

SPINAL INJURIES UNIT

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OUTPATIENT  
DEPARTMENT

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TRANSITIONAL  
REHABILITATION  
PROGRAM

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## Planning for disruption to supports and services because of COVID-19 – advice for people with Spinal Cord Injury (SCI)

**This document is current at January 2021 and will be updated if there are significant changes to its content.**

Please note: This document should not replace other information available from State or Commonwealth Governments but aims to provide some information specifically relevant to people with Spinal Cord Injury. We encourage you to review further general information about COVID-19, sometimes called coronavirus, and information specifically for people with a disability, at these Australian Health Department and Queensland Government websites.

[Coronavirus \(COVID-19\) information](#)

[Coronavirus \(COVID-19\) advice for people with disability](#)

[People with disability, support workers and carers](#)

It is wise to make a plan for what you will do if support worker availability becomes reduced during the COVID-19 pandemic, even if you don't end up needing it. Being able to stay safe and well at home and avoid hospitals is encouraged, to reduce your risk of exposure to the virus.

If you become unwell and need medical care, your usual GP and hospital services are still able to help, but they may use other options such as phone or video consults.

If you have an emergency, you can call an ambulance.

As usual, if you have difficulty breathing or autonomic dysreflexia, call an ambulance and tell them you have a SCI and it is a medical emergency.

### Why could support worker availability be reduced?

- Your support workers may be required to self-isolate or quarantine.
- You may be required to self-isolate or quarantine.
- Your support workers may need to care for their own children or family members who are sick.
- There may also be a normal level of staff sickness from the usual cold and flu season.

### How could you manage safely with less support?

#### What do you need?

Think about what supports and services are **essential** to keep you **safe and healthy**. This will not be the same for everyone. Consider:

- bladder management



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- bowel management
- medication management
- respiratory management
- transfers or preparation to stay in bed
- pressure relief/turning and wound care
- basic personal hygiene
- access to food and water
- access to a phone or emergency call system
- reliable internet and telehealth / video call options
- someone to help ensure bills for vital services are paid.

### ***What could you change or do without?***

- Think about services that could be reduced or replaced such as community outings and appointments. You may be able to get groceries home delivered or dropped off. Most grocery shops have put arrangements in place to ensure home delivery services for people who need it.
- What appointments or therapies can be changed to telephone or video calls?
- Could you safely consolidate shifts e.g. combine two shifts into one? Think about the impact this has on you. If it means spending longer in your bed or chair, consider how you will prevent pressure injuries.
- If you have a two-person care routine, are there any ways that this can be safely done with one person? Raise this with your service providers. Can a family member or informal support person be trained to assist as the second person?
- Could you access medication, food and drink independently if it was set up for you? For example, a water bottle, mug with a handle, camelback or long straw on a mount, leaving snacks that you can manipulate out on a bench, ready meals, adapted cutlery, or putting food or medications into containers you can open yourself?
- Consider ways that some supports could assist you from a distance or remotely, such as having a support worker pick up a bag of laundry left at the door and return it there, asking someone to assist with your banking or other admin tasks remotely, or doing some tasks outside and from a distance if possible.

### **Planning for different supports**

- Talk to your service providers to ask about their COVID-19 planning:
  - Can they provide backup staff if your regular support workers can't attend?
  - What training will these support workers have and how can they be quickly upskilled for your needs?
  - Can any of your support staff do 24hr/extended lock down if needed?
- Talk to your funding body such as NDIS, NIISQ, or My Aged Care:
  - Can they connect you with other service provider agencies if needed?
- If you employ your support workers directly, how many do you have? Do you need to recruit additional staff?
- What informal supports are available to you?



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- Do you have family, friends, neighbours or community members that can assist you with the essentials? Do they need training?
- Talk to your funding body about whether there is the option for family members or friends to be paid for work they provide if your formal supports are unavailable.
- Who could stay with you overnight or even 24/7 if the need arises?

