

Memorandum

Progress on Border & Managed Isolation and Quarantine Facility Infection Prevention and Control Workstreams

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To:	Hon Chris Hipkins, Minister for COVID-19 Response		

Contact for telephone discussion

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Action for Private Secretaries

N/A

Date dispatched to MO:

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Purpose

1. This report provides an update on recent actions taken, as well as ongoing workstreams, that follow the review of Infection Prevention and Control (IPC) procedures at managed isolation and quarantine facilities (MIQFs) and airports in response to the new SARS-CoV-2 variants and the increasing global prevalence of COVID-19.

Background

2. Specific IPC workstreams were identified in HR 20202050, titled "*October/November 2020 managed isolation and quarantine facility workers COVID-19 infections: reviews and actions.*" Progress of these workstreams are discussed in this report and include:
 - a. implementation of N95/P2 particulate respirator fit testing programmes,
 - b. development of a national incident review process; and
 - c. development of a nation-wide MIQF staff IPC training platform.

Review of current IPC measures in response to new variants of virus

3. The Ministry of Health's (the Ministry) IPC sub-group, led by Dr Sally Roberts, reviewed the evidence on the new variants of the virus as information was emerging from overseas during late December 2020 and early January 2021. Preliminary epidemiological modelling and phylogenetic and clinical findings suggest that (UK) variant B.1.1.7 has the risk of increased transmissibility. Estimates are that it is 40-70% more transmissible. There is preliminary data that people with the B.1.1.7 variant have higher viral loads, this could mean an infected person might shed more virus.
4. The mutations within B.1.1.7 may allow it entry into cells more efficiently but, to date, do not appear to impact the way the virus is physically transferred between individuals or the severity/longevity of the disease. Therefore, the Ministry considers the current IPC measures in place appropriate at this time. We continue to review all emerging evidence and any change in international practice on a daily basis.
5. A two-stage health screening system is in place at airports for all international arrivals. All newly arrived passengers undergo temperature checks and are asked if they have COVID-19 symptoms (stage 1). Those that have a temperature greater than 38°C and/or report COVID-19 symptoms then undergo a second, more comprehensive assessment by the border health team (stage 2).
6. We implemented one change to PPE measures for airport health workers. We recommended that, as an extra precautionary step, for border health teams who conduct stage 2 assessments, airborne precautions should be adhered to. This includes

the wearing of a N95/P2 particulate respirator, eye protection, a long sleeve gown and gloves.

7. We conduct regular updates of our IPC Standard Operating Procedures (SOPs) for MIQFs. The last version was released on 22 December 2020 with the next update due for completion 1 February 2021. We are also drafting IPC SOPs for the Air and Maritime Borders. Anticipated completion for these border SOPs is in February 2021. Our IPC standards are in line with international evidence-based recommendations and findings and we monitor new developments in this field of research daily.
8. We are facilitating additional regular meetings between the Ministry's IPC sub-group and nurse managers of MIQFs, and between the Ministry's IPC sub-group and IPC leads at MIQFs. Meetings with the nurse managers started mid-December.
9. Both meetings are intended to be open forum for questions and answers, identifying and resolving issues and supporting improved connection between the Ministry's IPC sub-group and the sector. We will invite representatives from the Air and Maritime Border IPC teams to the next meetings.

Implementation of N95/P2 particulate respirator fit testing programmes

10. We updated guidelines for the health workforce in MIQF IPC SOP v. 1.3 (November 23, 2020), requiring the use of N95/P2 particulate respirators if 2 metres physical distancing cannot be maintained from a confirmed or probable case of COVID-19. These particulate respirators require fit testing for each worker in order to function appropriately. Fit testing was completed for the majority of the MIQF health workforce by the end of December 2020.
11. On 22 December 2020, we placed a hold on 2016 – 2020 Quality Safety International (QSi) Duckbill P2 air particulate respirators in healthcare settings (HR20202327 refers). Due to inconsistencies in packaging and certification, we sent samples for review by INSPEC, an independent international accreditation testing authority. The results of the tests showed that they did not meet safety standards in two areas. We provided alternative particulate respirators to MIQFs and DHBs for immediate use and fit testing/checking. The change in mask supply required further fit testing was required for those that had not previously been fit tested to the alternative masks. DHBs made operational decisions to prioritise fit testing for those at greater risk, such as those in MIQFs.

Health workforce fit testing progress in MIQF facilities, as at 12 January 2021

12. Canterbury, Rotorua and Waikato have fit tested 100% of the health workforce. There may be some minor fluctuations in the 100% fit-testing rates in periods of staff turnover.
13. Four MIQF health staff in Canterbury failed their fit testing due to the masks being too big. These workers therefore are not rostered for any duties that would require wearing a N95/P2 mask (i.e. any duties that would require contact with confirmed or probable cases). The Canterbury DHB is fit testing those that do not fit the current supply of N95/P2 mask using an alternative N95/P2 air particulate respirator.

