

	<p><b>COVID-19 Community Response Framework</b>  <b>Mild Impact</b>  <b>GREEN</b></p> <p><b>Trigger status</b> (individual or cumulative): 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>	<p><b>COVID-19 Community Response Framework</b>  <b>Moderate Impact</b>  <b>ORANGE</b></p> <p><b>Trigger status</b> (individual or cumulative): 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>	<p><b>COVID-19 Community Framework</b>  <b>Severe Impact</b>  <b>RED</b></p> <p><b>Trigger status</b> (individual or cumulative): Multiple COVID-19 positive patients in your region; community transmission uncontrolled; hospitals and ICU at capacity; all available staff redeployed to critical care</p>
<p><b>Antenatal screening for Down syndrome and Other Conditions</b></p> <p>Essential service – antenatal screening is completed alongside standard maternity care services. It provides information to women about their pregnancy</p>	<p><b>Service must continue to be delivered</b></p> <p>First trimester maternal serum and ultrasound (anatomy and nuchal translucency) provided as standard maternal care</p> <p>If first trimester screening not completed, second trimester screening offered as per existing requirements</p> <p>Referral to specialist and diagnostic testing for women with a high-risk result who consent to referral as per existing requirements</p> <p>Specialist consult provided as standard care as per existing arrangements</p> <p>Diagnostic testing (amnio or CVS) provided by DHBs as standard care</p> <p><b>Please refer to your local District Health Board (DHB) infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b></p>	<p><b>Service must continue to be delivered</b></p> <p>First trimester maternal serum and ultrasound (anatomy and nuchal translucency) provided as standard maternal care</p> <p>If first trimester screening not completed, second trimester screening offered (the offer and referral can be made electronically where appropriate)</p> <p>Referral to specialist and diagnostic testing for women with a high-risk result who consent to referral (provision of risk result and for high-risk results, consent and referral may be completed electronically or face-to-face at the discretion of the LMC)</p> <p>Specialist consult provided as standard care - may be provided via telephone or video if appropriate</p> <p>Diagnostic testing (amnio or CVS) provided by DHBs as standard care</p> <p><b>Please refer to your local DHB infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b></p>	<p><b>Service must continue to be delivered</b></p> <p>First trimester maternal serum and ultrasound (anatomy and nuchal translucency) provided as standard maternal care. Please refer to the NSU website for updates on any potential changes to the availability of anatomy and/or nuchal translucency scanning services which may be implemented at some radiology practices</p> <p>If first trimester screening not completed, second trimester screening offered (the offer and referral can be made electronically where appropriate)</p> <p>Referral to specialist and diagnostic testing for women with a high-risk result who consent to referral (provision of risk result and for high-risk results, consent and referral may be completed electronically or face-to-face at the discretion of the LMC)</p> <p>Specialist consult provided as standard care - may be provided via telephone or video if appropriate</p> <p>Diagnostic testing (amnio or CVS) provided by DHBs as standard care</p> <p><b>Please refer to your local DHB infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b></p>

