

## MNZ Health & Hygiene Brief - Preparation for Returning to Work

In preparation for working at Level 2, the following tasks need to be actioned prior to, during and after contact with clients.

Screening	Minimum MoH and MNZ Expectation	Considerations for further measures
Ask these	1. Have they had COVID-19?	Length of time since last symptoms?
questions the	For a person to be recovered from	
day before <b>and</b>	COVID-19, they must meet the	Do they have any ongoing health issues
again on arrival	following criteria:	related to COVID-19?
	It must have been at least 12 days	
	since the onset of their symptoms.	
	After the 12 days, they need to have	
	been clear of all symptoms for 72	
	hours. And have had a negative test	
	2. Have they been in contact with a	Consider the stand down period.
	diagnosed COVID-19 case or	
	someone directly in contact with	
	a confirmed case?	
	They are required to self-isolate for	
	14 days.	
	3. Do they have any of the	Symptoms
	following Symptoms?	MoH Website information (02 Sept 2021)
	cough, sore throat, shortness of	The symptoms of COVID-19 are one or more of
	breath, running nose (coryza),	the following:
	loss of smell (anosmia), with or	• a cough
	without fever?	<ul> <li>a high temperature (at least 38°C)</li> </ul>
	If yes, no entry to clinic/no	<ul> <li>shortness of breath.</li> </ul>
	treatment, refer to GP or Healthline.	<ul> <li>sore throat</li> </ul>
	,	<ul> <li>sneezing and runny nose</li> </ul>
		<ul> <li>temporary loss of smell</li> </ul>
		<ul> <li>altered sense of taste</li> </ul>
		These symptoms do not necessarily mean you have
		COVID-19. The symptoms are similar to other illnesses that are much more common, such as cold
		and flu. Shortness of breath is a sign of possible
		pneumonia and requires immediate medical
		attention.
		Symptoms take up to 14 days to show after a person
		has been infected. A person can pass on the virus to
		others before they know they have it - from up to two days before symptoms develop.
		If you have these symptoms, please telephone
		Healthline (for free) on 0800 358 5453 or your doctor
		immediately.
	4. Have they been in contact with	See list of 'symptoms'
	anyone with the following	
	Symptoms?	
	cough, sore throat, shortness of	
	breath, running nose (coryza),	
	loss of smell (anosmia), with or	
	without fever?	
	If yes, no entry to clinic/no	
	treatment, refer to GP or Healthline.	



E Are they a High Rick Individual2	MoH High Risk	
5. Are they a High-Risk Individual? If yes, question further if the	COVID-19 website High Risk (see below)	
treatment is necessary. Caution is	Do they have a high-risk individual living	
required.	with them or in close contact?	
	Consider the use of face masks.	
Records with underlying health conditions are n	nost at risk of COVID-19 becoming a severe illness.	
	lost at risk of COVID-19 becoming a severe inness.	
<ul> <li>You are more vulnerable if you:</li> <li>are over 70 years old with a medical condition</li> </ul>		
<ul> <li>live in an aged care facility where spread can occur more easily</li> <li>have a medical condition and/or compromised immunity.</li> </ul>		
<ul> <li>are pregnant.</li> </ul>	promised miniancy.	
Other risk factors include ethnicity, smoking ar	nd obesity.	
If you have an underlying health condition and at high risk of getting very sick from Co		
you may get early access to the COVID-19 vaccine. This is along with those who are over 65, wor		
at the border or in frontline health care roles		
	a severe illness is the existence of underlying ons are not well controlled. Relevant conditions	
<ul> <li>serious respiratory disease such as chronic lung disease or moderate</li> <li>serious heart conditions;</li> </ul>		
<ul> <li>poorly controlled hypertension</li> <li>immunocompromised conditions</li> </ul>		
immunocompromised conditions     many conditions can cause	a norsan to be immunesempremised including	
	a person to be immunocompromised, including ng related illness, bone marrow or organ	
	pgic neoplasms, immune deficiencies, poorly	
-	nd prolonged use of corticosteroids and other	
	tions (such as disease-modifying anti-rheumatic	
drugs);	· · · · · · · · · · · · · · · · · · ·	
• severe obesity (body mass index [BM	I] of 40 or higher);	
<ul> <li>diabetes;</li> </ul>		
chronic kidney disease, people under	going dialysis; and	
liver disease.		
6. Have they travelled recently	Consider also, if they have travelled outside	
 <ul><li>6. Have they travelled recently (domestic or international)?</li></ul>	Consider also, if they have travelled outside of clinic local region and/or near existing	
 (domestic or international)?	of clinic local region and/or near existing	
 (domestic or international)? Those returning from overseas need	of clinic local region and/or near existing clusters.	
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Environment	Minimum	Considerations
	Adequate Health and Safety Signage. MNZ recommend a minimum of the COVID-19 QR code (mandatory for all businesses)	COVID-19 specific signage, hand washing signage, physical distancing signage and markers, and QR code. Hand sanitiser and single use face masks available at entrance.
	Clinic Entrance and Physical Distancing Rules.	<u>COVID Posters and signage</u> Does the clinic have shared access with another business? Is there a carpark where clients can wait? One in, one out protocol? Time between appointments to stop client to client contact and cleaning etc?
	Reduce surfaces that can be touched. Minimal plastic (easily sanitised) chairs and no magazines, toys, flyers etc in waiting room.	Consider closing off waiting room completely. Client to wait in their car or outside till allowed entry. Equipment and items in the clinic should be kept to a minimum to reduce contact opportunity. Consider a receptacle for client clothing to be held in during the treatment either disposable or sanitisable.
	Touchless Rubbish Bins available for use.Contactless payment or sanitise eftpos machine after each use.Cleaning all surfaces that have been in contact with each client after each appointment.	Paywave, invoice, internet banking. Alternative is sanitising eftpos machine. Cleaning schedule. More frequent cleaning. Include all surfaces not just those that were touched. Time between appointments to allow extra hygiene processes.
Hygiene & Sanitisation	Minimum	Considerations
	Therapist to wash hands before and after clients.         Soap and water for minimum 20 sec include hands, wrist, forearms and up to elbows.         Hand sanitiser available.         All linen to be laundered after single use.         Washing machine and detergent to wash	Therapist to wash hands more regularly. Client to wash or sanitise hands before entering treatment room. Use disposable towels or air hand dryer. <u>Hand washing protocol (COVID19.govt.nz)</u> <u>Hand washing protocol (HQSC.govt.nz)</u> Reception, waiting room, toilets, treatment room, other public areas. Disposable <u>face cradle covers</u> , table roll etc. Reducing linen.
	thoroughly with the warmest temperature recommended on the item's label, as recommended by <u>MoH</u> . After washing ensure linen is completely dry before use. Cough and sneeze etiquette.	Tissues and hand sanitiser available. Signage on how to cough/sneeze into one's elbow.



