

# COVID-19 WHS Advice for NSW Health



Workplace Relations Branch

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## Contents

General

Staff Support

Working within NSW Health facilities

Working in the community setting- Recommended principles for planning community based care

SafeWork NSW notification re: COVID-19

Incident reporting- IIMS/ ims+ COVID-19 exposures

Requests/ Refusal to undertake Work Duties in areas with COVID-19 Patients

Australian Health Protection Principal Committee Recommendations for Managing Vulnerable Workers

Scrubs, Uniforms, Aprons and Gowns

Working from Home or a Self-Isolation Location

COVID-Safe Workplace Considerations

COVID-Safe Workplaces- Focus Areas for Consideration

- General
- Hygiene Stations and Supplies
- Signage
- Aim for 1.5m and 4/ 2m2 Compliance
- Cleaning protocols
- Kitchens and break areas
- Lifts
- Meeting rooms
- Office areas
- Illness
- Entry Checking at NSW Health Facilities
- Start/ Finish Times & Transport
- Mental Health
- Vehicles
- Personal Protective Equipment
- Transitioning staff back to pre COVID-19 roles and/ or work locations

Continuity of Violence Prevention & Management Training During COVID-19

Further information on Coronavirus

## General

A range of infection prevention and control protocols are in place for the safety of staff, pre-dating the outbreak of novel coronavirus (COVID-19). These are supplemented by a range of COVID-19 specific protocols and training.

Clinical and support staff who work in clinical settings have existing knowledge about standard contact, droplet and airborne transmission precautions as part of training for their role; as well as COVID-19 specific training where required. Health agencies should regularly check that training for such staff is up to date and refresh where required; as well as frequently checking the Clinical Excellence Commission website for updates to infection prevention and control protocols: <https://www.cec.health.nsw.gov.au/keep-patients-safe/COVID-19/latest-resources>

Where infection control protocols are comprehensively followed this protects NSW Health staff from acquiring COVID-19 in their workplace.

However, in the course of providing health care, workers may come in contact with patients or other staff members who are infectious with COVID-19, but where it has not been possible to recognise their risk of infection.

The risk to health care workers in this situation is minimised by public health measures of quarantining contacts of COVID-19 cases. It is also minimised by regular hand washing, avoiding touching one's face, physical distancing where practicable; and by wearing the prescribed Personal Protective Equipment where required.

## Staff Support

### Keep staff updated on COVID-19

Knowledge about COVID-19 continues to evolve and develop rapidly. Health agencies should ensure that all staff are provided with timely, up to date information about COVID-19 at regular intervals and consider how to support staff who are psychologically impacted; as well as practical concerns about transmission/ contracting the virus.

### Engage your Employee Assistance Service/ Program

Health agencies should explore options to support staff via existing Employee Assistance Program (EAP) arrangements.

Actions may include:

- Raising the profile of the EAP service/ program within the health agency
- Encouraging staff to access available support services
- Increasing support services available to staff
- Providing onsite support sessions for staff where practical to do so

### Provide additional support to non-clinical staff

Particular care and attention should be placed upon ensuring that non-clinical staff are provided with information in a format that does not assume clinical knowledge. This will be especially important for non-clinical staff that work in or are required to enter clinical environments (e.g. ward administration staff, cleaning and portering staff, food services staff, employed and contracted maintenance staff).

## Working within NSW Health facilities

The risk of contracting COVID-19 is managed by specific additional precautions. Where such precautions are in place for a particular patient, bed or room (cohorted patients), they are signposted at the entry and associated personal protective equipment (PPE) is provided.

Where unsure of required precautions; local health agency based internal infection prevention & control teams should be approached for practical advice in the first instance; as such advice will consider the general requirements and the situational specific requirements (unique to patient cohort, treatment location etc). As the situation continues to develop this is subject to ongoing change.

The Clinical Excellence Commission has developed and regularly updates a range of resources in relation to prevention of COVID-19 transmission; including advice on respiratory protection requirements such as the use of surgical masks and respirators.

Further information is available at the following sources:

<https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus-update.aspx>

<http://www.cec.health.nsw.gov.au/keep-patients-safe/COVID-19>

## Working in the community setting- Recommended principles for planning community based care

Health Protection NSW and the Clinical Excellence Commission have provided guidance for community-based and outpatient health services in relation to managing COVID-19 risks.

