

# Cardiac, Pulmonary and Heart Failure Rehabilitation Services COVIDSafe Plan

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For more information, contact:

Metro North Emergency Management and Business Continuity, Metro North Hospital and Health Service, Block 7, RBWH, Herston QLD 4029, email [MN-EmergencyManagement@health.qld.gov.au](mailto:MN-EmergencyManagement@health.qld.gov.au), phone 07 3646 3743.

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# Introduction

This document outlines the COVID Safe plan for Cardiac, Pulmonary and Heart Failure Rehabilitation Services across Metro North Health facilities and other locations in during the COVID-19 Pandemic response.

Cardiac, Pulmonary and Heart Failure Rehabilitation Services providers must adhere to a strict COVID safe plan during these interventions.

## Principles

- Prioritise the care of existing clients to prevent clinical deterioration and the need for hospitalisation
- Ensuring ongoing triaging and management of referrals to minimise impact on the assessment waitlist
- Apply prioritisation criteria to ensure the most vulnerable and high-risk clients receive timely coordinated care
- Comprehensive screen of clients and staff and employ protective measures to limit exposure and possible transmission of the COVID-virus
- Increase utilisation of telehealth to improve service efficiencies and decrease direct contact with clients and the broader community
- Continuously engage with key stakeholders including clients, referrers and the MNHHS Heart Lung Stream to inform and collaborate on service changes

## Background

The [Metro North Hospital and Health Service COVID-19 Response Plan](#) aims to ensure the continuity of health services and minimise the community impact within Metro North Health. The response plan spans from Sustain Tier 0, Sustain Tier 1, Sustain Tier 2, Sustain Tier 3, Sustain Tier 4 and Sustain Tier 5 as the transmission of COVID-19 increases.

Additionally, [Metro North Hospital and Health Service \(Metro North HHS\) Community and Oral Health](#) have outlined a response plan specific to community services. The Tier response systems ensures appropriate responses commensurate with the level of community transmission risk.

As a provider of Cardiac, Pulmonary and Heart Failure Rehabilitation Services group-based exercise and education services, Metro North Health requires a plan that clearly articulates the difference in response according to the modified tiers.

## Constraints

This document has been developed within Heart Lung Rehabilitation Working Group which has representation across Metro North. The devised plan has been endorsed by the Executive Director of Heart Lung Stream and via the Metro North Clinical Advisors within EOC. The document does NOT supersede the existing Metro North Health COVID-19 Response Directives and Plans. This plan may need to be updated given the evolving COVID-19 context within Metro North.

# Cardiac, Pulmonary and Heart Failure Rehabilitation Services

## Complex Chronic Disease Team (CCDT) – Community Oral Health

Cardiac and Pulmonary Rehabilitation Services will vary across the different tier response levels.

The Complex Chronic Disease Team provides

**Cardiac Rehabilitation Services** at Chermside Community Health Centre, Nundah Community Health Centre, North Lakes Health Precinct and Caboolture King Street or alternative community location to be specified.

**Pulmonary Rehabilitation Services** are provided at North Lakes Health Precinct and Caboolture King Street or alternative community location to be specified.