	Physical Distancing Rules of 2m apply before hands on treatment e.g., arrival, departure, payment, rebooking.	Consider prone and side-lying options instead of supine to reduce exposure to droplets. Consider if appropriate to do face and hand massage. Refrain from intra-oral work. Consider PPE use if available – mask, goggles, apron, gloves.
	Face coverings / masks to be worn	Therapists are required to wear face coverings / masks, and must <u>legally keep 2</u> <u>metres apart</u> from each other, except during the treatment.
		When treating consider both client and therapist to wear a face mask. Masks to be replaced when damp, damaged or otherwise soiled. Single use masks to be discarded after use.
	Cleaning all surfaces that have been in contact with each client.	Cleaning schedule. More frequent cleaning. Include all surfaces not just those that were touched. Time between appointments to allow extra hygiene process?
Cleaning & disinfecting	Cleaning physically removes germs (bacteria and viruses), disinfecting uses chemicals to kill germs on surfaces. Some products do both, read the label to ensure efficiency. Hospital grade detergent/disinfectant products are suitable for cleaning following a suspected, probable, or confirmed case of COVID-19. Good disinfectants to look out for are things that contain hypochlorite (which is the main active ingredient in bleach) or activated hydrogen peroxide (0.5%). Others may contain benzalkonium chloride, though some studies have shown this is less effective against coronaviruses. You could also just use conventional bleach (at 0.1-0.2% available chlorine – check the back of your bottle) in water. Or you could just use alcohol. Ethanol is best. Isopropyl alcohol is good too. Methylated spirits are not as good but better than nothing.	
Employees	Minimum	Considerations
	Have they had COVID-19?	Clearance to return to work. Ongoing
-	Stand down – not to come to work.	health issues?
	Do they have Symptoms?	Clearance to return to work.
	Stand down – not to come to work.	Are they willing and able to work?
	Are they a High-Risk Individual? Have they travelled recently?	Are they willing and able to work? Clearance to return to work.
	Those returning from overseas or regions in Aotearoa NZ where there have been	clearance to retain to work.



	Have they been in contact with a diagnosed COVID-19 case or someone directly in contact with a confirmed case?	Clearance to return to work.
	directly in contact with a confirmed case? Stand down – not to come to work.	
	Education on new procedures.	Online training. Reading/resource material. Are they comfortable and competent with the new procedures?
Work Safety Planning	Minimum	Considerations
PPE	Hand washing is preferred over the use of gloves.	If it'll be more comfortable for client, then offer a mask. Consider Apron, Goggles if client or therapist is anxious. Consider if there is a shortage of PPE. Frontline medical staff should have first access to PPE.
Ventilation	Ensure good <u>ventilation</u> in treatment room.	Employers should ensure air conditioning systems are well maintained. It is advisable that air conditioning systems do not re- circulate air and are vented to the outside as much as possible. If the workplace does not have an air conditioning system, open windows regularly to get fresh air circulating.
Contact Tracing and Privacy	Minimum	Considerations
	PrivacyCommissionerconfirmsinformation that can be gathered: Name, phone number, date and time of visit of every individual who comes into the clinic including staff, clients and others. QR Code for scanning and/or register (completed by staff).*NB: From 11:59pm 7 September 2021 it is a legal requirement for the business owner to have secure systems in place for everyone entering the premises to scan or provide their details regardless of the duration of their visit.	Therapist to enter client details in the register so that clients cannot see anyone else's information. This also reduces another touch point. It is also important to store the information safely after closing time, such as in a locked cabinet. Register can be destroyed after 30 days. Consider if there is the need to have a separate register as online booking systems hold this information.