Further information is available at the following sources:

[https://www.cec.health.nsw.gov.au/\\_data/assets/pdf\\_file/0020/644006/Chapter-7-COVID-19-IPAC-manual.pdf](https://www.cec.health.nsw.gov.au/_data/assets/pdf_file/0020/644006/Chapter-7-COVID-19-IPAC-manual.pdf)

<https://www.health.nsw.gov.au/Infectious/diseases/Pages/covid-19-community-outpatient.aspx>

## SafeWork NSW notification re: COVID-19

Notification to SafeWork NSW may be required in relation to a worker (or others including patients and visitors) arising from COVID-19 matters. Information is provided below to assist in determining if you need to notify SafeWork NSW of a Notifiable Incident via 13 10 50 is required. Given penalties can apply for failure to notify; if in doubt, notify.

Where a notification is made; SafeWork NSW have advised that in most cases their response would likely be administrative only for COVID-19 notifications; unless there was evidence that safe systems of work were not in place to manage the risk.

Statement of Regulatory Intent- SafeWork NSW Re: COVID-19:

<https://www.safework.nsw.gov.au/news/safework-public-notice/statement-of-regulatory-intent-covid-19>

**When SafeWork NSW notification re: COVID-19 is required:**

Health Agencies **are required** to notify SafeWork NSW of serious illnesses (including COVID-19) arising out of the conduct of the health agency including:

- **illness** requiring the person to have **immediate treatment as an in-patient in a hospital** and/or

- any **confirmed infection** to which the carrying out of work is a significant contributing factor, including any infection that is reliably attributable to carrying out work that involves providing treatment or care to a person, or that involves contact with human blood or body substances

**When SafeWork NSW notification is not required:**

Health agencies **are not required** to notify SafeWork NSW where a person requires self-isolation **due to work or non-work related** risk of COVID-19 exposure. Per the above; notification is only required where the person requires immediate treatment as an in-patient due to the exposure or has a confirmed COVID-19 infection.

For general information about notifying SafeWork NSW about notifying a work-related death, injury, illness or dangerous incident workplace injury or illness see:

<https://www.safework.nsw.gov.au/notify-safework/incident-notification>

**Incident reporting- ims+ COVID-19 exposures**

Wherever practical to do so, existing health agency processes for incident reporting using the Incident Management System Plus (ims+) should be followed in full.

Where a staff member indicates privacy concerns about being identified in the incident reporting system as exposed to COVID-19 and, or confirmed COVID-19 infection, in place of identifying them by name, date of birth etc, their employee number can be used as a unique identifier instead, with asterisks used in place of mandatory fields for name, date of birth etc.

SafeWork NSW have confirmed their approval of this approach, but have also indicated they will still require the usual affected party details when undertaking a notifiable incident investigation (name, date of birth, address, phone number).

**Requests/ Refusal to undertake Work Duties in areas with COVID-19 Patients**

Groups or individual staff members may indicate they do not feel safe in undertaking part/all of their normal work duties due to concerns about risk of exposure to COVID-19. Health Agencies should approach such situations in a way that is sensitive to the concerns of staff and provides such staff with the necessary support and assistance to undertake their normal work duties as required. Staff are to undertake their normal duties during this challenging period.

Staff are also required to comply with requirements of the current Public Health Order; which may include QR code use; surveillance testing and wearing of masks in accordance with the Order and advice from the Clinical Excellence Commission.

Should groups or individual staff members refuse to or request not to undertake part/all of their normal work duties due to concerns about risk of contracting COVID-19, contact the following for situationally specific advice:

Your Health Agency:

- Risk Management & Work Health and Safety Teams
- Infection Prevention and Control Teams
- Industrial Relations Teams (industrial aspects)

These teams may contact Ministry of Health, Workplace Relations Branch via [MOH-WorkplaceRelationsCOVID-19@health.nsw.gov.au](mailto:MOH-WorkplaceRelationsCOVID-19@health.nsw.gov.au) or 02 9391 9360.

## Australian Health Protection Principal Committee Recommendations for People at Risk of COVID-19

AHPPC have provided advice; updated periodically for people at high risk and others at moderate risk of severe illness from COVID-19:

<https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/advice-for-people-at-risk-of-coronavirus-covid-19>

### Key factors for Health Agencies to consider when Undertaking a Risk Assessment in relation to a COVID-19 Vulnerable Worker

**Factors include:**

1. Whether the worker meets the AHPPC criteria for people at risk of serious illness
2. The nature of the duration, frequency and closeness of the worker's interaction with patients
3. Whether the worker is trained in and able to effectively use recommended PPE when in contact with patients
4. The opportunity for alternative work to be performed that does not expose the employee to COVID-19 related whether in the workplace or through access to flexible working practices

As significant parts of New South Wales are currently subject to Red and Amber Alerts; it is appropriate for Health Agencies to review existing arrangements for vulnerable workers.

This would involve a review of existing risk assessments in consultation with affected individual workers; in consideration of the higher level of circulating virus and any change to their health condition/s.

