



COVID-19: MERAS members Frequently Asked Questions

22 March 2020

The national DHBs Guidelines in regard to leave arrangements for staff arising from the containment of COVID-19 include scenarios and FAQs, as well as information about payments in the event that you or your family require self-isolation. These guidelines will have been distributed by your DHB and are on the MERAS website.

Health sector unions have been working together on these guidelines. We have been taking a principled approach, balancing common sense when it comes to employee rights and health professionals' ethics. The national guidelines include scenarios, but can't cover every eventuality. There are some grey areas that will arise, especially as the situation is changing rapidly. Let us know if you have any issues that seem inconsistent with the guidelines.

For those who work for a private birthing centre or a community trust, we would be interested in any employment-related guidelines that your employers may have issued. Please email them to jill.ovens@meras.co.nz We can provide your employer with the DHB national guidelines and advice.

Information sources

Your employer will have valuable information on the Intranet.

The Ministry of Health leads the Government's response to COVID-19 and any other pandemic. Their website is updated regularly.

For general information: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus>

They also have information specifically for health professionals: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals>

The Midwifery Council has specific information for midwives: <https://www.midwiferycouncil.health.nz/about-us/publications/important-information-about-covid-19>

The MERAS website has COVID-19 information to support members at: <https://meras.midwife.org.nz/covid-19>

What is the latest on international travel?

As of today, most of the confirmed cases in New Zealand have been related to international travel. Thus, we support the Government's further restrictions requiring all those who have returned from overseas to New Zealand within the last two weeks to self-isolate. This now includes those returning from Pacific nations.

The DHBs have placed restrictions on work-related international travel. As for any personal travel you may have booked, the official Government advice is not to go. You would be taking a huge risk of not being able to return to New Zealand due to travel bans in some countries, and you would be

required to self-isolate for two weeks on your return. In either case, you are likely to have to use additional annual leave if you are well, or sick leave if you are symptomatic.

If you have a genuine reason to travel (for example, a bereavement), and you don't have enough annual leave to cover an unplanned extension due to changing restrictions, talk to your manager about whether your employer will give you some special leave (in which case they will pay you as normal without leave balances being affected). Bear in mind that in many countries, including New Zealand, indoor gatherings with more than 100 people are banned, and therefore it may be that friends and family can be included in weddings and funerals via Zoom or other apps.

What about my pre-approved Annual Leave?

We are going to need all health professionals to mobilise when COVID-19 becomes widespread in the community. This includes midwives. If you have annual leave booked, particularly if it was for overseas travel, you may want to ask your employer for a deferment. It won't be much fun if restaurants, pubs, museums, art galleries and other public places are closed and you may need annual leave if schools close.

What happens if I am in self-isolation?

We don't know the true figure as to how many New Zealanders are in self-isolation. There will be a big spike in the next fortnight with the latest Government requirements. There is information on self-isolation on the new Government COVID-19 website at: <https://covid19.govt.nz/how-were-uniting/self-isolation/>

The DHBs' position on leave is that if the DHB requests that you self-isolate and you are not unwell, you will be paid special leave. However, if you get sick, they have said you need to use sick leave.

The DHBs do not accept that our DHBs MECA clause 18.1 (h), which provides for additional leave (special leave that does not come off your sick leave entitlement) where an employee is suffering from a minor illness which could have a detrimental effect on the patients or other staff in the employer's care, is applicable in relation to COVID-19. This is despite the fact that, for most people, COVID-19 will be a "minor" illness, but one that could be potentially harmful for some of the women in your care and for your colleagues who are in their 60s, are pregnant, or have pre-existing conditions.

This remains an area of contention. There would be very few, if any, midwifery managers who would not direct you to stay home if you or someone in your household is symptomatic with COVID-19.

What if schools are closed?

