



# COVID-19 Response

## Community Health

### Introduction

This information provides guidance to community health services to support the continued delivery of essential frontline services in response to the COVID-19 pandemic via safe and alternative means that support the most vulnerable members of the community. It is essential that consumers continue to receive ongoing services where possible throughout the COVID-19 pandemic.

Failure to provide critical and essential services to vulnerable clients may result in:

- Deterioration of existing health conditions
- Increased demand on scarce hospital resources
- Increased social isolation for already highly vulnerable consumers

This guidance should:

- Build upon the pandemic and business continuity planning already underway by the community health sector. These plans should be continually reviewed and refined to align with current COVID-19 advice.
- Inform alternative modes of service delivery and support the continued delivery of essential services to consumers, without compromising the health and wellbeing of consumers or the workforce.

### General advice

Guidance is current at the date of publication. As the pandemic progresses, settings are likely to change. Services should refer to <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19> or ring clinical advice line **1800 675 398** to seek current advice if unsure.

All services are encouraged to:

- Keep up-to-date with current COVID-19 advice and information for health providers on the Department of Health and Human Services' website: <https://www.dhhs.vic.gov.au/coronavirus>
- Refer to <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19> for the guidelines for health services and general practitioners, including transmission reduction and physical/social distancing measures
- Stay up to date by following the Chief Health Officer on Twitter (<https://twitter.com/victoriancho?lang=en>) to and subscribe to the newsletter by emailing: [COVID-19@dhhs.vic.gov.au](mailto:COVID-19@dhhs.vic.gov.au)

**Services should also be aware that for vulnerable patients or vulnerable health practitioners, new bulk-billed non-admitted items have been introduced for telehealth. Further information can be found at <http://www.mbsonline.gov.au/internet/mbsonline/publishing.nsf/Content/news-2020-03-01-latest-news-March>**

## Principles of critical and essential service delivery

DHHS recommends that Community Health Services **develop and implement** actions to move to an alternative service delivery model to deliver based on several principles

- Ensure the **continued delivery of essential services** and ensure that back up plans are in place if there are workforce shortages or staff are redirected to other COVID-19 duties
- Deliver essential services in **different and safe ways** which contribute to the reduction of COVID-19 infection and transmission rates for workers and the community. This includes **reducing face to face contact** wherever possible and aligning with **current COVID-19 physical distancing advice**
- **Prioritise access as needed** and in consideration of workforce availability to those people that need services the most, based on vulnerability, risk and need
- Ensure that Personal Protective Equipment (PPE) is prioritised and used in accordance with current DHHS advice at <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19>

## Key Actions

1. **Prioritise continued delivery** of critical services to high need clients including primary care and social support services.
2. Ensure **priority access** for **critical services** is given to high need clients with chronic and complex conditions.
3. **Replace** face to face support, home visits and centre appointments by using telephone or electronic consultations, including Skype and Zoom
4. Identify and reach out regularly (via phone/electronics) to high risk clients who may be vulnerable during periods of social isolation and physical distancing
5. Consider culturally appropriate responses for Aboriginal clients
6. **Practice** universal precautions and standard infection control procedures at both individual and service level, including for example regularly washing hands, cleaning phones, keyboards and shared spaces
7. **Prioritise essential** face to face appointments **only** for at risk or high needs clients and practice standard infection control precautions. If face to face support is deemed **professionally essential**, please follow current DHHS guidance to stay safe: <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19>
8. Decisions about the need to conduct a short face visit is at **service provider discretion** in line with clinical judgement and business continuity/pandemic plans.
9. **Only use full PPE in accordance with current DHHS guidance** at <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19>. Advice on the correct usage of PPE, including how to put PPE on and take it off is available at <https://www.dhhs.vic.gov.au/coronavirus> under the heading 'resources for health professionals'. Given the worldwide PPE shortage, DHHS will provide additional advice about the provision of PPE for the delivery of **essential** services for suspected or confirmed COVID-19 cases.
10. If your service has General Practitioners on site, it is recommended that you prioritise staffing resources, PPE and information technology to support these clinical activities.

## Community Health Service workforce health and availability

If Community Health Services are concerned that an employee or employee's family member may have or have been exposed to COVID-19, they should:

- Follow DHHS advice on <https://www.dhhs.vic.gov.au/coronavirus>
- Contact the 24 hour/7 day per week dedicated COVID-19 hotline [1800 675 398](tel:1800675398)

As Community Health Services are scaled back to essential services, staff may need to be redirected to support other essential services, such as telephone support. Providers should look at options for flexible staffing arrangements to support continuation of core services.

## Service agreements, funding and reporting

DHHS recognises the critical role of funded agencies in the provision of services to clients, their families, and their communities. The Department has published advice on the Funded Agency Channel addressing the funding implications for services during the COVID-19 pandemic. This advice can be found at <https://fac.dhhs.vic.gov.au/funding-and-service-delivery-responding-covid-19>.

Agencies should be reassured that DHHS:

- Will continue to provide funding and will not recoup funds for suspended services
- Understands funding may need to be redirected by services to implement alternative service delivery responses
- Understands that participation rates and targets may be impacted by COVID-19
- Expects that current year unspent funding will be rolled over to the following financial year to support Community Health programs

Services should have a prior discussion with their DHHS Area Agency Performance and System Support (APSS) Manager about any service closures or major service changes that will require significant redirection of funding.

To receive this publication in an accessible format, email [covid-19projectmanagementoffice@dhhs.vic.gov.au](mailto:covid-19projectmanagementoffice@dhhs.vic.gov.au)

For more information about COVID-19, call the Coronavirus Health Information Line on 1800 020 080.

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