



SURF LIFE SAVING®
NEW ZEALAND

Date: 06 May 2020

To: All SLSNZ clubs and members

From: Chris Emmett – COO SLSNZ

Subject: Update SLSNZ COVID-19 Operational Protocols (Alert Levels 1 to 4) Memo # 10

SLSNZ is committed to ensuring the health, safety and well-being of all our members in response to the COVID-19 pandemic. The health of our volunteers, staff, members, partners as well as community wellbeing, are our highest priority when making decisions that impact our core activities of Patrolling and Search and Rescue.

We have provided a detailed update on the following pages of the [SLSNZ COVID-19 Operational Protocols](#) which all clubs are expected to abide by. Additionally, Clubs should refer to SLSNZ's COVID-19 FAQs also available on the [SLSNZ COVID-19 web page](#) for information relating to other Club and/or member activities.

For all queries relating to this Memo, please contact Chris Emmett, Chief Operations Officer SLSNZ, chris.emmett@surflifesaving.org.nz

Chris Emmett
Chief Operations Officer
Surf Life Saving New Zealand



SURF LIFE SAVING®
NEW ZEALAND

In it for life

a PO Box 4667, Mount Maunganui 3149
t 07 574 2061 (ext 704)
m 027 220 3226

In it for life



FINANCIAL SERVICES



Surf Life Saving New Zealand COVID-19 Operational Protocols (Alert Levels 1 to 4)

GENERAL SAFETY MESSAGES

1. Lifeguards providing emergency medical response are:

- 1.1 To prioritise their own safety (as per existing protocols).
- 1.2 Be aware they are unlikely to identify a suspected case of COVID-19 whilst providing an emergency response.
- 1.3 However, still watch out for signs and symptoms of COVID-19 infection in patients who may have travelled internationally or who have had close or casual contact with an infected person.
- 1.4 To encourage the person to report any signs and symptoms of COVID-19 to [Healthline](https://www.healthline.co.nz) (0800 611 116) ASAP.

Patrolling Members - Checklist for providing First Aid

1. **Use PPE (gloves)** - as per existing protocols with all patients.
2. **If treating a patient with respiratory issues (a cough or breathing difficulties)**, wear a face mask in addition to the standard PPE for all patient treatment.
3. **Take a patient history including medical and travel** to establish travel and any flu like symptoms or respiratory symptoms.
4. **Be alert** for patients who meet the case definition – refer to questions in next section.
5. **If you suspect that the patient has coronavirus:**
 - a. **Withdraw** from activities immediately and notify Patrol Captain.
 - b. **Notify** SLSNZ or SLSNR immediately of suspected case and follow instructions for patient and patrol members.

Determining patients with suspected COVID-19

1. **Clinical criteria:**
Fever OR acute respiratory infection (e.g. shortness of breath or cough) with or without fever
AND
2. **Epidemiological criteria:**
Travel overseas in the 14 days prior to the onset of illness
OR
Close or casual contact with a confirmed case of COVID-19 in the 14 days before the onset of illness.

Close contact definition: greater than 15 minutes face-to-face or the sharing of a closed space for more than two hours with a confirmed case without recommended personal protective equipment (PPE). Contact needs to have occurred during the period of 24 hours prior to onset of symptoms in the confirmed case until the confirmed case is no longer considered infectious.

Casual contact definition: less than 15 minutes' face-to-face contact or sharing a closed space with a confirmed case for less than two hours. This includes members, other patients, or visitors who were in the same closed healthcare space as a case, but for shorter periods than those required for a close contact. Contact needs to have occurred during the period from the onset of symptoms in the confirmed case until the confirmed case is no longer considered infectious.

Suspected COVID-19 case during a response - conscious and responsive

If the patient is conscious and responsive, triage the patient against the criteria above to understand if they are considered to be a suspected case of COVID-19.

If the patient is considered as a suspected case of COVID-19:

- Place a face mask on the patient as soon as possible, preferably on first contact.
- Isolate the patient away from other responders and members of the public.
- Withdraw from the scene
- Notify Patrol Captain, Regional Lifesaving Managers, or SurfCom for *Northern Region* clubs. Northern Region Clubs – Please Follow the instructions of SurfCom
- Complete hand hygiene and wash exposed skin, preferably with alcohol-based sanitiser.

Suspected COVID-19 case during a response - unconscious and unresponsive

If the patient is unconscious and unresponsive:

- Assess your personal safety.
- If it is considered unsafe to treat the patient, isolate the patient and contact SurfCom (0800 SAVELIFE, *if outside of Northern Region*) who will communicate with St. Johns ambulance for patient transfer.

If the risk of the patient being a suspected case is considered to be low:

- Apply PPE and continue to treat patient.
- Complete hand hygiene and wash exposed skin, preferably with alcohol-based sanitiser.
- If there is a risk of contamination, consider the need to decontaminate clothing worn during treatment.

Additional Considerations when providing emergency medical response

Lifeguards considering full CPR

Some casualties (e.g. children and drowning casualties) will benefit from full CPR. It is accepted however, that the risk of COVID-19 transmission is higher with this procedure and each situation must be risk assessed on a case by case basis.

Consider CPR (chest compressions only) your safety comes first

- A. Follow standard basic life support for compression only CPR, consider using a towel draped over the patients' face.
- B. DR – adopt PPE: gloves, face mask, follow PPE guidelines
- C. ABC – start compression only CPR
- D. Avoid direct mouth to mouth contact
- E. Compressions – 30:2 + AED (if First responder consider oxygen if available)
- F. Remember that the pocket mask has a one-way valve

Post incident

- A. Decontaminate all equipment, change wipes for each bit of equipment
- B. Dispose of pocket mask, suction, AED pads etc. into the clinical waste bag
- C. Wipe down thoroughly all hardware – including AED, oxygen cylinder, medical bag (if used)
- D. Put all used wipes, gloves and other waste into a waste bag and seal before disposal.
- E. Put on new gloves and wipe down waste bag.
- F. Complete incident report ensuring that you clearly include the names of all those members involved, should testing for COVID-19 be required.
- G. If you believe you have made contact with a casualty that may be infected with COVID-19, self- isolate immediately and follow MOH guidelines

Patient Transfer

Members should minimise all non-essential patient contact until arrival of the Ambulance service.

Follow-up Support

Surf Life Saving staff will designate an Incident Manager who will liaise with the Patrol Captain and members to ensure the necessary follow up support and instructions are provided.