If you have to stay home to care for a sick dependant, sick leave applies (sick leave incorporates domestic leave). If your children are not sick, but they have been sent home from school due to school closure and you have to be at home with them, you will have to use annual leave or other leave you may have. This is not consistent with SSC guidelines, so is one of the issues where health sector unions remain at odds with the DHBs.

Who is responsible to keep you safe and healthy?

Under the Health and Safety at Work Act 2015 employers must ensure the health and safety of employees. As employees, you are required to take reasonable care to ensure your health and safety and that of others, including the women and babies in your care, and your colleagues.

In the current situation, this includes following safe work practices, wearing protective equipment and clothing, monitoring your own health, and reporting any breaches of policies, procedures or processes that are in place to prevent harm, such as infection prevention and control procedures, or incorrect use of PPE.

MERAS has raised concerns about the impact on workloads for midwives, given we already have a shortage of midwives which is likely to be exacerbated with colleagues who are sick and/or in self-isolation. It may be that you are asked to work more than usual. MERAS encourages midwives to contribute what you can, bearing in mind your fitness to work and competing obligations to your family/whanau. Look after yourself so you can look after the women and babies in your care.

Will I be asked to work in other areas?

During an emergency such as the current pandemic, health professionals can be called upon for assistance. This may extend to those off duty and may include deployment to areas requiring extra assistance.

Although midwives have skills that can provide assistance in areas outside maternity services, it is unlikely midwives would be asked to work in other areas. Given there is a shortage of midwives in most units and there will be a lower threshold for midwives to take sick leave if you have a cold or need to self-isolate, midwives able to work are likely to be more busy than usual providing care to women and babies.

Maternity services cannot be cancelled or postponed because of COVID-19. But midwives may need to look at doing things differently. Women coming into our hospitals and maternity units will need to be screened for travel history and possible contact with those with COVID-19. Visitors will be limited.

Some DHBs are shifting ante-natal services out of the hospitals and into the community. Changes may need to be made to clinic schedules to avoid several women being in the waiting room at any one time. Some DHBs are planning to use video consultations (e.g. through Skype, Facetime or Zoom) for some outpatient care. You may need to do phone consults to screen women before home visiting to check that no one in the house is in self isolation. PPE can be worn in the home environment.

What if I am at higher risk if I contract COVID-19?

Most people with COVID-19 have a mild to moderate illness with flu-like symptoms – fever, cough and shortness of breath. People of all ages are being infected, but older people and those with medical conditions seem most likely to get seriously ill.

If you are in your 60s, or you have a pre-existing health condition that puts you at risk of respiratory illness or has compromised your immune system, or you are pregnant, you should not be working with women who are symptomatic with COVID-19, even though appropriate wearing of PPE and following infection control procedures has been shown to be effective.

There is an issue for any practicing midwives who are in their 70s after the Prime Minister yesterday asked all over 70s to stay home. The position to DHBs from the lead CEs is as follows: *"In the meantime, please do not stand-down or redeploy staff based purely on age. Staff are expected to come to work as they ordinarily would until they are assessed."*

The DHBs have said you should talk to Occupational Health and Safety if you are concerned. In some DHBs, managers are being asked to make pragmatic decisions with staff in relation to risk and the need to come to work. We suggest that you start by discussing your particular situation with your manager if you have concerns, and if you are not satisfied with their response, call Caroline or Jill.

Is there any specific advice for community midwives?

The unions have raised issues around ensuring the safety of employees who work in the community. The College of Midwives is also working with the Ministry of Health on advice for community midwives, some of whom are employed. As indicated above phone consults before home visiting and the use of PPE during home visits where needed will help to keep you safe. We will put a link on our website to any information as it becomes available.

Other issues as they arise

The DHBs nationally have set up a steering group with DHB representatives (including CE representatives), and representatives from health sector unions to ensure rapid response to employment issues as we prepare to adapt to changing circumstances. MERAS is represented on that group.

We are responding to issues on the MERAS facebook page and you can contact us directly with queries by phone or by email.

We will keep you updated as matters progress. Check out www.meras.org.nz