

## Ministry of Health Workforce Advice 13 March 2020

### COVID-19

#### General

Precautionary measures are in place in response to the evolving novel coronavirus (COVID-19) situation. This document provides guidance for Health Agencies relating to staff who have:

- travelled to COVID-19 affected countries;
- had close contact with a person confirmed to have COVID-19 infection;
- had casual contact with a person confirmed to have COVID-19 infection;
- have primary carer responsibilities for children directed to stay home from school/ daycare; and/ or
- who remain overseas and are unable to return

#### Further information on COVID-19:

- NSW Health:  
<https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx>  
<https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus-update.aspx>
- Clinical Excellence Commission:  
<http://cec.health.nsw.gov.au/keep-patients-safe/infection-prevention-and-control/Coronavirus-COVID-19>

#### Staff Returning from Overseas Travel

The below provides guidance for staff in NSW Health facilities who are **returning from overseas**:

(Visit: <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-covid-19-countries.htm> to see a current list of Higher and Moderate risk countries):

All health care workers, staff, healthcare students, volunteers and contractors who have travelled overseas in the previous 14 days must be advised to:

- contact their supervisor directly for advice prior to returning to work;
- monitor symptoms for 14 days since departure/last contact; and
- if fever or respiratory illness (even if mild) occur, isolate themselves immediately and seek medical attention as soon as possible. Call the healthdirect helpline 1800 022 222 for advice or call your GP or Emergency Department and call before attending. For further information see 'Leave Due to Illness' section on page 7 of this document.

In addition, if they:

(1)

**Travelled or transited through a [Higher Risk](#) country in the past 14 days:**

Until 14 days have lapsed from last leaving a Higher Risk country:

- must not attend work
- must self-isolate at home other than for seeking individual medical care

OR

(2)

**Travelled in any other overseas country in the past 14 days:**

Until 14 days have lapsed from last leaving an overseas country:

- may attend work
- must carefully monitor for symptoms and self-isolate immediately if they develop symptoms of fever or acute respiratory infection (even if mild) and be assessed for COVID-19. For further information see 'Leave Due to Illness' section on page 7 of this document.
- must practice [Social Distancing](#) when out in public and avoid large crowds

### **Employees\* Who Are Excluded from the Workplace for Self- Isolation**

Special Paid Leave may be granted to employees to enable self-isolation where required following return from a Higher Risk COVID-19 affected country and/ or following [Close Contact](#) with a confirmed COVID-19 case (see page 4).

**Health Agencies should consider whether it is possible for those employees to work from home**

- if employees cannot undertake their substantive duties from home, Health Agencies should consider assigning other meaningful work which could be performed at home. For example telehealth, project work, completion of mandatory training etc.

**Special Paid Leave should be granted for employees by a Health Agency where working from home is not practicable**

- if employees cannot perform any work from home they should be directed not to attend work and be placed on paid special leave for any rostered time during the 14 day isolation period (or balance thereof).

**Employees with existing approved leave (annual, long service, leave without pay) who travel privately overseas should be made aware of the following:**

If Smartraveller advice for an overseas destination is Level 2-4: '[do not travel](#)', '[reconsider your need to travel](#)' or '[exercise a high degree of caution](#)', due to COVID-19 on the date of their departure **and** the employee chooses to still travel **and** that country of destination subsequently is added to the Higher Risk COVID-19 country list which requires self-isolation from the workplace, they will **not** be granted paid special leave to cover that absence.

If, on the date of departure for private travel, Smartraveller advice is Level 1 '[exercise normal safety precautions](#)'; and the advice level changes to Level 2-4 after departure due to COVID-19, the employee may be granted Special Paid Leave, subject to the Health Agency considerations relating to Special Paid Leave described on page 4.

The list of Higher Risk COVID-19 countries can be accessed here:

<https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-covid-19-countries.htm>

The list of countries with Smartraveller warnings can be accessed here:

<https://www.smartraveller.gov.au/destinations>

**Special Paid Leave for Casuals**

Casual employees are generally not entitled to paid special leave. If a casual is required to self-isolate due to close contact COVID-19 exposure in the workplace, each situation should be considered on a case by case basis; however special paid leave may be appropriate for shifts which are already rostered up to 20 days.

The Health agency should also consider the nature of a casual employee's engagement; including the length of the casual engagement and whether the casual has regular and systematic shifts.

**\*Employee: means a person who is either engaged on a full time/ part time/ temporary/ exempt or casual basis under a contract of employment in the NSW Health Service**

## Special Paid Leave Provisions for Employees

In respect of COVID-19, special paid leave of up to 20 days **in total** may be granted to employees who are unable to work because they are:

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- Self-isolating due to travel or close contact COVID-19 exposure\*
- Caring for sick family members;
- Caring for family members due to closure of school/daycare; and/ or
- Unable to attend work due to transport disruptions or workplace closure.

\*See Page 2 - 'Employees who are excluded from the workplace for self-isolation'.

Special paid leave will be provided before other leave entitlements are accessed.

After the 20 days total special paid leave has been used, employees may access accrued leave entitlements (in accordance with normal processes).

### **Employees who remain overseas and are unable to return**

Available FACS leave can be used for employees unable to return home due to COVID-19. Districts should be flexible with other leave requests (e.g. ADO, Annual and Long Service Leave and Leave without pay if FACS leave has been exhausted). Special paid leave is not granted for this purpose.