### Cardiac and Pulmonary Rehabilitation Services locations, hours of operation and capacity DELTA variant

Tier level	Locations	Hours of operation	In person Group Capacity (%)	Intervention Modality
Tier 0	<ul style="list-style-type: none"> <li>Chermside</li> <li>Nundah</li> <li>North Lakes</li> <li>Caboolture (King Street)</li> </ul>	Monday- Friday 8:00- 16:30	<ul style="list-style-type: none"> <li>up to 10 per group</li> <li>up to 12 per group</li> <li>up to 12-15 per group</li> <li>up to 7 per group</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Face to face assessment</li> <li>Face to face clinical measures</li> <li>Face to face post assessment</li> </ul>
Tier 1	<ul style="list-style-type: none"> <li>Chermside</li> <li>Nundah</li> <li>North Lakes</li> <li>Caboolture (King Street)</li> </ul>		<ul style="list-style-type: none"> <li>up to 6 per group (60%)</li> <li>up to 10 per group (83%)</li> <li>up to 12 per group (80%)</li> <li>up to 6 per group (85%)</li> </ul> <p>(*complies with 1:4 square meters rules and adherence to social distancing principles *)</p>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Comprehensive nursing via virtual modalities</li> <li>Essential face to face clinical measures that are unable to be completed virtually</li> <li>Essential face to face post assessment</li> </ul>
Tier 2	Cessation of all group-based programs <ul style="list-style-type: none"> <li>Telerehab- group based 4 per group x 1-2 per week as per client choice</li> <li>Telehealth- 1:1 telehealth consult with home program x 1-2 per week as per client choice</li> <li>Telephone- if unable to use virtual modalities with home program x 2 per week</li> <li>Virtual based assessments</li> </ul>			

## Royal Brisbane and Women's Hospital

Pulmonary Rehabilitation Services will vary across the different tier response levels.

The RBWH provides Pulmonary Rehabilitation at RBWH, Ned Hanlon Building (lvl 2) outpatient gym

**Table of Pulmonary Rehabilitation Services locations, hours of operation and capacity DELTA variant**

<b>Tier level</b>	<b>Locations</b>	<b>Hours of operation</b>	<b>In person Group Capacity (%)</b>	<b>Intervention Modality</b>
<i>Tier 0</i>	<ul style="list-style-type: none"> <li>RBWH, NHB Level 2 outpatients gym</li> </ul>	<u>Pulmonary Rehab</u> Tuesday & Friday 10:00 - 12:00  <u>Heart Support Service</u> Mon & Thurs 9-11.30am Tues 8am-9am	<ul style="list-style-type: none"> <li>Up to 12 per group (100%)</li> <li>Up to 15 per group (100%)</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Face to face assessment</li> <li>Face to face clinical measures</li> <li>Face to face post assessment</li> </ul>
<i>Tier 1</i>	<ul style="list-style-type: none"> <li>RBWH, NHB Level 2 outpatients gym</li> </ul>	<u>Pulmonary Rehab</u> Tuesday & Friday 10:00 - 12:00  <u>Heart Support Service</u> Mon & Thurs 9-11.30am Tues 8am-9am	<ul style="list-style-type: none"> <li>Up 6 per group (50 %)</li> <li>Up to 7 per group (46 %)</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Comprehensive nursing via virtual modalities</li> <li>Essential face to face clinical measures that are unable to be completed virtually</li> <li>Essential face to face post assessment</li> </ul>
<i>Tier 2</i>	Cessation of all face-to-face based programs <ul style="list-style-type: none"> <li>Telehealth - group based exercise and education, using Queensland Health Virtual Clinic</li> <li>Telehealth - 1:1 telehealth consult</li> <li>Telehealth patient assessments</li> <li>Telephone consults with patients as appropriate</li> </ul>			

## The Prince Charles Hospital

Pulmonary Rehabilitation Services will vary across the different tier response levels.

