

PUBLIC HEALTH ALERT

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Regional Public Health

HAUORA Ā IWI KI TE ŪPOKO ● O TE IKA A MĀUI
Better health for the greater Wellington region

To:	General Practices, Pharmacists, After-Hours Centres and Emergency Departments in the greater Wellington and Wairarapa regions
From:	Dr Craig Thornley, Medical Officer of Health
Date:	31 January 2020
Title:	National Advisory: Novel coronavirus response, update #5

Please distribute the following information from the NEW ZEALAND MINISTRY OF HEALTH to relevant staff in your organisation.

National Health Advisory Update on novel coronavirus response #5

On 28 January 2020, the National Health Coordination Centre was activated to respond to the novel coronavirus outbreak. While there have been no confirmed cases in New Zealand, there have been a small number of suspected cases notified. The Ministry of Health is updating its website with general advice for the public every day at 1200hrs.

WHO Emergency Committee convened

The WHO called a second emergency meeting of the Emergency Committee to revise the advice provided on the global response to novel coronavirus. They reported back at 0730hrs 31/01/2020 NZT. The WHO has declared a public health emergency of international concern (PHEIC). The Ministry of Health has indicated that there will be further communications sent to detail New Zealand's response to any change in WHO advice.

Use of personal protective equipment

The Ministry of Health has been receiving queries regarding the use of personal protective equipment (PPE) in community settings, and for frontline workers who interact with the public.

The following pages contain a summary of advice from the Ministry of Health, and advice on the use of masks from the World Health Organization.

Information for health professionals is being updated and will be available on the Ministry of Health website, including specific information for primary care providers.

Infection prevention and control advice when novel coronavirus infection is suspected

Basic hygiene measures are the most important way to stop the spread of infections, including the 2019 novel coronavirus (2019-nCoV). Basic hygiene measures include:

- washing hands regularly with soap and water, or cleansing with hand sanitiser¹
- staying at home if you are sick
- coughing or sneezing into a tissue or your elbow
- cleaning surfaces regularly.

In a **health care setting**, standard precautions should be applied. These include:

- hand and respiratory hygiene
- the use of appropriate personal protective equipment (PPE)
- safe waste management
- injection safety practices
- proper linen
- environmental cleaning
- sterilization of shared patient-care equipment.

For **other settings**, the use of personal protective equipment (PPE), such as face masks can reduce the spread of infection when used correctly and in the appropriate context. This may be recommended in workplaces where people are more likely to come in contact with the disease.

For **most people**, PPE such as face masks are not recommended, as there is limited evidence that the use of face masks prevents the spread of transmission of disease. The WHO recommends that there may be benefit in wearing a face mask to reduce the spread of infection from people **with symptoms** of an acute respiratory infection, but not for the general population unless there is a severe epidemic.

Table 1 summarises the recommendations for the use of PPE in different settings. These recommendations are a guide only and workplace settings not listed in the table should consider their ability to maintain the 1 metre rule and use the table to inform their use of PPE. In general, surgical/medical masks prevent the dispersal of droplets by an infected patient and the inhalation of droplets if within 1 metre of a coughing individual. Cough and hand hygiene will have a bigger impact.

¹ HHNZ recommends that ABHR solutions should meet the EN1500 testing standard for bactericidal effect. Generally, products meeting this standard have an ethanol concentration of at least 70% volume / volume (v/v) or a 60% concentration of isopropyl alcohol (<https://www.hqsc.govt.nz/assets/Infection-Prevention/Hand-Hygiene/PR/HHNZ-implementation-guidelines-June-2013.pdf>)

Table 1 – Recommendations on the use of personal protective equipment by setting

(shaded area shows recommendation)

Setting		Recommendation			
		Face mask	Gloves	Gown or apron	Eye protection
General public					
No symptoms of coronavirus		Not recommended			
Person with symptoms of an acute respiratory illness and assessment indicates risk of novel coronavirus		Surgical/medical			
Workplace					
People who can maintain more than 1 metre contact distance from people with potential coronavirus symptoms	Receptionists and other staff in health care settings (eg, pharmacy staff, orderlies, cleaners and dieticians), education staff	Not recommended			
People who, due to the nature of their job, may be unable to maintain more than 1 metre contact distance from people with potential coronavirus symptoms	Police, prison staff, customs staff	Surgical/medical	If direct contact likely		
People who, due to the nature of their job, cannot maintain at least 1 metre contact distance from people with potential coronavirus symptoms	Primary care clinical staff, ambulance staff, emergency department staff	As per infection prevention protocols (eg, surgical/medical masks and eye protection, either surgical mask with shield or glasses) if necessary			
People who, due to the nature of their job, cannot maintain at least 1 metre contact distance from people with potential coronavirus AND have	ICU staff, recovery room staff, people providing hands-on hospital care	As per infection prevention protocols			

