

# COVID-19 Online Support Forum



## Low and middle-income country emergency care

[acem.org.au/covid-19](http://acem.org.au/covid-19)



**Across two separate sessions on 12 May 2020, emergency care providers and emergency care program managers and coordinators participated in the fourth ACEM GEC COVID-19 online support forum. Participants were encouraged to discuss their current clinical situations and needs based on the main pillars of ACEM GECCo's LMIC COVID-19 guidelines. This week there was a special focus on the theme of supplies.**

**The following is a summary of the discussions.**

### Personal protective equipment

#### Issues and challenges

- Participants reported limited or inconsistent supplies of PPE in their facility, some hospitals stockpiling PPE, some hospital departments overusing PPE, and many participants reported inadequate PPE supplies in their COVID-19 clinics and emergency departments (ED)
- Some countries have had successful PPE donations, many are awaiting PPE replenishment with complications due to International flight and cargo restrictions.
- PPE supply, usage and lack of exposure to actual covid positive patients is causing increased anxiety in many ED staff, as well as PPE "fatigue" and incorrect "donning and doffing" techniques.
- Many participants reported wearing PPE in the hot tropical climates was extremely uncomfortable and logistically difficult. The use of air-conditioning units in ED resuscitation areas was suggested.
- All participants supported more education of PPE and the development of PPE guidelines and protocols. Many participants enquired on protocols on safe cleaning and re-using some PPE.

#### Recommendations

- All participants urged for consistent guidelines on PPE supplies, standards and availability. Easy to read posters and signage, ongoing ED

leadership, education and liaison with other departments, especially with Infectious Disease staff was recommended. All PPE supplies and usage were recommended to be tracked and recorded to prevent theft and stockpiling. Facilities could consider allocating PPE goggles to staff for re-usage.

- Participants supported the allocation of PPE buddies or "doffers" for clinical ED shifts to support staff. These "buddies" watch from outside isolation rooms and provide guidance on donning/doffing PPE, assist the patients' management and ensuring staff members in PPE have sufficient rest.
- Participants asked for information on re-using PPE, for example N95 mask re-usage; and research into comfortable donning of PPE in tropical areas.

### Airway devices, including oxygen delivery systems

#### Issues and challenges

- There was considerable variation in oxygen sources throughout participant countries and challenges in oxygen concentrator distribution to remote provinces was noted. Participants asked for more education in oxygen concentrators.
- The reduction in nebuliser usage and increasing use of spacers in many countries in the Pacific was encouraging. There is still a strong nebuliser culture, especially in remote areas using nebulisers in severe cases, and

PPE vigilance and equipment cleaning was advised in these situations, as per guidelines. Participants also commented on the issue of limited spacers, especially in remote settings.

### Recommendations

- All airway equipment, including spacers, should be cleaned using soap & water or bleach solution as per guidelines.
- Promotion of locally made spacers using water bottles or IV bottles was encouraged.

### Laboratory testing for COVID-19

#### Issues and challenges

- There was considerable variation in COVID-19 testing throughout the Indo-Pacific area. Some countries had onsite testing, some had significantly limited or no testing capacity. Limited international flights impacted testing abilities of some countries and led to delays in set up of testing equipment and supplies in many others.
- It was noted that a lack of testing capacity in countries would lead to poor or no knowledge of the COVID-19 prevalence, and this affects preparation and management.
- Participants reported that COVID-19 testing criteria for patients had become too narrow and some patients with respiratory infectious symptoms were not being tested.
- Participants were anxious that if staff testing was increased, long turn-around time for results would lead to a low staff testing turnout and increased anxiety while awaiting results.

#### Recommendations

- Testing guidelines need to be consistent and appropriate to current situation in each country, however, it was recommended to test all patients with respiratory illness symptoms.
- COVID-19 testing criteria and surveillance should be extended beyond hospitals, with staff using PPE when testing.

### Core themes

- Shortage of PPE and other supplies is leading to staff anxiety but is also an opportunity for practical innovations on reusing supplies.
- Team support and leadership is crucial.
- Building COVID-19 testing capacity and expanded testing criteria will be needed long term.

### Action points

#### Development of guidelines for the next phase of COVID-19 pandemic

- Participants asked whether we could help develop a guideline suitable for the Indo-Pacific region with the aim in making COVID-19 testing capacity sustainable. The guideline would need to address increased risk of keeping ED staff safe as possible whilst providing best care for the patient.
- There was a discussion over developing guidelines with broad criteria for whether the country has testing capacity or not or those with limited capacity.
- Indo-Pacific countries can be grouped into 2 categories based on what stage they are at with their experience of managing COVID-19:
  - More experienced – Fiji, Myanmar, Sri Lanka
  - Less experienced – other Pacific countries

### Resources shared

- Draft protocol – [Pacific protocol for prevention of COVID transmission from the workplace to home](#)

Please note: emergency care workers in the Pacific are invited to provide feedback on this protocol developed by Pacific Education Centre nurses. Please click the protocol title to provide your feedback (note this link takes you to an external (non-ACEM) website).

- Shift briefing guide
- Oxygen Therapy Guidelines (cleaning airway equipment & concentrator usage):
  - Oxygen Therapy with Limited Resources wall chart – <https://acem.org.au/getmedia/e7c95d63-a683-4667-8039-e770855aeecb/Oxygen-Therapy-and-Wall-Chart-V5-ANZCA-ACEM-SPC-WFSA-20200420>

### Participants in this session

- 37 total participants – on average 26 engaging in the conversation at any one time
- 43% (16/37) of participants were from Low and Middle-Income Countries (LMICs), with key emergency care providers from Fiji, Myanmar, Papua New Guinea, Solomon Islands, Sri Lanka, Timor-Leste, Tonga, Tuvalu and Uganda

Next Online Support Forum – Tuesday 26 May 2020,  
1pm Australian Eastern Standard Time