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What is best practice when transporting patients who do not have confirmed or probable SARS-CoV-2 (COVID-19):

- without fever or respiratory symptoms?
- with fever or respiratory symptoms?

### Context

- Maintaining access to high quality primary healthcare is critical including when services are disrupted due to social distancing requirements and other public health measures
- Many ACCHOs provide transport as an important part of primary healthcare to support patients to access healthcare services, including transport
  - o from home to the primary healthcare centre
  - to regional centres for hospital outpatient appointments, treatments and investigations (which may be several hours of travel)
  - to dialysis services.
- Several patients, sometimes with accompanying family members, may be transported in the same vehicle at the same time
- SARS-CoV-2 (COVID-19) is known to be transmissible in the absence of symptoms (eg pre-symptomatic transmission)
  - Early studies show:
    - between 5-80% of people who test positive for SARS-CoV-2 may not show symptoms being either truly asymptomatic or pre-symptomatic (going on to develop symptoms in the week following) (1)
    - the duration of infectivity before onset of symptoms is uncertain (2)
    - children and young adults can be asymptomatic. (1)
- There is a (potential) risk of transmission of SARS-CoV-2 (COVID-19) to or from any driver and passengers
- SARS-CoV-2 (COVID-19) is transmissible predominantly by droplet infection and by contact with contaminated surfaces (immediate environment or objects that have been in contact with an infected person)
  - strong clinical and epidemiological evidence shows transmission of the virus is mainly through respiratory droplets via direct (direct close contact by exposure of mucosae) or indirect physical contact (touching surfaces or fomites contaminated by respiratory droplets and then touching face) (2, 3)
  - Reports of airborne transmission are rare. (2, 3)









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### Summary of recommendations

- Where possible, avoid exposing drivers who are at <u>high risk of serious COVID-19 illness</u> to patients with fever and/or respiratory symptoms and/or probable or confirmed COVID-19.
- Provide training for drivers in the correct use of PPE including when and how to use PPE.
- Screen all passengers for fever, respiratory symptoms and/or exposure to a person known to have COVID-19 prior to entering a transport vehicle, by asking the questions:
  - Have you got or had recent fever, chills or night sweats?
  - Have you got a sore throat, cough or shortness of breath?
  - Have you had <u>close contact</u> in the last 14 days with anyone who has confirmed or probable COVID-19?
  - Have you travelled overseas in the past 14 days?
- When passengers answer no to all questions:
  - $\circ$  they can be transported as usual
  - advise passengers to complete hand hygiene, using hand sanitiser of at least 70% alcohol, prior to entering the vehicle
  - $\circ$  ~ observe social distancing as much as possible
  - no PPE is required
  - clean vehicles *at the end of each transport shift/daily*. This should include general cleaning and wiping down of all high touch surfaces (ie door handles, seat belts and seats) using detergent and disinfectant (at least 70% alcohol solution OR bleach or TGA-approved hospital grade disinfectant). Detergent and disinfectant can be combined (2-in-1 product). Make sure there is adequate ventilation of the vehicle while using cleaning and disinfectant agents. After cleaning, allow at least 30 minutes before next use for surfaces to fully dry.
- When passengers answer yes to one or more questions:
  - before commencing the journey, confirm the need for transport for healthcare with the local health service who should consider whether an alternative is available, such as telehealth, home delivery of medications, etc
  - arrange for an existing close contact (eg family/household member) who is not at <u>high risk of</u> serious COVID-19 illness to transport the patient if possible
  - if transport for healthcare is necessary:
    - transport without other passengers in the vehicle if possible
    - transport in vehicle fitted with driver compartment separated from passengers (eg Perspex shield between driver and passengers) when possible
    - advise passenger(s) to complete hand hygiene, using hand sanitiser of at least 70% alcohol prior to entering the vehicle and on leaving the vehicle
    - observe social distancing as much as possible
    - advise patient and accompanying passengers (close household contacts) to wear surgical masks
    - no specific PPE is recommended for drivers if passengers are wearing surgical masks, spatial distance is maintained and the driver compartment is separated from passengers
    - if the above requirements cannot be met, at a minimum, advise the driver to wear a surgical mask. Consider greater precautions i.e. gloves, gown and goggles if higher risk of transmission of infection. Advise the driver to wear a gown if close physical contact is needed eg assisting passengers in and out of the vehicle