<p>a high likelihood of potential contact with aerosolised respiratory secretions from invasive procedures – ventilation, suctioning etc.</p>	<p>to people in Droplet and Contact precautions</p>	
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How to correctly wear and remove a face mask²

If you are unwell or have a job which requires you to be in close contact with people who may have coronavirus, it is recommended you use a face mask. It is important that face masks are worn and removed correctly. Masks should fit snugly and fully cover your nose and mouth.

How to wear a mask:

- place over nose, mouth and chin
- fit flexible nose piece over nose bridge
- secure on head with ties or elastic
- adjust to fit – secure on your head, fitting snugly around your face with no gaps
- avoid touching or adjusting your mask during use.

How to remove a mask:

- avoid touching the front of the mask
- if the mask has ties, untie the bottom, then top tie
- remove from face
- discard, do not use again
- wash hands with soap and water or use hand sanitiser immediately.

² Adapted from <https://www.cdc.gov/hai/pdfs/ppe/PPESlides6-29-04.pdf>

Advice on the use of masks the community, during home care and in health care settings in the context of the novel coronavirus (2019-nCoV) outbreak

Interim guidance
29 January 2020

WHO/nCov/IPC_Masks/2020.1



Introduction

This document provides rapid advice on the use of medical masks in communities, at home and at health care facilities in areas that have reported outbreaks caused by the 2019 novel coronavirus (2019-nCoV). It is intended for public health and infection prevention and control (IPC) professionals, health care managers, health care workers and community health workers. It will be revised as more data become available.

With the current information available, it is suggested that the route of human-to-human transmission of 2019-nCoV is either via respiratory droplets or contact. Any person who is in close contact (within 1 meter) with someone who has respiratory symptoms (e.g., sneezing, coughing, etc.) is at risk of being exposed to potentially infective respiratory droplets.

Medical masks are surgical or procedure masks that are flat or pleated (some are like cups); they are affixed to the head with straps.

General Advice

Wearing a medical mask is one of the prevention measures to limit spread of certain respiratory diseases, including 2019-nCoV, in affected areas. However, the use of a mask **alone** is insufficient to provide the adequate level of protection and other equally relevant measures should be adopted. If masks are to be used, this measure must be combined with hand hygiene and other IPC measures to prevent the human-to-human transmission of 2019-nCoV. WHO has developed guidance for home care^a and health care settings^b on infection prevention and control (IPC) strategies for use when infection with 2019-nCoV is suspected.

Wearing medical masks when not indicated may cause unnecessary cost, procurement burden and create a false sense of security that can lead to neglecting other essential measures such as hand hygiene practices. Furthermore, using

a mask incorrectly may hamper its effectiveness to reduce the risk of transmission.

Community setting

Individuals without respiratory symptoms should:

- avoid agglomerations and frequency of closed crowded spaces;
- maintain distance of at least 1 meter from any individual with 2019-nCoV respiratory symptoms (e.g., coughing, sneezing);
- perform hand hygiene frequently, using alcohol-based hand rub if hands are not visibly soiled or soap and water when hands are visibly soiled;
- if coughing or sneezing cover nose and mouth with flexed elbow or paper tissue, dispose of tissue immediately after use and perform hand hygiene;
- refrain from touching mouth and nose;
- a medical mask is not required, as no evidence is available on its usefulness to protect non-sick persons. However, masks might be worn in some countries according to local cultural habits. If masks are used, best practices should be followed on how to wear, remove, and dispose of them and on hand hygiene action after removal (see below advice regarding appropriate mask management).

Individuals with respiratory symptoms should:

- wear a medical mask and seek medical care if experiencing fever, cough and difficulty breathing, as soon as possible or in accordance with local protocols;
- follow the below advice regarding appropriate mask management.

