

9 April 2020

Community Housing Aotearoa Alert Level 4 Guidance

Community Housing Aotearoa (CHA) has put together this document to consolidate information, contacts, resources and advice to help you in your day to day service delivery and decision making. It will be updated as new information is available and Alert Levels change.

Please contact Chris Glaudel at projects@communityhousing.org.nz or David Zussman at davidz@communityhousing.org.nz if you have any questions or additional resources to suggest. Please remember, we are in this together – you don't have to do this on your own.

Essential Services Alert Level 4

Organisations providing emergency, transitional, Housing First and public housing are deemed to be essential services providers. Information on other organisations deemed essential can be found on the [MSD website](#) and on the [Covid-19 website](#). As an essential service provider, it is important to always consider the purpose of Level 4 – do no harm, break the chain of transmission. Don't make decisions in isolation – check with the Ministry of Health (MOH), Ministry of Social Development (MSD), Ministry of Housing and Urban Development (HUD), or ask us here at CHA.

Under Alert Level 4, some of what you are doing may be business as usual and you will follow your normal processes and procedures for working with your residents. However, there are some guidelines you can follow to keep your staff safe.

- We have been assured that health, mental health and addiction services are still running essential services to support people at Alert Level 4, so reach out to the GP, Healthline, DHB crisis services or usual service providers in your areas, if required.
- Residents who have been using alcohol or drugs for a long period of time may have difficulty stopping use and experience withdrawal symptoms or experience distress if unable to access substances. The New Zealand Drug foundation has provided information regarding [withdrawal and how to respond](#).
- Some residents may not be able to self-isolate due to issues with addiction or mental health and insist on leaving their home. In these situations, it is likely to be safer to let them do this than try to prevent them leaving.
- Some residents may experience distress due to withdrawal from tobacco. They may benefit from nicotine replacement therapies provided through primary health services.
- Make sure your residents understand how to keep themselves safe by preventing the spread – keeping a 2 metre distance from others, washing hands as often as possible, and sneezing into a tissue or elbow.

Operating under Alert Level 4

To assist you with making informed decisions, here are some questions to consider and resources to help you operate safely.

Q1. Who are the staff in your organisation at higher risk of complications from COVID-19 or staff who live with people at higher risk of complications from COVID-19?

Remember, the focus here is – do no harm, break the chain of transmission. Keeping staff with a risk of complications safe will avoid the need for people to be hospitalised and reduce the risk of severe complications or worse. This protects staff and protects the health professionals who may be needed to provide care for them. The Covid-19 website provides a list of [relevant conditions](#) that can make COVID-19 a severe illness placing persons at increased risk.

Q2. Staff who are at higher risk of complications due to COVID-19 should stay at home. Consider whether these staff can work from home and provide telephone-based or technology-based support, advise, admin, coordination, and/or management roles?

Q3. Can all essential service staff work from home and provide telephone-based or technology-based support, advisory, administration, coordination, and/or management roles?

The purpose of Level 4 is to eliminate COVID-19. Staying at home and making the physical gaps between people wide enough that transmission cannot occur, including people working in essential services, helps to break the chain.

Q4. What is your prioritisation and decision-making process to protect as many staff and people within the service from being exposed as possible?

Q5. If face to face work is required, what is your decision-making process for one off contact situations and service wide delivery?

It is important to ensure staff are clear on your organisation's protocols for hand hygiene, physical distancing, cough etiquette and regular cleaning in the work environment, and follow up with staff to ensure these are followed. The Chief Executive or senior managers should make these health and safety and business continuity decisions.

Q6. If face to face work is required, can your organisation split staff into smaller teams?

Organising staff into smaller teams who do not have contact with each other can ensure continuity of service. If a member of one team develops symptoms or is exposed to COVID-19 and needs to self-isolate, the other team can continue to provide service. Your organisation should consider in advance how you will operate when a staff member becomes sick so there is a plan B.

Q7. Are there other organisations that can provide cover for sick staff and help maintain essential services, if needed? Who are your natural partners or larger service providers that may temporarily be able to cover essential service roles for 14 days?

