COVID-19 RISK MATRIX:

Is this person safe to be at work?

The table that follows is an adaptation of one developed by occupational health physicians from the ADHB for the assessment of staff working in that DHB.

In this adaptation the first two columns of the document are designed to allow primary care clinicians to assess their own and their colleagues' risk within the clinical setting. The subsequent three columns are designed to assist clinicians when advising patients not working in clinical settings who are concerned about their safety in the work environment.

The assessment of risk needs to be considered in light of the potential for complications from a severe respiratory illness for specific disease states or medication regimes. New Zealand is currently at alert Level 3. While the level of risk to a particular individual relative to another remains constant, the absolute risk to that individual varies according to the prevalence of COVID-19 within the community.

At the present time the prevalence of COVID-19 in New Zealand is low; however, if the prevalence were to increase again, then recommendations would be likely to need review.

When using the spreadsheet it is important to realise that a number of people will have more than one comorbidity. It is up to our clinical judgement to assess that additional risk. In addition it may be necessary to consider others in an individual's bubble and the risk that infection with COVID-19 would present to them.

COVID-19 Risk Matrix: Is this person safe to be at work?

Health condition	Frontline clinical staff with close clinical contact (e.g. doctors/nurses in general practice clinics or EDs)	Frontline staff in a clinic/ ward but without close patient contact (e.g. reception staff, cleaning staff in general practice clinics or EDs)	Member of the public working in an area with exposure to the public where unable to maintain physical distancing (e.g. aged residential care, early childhood teacher, hairdresser)	Member of the public working in an area with exposure to large numbers of the public but able to maintain physical distancing (e.g. bus driver, upermarket worker, school teacher)	Member of the public working in an area with exposure to small numbers of the public and able to maintain physical distancing (e.g. office worker, electrician)	
Over the age of 70 years?	no	no	yes	yes	yes	
Pregnant or breastfeeding?						
Pregnancy over 28 weeks	no	no	discussion needed	yes	yes	
Pregnancy under 28 weeks with a heart or lung condition	no	no	discussion needed	yes	yes	
Pregnancy under 28 weeks without a heart or lung condition	no	discussion needed	discussion needed	yes	yes	
Breastfeeding	yes, with appropriate controls	yes	yes	yes	yes	
Respiratory – asthma?						
Asthma well controlled	yes	yes	yes	yes	yes	
Asthma less well controlled (frequent use of SABA/LABA but no night waking)	needs medical review	yes	yes	yes	yes	
Asthma poorly controlled, e.g. long-term prednisone/ prednisolone greater than 10mg daily or recent (one year) oral prednisone for acute exacerbation	no	needs medical review	needs medical review	yes	yes	
Respiratory – other conditions?						
Stable chronic lung disease, e.g. Chronic Obstructive Pulmonary Disease, recurrent bronchitis	no	needs medical review	needs medical review	yes	yes	
Unstable chronic lung condition	no	no	no	yes	yes	
Recurrent pneumonia or bronchiectasis	no	needs medical review	needs medical review	yes	yes	

Health condition Diabetes?	Frontline clinical staff with close clinical contact (e.g. doctors/nurses in general practice clinics or EDs)	Frontline staff in a clinic/ ward but without close patient contact (e.g. reception staff, cleaning staff in general practice clinics or EDs)	Member of the public working in an area with exposure to the public where unable to maintain physical distancing (e.g. aged residential care, early childhood teacher, hairdresser)	Member of the public working in an area with exposure to large numbers of the public but able to maintain physical distancing (e.g. bus driver, upermarket worker, school teacher)	Member of the public working in an area with exposure to small numbers of the public and able to maintain physical distancing (e.g. office worker, electrician)
TYPE 1 DIABETES: Diagnosis for less than 10 years, and with previous good control and good current control. HbA1C blood test is below 65, and no unacceptable highs and/or lows, and no complications of diabetes.	needs careful medical review – must fulfil all critera	yes	yes	yes	yes
TYPE 1 DIABETES: Diagnosis for more than 10 years, and/or previous or current poor control, and/or HbA1C blood test above 64, and/or unacceptable highs and/or lows, and/or any complications of diabetes.	no	needs medical review	needs medical review	yes	yes
TYPE 2 DIABETES: Well controlled, HbA1C blood test is below 65, and/ or no complications of diabetes.	usually yes	yes	yes	yes	yes
TYPE 2 DIABETES: Poorly controlled, HbA1C blood test above 64 and/or any complications of diabetes.	no	needs medical review	needs medical review	yes	yes

