

# COVID-19 Breast Screening COVID Response Framework

February 2022

*This guidance has been updated in the context of an Omicron outbreak in Aotearoa. The focus for BreastScreen Aotearoa during the outbreak is on equity and continuing to provide screening appointments. To ensure service delivery continues further public health measures will need to be put in place.*

Breast screening is an essential preventative service. Breast Screening is considered safe to continue throughout green, orange and red levels on the proviso of compliance with all Ministry of Health advice regarding ways to limit potential spread of COVID-19.

BSA Providers, including sub-contractors, will also be working under the DHB National Hospital COVID-19 Response Framework. This ensures access to treatment for women who require it. This document has been developed to align with the Government's new COVID-19 Protection Framework 22 October 2021 (traffic light system), and the DHB National Hospital COVID-19 Response Framework. The Lead Provider is responsible for liaising with DHB's in their region to find out the level on the National Hospital Response Framework each DHB is operating at, and to advise subcontractors accordingly.

## Key messages

- Screening is an essential preventative service and will occur at all levels
- The screening programme is safe and COVID-19 risk is minimised through strong public health measures.

It is anticipated that providers are likely to experience higher levels of staff sickness during this period. The workforce may be 20-25% down at any one time due to staff being cases and household contacts.

The focus in recent months has been on catching up on screens missed due to previous COVID-19 lockdowns and restrictions. The focus throughout this Omicron outbreak period will be maintaining service delivery. It is unlikely there will be additional capacity to also catch up on the screening backlog. Providers should ensure equity is at the forefront of their strategic planning and operational processes. The BSA prioritisation tool sits alongside this guidance.

This document provides guidance to inform provider decisions on screening provision. Providers will also need to consider their local circumstances including the context of their wider organisation and staff.

## VACCINATION STATUS

Vaccination status of client/whanau will not affect the decision to provide care but does inform planning for safe clinical practice

Providers will **not** be able to introduce vaccine requirements for access to essential services.

## NATIONAL TELEHEALTH SERVICE ADVICE LINES

The National Telehealth Service advice lines are available for staff and the public.

- Healthline for general advice, triage and information (0800 611 116) –available 24/7.
- Dedicated COVID-19 Healthline (0800 358 5453) –available 24/7.
- The COVID-19 Vaccination Healthline (0800 28 29 26) provides vaccination information and help for people to book online and is available 8am to 8pm, 7 days a week including public holidays.
- The COVID-19 clinical advice line for home and community health professionals is available 8am to 8pm, 7 days a week including public holidays.

