

# Prevention and management of exposure to coronavirus (COVID-19) in the healthcare and social assistance industry

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## Information about managing the risk of exposure to COVID-19 in clinical and non-clinical settings, including patient transport.

### Background

On 16 March 2020 the Victorian government declared a State of Emergency in Victoria, to help minimise the spread of coronavirus (COVID-19).

The number of confirmed cases of coronavirus (COVID-19) in Australia is growing. The situation is changing rapidly.

A coronavirus (COVID-19) infection can cause mild to severe respiratory illness. Common symptoms of coronavirus (COVID-19) are:

- Fever
- Chills or sweats
- Cough
- Sore throat
- Shortness of breath
- Runny nose
- Loss of sense of smell

Employees in the healthcare and social assistance industry have a high risk of being exposed to coronavirus (COVID-19). These employees are likely to come into close contact with patients and clients in facilities and in people's homes, and because they work in high traffic environments.

Employers have a duty to provide and maintain, so far as is reasonably practicable, a working environment that is safe and without risks to the health of employees. This includes preventing risks to health, including psychological health, and safety associated with potential exposure to

coronavirus (COVID-19) as a result of providing health care and social assistance services in the current circumstances.

Employees have a duty to take reasonable care of their own and others health and safety in the workplace and cooperate with their employers about any action they take to comply with the OHS Act or Regulations.

More information about employer and employee obligations is set out below (see Legal duties).

### **Identifying risks to health in the healthcare and social assistance industry**

Employers must identify the level of risk to the health of employees from exposure to coronavirus (COVID-19) at their workplace, including where care is provided in people's homes. This must be done in consultation with health and safety representatives (HSRs) and employees.

Some activities that may pose a risk of exposure to coronavirus can include:

- Providing direct care or support to people with suspected or confirmed coronavirus (COVID-19) infection.
- Transporting people with suspected or confirmed coronavirus (COVID-19) infection.
- Transmission from employees who may have been exposed to patients with suspected or confirmed coronavirus (COVID-19) infection to other employees.
- Performing aerosol-generating procedures (eg bronchoscopy, tracheal intubation, non-invasive, high flow nasal oxygen therapy, manual ventilation before intubation, cardiopulmonary resuscitation, sputum induction, suctioning, nebuliser use) on people with suspected or confirmed coronavirus (COVID-19) infection.
- Physical examination of people who are presenting with symptoms consistent with coronavirus (COVID-19) infection.
- Cleaning medical equipment used with people with suspected or confirmed coronavirus (COVID-19) infection.
- Cleaners, domestic staff or visitors entering the room of people with suspected or confirmed coronavirus (COVID-19) infection.
- Cleaning cutlery, dishes or other objects used by people with suspected or confirmed coronavirus (COVID-19) infection.
- Cleaning rooms and public areas where people with suspected or confirmed coronavirus (COVID-19) infection have been.
- Transiting through areas where people with suspected or confirmed coronavirus (COVID-19) infection are located (eg wards, corridors, waiting rooms, cafeterias, common areas of residential settings).
- Manipulation of respiratory samples of people with suspected or confirmed coronavirus (COVID-19) infection.

- Reception tasks which involve interactions with people with suspected or confirmed coronavirus (COVID-19) infection.
- Handling of contaminated waste or personal protective equipment (PPE), which has been used by staff caring for people with suspected or confirmed coronavirus (COVID-19) infection.

Employers must also identify whether there are other increased risks as a result of coronavirus (COVID-19), including:

- Occupational violence and aggression (both in the workplace and in public areas where staff may wear uniforms), due to poor front-line management, rapidly changing information, increased workload, implementation of government restrictions and public fears about coronavirus (COVID-19).
- Fatigue, as a result of increased workload, inadequate staffing levels, additional or longer shift lengths and other pressures.
- Stress, as a result of vicarious trauma, increased workload and ongoing heightened levels of concentration.
- The availability of supplies, such as PPE or cleaning equipment.
- Workforce and skills shortages, including changes to the workforce composition or duties normally undertaken by an employee.
- The practicality of using PPE in a front line environment (such as entering patients homes, treating patients on the floor of a residence).
- PPE becoming ineffective or damaged by environmental factors (eg paramedics' gowns being caught or torn in high winds).

### **Information about preventing occupational violence and aggression, fatigue and stress**

- **Occupational violence and aggression**

<https://www.worksafe.vic.gov.au/occupational-violence-and-aggression>

- **Fatigue**

<https://www.worksafe.vic.gov.au/fatigue>

- **Work-related stress**

<https://www.worksafe.vic.gov.au/work-related-stress>

### **Controlling risks to health**

Where a risk to health, including psychological health, is identified at a workplace, employers must, so far as is reasonably practicable, eliminate the risk. Where it isn't possible to eliminate the risk, it

must be controlled, so far as is reasonably practicable.