Health condition Heart or cardiovascular condition?	Frontline clinical staff with close clinical contact (e.g. doctors/nurses in general practice clinics or EDs)	Frontline staff in a clinic/ ward but without close patient contact (e.g. reception staff, cleaning staff in general practice clinics or EDs)	Member of the public working in an area with exposure to the public where unable to maintain physical distancing (e.g. aged residential care, early childhood teacher, hairdresser)	Member of the public working in an area with exposure to large numbers of the public but able to maintain physical distancing (e.g. bus driver, upermarket worker, school teacher)	Member of the public working in an area with exposure to small numbers of the public and able to maintain physical distancing (e.g. office worker, electrician)
Under 65 years, without multiple previous heart proceedures and with well-controlled ischaemic heart disease = normal daily function without chest pain or shortness of breath or needing GTN	yes	yes	yes	yes	yes
65 years or over and well- controlled ischaemic heart disease = normal daily function without chest pain or shortness of breath or needing GTN	no	needs medical review	needs medical review	yes	yes
IHD with occasional symptoms and impact on daily activities	no	yes – needs medical review	yes	yes	yes
Other cardiac condition with or without chest pain/shortness of breath/limb swelling, e.g. cardiomyopathy, past valve surgery	no	probably yes – needs medical review	yes	yes	yes
Hypertension well controlled and no IHD	yes	yes	yes	yes	yes
Hypertension suboptimal control and no IHD	no	probably yes – needs medical review	probably yes – needs medical review	yes	yes

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Do you have a condition or medicine that affects your immune system?					
Immunocompromised, e.g. HIV/ AIDS, cancer, rheumatoid arthritis, immune deficiency syndrome, organ transplant recipient, splenectomy	no	needs medical review	needs medical review	yes	yes
Immunosuppressant medicines including: > Long-term prednisolone/ prednisone greater than 10mg daily > Abatacept > Adalimumab > Anakinra > Azathioprine > Cyclophosphamide > Cyclosporin > Etanercept > Hydroxychloroquine > Infliximab > Mercaptopurine > Methotrexate > Mycophenolate > Rituximab > Tacrolimus/Sirolimus	no	needs medical review	needs medical review	yes	yes

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Cancer?						
Active cancer	no	no	needs medical review	if able	yes	
Recovering from cancer, on chemotherapy or radiotherapy	no	no	needs medical review	if able	yes	
Full recovery from leukaemia or lung cancer	no	needs medical review	yes	yes	yes	
Full recovery from another cancer (not leukaemia or lung)	yes	yes	yes	yes	yes	
Musculoskeletal condition?						
Any active musculoskeletal condition, e.g. osteoarthritis, inflammatory joint disease	see medications above; needs medical review	yes	yes	yes	yes	
Skin condition?						
Any active skin condition not on an immunosuppressant medicine as listed above	yes	yes	yes	yes	yes	

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Other health condition?					
If other condition, does not affect lungs, heart, immune system, diabetes	probably yes – needs medical review	yes	yes	yes	yes
Conditions affecting lung lining, respiratory muscles, pleura, neuromuscular conditions	probably no – needs medical review	yes – if already working there	yes	yes	yes
Other neurological conditions possibly affecting breathing	no	needs medical review	needs medical review	yes	yes
Stable psychological or psychiatric condition	probably yes – may need medical review	yes – if already working there	yes	yes	yes
Deteriorating psychological or psychiatric condition	no	needs medical review	if able	yes	yes
Morbid obesity	no	needs medical review	needs medical review	yes	yes
Chronic kidney or chronic liver disease	needs medical review	probably yes – needs medical review	yes	yes	yes