# Guidance for BreastScreen Aotearoa Services

	<b>COVID-19 Community Health Response Framework</b> <b>Mild Impact</b> <b>GREEN</b> <ul style="list-style-type: none"> <li>Record keeping and scanning are required</li> <li>Face coverings are encouraged indoors.</li> </ul> <p><b>Health system scenarios:</b> One or more COVID-19 positive patients in your region; any cases in your community are monitored, managed and under control; hospital and ICU capacity manageable; managing service delivery as usual with only staffing and facility impact being for training &amp; readiness purposes &amp; regional/national deployments</p>	<b>COVID-19 Community Health Response Framework</b> <b>Moderate Impact</b> <b>ORANGE</b> <ul style="list-style-type: none"> <li>Record keeping and scanning are required</li> <li>Face coverings are mandatory in public places and encouraged elsewhere.</li> </ul> <p><b>Health system scenarios:</b> Multiple COVID-19 positive patients in your region; community transmission is increasing; hospital and ICU capacity impacted; significant staff absence, staff redeployment to support regional/national deployments, gaps not being covered</p>	<b>COVID-19 Community Health Response Framework</b> <b>Severe Impact</b> <b>RED</b> <ul style="list-style-type: none"> <li>Record keeping and scanning are required</li> <li>Face coverings are mandatory in public places and recommended when leaving the house.</li> </ul> <p><b>Health system scenarios:</b> Multiple COVID-19 positive patients in your region; community transmission uncontrolled; hospitals and ICU at capacity; all available staff redeployed to critical care</p>
COVID-19 screening	<ul style="list-style-type: none"> <li>Pre-appointment screening for COVID-19 symptoms and Higher Index of Suspicion criteria with referral to general practice/ testing centre as appropriate.</li> <li>Refer patients and staff for COVID-19 assessment and testing according to current MoH guidance if required. Staff who have symptoms should be stood down until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> </ul>	<ul style="list-style-type: none"> <li>Pre-appointment screening for COVID-19 symptoms and Higher Index of Suspicion criteria with referral to general practice/ testing centre as appropriate.</li> <li>Refer patients and staff for COVID-19 assessment and testing according to current MoH guidance if required. Staff who have symptoms should be stood down until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> </ul>	<ul style="list-style-type: none"> <li>Pre-appointment screening for COVID-19 symptoms, visiting a location of interest and/or being a contact of a case etc.</li> <li>Refer all patients and staff who exhibit COVID-19 symptoms for assessment and testing. Staff who have symptoms should be stood down until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> <li>Staff comply with public health guidance if they are identified as attending a location of interest and/or being a contact of a case.</li> </ul>
PPE	<ul style="list-style-type: none"> <li>Ensure PPE plans and infection control protocols in place and ensure PPE supply chain well established.</li> </ul>	<ul style="list-style-type: none"> <li>Activate appropriate PPE Plan and infection control protocols, aligned with MoH guidance.</li> <li>Maintain stock levels of PPE, alcoholic hand gel and cleaning products</li> </ul>	<ul style="list-style-type: none"> <li>Activate appropriate PPE plans and infection control protocols, aligned with MoH guidance.</li> <li>Maintain stock levels of PPE, alcoholic hand gel and cleaning products</li> <li>People attending screening are required to wear surgical or N95 masks during appointments. Staff should be wearing N95 masks during appointments. Appointments can be deferred for those who do not comply with mask wearing guidelines.</li> </ul>
Workforce	<ul style="list-style-type: none"> <li>Reinforce mask wearing, cleaning and hand hygiene plans for increasing levels.</li> <li>Engage with at-risk workers to mitigate their risk and review impact on staffing.</li> </ul>	<ul style="list-style-type: none"> <li>Reinforce mask wearing, cleaning and hand hygiene, incorporate into routine practice.</li> <li>Engage with at-risk workers to mitigate their risk and review impact on staffing.</li> <li>Ensure staffing plans in place to cover potential increase in level of staff absence.</li> </ul>	<ul style="list-style-type: none"> <li>Ensure N95 mask wearing, cleaning and hand hygiene incorporated into routine practice.</li> <li>Work with at-risk workers to mitigate their risk and review impact on staffing.</li> <li>Activate staffing plans to cover for increased staff absence.</li> <li>Infection control protocols for staff rooms and other common areas are in place.</li> </ul>