The Prince Charles provides

**Pulmonary Rehabilitation, Lung Transplant, and VAD/Heart Transplant services** occur onsite at TPCH

**Heart Failure Rehabilitation Services** are managed within TPCH but occur onsite at Chermside Community Health Centre

**Table 1 of Pulmonary Rehabilitation & Heart Failure Service hours of operation and capacity DELTA variant for TPCH**

<i>Tier level</i>	<b>Services</b>	<b>Hours of operation</b>	<b>In person Group Capacity (%)</b>	<b>Intervention Modality</b>
<i>Tier 0</i>	<ul style="list-style-type: none"> <li>Pulmonary Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Monday &amp; Friday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 12 per group (100%)</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Face to face assessment</li> <li>Face to face clinical measures and intervention</li> <li>Face to face post assessment</li> </ul>
	<ul style="list-style-type: none"> <li>Heart Failure Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Friday 830AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 10 per group (100%)</li> </ul>	
<i>Tier 1</i>	<ul style="list-style-type: none"> <li>Pulmonary Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Monday &amp; Friday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 10 per group (83.3%)</li> <li>(*complies with 1:4 square meters rules and adherence to social distancing principles *)</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Comprehensive nursing via virtual modalities as required</li> <li>Essential face to face clinical measures and interventions consider virtual modalities</li> <li>Essential face to face post assessment</li> <li>Establish the vaccination status of the patients</li> </ul>
	<ul style="list-style-type: none"> <li>Heart Failure Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Friday 830AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 6 per group (50%)</li> </ul>	
<i>Tier 2</i>	Cessation of all face to face group-based programs. <ul style="list-style-type: none"> <li>Tele-rehab: - group based 4-5 per group x 1-2 per week as per client choice</li> <li>Telehealth: - 1:1 telehealth consult with home program x 1-2 per week as per client choice</li> <li>Telephone: - if unable to use virtual modalities with home program x 2 per week</li> <li>1:1 Face to Face assessments or Virtual based assessments</li> <li>Consider reallocating physiotherapy resources to provide transplant rehabilitation</li> </ul>			

**Table 2 of Lung Transplant, VAD/Heart Transplant services hours of operation and capacity DELTA variant for TPCB**

<b>Tier level</b>	<b>Services</b>	<b>Hours of operation</b>	<b>In person Group Capacity (%)</b>	<b>Intervention Modality</b>
<i>Tier 0</i>	<ul style="list-style-type: none"> <li>Lung Transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday 12:30pm-1:30pm</li> <li>Wednesday:Tele:10am-11am</li> <li>F2F:11am-12pm</li> <li>Tele:1pm-2pm</li> <li>Friday 1pm-2pm</li> </ul>	<ul style="list-style-type: none"> <li>up to 8 per group (100%)</li> </ul>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Face to face assessment</li> <li>Face to face clinical measures and intervention</li> <li>Face to face post assessment</li> </ul>
	<ul style="list-style-type: none"> <li>VAD/Heart transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Thursday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 12 per group (100%)</li> </ul>	
<i>Tier 1</i>	<ul style="list-style-type: none"> <li>Lung Transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday 12:30pm-1:30pm</li> <li>Wednesday Tele:10am-11am</li> <li>F2F:11am-12pm</li> <li>Tele:1pm-2pm</li> <li>Friday 1pm-2pm</li> </ul>	<ul style="list-style-type: none"> <li>up to 8 per group (100%)</li> </ul> <p>(*complies with 1:4 square meters rules and adherence to social distancing principles *)</p>	<ul style="list-style-type: none"> <li>Telephone triage</li> <li>Comprehensive nursing via virtual modalities as required</li> <li>Essential face to face clinical measures and interventions consider virtual modalities</li> <li>Essential face to face post assessment</li> <li>Establish the vaccination status of the patients</li> </ul>
	<ul style="list-style-type: none"> <li>VAD/Heart transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Thursday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>up to 6 per group (50%)</li> </ul>	
<i>Tier 2</i>	<ul style="list-style-type: none"> <li>Lung Transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday 12:30pm-1:30pm</li> <li>Wednesday Tele:10am-11am</li> <li>F2F:11am-12pm</li> <li>Tele:1pm-2pm</li> <li>Friday 1pm-2pm</li> </ul>	<ul style="list-style-type: none"> <li>1-2 patients per F2F group (12.5% to 25%)</li> </ul>	<ul style="list-style-type: none"> <li>Aim for Tele-rehab when appropriate</li> <li>High priority patients (e.g. being worked up for active listing, actively listed) can be seen face to face</li> <li>Essential face to face assessment</li> <li>Establish the vaccination status of the patients</li> </ul>