- transport with windows as open as is practical, at a minimum at least partially open on both sides of the vehicle and, if air conditioner is used, set to FRESH AIR rather than CIRCULATE.
- clean vehicles *after each passenger journey*. This should include general cleaning and wiping down of all high touch surfaces (i.e. door handles, seat belts and seats) using detergent *and* disinfectant (at least 70% alcohol solution *or* bleach or TGA-approved hospital grade disinfectant). Detergent and disinfectant can be combined (2-in-1 product). Make sure there is adequate ventilation of the vehicle while using cleaning and disinfectant agents. After cleaning, allow at least 30 minutes before next use for surfaces to fully dry.
- For patients under quarantine, transport as a single passenger and advise patient to wear a surgical mask. Determine PPE for the driver and cleaning requirements for the vehicle as per responses to screening questions.
- Provide rubbish/tissue disposal and clear from the vehicle after each transport.
- Consider displaying health protection messages in vehicles about coughing and sneezing hygiene, hand hygiene, social distancing, avoiding touching the face and seasonal influenza immunisation.
- Check local travel restrictions and quarantine requirements for patients returning from regional centres to community as these may impact on PPE requirements during transport.
- Provide annual influenza immunisation and pneumococcal immunisation for all drivers.

### **Recommendations and rationale**

Recommendation	Rationale
Where possible, avoid exposing drivers who are at <u>high risk of serious COVID-19 illness</u> to patients with fever and/or respiratory symptoms and/or probable or confirmed COVID-19.	Some chronic conditions have been identified as increasing the risk of serious illness from COVID-19 infection (4). Drivers identified as high risk need to be enabled to take precautions to protect their own health.
Provide training for drivers in the correct use of PPE including when and how to use PPE.	All drivers could potentially come into contact with patients with SARS-CoV-2 (COVID-19) and need to be able to use appropriate PPE for their own protection and to prevent the spread of infection to others (2, 5).
Screen all passengers for fever, respiratory symptoms and/or exposure to a person known to have COVID-19 prior to entering a transport vehicle, by asking the questions:	Questions from and federal and state government guidance (6).
<ul> <li>Have you any got or had recent fever, chills or night sweats?</li> <li>Have you got a sore throat, cough or shortness of breath?</li> <li>Have you had close contact in the last 14 days with anyone who has confirmed or probable</li> </ul>	
COVID-19? Have you travelled overseas in the past 14 days?	

Recommendation	Rationale
<ul> <li>When passengers answer NO to all questions:</li> <li>they can be transported as usual</li> <li>advise passengers to complete hand hygiene, using hand sanitiser of at least 70% alcohol, prior to entering the vehicle</li> <li>observe social distancing as much as possible</li> <li>No PPE is required.</li> </ul>	In patients who do not have confirmed or probable SARS CoV-2 (COVID-19) and answer no to all screening questions, guidelines recommend: proper hand hygiene using hand sanitiser or soap and water, avoid touching face, maintain 1.5 m distance as far as possible for those transporting clients (5, 7) and clean surfaces regularly (7). Surgical masks are not required for drivers or passengers if healthy (5, 8), however, health personnel must still take droplet and contact precautions if patients have fever and/or respiratory symptoms and have a negative test for COVID-19 (9).
<ul> <li>When passengers answer YES to one or more of the screening questions:</li> <li>before commencing the journey, confirm the need for transport for healthcare with the local health service who should consider whether an alternative is available, such as telehealth, home delivery of medications, etc</li> <li>Arrange for an existing close contact (eg family/household member) who is not at high-risk of serious COVID-19 illness to transport the patient if possible.</li> </ul>	Derived from Institute for Urban Indigenous Health Network and National Aboriginal Community Controlled Health Organisation recommendations (7).
<ul> <li>When passengers answer YES to one or more of the screening questions if transport for healthcare is necessary</li> <li>transport without other passengers in the</li> </ul>	In patients who answer yes to any screening questions and still require transport, guidelines recommend: <ul> <li>as far as possible, patients should be</li> </ul>
<ul> <li>vehicle if possible</li> <li>transport in vehicle with driver compartment separated from passengers (eg Perspex shield between driver and passengers) when possible</li> <li>advise passenger(s) to complete hand hygiene, using hand sanitiser of at least 70% alcohol prior to entering the vehicle and on leaving the vehicle</li> </ul>	<ul> <li>transported as single passengers (10-13)</li> <li>as an alternative mode of transport, the patient may be transported via private vehicle by an existing close contact (14-16)</li> <li>transport in vehicle with driver compartment separated from passengers (eg Perspex shield between driver and passengers) when possible (17)</li> </ul>
<ul> <li>observe social distancing as much as possible</li> <li>advise patient and accompanying passengers (close household contacts) to wear surgical masks</li> <li>no specific PPE is recommended for drivers if patients are wearing masks, spatial distance is</li> </ul>	<ul> <li>hand hygiene should be practiced for all people involved (passengers and health personnel) before and after transport (5) and patient and accompanying passengers must put a surgical mask on before entering the vehicle and throughout trip (10)</li> </ul>

