eating areas/cafeteria, do HWs need to wear a surgical mask?	<p>Yes, Universal mask use applies in Red Alert</p> <p>Physical distancing, cough etiquette, respiratory hygiene and hand hygiene is always to be practiced.</p>
Can HWs wear a P2/N95 respirator for	<p>Yes, P2/N95 respirators are indicated for routine care of patients during Red Alert as per Airborne Precautions for the following.</p>

routine care of the patient?	<p>Airborne Precautions (includes the use of a P2/N95 respirator and eye protection) is required when caring for:</p> <ul style="list-style-type: none"> • Suspected or confirmed COVID-19 patients • Close contact of a COVID-19 case as determined by PHU • Patient with a communicable disease that is spread by the airborne route e.g., Tuberculosis (TB), Measles
Should HWs be wearing masks in safety huddles, meetings, family conferences etc. on the ward/other designated area?	Yes, universal mask use. Physical distancing also applies.
What should be done if a HW declines to wear a surgical mask/respirator during Red Alert?	<p>This is a WHS risk and should be managed within this legislation.</p> <p>Surgical masks/respirators, like other PPE are provided to protect HWs, patients and visitors.</p> <p>Where masks/respirators are prescribed for use and risk assessed as required, they must be consistently used by HWs and as such are not optional.</p>
Should a HW wear a surgical mask when they are talking to a patient and can maintain a 1.5 metre physical distance?	<p>Yes, All HWs are required to wear a surgical mask for all patient/client care during Red Alert</p> <p>Airborne Precautions (includes the use of a P2/N95 respirator and eye protection) is required when caring for</p> <ul style="list-style-type: none"> • suspected or confirmed COVID-19 patients • close contact of a COVID-19 case as determined by PHU • patient with a communicable disease that is spread by the airborne route e.g., Tuberculosis (TB), Measles
During Red Alert, should HWs with conditions that place them in a 'vulnerable' group be redeployed?	<p>Vulnerable HWs should be individually risk assessed to determine their suitability for clinical areas.</p> <p>Wearing a surgical mask or P2/N95 respirator as required during patient care will reduce this risk and should be considered in the risk assessment.</p>
If a HW is in a non-clinical area or office, should they wear a surgical mask?	<p>Yes, universal surgical mask use for Red Alert.</p> <p>Physical distancing, cough etiquette, respiratory hygiene and hand hygiene are always to be practiced.</p>
If a HW travels in a shared health vehicle with another HW, do	<p>Yes, universal surgical mask use for Red Alert.</p> <p>Please refer to <i>Chapter 2: Section 2.13 Transport</i>.</p>

they need to wear a surgical mask?	
Should a HW wear a surgical mask when they are examining a baby or toddler?	Yes, a baby or toddler will always be accompanied by a parent or guardian. Our protection is for everyone. HWs providing direct care of any patient must wear a surgical mask.
Should HWs entering a school for the provision of a service wear a mask? (e.g., immunisation or school within a health facility)	Yes. Restrictions for attending may apply based on risk assessment. For school-based programs, the decision to attend even when wearing a mask should be based on a risk assessment considering the proximity, intensity and duration of contact with children in the school. For schools located within health facilities, HWs are to wear a mask.
PATIENTS	
When should a patient wear a mask? (see also questions regarding approved cloth masks below)	On arrival to a health facility e.g., Emergency Department, Outpatient Clinic, Birth Suite, Medical Imaging, Pathology. After they are admitted as an inpatient, patients are required to wear a surgical mask when in shared rooms or if they leave their room for any reason and does not affect their clinical care.
Once a patient is admitted to a clinical area, are they required to wear a surgical mask while they are an inpatient?	Patients will not usually be required to wear a mask once in their room. If they have acute respiratory symptoms, fever or are suspected or confirmed COVID-19, they are required to wear a surgical mask if they are leaving their room (for example going to the medical imaging department). If patients are to leave the room and physical distancing is not possible, then they will be asked to wear a surgical mask (not a respirator). Patients that may be cohorted in open spaces (avoid where able) may be recommended to wear a surgical mask while in this area. Remember: Some patients will not be able to tolerate wearing a mask.
When a patient is discharged from a health facility (ED or as an inpatient) are they required to wear a mask?	Yes, while transiting through the health facility (surgical mask).