Home Care

In view of the currently available data on the disease and its transmission, WHO recommends that suspected cases of 2019-nCoV infection be cared for using isolation precautions

[\(ncov\)-infection-presenting-with-mild-symptoms-and-management-of-contacts](#)

^a Infection prevention and control during health care when novel coronavirus (nCoV) infection is suspected. Available at [https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected-20200125)

^a Infection prevention and control of epidemic- and pandemic-prone acute respiratory infections in health care. World Health Organization. (2014). Available at <https://apps.who.int/iris/handle/10665/174652>

^b Home care for patients with suspected novel coronavirus (nCoV) infection presenting with mild symptoms and management of contacts. Available at <https://www.who.int/publications-detail/home-care-for-patients-with-suspected-novel-coronavirus->

and monitored in a hospital setting. This would ensure both safety and quality of health care (in case patients' symptoms worsen) and public health security.

However, for several possible reasons, including situations when inpatient care is unavailable or unsafe (i.e. limited capacity and resources unable to meet demand for health care services), or in a case of informed refusal of hospitalization, home settings for health care provision may need to be considered. Specific IPC guidance for home care should be followed.

Individuals with suspected 2019-nCoV infection with mild respiratory symptoms should:

- perform hand hygiene frequently, using alcohol-based hand rub if hands are not visibly soiled or soap and water when hands are visibly soiled;
- keep distance from well individuals as much as possible (at least 1 meter);
- to contain respiratory secretions, a medical mask should be provided to the individual and worn as much as possible, if it can be tolerated. For individuals who cannot tolerate a medical mask, he/she should rigorously apply respiratory hygiene, i.e. cover mouth and nose when coughing or sneezing with disposable paper tissue. Dispose of the material after use. Clean hands immediately after contact with respiratory secretions;
- improve airflow in living space by opening windows and door as much as possible.

Relatives or caregivers to individuals with suspected 2019-nCoV infection with mild respiratory symptoms should:

- perform hand hygiene frequently, using alcohol-based hand rub if hands are not visibly soiled or soap and water when hands are visibly soiled;
- keep distance from affected individual as much as possible (at least 1 meter);
- wear a medical mask when in the same room with the affected individual;
- dispose of the material immediately after use. Clean hands immediately after contact with respiratory secretions;
- improve airflow in living space by opening windows as much as possible.

Health Care Facilities

Individuals with respiratory symptoms should:

- wear a medical mask while waiting in triage or waiting areas or during transportation within the facility;

- wear a medical mask when staying in cohorting areas dedicated to suspected or confirmed cases;
- do not wear a medical mask when isolated in single rooms but cover mouth and nose when coughing or sneezing with disposable paper tissues. Dispose them appropriately and perform hand hygiene immediately afterwards.

Health care workers should:

- wear a medical mask when entering a room where patients suspected or confirmed of being infected with 2019-nCoV are admitted and in any situation of care provided to a suspected or confirmed case;
- use a particulate respirator at least as protective as a US National Institute for Occupational Safety and Health (NIOSH)-certified N95, European Union (EU) standard FFP2, or equivalent, when performing aerosol-generating procedures such as tracheal intubation, non-invasive ventilation, tracheotomy, cardiopulmonary resuscitation, manual ventilation before intubation, and bronchoscopy.

Masks management

If medical masks are worn, appropriate use and disposal is essential to ensure they are effective and to avoid any increase in risk of transmission associated with the incorrect use and disposal of masks.

The following information on correct use of medical masks derives from the practices in health-care settings:

- place mask carefully to cover mouth and nose and tie securely to minimise any gaps between the face and the mask;
- while in use, avoid touching the mask;
- remove the mask by using appropriate technique (i.e. do not touch the front but remove the lace from behind);
- after removal or whenever you inadvertently touch a used mask, clean hands by using an alcohol-based hand rub or soap and water if visibly soiled
- replace masks with a new clean, dry mask as soon as they become damp/humid;
- do not re-use single-use masks;
- discard single-use masks after each use and dispose of them immediately upon removal.

Cloth (e.g. cotton or gauze) masks are not recommended under any circumstance.

⁴ Infection prevention and control of epidemic- and pandemic-prone acute respiratory infections in health care. World Health Organization. (2014). Organization. <https://apps.who.int/iris/handle/10665/112656>