

COVID-19 Online Support Forum



Low and middle-income country emergency care

acem.org.au/covid-19



On 31 March 2020 the ACEM Global Emergency Care Committee hosted an online support forum for emergency care providers from low and middle-income providers to discuss the providers' current clinical situation and needs. The following is a summary of the discussion.

Systems

- Staff from emergency departments are frequently taking the lead for their country in this COVID-19 response
- A whole health system approach is needed – include public health, pre-hospital, ED, Inpatient teams and the community
- Utilisation of public health department to develop separate areas from ED to screen potential COVID-19 patients “fever clinics” identified as positive model for the Pacific Region
- Emphasis on increasing efforts on prevention needed, social distancing and community involvement
- Public health education needed about facts to dispel social media myths
- Communication to the general public using COVID-19 phone hotlines
- Resources/protocols need to be translated into local languages
- Include pre-hospital staff and community leaders in plans and training
- Establish guidelines on how to isolate and look after health care workers who are unwell
- Consideration of quarantine accommodation for health care workers

Space

- Create a separate respiratory area and non-respiratory area in the ED
- Cessation of elective surgery and involvement of all hospital workers
- Pre-Hospital staff involvement needed for triage changes and ongoing education
- Utilise red tape on the ground next to ambulance entrances indicating where to stop and triage
- Removal of public nebulisation stations at EDs highly recommended
- Nebulisation is a challenging issue for countries with high asthma prevalence
- Improve communication in ED and hospital to facilitate transfer of patients to wards without multiple reviews

Supplies

- Urgent need for more PPE
- Emphasis on the need for PPE supplies, guidelines and training
- Specific equipment needs N95 masks and eye shields needed for the management of COVID-19 positive patients
- Support needed for PPE daily and for all shifts – 24 hours a day

Staff

- Prioritising staff safety, both physically and mentally – this was universally a **key issue**
- High level of fear in staff – examples of staff refusing to see respiratory cases
- Need for solidarity and development of well-being and staff safety champions
- Time for leadership and inclusivity especially with staff safety
- Staff need to feel safe, engaged, useful, protected for themselves and family
- Preparing nursing staff is an important and challenging step
- Need for open and frequent communication between staff
- Transparency in sharing of updates to every member of the team is important for showing inclusiveness
- Participants asked about resources to reduce fear, maintain staff well-being, provide sense of vocation and build team
- Discussion about start of shift briefing, “safety huddle” resource
- Need assurance of continued remuneration for staff if sick or in quarantine / isolation

Regional Partnership Resources, Supplies and Training

- The Pacific Community have a COVID-19 commodities package list
- SPC are a key resource to assist with developing guidelines & protocols such as infection control
- SPC have identified needs for ventilators and will be supporting procurement and distribution
- There was strong advocacy for point-of-care testing to settings that will rely on containment as their best defence
- **Training needs identified:**
 - PPE refreshers
 - Regional training in ventilation for high-risk patients
- **Resource/information needs identified:**
 - Mental health and wellbeing information

The way forward

- Participants supported twice monthly open discussion forums with GEC members
- Discussions at different times to allow for different time zones
- ACEM GEC team collate resource/information needs identified and to liaise with SPC regarding ongoing regional training needs

Resources

1. *ACEM Managing-COVID-19-across-the-Indo-Pacific Guidelines* Accessed: [https://acem.org.au/getmedia/3930cc60-abb1-4517-b7af-36da918a3f7b/Managing-COVID-19-across-the-Indo-Pacific-\(G763\)](https://acem.org.au/getmedia/3930cc60-abb1-4517-b7af-36da918a3f7b/Managing-COVID-19-across-the-Indo-Pacific-(G763))
2. *Start of Shift Briefing (COVID-19)*, Accessed: https://acem.org.au/getmedia/5d1fb588-172f-47a7-b1c8-231da35b88be/Start-of-shift_3
3. *IFEM COVID- 19 Guidelines* Accessed: <https://www.ifem.cc/coronavirus-2019-information>

Participants in this session

- 46 total attendees – on average 33 participants engaging in the conversation at any one time
- Twenty-one of the 46 total participants (46%) were from Low and Middle-Income Countries, with key emergency care providers and emergency care program managers/ coordinators from Fiji, Papua New Guinea, Samoa, Solomon Islands, Sri Lanka, Timor-Leste and Vanuatu.