<p>What should be done when a patient does not want to wear a mask on arrival (and is not confused or have cognitive impairment or other conditions that might cause difficulty with mask wearing)?</p>	<p>Check the reasons for declining to wear a mask and determine if there are alternatives that may be suitable for this patient.</p> <p>If they continue to decline the alternative, the patient should be placed 1.5 metres away from other patients/clients and informed that they are not to walk around the clinical area until they are either discharged from the ED or admitted to their clinical area.</p> <p>Be mindful of the practicalities of wearing a mask for certain patient groups e.g., those with behavioural disorders or mental health conditions, cognitive impairment.</p> <p>Women in labour may find mask wearing difficult and may be unable to comply but it is strongly recommended during Red Alert.</p> <p>Where there are no obvious barriers to mask-wearing, the patient should be informed of the current Red Alert recommendations and their risk for COVID-19 and the risk to others.</p>
<p>Why don't children 12 years and under need to wear a mask?</p>	<p>In general, it is not practical for children to be fitted with a mask. There appears to be limited transmission of COVID-19 from children to adults.</p> <p>Parents/guardians are expected to wear a mask and to assist children in this age group with hand hygiene.</p> <p>If a child is wearing a mask, then this can continue while the child is inside a health facility.</p> <p>Masks can be choking hazards for children under two years; therefore, masks are not suitable for this age group.</p> <p>This advice is consistent with other jurisdictions.</p>
<p>Can a patient with suspected or confirmed COVID-19 wear a P2/N95 respirator?</p>	<p>Patients should not wear a P2/N95 respirator but may be asked to wear a surgical mask when in a shared space.</p> <p>Surgical masks provide source control by the patient when wearing.</p>
<p>APPROVED CLOTH MASKS</p>	
<p>Can a HW wear an approved cloth mask at work?</p>	<p>No, approved cloth masks vary in quality and effectiveness and they are not fluid resistant. This means they will not prevent blood, body fluids and respiratory droplets penetrating the mask.</p> <p>An approved cloth mask can be worn by HWs outside the health facility e.g., travelling to and from work.</p>

<p>If a visitor comes in wearing an <u>approved cloth mask</u>, should it be changed to a surgical mask?</p>	<p>No, a visitor can wear an approved cloth mask while visiting the health facility.</p> <p>If the visitor can wear the approved cloth mask without discomfort, they should continue to wear it.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask and cough etiquette, respiratory hygiene are to be provided.</p> <p>If the visitor has acute respiratory symptoms or fever, they need to defer their visit and have COVID-19 testing. They should be asked to change to a surgical mask.</p>
<p>If a patient/client, <u>without</u> any COVID-19 symptoms, comes in wearing an <u>approved cloth mask</u>, should it be changed to a surgical mask?</p>	<p>No, if the patient/client can wear an approved cloth mask without discomfort, they should continue to wear it.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask and cough etiquette, respiratory hygiene are to be provided.</p>
<p>If a patient/client, <u>with</u> an ARI or COVID-19 symptoms, comes in wearing an approved cloth mask, should it be changed to a surgical mask?</p>	<p>Yes, an approved cloth mask will become damp very quickly when someone has an ARI, fever or COVID-19 symptoms.</p> <p>The approved cloth mask will be much less effective when damp and may be touched frequently by the patient.</p> <p>A surgical mask should be placed on the patient and usual admission/discharge processes for suspected or confirmed COVID-19 patients are to be followed.</p> <p>Reminders regarding hand hygiene, physical distancing, avoiding touching their mask, cough etiquette and respiratory hygiene are to be provided.</p> <p>Access to tissues, ABHR and a bin is to be provided.</p>
<p>If a member of the community wears a towel, scarf, tea towel etc. into the health facility, is this classified as an 'approved cloth mask'?</p>	<p>No, these are not classified as approved cloth masks.</p> <p>NSW Health has released general guidance for approved cloth masks. This information should be followed.</p>
<p>HOME VISITS</p>	
<p>Do HWs need to wear a surgical mask when they are visiting a patient in their home to provide healthcare?</p>	<p>Yes, a surgical mask should be worn if providing care in the home.</p> <p>Wear a P2/N95 respirator when providing care to patients with suspected or confirmed COVID-19.</p> <p>Patients are also recommended to wear a mask during visit where able.</p>

CARER IN A HEALTHCARE SETTING

Should a carer wear a surgical face mask?

Yes, they can also wear an approved cloth mask.
If a carer is accompanying a patient/client into a health facility, they should wear a mask (surgical or approved cloth mask).

VISITORS

Are visitors required to wear a mask if they come to a health facility?

Yes, visitors are required to wear a mask if they are coming into a health facility for any reason.
If they are already wearing an approved cloth mask (as per NSW Health criteria) or surgical mask, they can continue to wear this. See section above on Approved cloth masks.
Reduce visitors to essential only and follow local procedures.

Birth room
If a partner or family member from the same household is supporting the women during labour, do they need to wear a mask when they are in the patient's room?

