PUBLIC HEALTH CORE PROGRAMS AND SERVICES DURING COVID-19

This resource is intended to provide guidance for decision-making for the continued provision of essential public health services. The recommendations below should be considered in light of pandemic response and in consultation with community leadership.

It is important that essential and core public health programs are carefully considered in order to avoid unintentional consequences such as unimmunized cohorts and increases in vaccine preventable diseases.

We recognize that the provision of public health programs during COVID-19 present many challenges and considerations. It is critical that safety measures are put in place for both health care providers and community members while providing core programs and services. Refer often to the FNHA website for reliable up-to-date COVID-19 information.

For most recent information, access this document online. An April 28, 2020 recorded webinar can be viewed here.

See also: Home and Community Care COVID-19 Toolkit

ESSENTIAL SERVICES	
"What are CHNs required to provide?" **and** *"How can these services be provided safely?"*	In her Letter Re Non-essential Services, Dr. Bonnie Henry outlines her expectations to assist in your decision-making as professionals to ensure that all are delivering the best and safest care to our communities. Some of the key points in this letter include: • All non-essential and elective services involving direct physical contact with patients and clients should be reduced to minimal levels, subject to allowable exceptions, until further notice. • Allowable exceptions can be made for time-sensitive circumstances, and emergent, urgent, and/or essential care to avert or avoid negative patient or client outcomes, or to avert or avoid a situation that would have a direct impact on the safety of a patient or client. • Where possible and appropriate, health professionals are encouraged to provide care to patients and clients via telephone and video technology. • Health professionals are in the best position to determine what is essential in their specific health practice. • Health professionals who provide emergent, urgent, and/or essential care must assess and screen patients and clients for symptoms of COVID-19. Unless direct physical contact with patients and clients is required, physical distancing of two meters should be maintained at all times. When direct physical contact is required for the care of patients and clients with suspected or confirmed COVID-19, health professionals must use infection control practices including as appropriate personal protective equipment.

As of May 15, 2020, BC College of Nursing Professionals offer principles, assumptions and best practices as services resume. Nurses may face difficult decisions regarding which clients to see and the prioritization of service provision. Clinical judgment is based upon the following considerations:

- acuity of the client's condition
- functional impairment or impact of the condition on health-related quality of life
- the impact to the client if they do not receive services
- appropriateness of service provision via virtual care
- necessity of services which can only be provided in-person
- duration of client wait times for care
- referral/escalation process if unable to address client's care needs in a timely manner

BCCNP does not expect any registrant to provide treatment unless, in their professional opinion, it is safe to do so for both clients and staff. **See** WorkSafe Health professionals: Protocols for returning to operation

Some core Public Health programs include, but are not limited to:

- Immunizations
- Perinatal and Well Baby
- Sexual Health
- Harm Reduction
- Communicable Disease Response (COVID-19)
- Communicable Disease Response (Tuberculosis)

Key Points For Essential Clinic Visits See further information in resources below See tips for virtual health visits and phone calls here: For health care providers For clients and family	Post information on your website and signs on clinic doors with the following messaging: *Avoid coming to the health unit/clinic if: you or your child is feeling ill and/or have any of the following symptoms: runny nose, sore throat, fever, cough, shortness of breath or trouble breathing, diarrhea or vomiting or if you have been asked to quarantine because you have travelled out of Canada or been in contact with or in close proximity to someone with COVID-19.* **At the time of appointment booking** • Reassure clients that extra precautions are in place at the clinic to prevent the spread of COVID-19. Advise visitors that the staff at the clinic may be wearing PPE and will have a mask and other equipment on for the protection of both the health care worker and the client. Also, remind them that physical distancing measures are also in place in the clinic setting as much as possible. • Inform the client or parent/guardian that only those required for the service should come to the clinic (i.e. one adult should accompany a child, and the other family members should remain at home). • Unlike routine practice in the years pre-COVID-19; clients with a mild viral illness, with or without fever, should not come to the clinic. Defer the appointment until symptoms have resolved. Provide an appointment time 10 days to 2 weeks later.