While organising staff into isolated teams is helpful, that is not possible for all organisations, especially those with limited staff. Identifying in advance who may be able to step in as a Plan B for smaller organisations or Plan C for larger ones can ensure service continuity.

Q8. What are your prioritisation and decision-making processes that help ensure all services provided by staff are essential?

Identifying other support channels available for people within your service can help to minimise opportunities for transmission. For example, the local Civil Defence Emergency Management Group can assist with access to food and items from the pharmacy if people cannot leave their homes. Family members or the local welfare teams within the local council may also be available to assist. Make sure information on these resources is available to service users and provide telephone or other means to help them develop a plan of supports not dependent on your staff.

Q9. Do you have strategic and operational contact to your local council and/or Civil Defence Emergency Management Group?

Establish formal links with the regional/ local Civil Defence Emergency Management Group. Make sure you and your staff know what support is available for your organisation to assist with business continuity, for example if multiple staff become unwell.

Q10. Do you know the official contact within HUD, MSD, or other agency you are providing contracted services for who can assist your organisation with strategic and operational matters while we are at Alert Level 4?

Remember you are not in this alone and others facing similar issues will be bringing their questions to their ministry contacts. They can provide you resources and ideas. They may provide guidance on how you can use contracted providers with the correct authorisation, protocols and procedures in place to do the work instead. This could be such activities as the repair or delivery of new whiteware, provide professional cleaning services, on-site security services etc. If unsure, please contact CHA.

COVID-19 Key contact numbers, helplines, and web-based resources

Welfare	
Police emergency	111
Police non-emergency (COVID-19 welfare checks)	105 105.police.govt.nz
Government help line 8am – 1am, seven days a week	0800 779 997
Online tool to check what welfare assistance may be available from MSD	https://check.msd.govt.nz/
Temporary accommodation (for people who cannot self-isolate due to COVID-19) costs may be incurred.	0508 754 163 Work and Income can help with costs on a case-by-case basis
Immigration	0508 225 288
Civil Defence Emergency Management Public Numbers https://www.civildefence.govt.nz/resources/news-and-events/news/cdem-group-0800-numbers-for-supporting-communities/	
wecare kiwi https://wecare.kiwi/ (Care NZ and IHC) free service to sustain family/whānau carers and people living on their own, of any age.	Business hours 0800 777 797 , help@wecare.kiwi , or email centre@carers.net.nz Carers NZ's helpline during business hours. Will respond within 24 hours.

Health	
Emergency risk to life / severe injury, breathing difficulties <ul style="list-style-type: none"> let them know if symptoms of cough, fever, shortness of breath and/ or suspected COVID-19 	111
General Practice (GP)	Usual number
Healthline: dedicated COVID-19 number (24-hour service, seven days a week) <ul style="list-style-type: none"> if does not have a GP symptoms of feeling unwell, cough, fever, and shortness of breath, and suspected COVID-19 	0800 358 5453 If possible, have the person who is unwell make the call or be available to speak to the health professionals and to be assessed over the phone.
Healthline: General symptoms (24-hours, seven days a week) <ul style="list-style-type: none"> unwell not suspected COVID-19 	0800 611 116 If possible, as above

Mental health concerns	
Emergency risk to life or immediate harm	111
Crisis support required, <ul style="list-style-type: none"> check weblink for information about your District Health Board local area 0800 number OR Call Healthline 24-hour service, seven days a week) 	Crisis Assessment and Treatment Team number https://mentalhealth.org.nz/get-help/in-crisis/ Or Healthline 0800 611 116
Non-crisis support required, <ul style="list-style-type: none"> Call usual mental health support worker 	Usual number
Mental health support by phone or text <ul style="list-style-type: none"> if does not have a usual support provider 	Call or text 1737 https://www.mentalhealth.org.nz/get-help/in-crisis/helplines/
Promoting wellbeing	
The Ministry of Health website contains information on mental health and wellbeing resources . The Mental Health Foundation website information also has tips on mental health and wellbeing. Melon Health has developed materials for Self-care and Support for NZers during Covid-19	