A mask is recommended for the mother and any support person(s).
When the visitor leaves the room, they are to wear a mask until they leave the hospital as per the Red Alert risk level.

What should be done if a visitor declines to wear a mask?

The visitor should be informed of the current Red Alert recommendations and the risk to the patient, themselves and others in the facility they are visiting.
If they continue to decline to wear a mask, they should be risk assessed to determine the location of their visit and the patient they are visiting.
Offer an alternative such as a virtual visit.
They should only be asked to leave the health facility if it is determined that there will be a COVID-19 risk for the patient, HW, themselves or to the clinical area they will be visiting.

Who will teach visitors how to wear a mask?

As visitors are screened at entry areas, HWs who are responsible for these areas should provide assistance on correct mask use.
Posters and information on mask use are available [here](#).

AGED CARE FACILITIES/MULTI-PURPOSE SERVICE (MPS)

<p>In a NSW Health operated RACF/MPS, do these rules for mask wearing apply to HWs?</p>	<p>Yes, HWs who work in RACFs should take extra precautions including the use of masks where there are areas for increased testing see NSW Health advice for RACFs for more detailed information. This includes aged care areas within an MPS.</p> <p>P2/N95 respirator is recommended for HWs when providing care for patients with suspected or confirmed COVID-19.</p> <p>Visitors, including any children may require an exemption to visit.</p>
<p>Does a resident in an ACF or MPS need to wear a surgical mask?</p>	<p>Risk assess.</p> <p>Focus should be on separation, segregation, and isolation. All HW to wear appropriate PPE.</p>

PATIENTS WITH A DISABILITY, COGNITIVE IMPAIRMENT, BEHAVIOURAL ISSUES AND/OR MENTAL HEALTH CONDITIONS

	<p>Yes.</p> <p>P2/N95 respirator is recommended for HWs when providing care for patients with suspected or confirmed COVID-19.</p> <p>HWs, visitors and/or carers wearing a P2/N95 respirator or a surgical mask may cause some patients distress or trigger changes to their behaviour or mental health condition. This will require a risk assessment and ongoing monitoring to determine the best way to manage the risk of transmission of COVID-19 when providing care during Red Alert. If a risk assessment determines that a mask will pose a physical risk to the patient, alternatives such as physical distancing and full-face shield should be considered. The risk assessment should determine the appropriate PPE for the HW.</p> <p>All decisions regarding the risk assessment should be documented in the patients' healthcare record.</p>
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VOLUNTEERS IN A HEALTHCARE SETTING

<p>Are volunteers required to wear a mask?</p>	<p>Volunteers may be restricted during Red Alert.</p> <p>If a volunteer provides support or assistance in the facility, they are required to wear a surgical mask (this includes administrative areas).</p> <p>Reminders regarding hand hygiene, physical distancing, cough etiquette, respiratory hygiene and not coming to the facility if unwell are to be provided.</p> <p>A risk assessment of vulnerable volunteers should be conducted based on community transmission case locations.</p> <p>Volunteers should not be interacting with patients with an ARI or suspected or confirmed COVID-19</p>
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CONTRACTORS

<p>When should a contractor wear a surgical mask?</p>	<p>Yes, they are required to wear a mask when they enter the facility.</p> <p>Universal surgical mask use will be in place during Red Alert.</p> <p>Reminders regarding hand hygiene, physical distancing, cough etiquette and respiratory hygiene are to be provided.</p> <p>It is expected that contractors maintain adequate supplies of PPE and ABHR as part of their WHS obligations.</p>
<p>If a cafeteria is located within a health facility (contracted by the LHD/SHN), should the HW wear a mask when interacting with patients, HW and visitors?</p>	<p>Yes. Universal mask use (surgical or approved cloth mask) is required.</p>
<p>STOCK DELIVERY TO CLINICAL AREAS – EXTERNAL DELIVERY/COURIER COMPANIES</p>	
<p>Do delivery/courier HW need to wear a mask (surgical or own cloth) if they are making a delivery to clinical areas?</p>	<p>Yes, masks and ABHR should be made available to delivery/courier HW, if they do not have their own approved cloth mask.</p> <p>Reminders regarding physical distancing, cough etiquette, respiratory hygiene and not being onsite if they have acute respiratory symptoms or fever.</p>
<p>VALVE MASKS</p>	
<p>If a patient or a visitor is wearing a mask with a valve, do we need to change it to a surgical mask?</p>	<p>Yes, these masks should be changed.</p> <p>These masks should not be worn as the exhalation valve is generally not filtered and particles are able to be exhaled via the valve.</p>