	• Ensure any accompanying adults (e.g., those bringing a child to the clinic) are not ill with COVID-19-like symptoms and are not in isolation for illness or quarantine because of recent travel or exposure to a case of COVID-19. • Bundling tasks is an important strategy during visits. Consider what essential *in person* activities can be combined in one visit. **Screening at the clinic door** Review symptoms of respiratory illness with all people coming to the clinic. *Reinforce that there is a maximum of two people per visit and only when the client requires assistance.* • Anyone who has symptoms of respiratory illness, with or without fever, should be sent home and asked to phone and rebook the appointment. • Provide hand sanitizer for all people entering the clinic area. • Show the family directly into a clinic room upon arrival in order to avoid using waiting room. If this is not possible, ensure physical distancing measures are in place in the waiting area. Adjust the waiting room seating by removing chairs and leaving remaining chairs at least 2 meters apart. **The appointment** • Consider ordering of activities to reduce visit time. For example, for immunization appointments, screen for contraindications and immunize first. Perform any additional assessment(s) or answer questions during the 15-minute post-immunization wait in the clinic room. Do not send the family to wait in the waiting room. If this is not possible, ensure physical distancing measures are in place in the waiting area. See above.
Immunizations	*"…we want to make sure that we are doing our best to protect people in our communities from all of the other issues that arise that may affect our health. In particular, I want to encourage … parents of young children, to make sure they continue with their childhood immunization programs. These are critical programs that we are preserving within our public health communities to make sure that young children in particular receive their basic immunizations and their childhood immunizations… it is still incredibly important to protect our children from the other infectious diseases that we know can spread in our communities."* (Dr. Bonnie Henry, April 15, 2020) The BCCDC Immunization Decision Support Tool includes a section Continuity, Prioritization and Safe Delivery of Immunization Services during COVID-19 Response. This document provides guidance for continuity of services for immunizations during this challenging time. Reach out with your questions via ***email:*** immunize@FNHA.ca • Immunization Competency Program (ICP) remains a priority and is a requirement for the safe delivery of immunizations. FNHA Immunize recognizes that involvement in the provincial COVID-19 response poses a challenge to the way that FNHA Skills check list and Immunization Competency renewals are usually carried

	out. FNHA Immunize will be adjusting the ICP requirements and expectations during this time, and will be providing messaging to all nurses about these program changes as the situation evolves. *Contact via **email:*** immunize@fnha.ca for more information. Immunization Certification Interim Guidelines will be distributed via *All Nurses* email distribution. • Information for parents/caregivers: Immunization during COVID-19 • Immunization Awareness Week Resources: Immunization Awareness Week 2020
Perinatal and well-baby	Education and support is provided virtually when possible during COVID-19. Nurses continue to assess and support the new family around labour, birth and postpartum including feeding (bottle and breast), infant health, mental health and cultural supports. Some tests/screenings usually done in hospital may not be done and might need follow-up. With fewer in-person visits to a health care provider and less in-person contact with clients, it is important to ensure families know when to seek medical help. **See** *Tips for Virtual Visits* page 6 of this document. Baby's Best Chance 7th Edition, 2019. Pages 78, 87-89. Maternal Child General Information for Nurses Part 1 of 4 Pregnancy Information for Nurses Part 2 of 4 Labour, Delivery and Postpartum Part 3 of 4 Infant and Newborn Information for Nurses Part 4 of 4 Breastfeeding your Infant during COVID-19 Formula Feeding Your Infant during COVID-19
Sexual Health	FNHA recommends following the advice from **Options for Sexual Health***: Options for Sexual Health-COVID-19 Update *"… sexual health care is still a necessary service, and we also want to ensure the health and safety of our clients and staff. After careful consideration we have decided to limit our clinics to provide only essential services via telephone assessments which will include:* • *Contraceptive access* • *Symptomatic STI treatment* • *Urgent STI Testing/Pregnancy testing (based on clinical judgment)* • *For the interim, we will not be providing Pap testing or other general sexual health services."* ***Options for Sexual Health** are a provincial organization and with services in some rural communities. The clinical practice leader is a major contributor to all the BCCNP and BCCDC DST working groups. Check frequently which lab tests are being processed and which are on hold pending lab capacity.

	Case and Contact investigations and treatment for STIs is considered an essential service and is to continue as per your usual processes. **See** also: CATIE – COVID-19, HIV and hepatitis C Temporary suspension of non-urgent Hepatitis C (HCV) testing
Harm Reduction	Substance Use, Harm Reduction and COVID-19: Substance Use British Columbia Centre on Substance Use: BCCSU – COVID-19 Mental Health and Wellness VictimLinkBC BC Women's Hospital and Health Centre Gender Based Violence Indian Residential School Survivors Society: 604-985-4465 or toll free 1-800-721-0066 Tsow-Tun-Le-Lum: 1-250-268-2463 or toll free 1-888-590-3123
Communicable Disease Response	COVID-19, tuberculosis and other communicable diseases are reportable to the Medical Health Officer. Use your normal process to report and alert your regional health authority of any reportable diseases. **See** Regional Health contacts