Recommendation	Rationale
<ul> <li>maintained and the driver compartment is separated from passengers</li> <li>if the above requirements cannot be met, at a minimum, advise the driver to wear a surgical mask. Consider greater precautions i.e. gloves, gown and goggles if higher risk of transmission of infection. Advise the driver to wear a gown if close physical contact is needed eg assisting passengers in and out of the vehicle</li> <li>transport with windows as open as is practical, at a minimum at least partially open on both sides of the vehicle and, if air conditioner is used, set to FRESH AIR rather than CIRCULATE.</li> </ul>	<ul> <li>no PPE is needed for drivers if patients are using a mask throughout, spatial distance is maintained and the driver cab is separated from passengers (10, 17)</li> <li>if this is not possible, the driver should wear a surgical mask at minimum (17) and consider greater precautions: i.e. gloves, gown and goggles if there is a higher risk of transmission of respiratory infection; a gown should be worn if close physical contact is needed eg assisting passengers in and out of the vehicle (7, 17, 18)</li> <li>ensure vehicles have proper ventilation and open windows. A/C should be set to fresh air to avoid re-circulation of air within the vehicle (5, 10, 12)</li> <li>No evidence has been found relating to use of equipment (such as seat covers) to prevent transmission of COVID-19. Therefore, it is recommended that procedures are in place for cleaning of vehicles between patients, and that vehicles and resources such as consumables and equipment are specifically allocated, where possible, solely for transporting COVID-19 patients (11, 13).</li> </ul>

### **Cleaning vehicles**

Recommendation	Rationale
<ul> <li>Kecommendation</li> <li>When passengers answer NO to all questions:</li> <li>clean vehicles at the end of each transport shift/daily. This should include general cleaning and wiping down of all high touch surfaces (i.e. door handles, seat belts and seats) using detergent and disinfectant (at least 70% alcohol solution or bleach or TGA-approved hospital grade disinfectant). Detergent and disinfectant can be combined (2-in-1 product). Make sure there is adequate ventilation of the vehicle while using cleaning and disinfectant agents. After cleaning, allow at least 30 minutes before next use for surfaces to fully dry.</li> </ul>	<ul> <li>Cleaning of vehicles for patients who do not have confirmed or probable SARS CoV-2 (COVID-19) and answer no to all screening questions, recommendations include (19-22):</li> <li>routine cleaning of frequently touched hard surfaces with detergent AND disinfectant solution or wipe</li> <li>2-in-1 clean: a physical clean using combined detergent (soap and water) and disinfectant agent (1,000ppm chlorine solution or at least 70% alcohol solution or bleach or TGA-approved hospital grade disinfectant) solution made up daily from a concentrated solution, or</li> <li>2-step clean: a physical clean using detergent</li> </ul>
	(soap and water) followed by a disinfectant agent (1,000ppm chlorine solution or at least