The [Queenslanders with a Disability Network](#) (QDN) has some useful resources to help you make a plan. Find them [here](#). There are also guides to help you prepare [if you need to go to hospital](#).

## Training new supports

Make a clear “How to meet my critical needs list” that a new, possibly untrained worker could follow. Have this in a hard copy and electronic copy. This might include:

- short videos on your own phone or tablet of some of the key parts of your care routine
- written information or pictures of how to assist with your essential care needs such as rolling, transferring, positioning in your chair, cough assist, or setting up equipment
- a list of medications and their timing
- important contact phone numbers and emails.

Disability Services Consulting has a [tool](#) that might help you to think about your needs.

## Have a plan to make sure support workers take infection control seriously

We know that people with SCI who need hands-on personal care cannot practice physical distancing during these tasks. You might consider using face masks at these times. Please refer to the [Queensland Government](#) website for the latest guidance that may be relevant to you and your supports.

Some other strategies might include:

- a phone call, text or email ahead of time to ask new service providers to wash their hands properly when they enter, to cough into their elbow, and to use physical distancing for tasks that allow it
- a handwashing sign on the door
- an outside hand washing station
- having a supply of soap, clean towels, gloves and hand sanitiser (but don't stockpile)
- asking supports if they have reviewed the Queensland Government information for [people with disability, support workers and carers](#) and completed the Australian Governments' [COVID-19 free training module](#).

## Do you regularly use medications and health supplies (consumables)?



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It is wise to have an adequate supply of your usual medications and health supplies or consumables available in case you have a period of self isolation but avoid stockpiling. Talk to your service provider or supplier about your needs and any supply issues.

### Can equipment, assistive technology and consumables help you?

Think about whether you can source equipment or assistive technology to assist you to stay safe and healthy at home with a reduction in support workers. Ask your funding body if they can help. For NDIS participants, ask if they can make funding available in your core budget or if they can change your management option to self-managed to make funding available to you easily. Some ideas might include:

- Pressure relieving mattress or cushion to accommodate longer periods of time in bed or chair, or other items to protect your skin such as heel protectors
- Hiring an electric bed to assist with turning or skin care if spending longer in bed
- Manual handling equipment such as slide boards, slide sheets and hoists
- Emergency call systems or smart technology
- Over bed tables to allow you to access essential items from bed such as phone, remote controls, food and water
- Alternative catheters or drainage bags
- Alternative wound dressings

### Should I go to the Hospital Emergency Department because I don't have enough support workers available to meet my essential needs?

You can, but this should be the last resort after you have exhausted all the options in your plan.

### What else can I do?

- Find the latest information about COVID-19 recommendations from reputable sites like the Queensland and Australian Government health sites. (see below).
- Try to eat well, stay active and get enough sleep.
- Look after your mental health. Here are some resources that may be helpful.

Lifeline - [Mental health and wellbeing during the Coronavirus COVID-19 outbreak](#)

Beyond Blue - [Coronavirus Mental Wellbeing Support Service](#)

### Who can I contact for help?

#### SPOT – Spinal Outreach Team Queensland

3176 9507 or freecall 1800 624 832 (during business hours)

[www.health.qld.gov.au/qscis/spot](http://www.health.qld.gov.au/qscis/spot)

SPOT can assist with advice over the phone, by email or by video from a phone or computer.



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[Queensland Health](http://www.health.qld.gov.au/qscis) for the latest information and advice  
[www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19](http://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19)

**13 HEALTH**  
13 43 25 84

**National Coronavirus helpline**  
1800 020 080

**QLD Government Community Recovery Hotline** for people who are self-quarantined and cannot access essential food and medication  
1800 173 349

**NDIS**  
[New measures to support NDIS participants and providers through COVID-19 Coronavirus \(COVID-19\) information and support](http://www.ndis.gov.au/covid-19)  
1800 800 110

**NIISQ**  
1300 607 566

**My Aged Care**  
1800 200 422

[Australian Department of Health](http://www.health.gov.au)