<ul style="list-style-type: none"> <li>VAD/Heart transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Thursday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>Virtual MOC. This may include tele-rehab/telehealth</li> </ul>	<ul style="list-style-type: none"> <li>Tele-rehab/Telehealth where safe and appropriate</li> <li>Select high priority patients may do face to face with approval from Director of Cardiology</li> <li>Establish the vaccination status of the patients</li> </ul>
<p>Cessation of all face to face group-based programs <b>except for priority services</b> such as <b>lung transplant and VAD/Heart transplant rehabilitation (see specifics above)</b>. Consider models below: -</p> <ul style="list-style-type: none"> <li>Tele-rehab: - group based 4-5 per group x 1-2 per week as per client choice</li> <li>Telehealth: - 1:1 telehealth consult with home program x 1-2 per week as per client choice</li> <li>Telephone: - if unable to use virtual modalities with home program x 2 per week</li> <li>1:1 Face to Face assessments or Virtual based assessments</li> <li>Consider reallocating physiotherapy resources to provide transplant rehabilitation</li> </ul>			
<ul style="list-style-type: none"> <li>Lung Transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday 12:30pm-1:30pm</li> <li>Wednesday 11am-12pm</li> <li>Friday 1pm-2pm</li> <li>Plus, as required depending upon number of high priority patients needed to be seen.</li> </ul>	<p>One patient face to face (i.e. individual sessions)</p>	<ul style="list-style-type: none"> <li>Aim for Tele-rehab when appropriate</li> <li>High priority patients (e.g. being worked up for active listing, actively listed) can be seen face to face</li> <li>Essential face to face assessment</li> <li>Establish the vaccination status of the patients</li> </ul>
<ul style="list-style-type: none"> <li>VAD/Heart transplant Rehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>Tuesday &amp; Thursday 11AM-12PM</li> </ul>	<ul style="list-style-type: none"> <li>Virtual MOC. This may include tele-rehab/telehealth</li> </ul>	<ul style="list-style-type: none"> <li>Tele-rehab/Telehealth where safe and appropriate</li> <li>Select high priority patients may do face to face with approval from Director of Cardiology</li> <li>Establish the vaccination status of the patients</li> </ul>

Tier 3-5



## Australian Catholic University (ACU) Partnership with MNH

ACU provides Cardiac and Pulmonary Rehabilitation at ACU Health Clinic, 8 Approach Rd, Banyo, QLD. This partnership is supported by a formal MOU between MNH and ACU.

ACU Health Clinic is governed by ACU National Clinic Director's guidance regarding clinic closures, student restrictions and limitations on face-to-face reviews. Whilst ACU does not have a dedicated "tiered response", the clinic has guidelines that it follows in response to COVID-19 community transmission. The ACU Health Clinic may close to face-to-face client reviews at an earlier time-point to MNHHS, resulting in earlier transition to telehealth models.

Wherever possible, the delivery model at ACU will follow MNHHS rehabilitation models, guidelines and advice.