14. 82% of the Auckland MIQF health workforce have been fit tested with new masks, with approximately 20 workers remaining. Some of these workers are not rostered to work in an MIQF in the next four weeks.
15. Prior to the recall of the QSi masks, Wellington had fit tested 100% of the required MIQF health workforce. Due to the hold placed on QSi P2 Duckbill masks, 27 staff members required additional fit test assessments. Approximately 60% of these staff members have been re-tested to date. The remainder of the fit tests in Wellington will be completed by the end of January. This delay is due to the fit testing provider being fully booked over this period.

Health workforce fit testing progress in airports, as at 12 January 2021

16. Christchurch Airport uses MIQF health staff to complete health checks at the airport. Therefore, the numbers reported above in paragraph 15 and 16 currently reflect the Christchurch Airport fit testing rates.
17. Auckland Airport has fit tested 14 staff and have six left to complete. Those remaining employees will be fit tested in the next 2 weeks when they return from leave.

Transport workforce fit testing, as at 12 January 2021

18. MBIE advised they met with the MIQF transport provider, Johnston's, who has confirmed that all drivers have been fit tested. All the transport vehicles have a physical barrier in the form of a Perspex screen between drivers and returnees. There is no physical contact between driver and returnees as the returnees enter by the rear of the bus.

Summary of fit testing progress

19. We are reassured by the progress in fit testing for all employees who require particulate respirators, especially given the recent need to re-fit test some workers due to the issue with QSi masks. We will also review fit testing completion rates at the end of January.

Ongoing MIQF IPC audits and improvements

20. The next round of scheduled IPC audits of MIQFs has started. 16 IPC audits were completed before Christmas on schedule. Due to resource issues, the January audits have been rescheduled with the remaining 16 to be completed by 3 February 2021. We will provide you with a briefing on the findings and any further actions identified on 15 February 2021.
21. We communicate findings to MIQFs at the time of the audit. We expect that high risk findings be actioned within 24 hours. An example of a high-risk finding is that one MIQF was not completing returnee healthchecks per the IPC SOP requirements, which was mitigated on the same day as the audit.
22. MIQFs also provide weekly progress reports on audit recommendations. We are actively following up with the MIQFs to ensure recommendations are completed satisfactorily and in a timely fashion. We negotiate timeframes with each facility based on the complexity of the recommendation and we closely monitor that these timeframes are met.

Next steps and anticipated workstreams in the first quarter of 2021

Case incident review process

23. A systematic case incident review process is being developed to review cases where MIQF and border workers become infected with COVID-19. This systematic review process is designed to ensure that all relevant details are recorded in order to identify and rectify any gaps in our IPC procedures.
24. The draft National Incident Review process was tabled at the MIQ Risk, Quality and Assurance Advisory Group on 16 December 2020 and was endorsed at that meeting. It is going through final consultations with relevant sectors and will be signed out formally by the end of January 2021.

Additional education for border and MIQF workers on IPC

25. Additional education and communications are planned which explain current IPC protocols continue to be safe for workers. A one page fact sheet titled "CoV-2 variants of concern: Infection Prevention and Control advice for staff working at managed isolation quarantine facilities (MIQF)" is in the final stages of the internal Ministry process approval before it will be shared with MIQF staff next week.
26. A webinar is planned to visually demonstrate why current protocols are effective and to explain the science behind why they are effective. This webinar will be delivered by IPC experts from the Ministry in early February.
27. MBIE has developed a learning platform, 'Learn@MIQ', to standardise and assure the training that MIQF workers receive. This includes an IPC module with content provided by the Ministry. Learn@MIQ went live in a 'pilot' to selected users on 18 December 2020.
28. Learn@MIQ has collected user data from 6 of 32 facilities and continue to add users to the pilot. A full roll-out of Learn@MIQ is expected after the System & Security documentation and procedures are presented to the MBIE Architecture Review Board on 19 January 2021.
29. We are investigating the possibility of extending this learning platform to other groups such as air and maritime border workers. There is a possibility that the security settings might make it difficult for non-MIQ users to access the platform.

Ongoing improvements and adaptation

30. We are committed to continuing to monitor international developments and new research in IPC. In addition to existing reviews and improvement process such as the regular revisions of the IPC SOPs and regular IPC audits of MIQFs, we are constantly improving our existing processes. We have experienced senior IPC experts in the IPC sub-group who review and conduct this work.
31. Recent improvements details in this report include the commencement of more regular meetings between various IPC stakeholders and the developing of air and maritime border-specific IPC SOPs.

32. We will continue to review and adapt our policies and procedures to respond to emerging international evidence, align with international best practice and rectify any gaps we identify through our audit and review process.

ENDS.



Sue Gordon

Deputy Chief Executive

COVID-19 Health System Response

Date: 15/12/2020

PROACTIVELY RELEASED