Employers also have a duty to consult with employees and health and safety representatives (HSRs) (if any), on matters related to health or safety that directly affect, or are likely to directly affect them.

This includes consultation on identifying hazards or risks, and decisions about how to control risks associated with coronavirus (COVID-19) (eg working at a location other than the usual place of work, procedures for managing deceased persons).

The types of control measures required depends on the level of risk as well as the availability and suitability of controls for each workplace, including individual work areas.

Control measures may include:

### **Systems of work**

- Developing organisational-level plans to address a surge in demand as a result of coronavirus (COVID-19) including preparation and implementation of control measures to prevent exposure risks to employees. These plans should be prepared in accordance with advice provided by the Department of Health and Human Services (DHHS) coronavirus (COVID-19) website (see link below).
- Developing facility-level plans that describe the controls that will be enacted in the event of an outbreak (eg quarantine of residents, use of bathroom and kitchen facilities), in accordance with advice provided by DHHS.
- Preventing unnecessary contact with people with suspected or confirmed coronavirus (COVID-19) infection (eg preliminary phone screening to triage to an appropriate facility, phone consultations).
- Minimising the risk of cross-infection by segregating teams caring for suspected and confirmed cases of coronavirus (COVID-19).
- Limiting transmission by allocating employees to work in a single ward or facility for each shift.
- Limiting transmission in home-based care settings by consistently allocating patients or clients to the same employee for each shift.
- Consistently applying physical distancing measures in all workplace settings, including clinical and non-clinical settings, during handovers, outreach, home visits and welfare checks.
- Explicit advice to staff to ensure they do not attend work when unwell.
- Monitoring the health of workers to aid in early detection of suspected coronavirus (COVID-19) infection to prevent transmission.
- Ensuring business continuity plans are in place for staff absenteeism, including appropriate induction and context-specific training for staff who are redeployed to areas outside of their normal work areas.

Refer to the DHHS website information for health services including tools that may assist with planning and implementing safe systems of work.

## **DHHS information for health services**

- **DHHS: Health services and general practice - coronavirus disease (COVID-19)**

<https://www.worksafe.vic.gov.au/resources/dhhs-health-services-and-general-practice-coronavirus-disease-covid-19>

## **Work environment and facilities**

- Changing the work environment to prevent unnecessary contact with people with suspected or confirmed coronavirus (COVID-19) (eg designated facilities, perspex barriers at reception areas, designated entry and exit points for people with suspected or confirmed coronavirus (COVID-19).
- Providing and encouraging use of facilities or products (eg hand wash stations with soap and hand towels, hand sanitiser with over 60 per cent alcohol, bleach solution for disinfecting/cleaning) to allow employees to maintain good hygiene practices.
- Avoiding shared use of phones, desks, offices, kitchens or other work tools and equipment.
- Thorough and regular sanitation of workplaces.
- Appropriate waste management systems, including for the safe disposal of contaminated PPE.
- Providing employees with time to wash up and change their clothes prior to the end of their shift.
- Ensuring all employees have access to clean and safe locations for meal breaks.

## **PPE**

- Providing PPE that is appropriate for the level of risk associated with the task, in accordance with guidance from DHHS for health services and general practitioners (link below). Information, instruction and training must be provided and should include information on why PPE is required, how to safely use it, how to safely remove and how to dispose of it in accordance with DHHS guidance.
- Ensuring any provided PPE is practical for the work environment.
- Providing clothing for employees to wear at work to reduce risk of cross-contamination of clothing during travel and at home and reduce the risk of occupational violence when commuting.
- Providing adequate facilities for employees to safely remove and dispose of PPE and contaminated clothing.
- Providing laundry services for employees to reduce the need to transport and handle potentially contaminated clothing.
- Regularly communicating with staff about the availability of PPE (eg stock levels).

## **Communications and employee welfare**

- Consulting with HSRs and employees as often as necessary to ensure their input to any proposed changes.
- Communicating any altered expectations and working conditions to patients, clients and visitors to reduce the risk of coronavirus (COVID-19) infection to employees.
- Providing information in a format and languages that employees can readily understand.
- Ensuring employees who are considered to be at high risk in relation to coronavirus (COVID-19) exposure are provided with opportunities to work in lower risk settings where possible.
- Using video conferencing for teaching and departmental meetings.
- Ensuring employees take regular rest breaks and have access to adequate facilities for rest breaks.
- Providing updated information to all employees, including employees on leave, contractors and casual workers.
- Ensuring that employees know how to handle, transport and disinfect potentially contaminated clothing and items used at work (eg shoes, phones, identity badges).
- Ensuring that employees know what to do, or who to notify if they feel unwell or suspect they have been infected, according to the DHHS information about coronavirus (COVID-19) ([link below](#)).
- Ensuring that employees know what to do, or who to notify if they feel unsafe or uncomfortable in the workplace.