COVID-19	• COVID-19: Interim Guidance for Public Health Management • Public health processes and the role of communities during COVID-19: Public health processes • COVID-19 Testing Sites in Community: Testing criteria and sites continue to change as communities consider offering testing in their communities. Information on testing is available at: BCCDC-Lab Testing • FNHA is currently developing resources for testing sites in First Nations Communities. Check for updates • Panorama Case and Contact Workflow for Indigenous Communities: Panorama Case/Contact
Tuberculosis	TB is considered an essential service and priority is given to timely screening for anyone symptomatic for active TB, as well as case management support for clients beginning or already taking treatment for either active or latent TB. Use your normal process for screening and referral to FNHA TB Services. Assess clients virtually whenever possible. If a client requires a TB screening for employment or school, complete a symptom review and risk assessment, deferring the Tuberculin skin test (TST). If the symptom

		assessment is negative, provide a <u>clearance letter</u> to the client for their employer or school. As usual, lack of Tuberculin skin testing should not delay or otherwise impact admission into treatment programs, and screening should involve ruling out active TB. Clearance for entry can be provided based on a negative symptom assessment. Case and contact investigations will continue as per usual FNHA TB Services processes. • [Prioritization of Essential TB Care and Services during COVID-19 Pandemic](#) - *updated May 21, 2020* • [Guidelines for DOT during COVID-19 Pandemic](#) • Connect with the FNHA TB Services via email: FNHATB@fnha.ca or 1-604-693-6998
	BCCDC [Communicable Disease Manual](#)	
General	Lateral Kindness Poster: https://www.fnha.ca/Documents/FNHA-COVID-19-Lateral-Kindness-Poster.pdf COVID-19 Public Health Guidance for Child Care Settings: https://www2.gov.bc.ca/gov/content/family-social-supports/caring-for-young-children/child-care-response-covid-19/child-care-response-covid-19-provider/child-care-response-covid-19-health-safety Mental wellness of providers - the PHSA overdose mobile response team supports direct care providers during COVID-19: http://www.phsa.ca/our-services/programs-services/health-emergency-management-bc/provincial-overdose-mobile-response-team	

Other Resources:

First Nations Health Authority (FNHA) Public Information:
o   https://www.fnha.ca/what-we-do/communicable-disease-control/coronavirus

FNHA Risk Assessment Script for Clinics is intended for use by support staff or CHNs and includes key reminders when booking clients into clinics for appointments
o   https://www.fnha.ca/Documents/FNHA-Risk-Assessment-Script-for-Clinics.pdf).

FNHA Community COVID-19 Safety Planning Guide is a supplemental resource
o   https://www.fnha.ca/Documents/FNHA-Community-COVID-19-Safety-Planning-Guide.PDF

FNHA Services Resumption Planning Guide for BC First Nations Guide. This companion resource provides tools that Community Leaders and Operations can use to support the reopening of communities and the

re-starting of operations. Of particular note to CHNs is the section on COVID-19 Safety Controls and Protocols to Implement for Nurses, found on pages 17-20 of the Safety Planning Guide:

o   https://www.fnha.ca/Documents/FNHA-Services-Resumption-Planning-Guide.pdf).

Tips on Virtual and Phone Health Visits for clients:

o   https://www.fnha.ca/Documents/FNHA-Virtual-and-Phone-Health-Visits-for-You-and-Your-Family.pdf

Tips on Virtual and Phone Health Visits for health care providers:

o   https://www.fnha.ca/Documents/FNHA-Tips-for-Virtual-and-Phone-Health-Visits-for-Health-Care-Providers.pdf

BC Centre for Disease Control (BCCDC) Public Information:

o   http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%202%20-%20Imms/Continuity_of_Immunization_Services_During_COVID-19.pdf
o   http://www.bccdc.ca/health-info/diseases-conditions/covid-19
o   http://www.bccdc.ca/health-info/diseases-conditions/covid-19/common-questions

BC College of Nursing Professionals:

o   https://www.bccnp.ca/Standards/Covid_19/Pages/Default.aspx

Ministry of Health Provincial COVID-19 Public Information:

o   https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support

Provincial Health Authority Office of Virtual Health:

o   http://www.phsa.ca/health-professionals-site/Documents/Office%20of%20Virtual%20Health/Client%20Notification%20Form.docx.pdf
o   http://www.phsa.ca/health-professionals-site/Documents/Office%20of%20Virtual%20Health/Toolkit_appendix2_sample_validation.docx%20-%20Copy.pdf

WorkSafeBC Health professionals: Protocols for returning to operation:

o   https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation/health-professionals

Government of Canada:

o   https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals.html

World Health Organization:

o   https://www.who.int/emergencies/diseases/novel-coronavirus-2019