

# As at 22 April 2020

## Advocacy

- As of 20 April 2020, specialists, consultant physicians and allied health providers are no longer required to bulk bill COVID-19 telehealth (video conference) and telephone consultations where the service is provided to a concessional or vulnerable patient or a child under 16 years of age. Specialists, consultant physicians and allied health providers are now able to continue their usual billing practice. This is a welcome result of ongoing advocacy and feedback by the College regarding concerns of its members on billing practices. In addition, eight new items for public health physicians (mirroring items 410, 411, 412 and 413) have been added as telephone and telehealth equivalent items. The College will continue to seek additional specialist telehealth items to cover the work of members of the College's Faculties and Chapters.
- The Australasian Chapter of Addiction Medicine has drafted interim guidelines for members on the delivery of medication-assisted treatment of opioid dependence in response to COVID-19, which has now been endorsed. The <u>interim guidelines</u> are published on the College COVID-19 webpage. An accompanying media release will follow.
- There is anecdotal evidence that members working in private practice, but also in public and private hospitals, are still struggling to access PPE, and have little to no access to training in when and how to use PPE correctly. Those working in tertiary hospitals are using their networks to share information, but there may be a need for the College to take a role in assisting in disseminating such information. The Commonwealth Health Department has advised that the arrival onshore of significant additional PPE should allow wider distribution, including to specialists working in community settings. Written advice on this is under consideration.
- Regional and Aotearoa New Zealand member-facing staff are now logging concerns raised by members, particularly trainees
  reallocated to COVID-19 clinical duties, regarding access to PPE. As this is being raised by a range of members, the aim of
  logging this information is to determine the scale of the concern.
- A <u>Māori Health Committee (MHC) statement</u> has been released urging the Aotearoa New Zealand Government to
  ensure that equity is centred in all COVID-19 decisions, medical unit prioritisation, resource rationing and data
  collection. The statement supports the work of <u>Te Rōpū Whakakaupapa Urutā</u>, the Independent National Māori
  Pandemic Group. The MHC statement has been well received by other Colleges in Aotearoa New Zealand and
  the Hon Peeni Henare, Associate Minister of Health (Māori Health).
- The College has recently endorsed the first iteration of world leading 'living guidelines' produced by Cochrane Australia on best care for COVID-19 patients. The guidelines will be updated weekly.

# Advisory Groups – Education Learning and Assessment

- The <u>College COVID-19 education webpages</u> have been redesigned to support the various changes. A large number of <u>FAQs</u> have been drafted based on all the enquiries received to date and will be published once approved.
- A brief has been developed to be sent out of session to all the committees and committee members who are responsible for training, accreditation, or exams to direct them to relevant College webpages for the latest information.
- A guide has been developed for working with individual Training Committees to review any additional program requirement
  changes they need to make during this clinical year due to COVID-19. The feedback gathered on the process at the Training
  and Accreditation Advisory Group meeting on 17 April 2020 and the Guide will be piloted with several Training Committees
  shortly, including a number of scenarios that trainees will likely face that each Training Committee needs to consider.
- A letter has been sent to all Health Departments advising them of changes to College exams and program requirements.
- A communications plan covering the next five months has been developed, which outlines the Education, Learning, and Assessment communication response to the impacts of COVID-19.
- A COVID-19 Education, Learning, and Assessment Program Plan is being developed, which will outline the approach, tasks, schedule, interdependencies, and risks based on all the exams, training requirements and accreditation decisions made to date.

# **Professional Practice**

#### **Member Services**

PPE availability and correct usage continue to be concerns for members. These concerns have been forwarded to the
 College's Policy and Advocacy team with respect to the Australian Chief Medical Officer's request that COVID-19 resources

- be endorsed by the Commonwealth before issue.
- The AFOEM Council met on 17 April 2020 and has shared resources regarding the correct use of PPE that have been produced in Aotearoa New Zealand. These resources have been referred to the College's Policy and Advocacy team with respect to members' interest in receiving instruction and training on PPE use.
- The College released a message of support to members from staff across social media platforms on 17 April 2020:
  - o <u>Twitter</u>
  - o Facebook
  - o <u>LinkedIn</u>
  - o <u>Instagram</u>

#### **RACP Facilities and staff**

- Following the Aotearoa New Zealand Government's decision to move to Alert Level 3 from midnight on Monday, 27 April 2020 and in advance of a further review of Alert Levels on Monday, 11 May 2020, discussions will commence to develop plans for a phased reopening of the Te Whanganui-a-Tara Wellington office once Aotearoa New Zealand transitions to Alert Level 2.
- Work is underway to assess threats to the RACP's supply chain caused by potential failures of key suppliers during the isolation period.

## **RACP Resources**

- College COVID-19 webpage
- National COVID-19 Clinical Evidence Taskforce evidence-based clinical guidelines