## Scrubs, Uniforms, Aprons and Gowns

The Clinical Excellence Commission has provided advice on Scrubs, Uniforms, Aprons and Gowns and COVID-19 which may assist in resolving any related concerns from staff:

[https://www.cec.health.nsw.gov.au/data/assets/pdf\\_file/0005/644009/Chapter-4-COVID-19-IPAC-manual.pdf](https://www.cec.health.nsw.gov.au/data/assets/pdf_file/0005/644009/Chapter-4-COVID-19-IPAC-manual.pdf)

## Working From Home or a Self-Isolation Location

Throughout the COVID-19 pandemic; Health Agencies are likely to have experienced increased numbers of staff working from home or a self-isolation location where practical for the staff member and the health agency.

Reasonable steps should be taken to ensure a worker's work area meets workplace health and safety requirements. An assessment of the work area should be carried out, where possible, before the worker starts working from the location; SafeWork NSW have provided a checklist to assist with assessing work areas.

SafeWork NSW have provided information about working remotely, including a working from home [checklist](#) and [guidance for employers](#). SafeWork Australia have also provided some advice which is available [here](#).

The current [Temporary Movement and Gathering Restrictions Public Health Order](#) directs employers to allow employees to work from home (where it is reasonably practicable to do so).

Whether a staff member can work from their place of residence is a question of whether it is reasonable to work from home or self-isolation location. Whether it is reasonable to work from home or self-isolation location will depend on:

1. The needs of the health agency (including any directions of the health agency for staff to physically attend at workplace);
2. The inherent requirements of the job; and
3. Whether the staff member's home or self-isolation location is sufficiently equipped to allow them to fulfil the inherent requirements of their job from home safely & reasonably.

Health agencies will continue to keep arrangements under review in relation to any changes in community prevalence.

Further information:

<https://www.nsw.gov.au/covid-19/safe-workplaces/employers/working-from-home>

## COVID-Safe Workplace Considerations

A range of resources are available from SafeWork Australia, SafeWork NSW and the Clinical Excellence Commission. The: [SafeWork Australia's Fact Sheet](#) has some general advice and the [SafeWork Australia COVID-Safe Workplace Checklist](#) is a good place to start in terms of considering measures to ensure a COVID-Safe work environment along with their [COVID-19 Risk Assessment](#) advice.

## National COVID-19 Safe Workplace Principles:

Recognising that the COVID-19 pandemic is a public health emergency, that all actions in respect of COVID-19 should be founded in expert health advice and that the following principles operate subject to the measures agreed and implemented by governments through the National Cabinet process:

1. All workers, regardless of their occupation or how they are engaged, have the right to a healthy and safe working environment.
2. The COVID-19 pandemic requires a uniquely focused approach to work health and safety (WHS) as it applies to businesses, workers and others in the workplace.
3. To keep our workplaces healthy and safe, businesses must, in consultation with workers, and their representatives, assess the way they work to identify, understand and quantify risks and to implement and review control measures to address those risks.
4. As COVID-19 restrictions are gradually relaxed, businesses, workers and other duty holders must work together to adapt and promote safe work practices, consistent with advice from health authorities, to ensure their workplaces are ready for the social distancing and exemplary hygiene measures that will be an important part of the transition.
5. Businesses and workers must actively control against the transmission of COVID-19 while at work, consistent with the latest advice from the [Australian Health Protection Principal Committee \(AHPPC\)](#), including considering the application of a hierarchy of appropriate controls where relevant.
6. Businesses and workers must prepare for the possibility that there will be cases of COVID-19 in the workplace and be ready to respond immediately, appropriately, effectively and efficiently, and consistent with advice from health authorities.
7. Existing state and territory jurisdiction of WHS compliance and enforcement remains critical. While acknowledging that individual variations across WHS laws mean approaches in different parts of the country may vary, to ensure business and worker confidence, a commitment to a consistent national approach is key. This includes a commitment to communicating what constitutes best practice in prevention, mitigation and response to the risks presented by COVID-19.
8. Safe Work Australia (SWA), through its tripartite membership, will provide a central hub of WHS guidance and tools that Australian workplaces can use to successfully form the basis of their management of health and safety risks posed by COVID-19.
9. States and Territories ultimately have the role of providing advice, education, compliance and enforcement of WHS and will leverage the use of the SWA central hub in fulfilling their statutory functions.
10. The work of the National COVID-19 Coordination Commission will complement the work of SWA, jurisdictions and health authorities to support industries more broadly to respond to the COVID-19 pandemic appropriately, effectively and safely.