If an employee develops symptoms of coronavirus (COVID-19) they should isolate themselves immediately, call the coronavirus information line on [1800 675 398](tel:1800675398) or their doctor and follow the self-isolation guidance available on the DHHS website ([link below](#)).

An employer's duty to eliminate or reduce risks associated with exposure to coronavirus (COVID-19) so far as is reasonably practicable includes ensuring that:

- employees know what to do or who to notify if they feel unwell or suspect they've been infected, according to the information provided by DHHS (see [link below](#))
- any unwell employee does not attend the workplace, including employees who have been tested for coronavirus (COVID-19) or who are confirmed coronavirus (COVID-19) cases

### **Working from locations other than the usual place of work**

In some circumstances, employers may require employees to work from a location other than their usual place of work.

This includes working in a different area, newly established clinics, improvised hospitals, contingency units and changes in home-based care. Whether this is a reasonably practicable measure depends

on the specifics of the workplace, the facilities available for employees and the ability for employees to do their work safely.

When making decisions about whether employees should work from a different location, employers must consult with employees and HSRs (if any), and should:

- Consider whether an employee is at a high risk of contracting coronavirus (COVID-19), or experiencing associated complications, before deploying them to an area of high exposure risk.
- Consider whether working from a different location will introduce additional risks, such as risks associated with hazardous manual handling or psychological risks associated with isolation.
- Keep up to date with information about coronavirus (COVID-19) risks and appropriate control measures.
- Seek advice specific to their circumstances, including from official advice issued by DHHS or other government agencies and legal providers. Some employee and employer organisations may also offer guidance.
- Establish communication systems for providing information to employees about working arrangements.
- Ensure that working hours are monitored and flexible, where possible.
- Ensure that support systems are in place for IT, equipment and personal needs.

Employers must also provide adequate induction and context specific training to workers who are redeployed to a location other than their usual place of work.

### **Notifiable incidents**

Under OHS laws, incidents where an employee tests positive for coronavirus (COVID-19) does not meet the definition of an incident to be notified to WorkSafe Victoria.

### **Legal duties**

Employers have duties under the Occupational Health and Safety Act 2004 (OHS Act), which include that they must, so far as is reasonably practicable:

- Provide and maintain a working environment that is safe and without risks to the health of employees and independent contractors.
- Provide adequate facilities for the welfare of employees and independent contractors.
- Provide such information, instruction, training or supervision to employees and independent contractors as is necessary to enable those persons to perform their work in a way that is safe and without risks to health.
- Monitor the health of employees of the employer.
- Monitor conditions at any workplace under the employer's management and control.

- Provide information concerning health and safety to employees, including (where appropriate) in languages other than English.
- Ensure that persons other than employees of the employer are not exposed to risks to their health or safety arising from the conduct of the undertaking of the employer. Consult with employees and HSRs (if any), on matters related to health or safety that directly affect, or are likely to directly affect them.

A person with management or control of a workplace must ensure, so far as is reasonably practicable, that the workplace and the means of entering and leaving it are safe and without risks to health.

Employees also have duties under the OHS Act, which includes that they must:

- Take reasonable care for their own health and safety and that of persons who may be affected by the employee's acts or omissions at a workplace.
- Co-operate with their employer with respect to any action taken by the employer to comply with a requirement imposed by or under the OHS Act.

The OHS Act gives HSRs a role in raising and resolving any OHS issues with their employer, and powers to take issues further if necessary. For more information see the guidance on powers for HSRs ([link below](#)).

## More information

- **Coronavirus disease (COVID-19) information from DHHS**

<https://www.worksafe.vic.gov.au/resources/coronavirus-disease-covid-19-information-dhhs>

- **DHHS: Health services and general practice - coronavirus disease (COVID-19)**

<https://www.worksafe.vic.gov.au/resources/dhhs-health-services-and-general-practice-coronavirus-disease-covid-19>

- **DHHS: About coronavirus (COVID-19)**

<https://www.worksafe.vic.gov.au/resources/dhhs-about-coronavirus-covid-19>

- **DHHS: Self-isolation**

<https://www.worksafe.vic.gov.au/resources/dhhs-self-isolation>

- **COVID-19 Pandemic Plan for Victorian Health Sector**

<https://www.worksafe.vic.gov.au/resources/covid-19-pandemic-plan-victorian-health-sector>

- **Infectious diseases**

<https://www.worksafe.vic.gov.au/infectious-diseases>

- **Preparing for a pandemic: a guide for employers**

<https://www.worksafe.vic.gov.au/resources/preparing-pandemic-guide-employers>

- **Powers of health and safety representatives**

<https://www.worksafe.vic.gov.au/powers-health-and-safety-representatives>

- **Fire hazards when manufacturing or storing alcohol-based hand sanitiser**

<https://www.worksafe.vic.gov.au/safety-alerts/fire-hazards-when-manufacturing-or-storing-alcohol-based-hand-sanitiser>