<p>Service delivery</p> <ul style="list-style-type: none"> <li>Screening sites</li> </ul>	<ul style="list-style-type: none"> <li>Screening and assessment should occur.</li> <li>Align with the National Hospital COVID-19 Response Framework (below) and local DHB guidance.</li> <li>Invitations should be prioritised as per NSU guidance.</li> <li>Booking schedules need to accommodate physical distancing in reception and waiting areas, additional time for cleaning.</li> <li>Ensure plans in place for triaging at entrances and physical distancing.</li> <li>Contact tracing systems in place and clearly displayed.</li> <li>Ensure plans in place to safeguard assessment clinics and other essential activities during increasing levels and to cease non-essential activities.</li> </ul>	<ul style="list-style-type: none"> <li>Screening and assessment should occur.</li> <li>Invitations should be prioritised as per NSU guidance.</li> <li>Booking schedules need to accommodate physical distancing in reception and waiting areas, additional time for cleaning. Throughput may be reduced.</li> <li>Maintain triaging at entrances and physical distancing.</li> <li>Contact tracing systems in place and clearly displayed.</li> <li>Activate virtual and non-contact service delivery activities (meetings, health promotion, etc..) where possible.</li> <li>Activate plans to safeguard assessment clinics and other essential activities during increasing levels</li> <li>Local hospital capacity and constraints on services should be considered and screening services aligned with the National Hospital COVID-19 Response Framework (below) and local DHB guidance.</li> </ul>	<ul style="list-style-type: none"> <li>Screening and assessment should occur unless regional circumstances prohibit this. If workforce capacity means prioritising screening or assessment, then assessment appointments should be prioritised. Assessment of M4/5 should be prioritised if necessary.</li> <li>Invitations should be prioritised as per NSU guidance.</li> <li>Booking schedules need to accommodate physical distancing in reception and waiting areas, additional time for cleaning. Throughput may be reduced.</li> <li>Maintain triaging at entrances and physical distancing.</li> <li>Contact tracing systems in place and clearly displayed.</li> <li>Activate virtual and non-contact service delivery activities where possible (meetings, health promotion, etc).</li> <li>Activate plans to safeguard assessment clinics and other essential activities during increasing levels.</li> <li>Mobile screening can occur if staff are available and willing to travel away from home. Mobile screening can be paused if uptake by women, or staff absences makes this inefficient.</li> <li>Women with a pre-existing medical condition are deferred as appropriate after discussion with the woman.</li> <li>Local hospital capacity and constraints on services should be considered and screening services aligned with the National Hospital COVID-19 Response Framework (below) and local DHB guidance.</li> </ul>
<p>Support to Screening Services</p>	<ul style="list-style-type: none"> <li>Ask clients screening questions for COVID-19. This includes when home visiting and providing transport. Provide advice to see general practice/ testing centre as appropriate.</li> <li>Refer staff for COVID-19 assessment and testing according to current MoH guidance if required. Staff who have symptoms should remain home until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> <li>Reinforce mask wearing, cleaning and hand hygiene plans for increasing levels.</li> <li>Engage with at-risk workers to mitigate their risk and review impact on staffing.</li> <li>Align with your local DHB, hospital and breast screening provider guidance.</li> <li>Ensure plans in place for physical distancing.</li> <li>Contact tracing systems in place and clearly displayed.</li> </ul>	<ul style="list-style-type: none"> <li>Ask clients screening questions for COVID-19. This includes when home visiting and providing transport. Provide advice to see general practice/ testing centre as appropriate.</li> <li>Refer staff for COVID-19 assessment and testing according to current MoH guidance if required. Staff who have symptoms should remain home until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> <li>Reinforce mask wearing, cleaning and hand hygiene, incorporate into routine practice.</li> <li>Engage with at-risk workers to mitigate their risk and review impact on staffing.</li> <li>Ensure staffing plans in place to cover potential increase in level of staff absence.</li> <li>Contact tracing systems in place and clearly displayed.</li> <li>Activate virtual and non-contact service delivery activities (meetings, health promotion, etc..) where possible</li> </ul>	<ul style="list-style-type: none"> <li>Ask clients pre-appointment screening questions for COVID-19 symptoms with advice to see general practice/ testing centre as appropriate.</li> <li>Refer staff for COVID-19 assessment and testing according to current MoH guidance if required. Staff who have symptoms should remain home until they obtain a negative test result. Follow Ministry of Health and Public Health Unit guidance.</li> <li>Ensure mask wearing, cleaning and hand hygiene incorporated into routine practice.</li> <li>Work with at-risk workers to mitigate their risk and review impact on staffing.</li> <li>Activate staffing plans to cover for possible increased staff absence.</li> <li>Contact tracing systems in place and clearly displayed.</li> <li>Activate virtual and non-contact service delivery activities where possible (meetings, health promotion, etc)</li> </ul>

### Assessment links to current hospital framework

HOSPITAL RESPONSE LEVEL GREEN	HOSPITAL RESPONSE LEVEL YELLOW	HOSPITAL RESPONSE LEVEL ORANGE	HOSPITAL LEVEL RED
<p><b>Assessment:</b></p> <ul style="list-style-type: none"> <li>Restore normal services as quickly as possible.</li> <li>Additional clinics scheduled where possible to reduce wait list.</li> </ul>	<p><b>Assessment:</b></p> <ul style="list-style-type: none"> <li>M4/5 women are considered urgent and can be offered assessment and referred for treatment.</li> <li>M2/3 women are assessed as capacity allows.</li> </ul>	<p><b>Assessment:</b></p> <ul style="list-style-type: none"> <li>Clinics need to operate within the requirements of local DHB protocols.</li> <li>M4/5 women are considered urgent and can be offered assessment and referred for treatment.</li> <li>If capacity is restricted women triaged as M2/3 are advised by phone or letter that they need further non urgent investigations and that this is deferred.</li> <li>Reduced in-person MDM representatives or alternatively attend remotely.</li> </ul>	<p><b>Assessment:</b></p> <ul style="list-style-type: none"> <li>Clinics need to operate within the requirements of local DHB protocols.</li> <li>M4/5 women are considered urgent and can be offered assessment and referred for treatment. Clips inserted and receptor testing.</li> <li>Reduced in-person MDM representatives or alternatively attend remotely.</li> <li>If capacity is restricted women triaged as M2/3 are advised by phone or letter that they need further non urgent investigations and that this is deferred.</li> </ul>

		<ul style="list-style-type: none"><li>• Women with M3 who have waited for 6 weeks or more are assessed as capacity allows.</li><li>• Women triaged as M2 who have waited for 12 weeks are assessed as capacity allows.</li></ul>	Those triaged as M2/M3 who have waited for 12 weeks are assessed as capacity allows.
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#Triage based on BI-RADS Breast Imaging-Reporting and Data System (American College of Radiology, 2013) risk assessment categories: M0 incomplete; M1 negative; M2 benign; M3 likely benign; M4 suspicious for malignancy; M5 highly suggestive of malignancy.