**Table of Cardiac/Pulmonary Rehabilitation Services locations, hours of operation and capacity DELTA variant**

<b>Tier level</b>	<b>Locations</b>	<b>Hours of operation</b>	<b>In person Group Capacity (%)</b>	<b>Intervention Modality</b>
<i>No community transmission</i>	<ul style="list-style-type: none"> <li>ACU Health Clinic, Banyo</li> </ul>	<u>Pulmonary Rehab</u> Mon and Wed Class A 9am-10am Class B 11am-12pm  <u>Cardiac Rehab</u> Tues and Thurs Class A 9am-10am Class B 11am-12pm	<ul style="list-style-type: none"> <li>8 per group (limited by equipment availability rather than room size/ social distancing restrictions)</li> </ul>	<ul style="list-style-type: none"> <li>Referrals received via MNHHS and initial client contact via telephone</li> <li>Face to face pre and post assessment and clinical measures</li> <li>Face to face exercise and education</li> </ul>
<i>Limited community transmission (no lockdown)</i>	<ul style="list-style-type: none"> <li>ACU Health Clinic, Banyo</li> </ul>	<u>Pulmonary Rehab</u> Mon and Wed Class A 9am-10am Class B 11am-12pm  <u>Cardiac Rehab</u> Tues and Thurs Class A 9am-10am Class B 11am-12pm	<ul style="list-style-type: none"> <li>Reduced according to direction from MNHHS or government directives on social distancing</li> </ul>	<ul style="list-style-type: none"> <li>Follow MNHHS directives where able</li> <li>Depending on clinic closures, either complete conversion to virtual models as per "lockdown" model <b>OR</b> the following model:                             <ul style="list-style-type: none"> <li>- Virtual subjective assessment</li> <li>- Essential face to face clinical measures that are unable to be completed virtually</li> <li>- Virtual exercise and education</li> <li>- For high priority clients, may be able to offer adjunct 1:1 face-to-face sessions</li> </ul> </li> </ul>
<i>Lockdown</i>	ACU Clinic closes to all students and clients (students able to telehealth from home) <ul style="list-style-type: none"> <li>Cessation of all face-to-face based programs</li> <li>Telehealth - group based exercise and education, using Zoom software</li> <li>Telehealth –1:1 telehealth consult if required</li> <li>Telehealth patient assessments</li> </ul>			

- Telephone consults with patients as appropriate

## Delta Variant- Response COVID 19

	<b>Sustain – Tier 0 -1 (prevent local transmission and prepare)</b>	<b>Sustain – Tier 1 (limited community transmission)</b>	<b>Sustain – Tier 2 (moderate community transmission)</b>	<b>Sustain – Tier 3-5 (significant community transmission)</b>
<i>General</i>	<p>Clients and staff do not attend if unwell/symptomatic</p> <p>Establish sub-teams to limit contact between staff and client</p> <p>QR coding on entry to facility and staff sign in</p>			
<i>Room Capacity</i>	<p>100% gym capacity</p> <p>2m<sup>2</sup> per person</p>	<p>50-60% gym capacity- on direction from MN EOC and or Medical Directors</p> <p>4m<sup>2</sup> person</p> <p>Cessation of offsite (non QHEALTH) facility groups unless existing clause defined in existing property agreement</p>	<p>Cessation of group-based exercise and education sessions.</p> <p>Virtual model to be scaled up.</p> <p>Note – Refer to TPCB priority service areas table that defines continuation face-face services.</p>	
<i>Education</i>	<p><u>Cardiac</u> Block education (4hrs) Virtual education Patient resources hub Adhoc 1-1 intervention</p> <p><u>Pulmonary</u> 1-2 education sessions per week Patient resource hub</p>	<p>Cessation of group education. Patient resource hub including videos accessible to clients</p>		
<i>Social Distancing</i>	<p>Observe social distancing 1.5m where possible</p>	<p>Observe social distancing 1.5m where possible</p> <p>Limit prolonged close contact between clients</p>		
<i>PPE</i>	<p>Training for all staff</p> <p>Standard precautions</p> <p>Masks to be worn on entry and exit of the group classes. Clients able can remove masks during exercise if clinically indicated.</p>	<p>Training for all staff</p> <p>All staff MN EOC directions.</p> <p>Masks to be worn on entry and exit of the group classes. Clients able can remove masks during exercise if clinically indicated.</p>		
<i>COVID Screening</i>	<p>Health professional administered screen prior to initial face to face assessment</p> <p>Client administered COVID checklist and declaration prior to each session</p>	<p>Health professional administered COVID screen (including temperature check) prior to every session using the approved COVID screening tool</p>		
<i>Infection control</i>	<p>Wipe down hard surfaces between sessions</p> <p>No sharing of pens or clipboards</p> <p>Client assisted cleaning between equipment</p>	<p>Health professional wipe down of hard surfaces and equipment between each client use</p> <p>No sharing of pens or clipboards</p>		