	<b>COVID-19 Community Response Framework Mild Impact GREEN</b> <b>Trigger status</b> (individual or cumulative): 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 & readiness purposes & regional/national deployments	<b>COVID-19 Community Response Framework Moderate Impact ORANGE</b> <b>Trigger status</b> (individual or cumulative): 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	<b>COVID-19 Community Framework Severe Impact RED</b> <b>Trigger status</b> (individual or cumulative): Multiple COVID-19 positive patients in your region; community transmission uncontrolled; hospitals and ICU at capacity; all available staff redeployed to critical care
<b>Newborn Metabolic Screening</b> Essential service – with time critical testing to prevent severe health consequences for newborns	<b>Service must continue to be delivered</b> Blood spot can be taken from 24 hours post birth by midwife or hospital phlebotomist if this better fits schedule of visits (optimal time for sample taking is 48 - 72 hours) Recollections completed in consultation with LabPlus Samples dispatched to LabPlus consistent with existing arrangements, including any changes implemented to address issues with courier delivery timelines (refer to the recent <a href="#">Best Practice Guidelines</a> ) Please advise the laboratory of any issues regarding collection or delivery of samples as soon as you become aware of an issue If results have not been received within 10 days of a child’s birth midwives should check that the lab has the sample using the courier track number and call 0800 LABLINK to enquire about sample/result Second sample completed as required by LabPlus for diagnostic testing as per existing arrangements Referral to specialist and treatment/intervention initiated <b>Please refer to your local DHB infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>	<b>Service must continue to be delivered</b> Blood spot can be taken from 24 hours post birth by midwife or hospital phlebotomist if this better fits schedule of visits (optimal time for sample taking is 48 - 72 hours) Recollections completed in consultation with LabPlus Samples dispatched to LabPlus consistent with existing arrangements, including any changes implemented to address issues with courier delivery timelines (refer to the recent <a href="#">Best Practice Guidelines</a> ) Please advise the laboratory of any issues regarding collection or delivery of samples as soon as you become aware of an issue If results have not been received within 10 days of a child’s birth midwives should check that the lab has the sample using the courier track number and call 0800 LABLINK to enquire about sample/result Second sample completed as required by LabPlus for diagnostic testing as per existing arrangements Referral to specialist and treatment/intervention initiated <b>Please refer to your local DHB infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>	<b>Service must continue to be delivered</b> Blood spot can be taken from 24 hours post birth by midwife or hospital phlebotomist if this better fits schedule of visits (optimal time for sample taking is 48 - 72 hours) Recollections completed in consultation with LabPlus Samples dispatched to LabPlus consistent with existing arrangements, including any changes implemented to address issues with courier delivery timelines (refer to the recent <a href="#">Best Practice Guidelines</a> ) Please advise the laboratory of any issues regarding collection or delivery of samples as soon as you become aware of an issue If results have not been received within 10 days of a child’s birth midwives should check that the lab has the sample using the courier track number and call 0800 LABLINK to enquire about sample/result Second sample completed as required by LabPlus for diagnostic testing as per existing arrangements Referral to specialist and treatment/intervention initiated <b>Please refer to your local DHB infection control procedures and the Ministry of Health COVID-19 website for up-to-date information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>
<b>Universal Newborn Hearing Screening and Early Intervention Services</b> Essential service – lack of identification of hearing loss in a newborn can have life-long consequences	<b>Service must continue to be delivered</b> All newborn hearing screening and diagnostic audiology services delivered as per standard care and consistent with the programme’s screening and diagnostic audiology protocols Outpatient newborn hearing screening services provided in hospitals, community outpatient clinics and at home (where existing home screening arrangements are already implemented) Where required and feasible, additional outpatient clinics provided to complete any outstanding newborn hearing screening for priority babies Diagnostic audiology available for all referrals from newborn hearing screening, with additional clinics as required and where feasible to support diagnostic audiology completions within three months <b>Please refer to your local DHB infection control procedures for information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>	<b>Service must continue to be delivered</b> Newborn hearing screening provided for all hospital/inpatient births Hospital and community-based outpatient appointments provided, with <b>a focus on completing</b> newborn hearing screening for priority babies Additional outpatient clinics provided where feasible to support ongoing delivery of the newborn hearing screening pathway and minimise delays in the identification of hearing loss Diagnostic audiology provided for all referrals from newborn hearing screening, with a focus on completing acute and prioritised babies first <b>Please refer to your local DHB infection control procedures for information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>	<b>Service must continue to be delivered</b> Prioritise newborn hearing screening for hospital/inpatient births Hospital and community-based outpatient appointments provided <b>where feasible</b> , with <b>a focus on completing</b> newborn hearing screening for priority babies Where newborn hearing screening cannot be provided, the DHB must have electronic systems in place to identify and track all babies who do not commence or complete their screening pathway, so that an offer of screening can be made when the service recommences Diagnostic audiology provided for acute and priority cases <b>Please refer to your local DHB infection control procedures for information and advice about use of PPE, pre-screening, contact tracing, and providing services for people who have confirmed or probable COVID-19</b>

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<b>Bowel screening</b> Essential service – delay in cancer diagnosis may lead to cancer stage progression and poorer outcomes	Deliver service as usual. Screen and swab for COVID-19 in those attending for diagnostic appointments as per current MoH guidance.	FIT kits continue to be mailed out. GP follow up of positive results and pre-assessments done virtually. Screen and swab for COVID-19 in those attending for diagnostic appointments as per current MoH guidance. PPE for diagnostic procedures as per DHB requirements. Sending out of invitation kits may be deferred if significant impacts on <ul style="list-style-type: none"> <li>- spoilt kit rate due to delay in transit</li> <li>- number of people waiting for diagnostic appointments due to reduced hospital capacity</li> </ul>	FIT kits continue to be mailed out. GP follow up of positive results and pre-assessments done virtually. Screen and swab for COVID-19 in those attending for diagnostic appointments as per current MoH guidance. PPE for diagnostic procedures as per DHB requirements. Sending out of invitation kits may be deferred if significant impacts on <ul style="list-style-type: none"> <li>- spoilt kit rate due to delay in transit</li> <li>- number of people waiting for diagnostic appointments due to reduced hospital capacity</li> </ul>
<b>Breast screening</b> Essential service – delay in cancer diagnosis may lead to cancer stage progression and poorer outcomes	Screen for COVID-19 in screening attendees as per current MoH guidance, otherwise deliver service as per usual PPE as per current DHB guidance for outpatient radiology services	Screen for COVID-19 in screening attendees as per current MoH guidance PPE as per current DHB guidance for outpatient radiology services. Where staffing levels are impacting on service delivery – implement NSU prioritisation guidance for scheduling of appointments	Screen for COVID-19 in screening attendees as per current MoH guidance PPE as per current DHB guidance for outpatient radiology services. Where staffing levels are impacting on service delivery – implement NSU prioritisation guidance for scheduling of appointments
<b>Cervical screening</b> Essential service – delay in screening may lead to cancer stage progression and poorer outcomes	Screen and swab for COVID-19 in screening attendees as per current MoH guidance, otherwise deliver service as per usual PPE as per current DHB guidance for midwifery services	Screen and swab for COVID-19 in screening attendees as per current MoH guidance Where staffing levels are impacting on service delivery – implement NSU prioritisation guidance for who to recall for available screening appointments PPE as per current DHB guidance for midwifery services	Screen and swab for COVID-19 in screening attendees as per current MoH guidance Where staffing levels are impacting on service delivery – implement NSU prioritisation guidance for who to recall for available screening appointments PPE as per current DHB guidance for midwifery services