



Dietitians Board

Te Mana Mātanga Mātai Kai

Unite
against
COVID-19

13 May 2020

As we move to **Alert Level 2** on 14 May 2020 the Ministry of Health has issued guidance to the Allied Health sector which covers Dietitians – please refer to the [Allied Health Professions](#) web page regularly for up to date messaging.

Health practitioners are a high risk group of both contracting and transmitting COVID-19. The management of these risks needs to be balanced with continuing to provide equitable and essential health and disability services.

As indicated in earlier communications Dietitians working **within a DHB** continue to work as previously - DHB's have their own set of guidelines and protocols that DHB dietitians need to follow.

Under **Alert Level 2** Dietitians working in a **non-DHB environment** can “return to work” as long as measures are taken to protect the health and safety of the public and themselves.

Dietitians working in private practice and in the community are able to see clients/patients in-person if the following processes are in place:

- Screening for COVID-19 symptoms prior to in-person appointment
- Physical distancing measures
- Infection prevention control measures including PPE where required
- *Please follow Ministry of Health Guidelines and the requirements of any facility you are visiting*

Dietitians are able to travel within and to neighbouring regions to provide care to clients/patients and receive training.

Physical distancing must be in place for any type of treatment, consultation or training.

Telehealth and virtual appointments remain the preferred option in **Alert Level 2**. Please exercise extra caution when treating vulnerable groups.

Ministry of Health has advised it is expected that professional bodies, as well as employers, will operationalise the **Alert Level 2** guidance to their local context.

Screening

In order to support the government's strategy to eliminate COVID-19, it is important that all efforts are made to identify potential sources of infection. Pre-requisite screening needs to occur before you offer in-person contact which may impact on your ability to deliver your service.

Prior to an in-person appointment, the client/patient should be asked the following screening questions:

- Do you have new or worsening respiratory symptoms including one of the following: cough, sore throat, shortness of breath, coryza (runny nose) or temporary loss of smell, with or without fever?
- In the last two weeks, have you been in contact with others who have been unwell with respiratory symptoms or fever, or are suspected or confirmed to have COVID-19?

If the client/patient answers yes to either of these questions, you should not hold an in-person appointment. If you must do so, ensure the appropriate infection prevention control measures are in place.

Contact Tracing

Practitioners will no longer be required to notify their Responsible Authority for seeing clients/patients in-person in **Alert Level 2**.

You are, however, required to keep a detailed record of all work related contacts you undertake, as well as your own personal social contacts. These records need to contain as much information as possible including:

- The sources and settings where close contacts are occurring
- The timeliness of actions, and in particular the time intervals of symptoms
- Names of the people and how to contact them

Mitigating Risks

It is important the public understands any limitations to the type of services you can provide. You should discuss the risks and benefits of an in-person consultation.

It would be prudent to advise your clients/patients what to expect from you as a health practitioner during a consultation to assure them of their safety. This might include information on your website or in your waiting area.