



Medical Guidelines

Motorsport Australia
Return to Race
COVID-19

V1
11/08/2020

Introduction

These guidelines should be used in association with existing medical guidelines and procedures. As the rules, regulations and restrictions around COVID-19 change, it should be clearly noted that State and Local government initiated requirements must take precedence and be followed as a minimum. These guidelines should be used to supplement any higher level requirements.

1. Government Guidelines

- a. Federal, State and Territory, and Local Public Health Authority Guidelines must always be followed
- b. State, local and specialist college guidelines on Personal Protective Equipment (PPE), especially in reference to close patient contact, droplet precautions and aerosol generating procedures, must be adhered to as a minimum

2. Good Hygiene and PPE use

- a. All entrances to the medical facility must have appropriate hand hygiene and signage
- b. All medical/first aid vehicles must have appropriate hand hygiene and biohazard bags
- c. Hand hygiene facilities or products must be available to all event attendees via the organiser and distributed around the event precinct
- d. Avoid sharing equipment, tools or apparel. This includes radios and event related equipment
- e. Frequently touched surfaces, work areas and equipment must be cleaned thoroughly and regularly including the inside of vehicles
- f. Monitors and medical devices must be thoroughly and appropriately cleaned after patient use.
- g. Disposable medical equipment is preferred over items that must be cleaned
- h. Appropriate PPE to be worn by medical and rescue/extrication personnel at the event. This includes gloves and protective eye wear at all times
- i. Gowns, N95/P2 masks gloves and protective eyewear/visors must be available in all vehicles and the medical centre
- j. It is mandatory to utilise appropriate N95/P2 mask, eyewear, and gown for the assessment and/or management for any suspected COVID-19 patient
- k. It is strongly recommended that N95/P2 masks, eyewear and gown be used for all aerosol generating procedures independent of their COVID-19 status
- l. All items that come into contact with a suspected COVID-19 case must be isolated and cleaned appropriately or disposed of in a biohazard bag/bin

3. Social/Physical Distancing

- a. Maintain social/physical distancing measures at all times
- b. Masks should be considered in all areas where social/physical distancing cannot be maintained including inside vehicles
- c. Avoid the use of indoor facilities where possible
- d. Avoid mass briefings if possible. Aim to utilise online or electronic document briefings, debriefs and instructions
- e. Limit the number of personnel attending an event to those who are essential. Excess personnel should be discouraged
- f. Operational vehicles should ideally be limited to two occupants if possible. At all times, the minimum safe number of personnel should be positioned in any vehicle. This will depend on local regulations, personnel skill mix, vehicle type, vehicle location and purpose, and other factors. Personnel should remain outside their vehicle until they are needed to respond to any incident or for environmental reasons
- g. Event organisers should put in place practical measures to enforce social/physical distancing requirements, including the provision of signage and creating barriers and/or markings that restrict the amount of people in any given area
- h. Avoid unnecessary physical interaction between officials, competitors, media, and other personnel. Wherever possible electronic and radio interaction should be used
- i. Medical facilities should have signage that clearly indicates the maximum number of people allowed. This also must be strictly enforced for each room with signage to that effect clearly displayed. If for operational or clinical reasons that number is exceeded, masks should be worn, and the excess persons should leave as soon as practicable

4. Restriction

- a. Under no circumstances should anyone with a fever or symptoms consistent with COVID-19 attend the event. This includes any fever, respiratory symptoms, shortness of breath, sore throat, cough, fatigue, or lack of sense of smell
- b. Anyone with symptoms, even in the context of a negative COVID-19 PCR test, should self isolate and not attend the event until they are asymptomatic for at least 48 hours
- c. Under no circumstances should anyone attend the event if they have been:
 - overseas in the previous 14 days, or
 - in contact with someone who has been overseas in the previous 14 days, or
 - in contact with a known COVID-19 positive case in the previous 14 days, or
 - are awaiting the results of a COVID-19 test
- d. Symptom checking should be performed on all personnel entering the event precinct. This should be informed by clear posters at the point of entry. Any person that is experiencing any symptoms should be refused entry and referred to the nearest testing centre or medical facility (not the track medical centre)