Youth and rangitahi	
Emergency Risk to life or immediate harm	111
Oranga Tamariki Links to practice during Alert Level 4	https://practice.orangatamariki.govt.nz/covid-19-implications-for-our-practice/

Alcohol and drugs	
Emergency severe symptom of withdrawal	111
Recognising symptoms of withdrawal <ul style="list-style-type: none"> • severe • uncommon • common 	https://www.drugfoundation.org.nz/covid-19/
Non-emergency support required, <ul style="list-style-type: none"> • Call usual support provider 	Usual number
If no current support provider, connect via link to list of your local alcohol and other drug service to find out what support they provide	https://www.healthpoint.co.nz/
Helpline (24 hrs a day, seven days a week) <ul style="list-style-type: none"> • Counsellors and peer support • Call free from mobile or landline • Text free and they'll text you back Live chat on their website	0800 787 797 Text 8681 https://alcoholdrughelp.org.nz/
On-line resource Harm minimisation during lockdown	https://drughelp.org.nz/covid-19-lockdown-support/managing-withdrawal
On-line resource Supporting others	https://drughelp.org.nz/covid-19-lockdown-support/supporting-others

Family violence/ sexual harm	
Emergency Risk to life or immediate harm	111
Women's Refuge be linked up with an advocate in your area	0800 743 843 (0800 REFUGE)
Helpline Safe to Talk <i>Kōrero mai, ka ora</i> – sexual harm helpline. Talk to counsellors	Call 0800 044334 , text 4334 or email support@safetotalk.nz
Helpline Family Services 211 – for help finding, and direct transfer to, community-based health and social support services in your area	(0800 211 211)
Victim Support	Call 0800 842 846 to get help
Online resources that links to assistance available	https://covid19.govt.nz/help-and-advice/for-everyone/family-violence-and-sexual-violence-prevention/

Workplace Health and Safety Alert level 4

Advice is based on Ministry of Health and New Zealand Government information and factsheets relevant for community housing providers and homelessness services.

<p>Workplace health and safety: preventing the spread of the virus</p> <p>Going to work Staff cannot go to work if they:</p> <ul style="list-style-type: none"> • have cold or flu symptoms. Workers should be symptom free for 48 hours before returning to work. • have been overseas or in close contact with someone confirmed with COVID-19 in the past 14 days. We advise that you self-isolate for 14 days from the date of departure or close contact. <p>If you develop symptoms (listed below) within 14 days of being overseas, or within 14 days of contact with a confirmed case of COVID-19, you should phone Healthline on 0800 358 5453.</p>
<p>Preventing the spread of the virus</p> <p>Practising good hand hygiene and sneeze/cough hygiene is the best defence against most viruses. You should:</p> <ul style="list-style-type: none"> • wash your hands frequently with soap and water and dry them well, before and after eating and after going to the toilet • avoid contact with others (touching, kissing, hugging and other intimate contact) • cover coughs and sneezes with clean tissues or your elbow and dispose of tissues • use alcohol-based hand sanitiser if you can't wash and dry your hands. <p>Links to posters and videos on hand hygiene for workplaces on the Covid-19 website.</p>
<p>Physical distancing 2 metres</p> <p>Because transmission is by droplet, it is important to maintain a two metre (2m) distance between every person you are in contact with, and ensure they are doing the same with everyone they are in contact with.</p>
<p>Good cough etiquette</p> <p>The person with the symptoms should practice good cough etiquette, such as coughing into a tissue or their elbow, or wear a mask. Dispose of tissues immediately.</p>
<p>Hand hygiene</p> <p>Hand hygiene is one of the most effective ways to prevent the spread of COVID-19. Washing your hands with soap and water is as effective as using hand sanitiser. Hands must be washed well for at least 20 seconds – including front and back of hands, between fingers, thumbs and up to the wrist.</p> <p>There are good instructional videos on hand washing here (Hand washing with soap, Hand washing with sanitiser). We recommend you put posters up in your bathrooms to encourage hand washing. There are some excellent posters and resources to be found here.</p>
<p>Don't touch your face</p>

Don't touch your face. The virus needs access to mucus membranes in your mouth, nose and eyes to infect you. If you touch anything which has the virus on it – surfaces, contaminated tissues or clothing – and then touch your face, you could be in trouble.

