

## **Guideline on hospitalisation of COVID-19 confirmed PWD**

-By Daegu Solidarity Against Disability Discrimination(SADD) on 13. Mar. 2020

-Translated by Korean Disability Forum

1. (Hospitalisation)When a person with severe disabilities is confirmed with COVID-19, the person has to be prior object of hospitalisation regardless of the degree of symptom.

-Severer the disabilities are, the person should be considered to be hospitalised.

(As bigger population of PWD have chronic or underlying diseases, they should be classified of high-risk group)

-The PWSD infected of COVID-19 should be immediately moved to hospital or residential health care centre before going to hospital.

-It is suggested to prepare separate ward for the PWSD who need daily assistance

2. (Confirmation) Check what is needed for hospitalisation for the PWD

-Ask the PWD oneself first.

-If it is difficult to figure out from the PWD or additional informations are required, ask family members or main carers/supporting organisations.

-Minimum informations to confirm are as follows;

- Environment: Information related to essential amenities such as beds, bathrooms, shower rooms, and assistive devices.
- Communication: Confirm the type of disabilities the person has and then comfort ways to communicate
- Daily support: Check necessary matters such as using toilet, personal care, meal assistance, clothing, washing, and changing body position
- Emotion/Relationship: when the PWD demonstrate challenging behavior, verify the reason and ways to calm the person down.
- Personal possessions: Check if the PWD has possessions helping emotional stability such as cellphone/charger, urinal container, and assistive device, etc.
- Other assistive devices: Check additional assistive devices such as electric beds, hoists, etc.
- Resources outside: Confirm family members or supporting organisations with whom can consult situations and condition of the PWD.
- Medical record, drug use, usual health condition, and food to avoid should be checked

3. (Information) Inform the PWD the infection status, hospitalisation, treatment process, and prohibition in the hospitals, etc. in the manner of understandable ways considering the disabilities. It is recommended hospitals to provide guidebooks in plain language.

-Looking for cooperation with the sign language translation centres to support deaf people.

-when the person has difficulty to speak, use alternative communication such as keyboard in smart phone or drawing.

4. When the PWD needs daily support other than medical support, designate a assistant inside of the hospital and let the patient in need know the assistant and the way to ask support.

- Checklist on the degree of daily support

<b>Name</b>	
<b>Day of Birth</b>	
<b>Type of Disability</b>	(1) Physical disability (2) Brain lesion disorder (3) Visual impairment (4) Hearing Impairment (5) Difficult to speak (6) Visual Impairment (7) Cardiac Impairment (8) Liver Impairment (10) Respiratory Impairment (11)Intestinal Fistular/Urinary Fistular (12) Epilepsy (13) Learning Disability (14) Mental Disorder (15) Autism
<b>Degree of Disability</b>	
<b>Assistive Devices in use</b>	

Emergency Contact	
Area of support	Degree of necessity
1. Changing Clothes	(1) No need (2) a little (3) totally
2. Taking shower	(1) No need (2) a little (3) totally
3. Eating meals	(1) No need (2) a little (3) totally
4. Chewing/swallowing	(1) No need (2) a little (3) totally
5. Changing body position in bed	(1) No need (2) a little (3) totally
6. Transfer sitting place	(1) No need (2) a little (3) totally
7. Walking	(1) No need (2) a little (3) totally
8. Using Toilet	(1) No need (2) a little (3) totally
10. Taking medicine	(1) No need (2) a little (3) totally
11. Support in communication	(1) No need (2) a little (3) totally
12. A position or motion taken mainly(if there are any)	(1) No need (2) a little (3) totally
13. Other considerations (If there are any)	(1) No need (2) a little (3) totally

- Check the ways to ask support(it should be the way PWD can do by oneself)

ex. Helping bell, phone call, regular visit by the assistant(by minutes or hours)

5. In principle, daily support should be provided by medical professionals, but hospital can ask to send labourforce to the local government through consultation.

- Hospital can request additional labourforce if necessary to the local government after consultation.

(Daily assistance on patients in a ward by non-medical professionals should be approved by the local government in unavoidable circumstances.)

-When additional daily assistants are dispatched to hospitals, central/local governments should pay the cost by certain

criteria(including danger allowance)

-Additional assistants should be well educated/informed on safety including personal protection and hospital protocol.

-When non-medical professionals are dispatched to hospitals as additional daily assistants, separate waiting place besides of the ward should be spared for them.

6. (Observation) For PWD, especially those with learning/mental disabilities, it can be difficult to express their symptoms. Thus, more frequent observations than on non-disabled patients are required.

7. The condition of the patients with disabilities should be updated and informed on daily basis to those who are in confidential relationship with the patients such as family members or/and organisations.

8. (Negative pressure room)

When a severe patient with disabilities is moved to negative pressure room, general protocol is followed. The detail ways to support the patient considering the patient's disabilities(proper ways to help in toilet and to communicate in use of respirator, etc.) should be confirmed by family members or main carer/organisation.

9. When additional measures are required to be taken, besides medical treatment, hospital should consult with family members

or main support organisations of the patient.

## **Annex. Basic attitudes in assisting the patient with disabilities**

Treat the patient as a human being, without prejudice or stereotype on PWD.

- Be careful with degrading expressions about disabilities
- Be respectful to the PWD, you should call them as 'Mr.-' or 'Ms-'
- Provide support in need, to the maximum
- Be careful with the assistive devices
- When medical decision is necessary, consult with health professional

### 2. Follow basic health rules

- Keep wearing personal protection
- Cover your mouth with arms or tissues when coughing
- Wash hands frequently with soap more than 30 seconds

### 3. Minimise contact between the patient and daily assistant

- When have conversation, avoid face-to-face and keep at least 2m distance
- Do not have meal with the patient. Assist the patient first, and the assistant have meal after.

#### 4. Separate living area

- Separate living area between the patient with disability and assistant(If it is difficult, stay as far as possible)
- Assist the patient only when is necessary

#### 5. Use items separately

- Use clothes, blankets, pillows, towels, cups, etc. separately
- Use tableware separately

#### 6. Sterilise often

- Sterilise often highly touched surface such as wheelchair, upon the tables, beds, and cell phones, etc.
- Sterilise everytime after using toilet or urinal container

#### 7. Check thoroughly health conditions of the patient and assistant

- Observe carefully the health condition of the patient with disabilities and report to the nurse in charge
- Measure body temperature every morning and evening, check the progress and report to the nurse in charge
- Let family members and/or main caregiving organisations know the health condition of the patient through the nurse in charge