- e. Medical facilities should be restricted to medical assessments and patient management only. They should not be "multipurpose". Specifically, alternative facilities should be sought for anti-doping procedures
- f. Signage on the entry to medical facilities should clearly describe potential COVID-19 symptoms and they should not enter the facility. An alternative process should be noted on the same sign

5. Suspected COVID-19 Case Management

- a. The first aid/medical team must have a clear local plan for assessment and management of a Suspected COVID-19 case including the nearest and alternative testing facilities. All suspected cases should be assessed after donning appropriate PPE which includes a P2/N95 Mask, visor and/or eyewear, appropriate gown and gloves
- b. If unsure on the need for testing, further advice should be sought from the COVID-19 clinicians information line for their state and be consistent with the CDNA guidelines www1.health.gov.au/internet/main/publishing.nsf/Content/cdna-song-novel-coronavirus.htm. Clinicians should have a low threshold for PCR testing and patient self-isolation until they are asymptomatic and a negative COVID-19 result
- c. It is the responsibility of the person making the referral for testing to follow up the results and inform the patient
- d. Any suspected case should be assessed and managed outside of any first aid or medical facility if possible or in appropriate isolated section of the medical facility or separate facility. They should be provided a mask and should wear it until the decision is made that they are NOT at risk of having COVID-19
- e. Any person with suspected COVID symptoms should be provided a mask and told to attend the local doctor, testing centre or hospital for further assessment and testing. These facilities must be clearly documented PRIOR to the event. Private transport is preferred unless the person is significantly unwell
- f. Any person with suspected COVID symptoms that is significantly unwell should be managed appropriately and care provided until an ambulance arrives. If care cannot be adequately provided in the isolation area or separate facility, they should be managed in the resuscitation area of the medical facility or ambulance until they are transferred to hospital. After this time, the facility should be thoroughly cleaned. Adequate ventilation should also be provided in the facility
- g. Whilst symptomatic or febrile, even in the context of a negative test, the person MUST remain isolated until they are asymptomatic for 48 hours AND have a negative PCR test
- h. All facilities should be cleaned thoroughly prior to the first day of the event and at least daily during the event. Additional cleaning is required after treatment of any suspected or potential COVID-19 case
- i. First aid/Medical facilities should have appropriate cleaning as directed by the department of health (e.g. bleach solution or appropriate detergent) <https://www.health.gov.au/sites/default/files/documents/2020/03/coronavirus-covid-19-environmental-cleaning-and-disinfection-principles-for-health-and-residential-care-facilities.pdf>

6. Medical Log and Notification

- a. A log of all patients that present at the medical centre or are seen by first aid/medical personnel must be recorded. This must include date and time of presentation, name, contact number, injury/illness, and disposition (including transport method). A summary of this must be immediately electronically sent to the secretary of the meeting at the end of the event
- b. All patients that are referred externally (including private transport) for further assessment and/or management must immediately be notified to secretary of the meeting/stewards/organiser. Confidential clinical details should not be provided with the exception of noting any suspected COVID-19 cases for tracing purposes

7. Track Medical Response

c. **Officials assessment at the scene**

Officials at the scene of an incident or at their post should aim to maintain social distancing measures while communicating with the driver. Officials should not come in contact with driver's apparel or safety equipment except in an emergency. All officials that may be in contact with a driver or vehicle should be wearing appropriate PPE (gloves and eyewear as a minimum).

d. **Medical assessment and management**

The minimum safe number of personnel per vehicle must be determined by the medical team based on skill mix, vehicle type and role.

The use of PPE to protect against COVID should be made on a case by case basis. Personal protection and scene safety of medical personnel must always take priority. Decision making with regards to PPE should include factors of COVID-19 risk, vision, communication, access, dexterity, fire risk and practicality.

Track medical response procedures, assessment and patient management should be based on existing Motorsport Australia and contemporary trauma protocols and guidelines. Medical teams should have clearly described local protocols and procedures covering a range of scenarios.

8. Spectator Medical Response

- a. A separate medical service should provide first aid/medical services to spectators. The size and acuity of the service should be proportional to the number of spectators on site
- b. The spectator medical service must have a clear plan for the assessment, management and referral of suspected COVID-19 cases. Suspected COVID-19 cases should not be referred to the track medical service or medical centre
- c. Any decision to refer a patient to the track medical centre for any condition must be approved by the CMO prior to sending them to the facility