## Staff who have Contact with a Confirmed Case of COVID-19

All health care workers, staff, healthcare students, volunteers and contractors who have been in contact with a confirmed case of COVID-19 must:

- contact your supervisor directly;
- monitor symptoms for 14 days last contact; and
- if fever or respiratory illness (even if mild) occur, isolate yourself immediately and seek medical attention as soon as possible. Call the healthdirect helpline 1800 022 222 for advice or call your GP or Emergency Department and call before attending. For further information see 'Leave Due to Illness' section on page 7 of this document.

In addition, if they:

(1)

### Are a **Close Contact** of a person confirmed to have COVID-19:

Until 14 days have lapsed from last contact:

- must not attend work
- must self-isolate at home other than for seeking individual medical care

(2)

### Are a **Casual Contact** of a person confirmed to have COVID-19:

- can continue to attend work if well
- must self-isolate and seek assessment if they develop fever or respiratory illness

**Note:** Close Contact does not include situations where staff had contact with a known confirmed COVID-19 case during work activity; where such contact was protected by the wearing of prescribed Personal Protective Equipment (PPE) for the duration of the contact.

## Leave Management and Workforce Supply Planning

Workforce units need to engage with employees about managing leave differently during COVID-19 and seek their support. This is important to ensure workforce supply to manage demand. A dedicated contact should be established within the Health Agency for the purposes of planning workforce supply.

Management of excessive leave is not the priority during the COVID-19 situation and additional flexibility is required where staffing resources are limited.

New requests for approval of secondary employment must be considered against the needs of the workforce surge plan particularly for employees in clinical or frontline support roles.

A key piece of work will be to identify employees with clinical skillsets and current registration who are not working in clinical 'patient facing' roles in anticipation that such information should be included for planning purposes in the Workforce Surge Plan.

### Event Planning

Agencies should review any planned events which involve meetings of large numbers of staff to minimise the absence of staff who are needed to assist with surge planning and service delivery. Consideration should be given to postponing these events or managing them in a different way (e.g. webinars, circulation of papers, etc).

### New Leave Requests and Approvals

As the COVID-19 situation progresses; Health Agencies should now suspend business as usual processes for leave approval (annual, long service, leave without pay) and establish in their surge plans how such new leave requests will be approved over the next six months.

#### Key points for consideration include:

- exceptional personal circumstances (e.g. bereavement, family, weddings)
- projected workforce supply for COVID-19
- high demand periods such as school holidays
- winter flu (surge in demand and possibility of increase numbers of employees absent due to personal illness/ family illness)
- strategies for employees to work outside their usual allocation to support high demand areas
- supporting settings where there are existing vacancies

**Existing Approved Leave**

Where leave (annual, long service, leave without pay) has already been approved in most instances this should proceed unless there is significant reason to withdraw approval. Health Agencies should anticipate that in some cases, employees may seek to cancel their existing approved leave due to COVID-19.

**Leave Due to Illness****Encourage Staff not to Attend Work When Unwell**

Staff who are unwell for any reason should not come to work in line with current established practice.

Where a Health Care Worker is unwell with fever and acute respiratory infection (symptoms relevant to COVID-19 and other illnesses), they should:

1. Be assessed for COVID-19 irrespective of travel; and
2. Self-isolate from onset of symptoms to when they get the assessment result; and
3. Stay away from work as they normally would until well (and in the case of a COVID-19 diagnosis, until 14 days has passed)

**Employees who are unable to work because they are sick:**

If an employee is sick due to COVID-19 or any other reason, current sick leave entitlements and conditions apply. Where sick leave is exhausted, Health Agencies may grant additional sick leave on a case by case basis.

**Granting of Paid Sick Leave to Employees who have been employed for Less Than 3 Months**

Award provisions for newly employed Full Time and Part Time NSW Health employees in some cases defer entitlement to paid Sick Leave for a period of 3 months from commencement.

Where a new employee's entitlement to paid Sick Leave is deferred; Health Agencies are encouraged to allow access to paid Sick Leave from commencement for eligible employees.

## Official Work Related Travel Arrangements for All Overseas and Domestic Travel (Including TESL)

It is anticipated that many pre-arranged overseas conferences and events will be impacted by participant withdrawal, flight cancellations and quarantine declarations.

### Domestic Travel

Health Agencies should review all currently booked domestic travel. Domestic travel should be restricted to essential travel only.

### Suspend New Official Overseas Travel Applications (Including TESL)

Health Agencies should suspend any new approvals of official overseas travel (regardless of the COVID-19 status of the destination); and consider alternatives to travel where practicable to do so. This will be continually monitored and reviewed.

### Official Overseas Travel Booked and Approved Prior to 5 March 2020 (Including TESL)

If Government Smartraveller advice indicates 'do not travel', 'reconsider your need to travel' or 'exercise a high degree of caution', travel is to be cancelled (including but not limited to COVID-19).

Otherwise:

- A documented risk assessment should be undertaken to determine whether such overseas travel should continue in light of the developing COVID-19 situation.
- The risk assessment should be undertaken as soon as practicable to do so, in order to minimise impact on the individual staff member/s and maximise potential for refunding/ crediting/ cancellation of bookings.
- Key considerations should include:
  1. The employee's safety while overseas
  2. Identified requirements of the workforce surge plan in relation to the employee
  3. Potential delayed return to Australia and potential quarantine period further delaying return to work once back in Australia
  4. Any exceptional circumstances
  5. NSW Health Public Health advice until departure: <https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx>
  6. COVID-19 travel information provided at <https://www.smartraveller.gov.au/news-and-updates/novel-coronavirus-covid-19>
- Where the status of the destination changes prior to departure and the Government Smartraveller advice indicates 'do not travel', 'reconsider your need to travel' or 'exercise a high degree of caution', (including but not limited to due to COVID-19) official overseas travel is to be cancelled and not proceed.