Guidance for cleaning

The Ministry of Health website has [excellent cleaning advice](#) for infection control within your facility.

- Wash dishes in the dishwasher if you can.
- Clean all 'high-touch' surfaces such as tabletops, doorknobs, bathrooms and toilets every day with antiseptic wipes or disinfectant.
- Clean toilets with a separate set of cleaning equipment (disposable cleaning cloths, mops, etc).
- Clean floors with disinfectant every day.
- Wash laundry in warm or hot water and dry thoroughly. Wear gloves while handling soiled laundry.

Personal Protective Equipment (PPE)

What is PPE?

PPE means personal protective equipment. It most commonly means gloves and an apron, for some tasks relating to close personal care of someone suspected to have COVID-19 or confirmed to have COVID-19 it may mean a surgical mask if you are in close contact for 15 minutes or more.

Do you need PPE?

If providing personal close care is not part of your usual service delivery, there is not an expectation for your service to deliver personal close care during the COVID-19 response.

- Staff, like everyone else are asked to keep a 2-metre distance from the people they support.
- Most social service staff will not require full PPE, (mask, gloves, gown and goggles or a visor) in the course of their usual work.
- Full PPE (mask, gloves, gown and goggles or a visor) is only recommended for staff who are in close contact (within 1 metre of a person for more than 15 minutes) with someone suspected or confirmed to have COVID-19.
- Most face-to-face support for people who are not suspected or confirmed to have COVID-19 can be provided safely at 2 metres or within a metre for a short period of time (less than 15 minutes). For example, putting food by someone's door, checking on someone's welfare.

Basic hygiene measures for everyone include physical distancing, good hand hygiene, cough etiquette, regular cleaning of surfaces and frequently touched items, avoid touching face, eyes, mouth and nose.

If you need PPE

The links below are helpful to assess whether you need PPE or not and what type of PPE you will need (non-health workers)

- Personal protective equipment (PPE) used by [community care providers](#) for prevention of COVID-19*
- Steps to [put on PPE safely](#)
- Personal Protective Equipment (PPE) requirement for [essential non-health workers](#) - COVID-19

PPE for cleaning and food handling

Always wear disposable gloves when cleaning. Dispose of used gloves in a rubbish bin. Wash your hands immediately after handling these items.

You can use hand sanitiser (containing at least 60 percent alcohol) if soap and water are not available and if your hands are not visibly dirty. If using hand sanitiser, cover all surfaces of your hands and rub them together until they feel dry.

Avoid touching your eyes, nose and mouth with unwashed hands.

Specific advice for homelessness service providers in Wellington.

The Hutt Valley, Wairarapa and Capital & Coast District Health Boards have developed advice for homelessness service providers. They have also provided information for services that do require PPE due to providing close personal care to access PPE and training in the proper use of PPE. The PPE is only to be used by providers who will be providing close personal care.

Shared accommodation (emergency housing providers)

Ministry of Health advice for [homeless shelters](#) is on the Covid-19 website.

Engage your local district health board

Work with them to develop a plan for what to do if a COVID-19 case is suspected or confirmed in or around your facility.

Prepare your community

- Develop plans for what to do if staff or volunteers are unable to come to work due to self-isolation or illness.
- Develop a plan for communicating with staff, volunteers and attendees whenever updates are needed.
- If possible, identify space where those who become unwell can be separated from others temporarily. Designate a room and bathroom (if available) and develop a plan for cleaning the room safely. Public health staff will guide you further about your individual situation.
- Ensure surfaces that are frequently touched – such as shared desks, countertops, kitchen areas, equipment, electronics and doorknobs – are cleaned frequently and thoroughly with disinfectant.
- Ensure there are appropriate handwashing facilities, tissues and lined containers for the safe disposal of used tissues available.
- Place tips and advice about COVID-19 in obvious and visible places, including health tips and where to go for help and advice.
- Ensure staff, volunteers and those using the space are aware of these health steps, and of the importance of following them.