Recommendation	Rationale
	70% alcohol solution or bleach or TGA-approved hospital grade disinfectant)
	<ul> <li>combination disinfectant and detergent wipes can be used.</li> </ul>
When passengers answer YES to one or more of the screening questions if transport for healthcare is necessary:	Cleaning of vehicles for patients who answer yes to any screening questions and still require transport, guidelines recommend (19, 20, 22):
<ul> <li>clean vehicles after each passenger journey. This should include general cleaning and wiping down of all high touch surfaces (i.e. door handles, seat belts and seats) using detergent and disinfectant (at least 70% alcohol solution or bleach or TGA-approved hospital grade disinfectant). Detergent and disinfectant can be combined (2-in-1 product). Make sure there is adequate ventilation of the vehicle while using cleaning and disinfectant agents. After cleaning, allow at least 30 minutes before next use for surfaces to fully dry.</li> </ul>	<ul> <li>during cleaning, ensure adequate ventilation when chemicals are in use, doors and windows should remain open when cleaning the vehicle. Personnel undertaking cleaning should wear appropriate PPE (gloves, gown, mask and goggles or face shield) (7) or disposable gloves compatible with the products, other manufacturer recommended PPE and a disposable gown (23)</li> <li>targeted cleaning after each passenger journey using detergent AND disinfectant solution (or wipes)</li> <li>2-in-1 clean, a physical clean using combined detergent (soap and water) and disinfectant agent (1,000ppm chlorine solution [bleach] or at least 70% alcohol solution OR bleach OR TGA-approved hospital grade disinfectant solution, or</li> <li>2-step clean, a physical clean using detergent (soap and water) followed by a disinfectant agent (1,000ppm chlorine solution (bleach) or at least 70% alcohol solution OR bleach OR TGA approved hospital grade disinfectant). Combination disinfectant and detergent wipes also acceptable</li> <li>concentrate on high touch hard surfaces that the patient and passengers have or likely to have touched (10, 12, 23):</li> <li>door handles, seat belts and seats</li> <li>if patient didn't use a mask, wipe the back of the seat in front</li> <li>clothing, luggage, walking frames and other belongings are assumed to cause little</li> </ul>

Rationale
contamination in a vehicle. Perform hand hygiene after handling items. (10)
There is no need to clean the entire car after transport of a person with suspected or confirmed COVID-19 (10)
All consumables that are unable to be cleaned should be discarded. To reduce the risk of transmission, disposable or patient-dedicated equipment is preferred. Equipment that is unable to be dedicated should be cleaned and disinfected after use, allowed to dry and stored clean (20, 22).
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- Set-up patient transfer teams with equipment appropriate for COVID-19. This includes surgical masks, PPE, tissues, medical waste disposal, alcohol-based hand sanitiser, and cleaning supplies such as detergent (soap and water based), disinfectant (TGA-approved hospital grade disinfectant or 1,000ppm chlorine solution [bleach] or at least 70% alcohol solution) and disposable wipes (10, 11, 13).
- Patients should be kept in the vehicle on arrival until prearranged movements are implemented (11, 13).
- Where possible, do not use ordinary cars (eg 5-7 seats), but larger vehicles (eg bus, minibus) to allow for better physical distancing between the driver and passengers (7, 10).

### Other recommendations

Recommendation	Rationale
For patients under quarantine transport as a single passenger and advise patient to wear a surgical mask. Determine PPE for the driver and cleaning requirements for the vehicle as per responses to screening questions.	Transporting as a single passenger optimises social distancing recommendations. National guidelines recommend quarantined patients wear a surgical mask when going outside and before presenting to any healthcare setting for medical care (6, 24).
Provide rubbish/tissue disposal and clear from the vehicle after each transport.	Good practice point.
Consider displaying health protection messages in vehicles about coughing and sneezing hygiene, hand hygiene, social distancing, avoiding touching the face and seasonal influenza immunisation.	Good practice point.

Recommendation	Rationale
Check local travel restrictions and quarantine requirements for patients returning from regional centres to community as these may impact on PPE requirements during transport.	Transport of patients from regional centres back to community: Patients who are confirmed COVID-19, ready for discharge and have not yet completed the clearance criteria, can be transported home by family/friend/support person. Both the patient and driver should wear a surgical mask during transport. Health care facilities need to supply the surgical mask and instructions on use of masks (putting on and taking off). On completion of journey vehicles should be cleaned as described above (25).
Provide annual influenza immunisation and pneumococcal immunisation for all drivers.	Good practice point.

### **Related topics and resources**

Infection prevention and control RACGP Infection prevention and control standards

Use of PPE RACGP Infection prevention and control standards

Infection Control Expert Group <u>Guidance on use of personal protective equipment (PPE) in non-inpatient</u> <u>health care settings, during the COVID-19 outbreak</u>

Environmental cleaning RACGP Infection prevention and control standards

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<sup>2</sup> A joint initiative formed between the National Aboriginal Community Controlled Health Organisation, Royal Australian College of General Practitioners and Lowitja Institute. Additional contributors to this guidance included: Expert Reviewers: Atkinson D, Peiris D, and Senior T; Executive Group Belfrage M, Agostino J, Thurber K, Senior T, Chamberlain C, and Freeman K; and Expert Committee.









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