Reducing risk of spread	
How can you reduce the risk of spread of illness in a communal housing situation?	
How can you support people to keep within their bubbles?	
Can you split the use of bathrooms to reduce the risk of spread of illness? For example, if 18 people share a communal house and there are 3 bathrooms and toilets, can the same 6 people/groups be allocated to each toilet and bathroom?	
Avoid people from different rooms needing to get closer than 2 metres apart by making a roster to use communal areas, such as the kitchen during mealtimes or laundry facilities.	
Remind people to keep 2 metres apart if you provide an outside smoking area.	
Clean high touch surfaces (doorknobs), light switches, toilets and bathrooms more frequently than usual. Particularly in accommodation with higher numbers of people where the risk of 'bursting' bubbles is higher.	
CHA is working with to develop a checklist and additional support for communal accommodation providers in the event of a case of COVID-19 being suspected and/or confirmed in shared accommodation. If you have concerns, please contact CHA and we will work with you find practical solutions.	

If someone in the service or staff has symptoms	
Healthline: dedicated COVID-19 number (24-hour service, seven days a week) <ul style="list-style-type: none"> if does not have a GP symptoms of feeling unwell, cough, fever, and shortness of breath, and suspected COVID-19 	0800 358 5453 If possible, have the person who is unwell make the call or be available to speak to the health professionals and to be assessed over the phone.
Public health staff will contact you to contract trace within the service and provide advice on next steps.	<ul style="list-style-type: none"> isolating person/s with symptoms quarantine of a building access to health/ welfare supports for people in isolation.
<ul style="list-style-type: none"> CHA is working with health and welfare CDEM to develop processes to help support communal accommodation providers in the event of a case of COVID-19 being suspected and/or confirmed in shared accommodation. 	
<ul style="list-style-type: none"> If you are having issues with business continuity due to staff being unwell or being required to self-isolate in the event of a case of COVID-19 being suspected and/or confirmed your shared accommodation, please let HUD and CHA know and we will work with you to find practical solutions. 	

Transport (essential services)
Organisations can use approved taxi services, Uber etc to transport staff and people to their housing, providing people do not have symptoms of COVID-19 and appropriate safety protocols are followed
CHA is working with health to develop processes for transporting people who are suspected or confirmed to have COVID-19 between accommodation and health facilities.

Empty properties and essential moves at Level 4 – key questions and issues that you should take into consideration.

The Ministry of Social Development [issued guidance](#) on 1 April 'Pausing non-essential placements in transitional and public housing'.

It is only essential to move or place a person or household when:

- they can't safely self-isolate in their current accommodation or they're homeless and they can move to more suitable accommodation to safely self-isolate e.g. moving a family from communal accommodation into a self-contained property, or moving a homeless person off the street into appropriate accommodation
- they're in over-crowded housing and they can move to more suitable accommodation to safely self-isolate, o e.g. an existing public housing tenant in an over-crowded property.
- there's a serious risk to their health, safety and security in their current accommodation and they can move to safer accommodation e.g. people who may be at risk of family violence.

Providers should only undertake such a move if:

- They have in place the appropriate policy and procedures to manage the move in a way that complies with the health and safety requirements of Level 4
- They can maintain the safety of staff
- Individuals or households can move quickly and without disruption to others.
- They can minimise the number of people and organisations (e.g. delivery drivers) involved in the move
- They have contacted MSD / MHUD first or as soon as practically possible

Providers should also consider:

- The level of maintenance required. This should be kept to a minimum and address minimum health and safety requirements.
- If additional maintenance is required hold the unit/property as vacant and notify MSD/HUD
- Advise MSD/HUD of vacancies available for occupation
- If people don't have the essentials to live safely and independently in a new property (e.g. whiteware, beds, utilities), it is more appropriate for them to be placed in emergency housing instead.
- It may be necessary to interact with local police about the essential nature of the move. This will also impact individuals/households.

If providers are approached to house anyone with COVID-19, they should contact MSD/HUD immediately and before proceeding. Separate guidance will be provided.