<b>COVID-Safe Workplaces- Focus Areas for Consideration</b>	
General	<p>Links to a range of useful COVID-19 resources for the workplace:</p> <p><a href="#">SafeWork Australia COVID-19 Information for Workplaces</a></p> <p><a href="#">SafeWork NSW COVID-19 Resources</a></p> <p><a href="#">Federal Department of Health COVID-19 Information for Employers</a></p> <p><a href="#">CEC COVID-19 Advice</a></p> <p><a href="#">Australian Government Coronavirus App</a></p> <p><a href="#">Covid Safe App</a></p> <p><a href="#">Australian Government Whatsapp Channel COVID-19</a></p> <p><a href="#">NSW Health COVID-19 Communities of Practice</a></p>
Hygiene Stations and Supplies	<p>In addition to existing hygiene stations and equipment commonly located in and around clinical areas and at significant building entry/ exit points; consider addition stations and equipment for:</p> <ul style="list-style-type: none"> <li>• Administration and office support areas</li> <li>• Common areas regularly populated with staff</li> <li>• Shared equipment such as printers, scanners and workstations</li> <li>• Meeting rooms</li> <li>• Kitchen and break area facilities</li> </ul> <p>For additional information: <a href="#">SafeWork Australia Health Hygiene and Facilities Checklist</a></p>
Signage	<p>Consider strategic placement of signage reminding staff, visitors and patients of:</p> <ul style="list-style-type: none"> <li>• Physical distancing requirements</li> <li>• Hand hygiene</li> <li>• Cough/ sneezing etiquette</li> <li>• Remaining home and seeking assessment and testing if unwell</li> </ul> <p>For additional information: <a href="#">SafeWork Australia COVID-19 Signage</a></p>
Aim for compliance with Square Metre Rules	<p>Hospitals and Health Services are deemed 'exempted gatherings' under Schedule 2 of the Public Health (COVID-19 Restrictions on Gathering and Movement) Order</p> <p>This allows for exemptions from some of the physical distancing requirements, but we still aim to apply all requirements as widely as possible; and in the context of a wider COVID-Safe plan. Due to the nature of our business it is not always practicable to achieve physical distancing for each person in every environment we operate; particularly in clinical areas.</p>

	<p>Despite this; we must identify and implement ways to maximise physical distancing between staff; staff and visitors and staff and patients so far as it is reasonably practicable to achieve.</p> <p>Encourage staff to feel comfortable in raising concerns if they feel physical distancing is being inadvertently breached by colleagues, visitors or patients; as well as any suggestions they may have to enhance physical distancing in their work environment.</p> <p>For additional information:  <a href="https://www.nsw.gov.au/covid-19/rules/square-metres-rules">https://www.nsw.gov.au/covid-19/rules/square-metres-rules</a></p>
<p>Cleaning protocols</p>	<p>Consult with your health agency infection prevention and control and cleaning experts to determine what best practice looks like for your work environments.</p> <p>In addition to regular cleaning schedules and protocols for cleaning clinical areas; consider:</p> <ul style="list-style-type: none"> <li>• Pre and post use touch point cleaning</li> <li>• End of day cleaning processes</li> <li>• Meeting rooms, break areas, kitchens, bathrooms and shared equipment</li> </ul> <p>For additional information:  <a href="#">SafeWork Australia Cleaning to Prevent the Spread of COVID-19</a>  <a href="#">SafeWork Australia Cleaning Checklist</a>  <a href="#">SafeWork Australia Recommended Cleaning Supplementary Information</a></p>
<p>Kitchens and break areas</p>	<p>Kitchen and staff break/ 'tea rooms' may need to be managed differently during COVID-19.</p> <p>For such facilities which ordinarily have high volumes of staff in peak times; consider staggering breaks/ implementing signage reminding staff of physical distancing requirements and the maximum room capacity.</p> <p>Cleaning of such areas may need to be reviewed and increased above what it was previously; see 'cleaning protocols' section of this advice for further information.</p> <p>The CEC have also published advice in relation to using shared spaces:  <a href="#">CEC Safe Work Practice for Health Workers Using a Shared Space</a></p>
<p>Lifts</p>	<p><b>Lifts</b></p> <ul style="list-style-type: none"> <li>▪ Even if workers and others only spend a short amount of time in a lift each day, there is still a risk of exposure to COVID-19 that you must eliminate or minimise so far as reasonably practicable.</li> </ul>

- See our information on the meaning of [reasonably practicable](#).

- There is no specific limit to the number of people allowed in a lift, however you must still ensure, as far as you reasonably can, that people maintain physical distancing in lifts and lift waiting areas.
- Remember, you must consult with workers and their representatives (e.g. health and safety representatives (*HSRs*)) on health and safety matters relating to COVID-19. This includes consulting workers and their representatives on what [control measures](#) to put in place to minimise their risk of exposure to COVID-19 in the workplace, including when using lifts.
- You must also consult with the building owner/manager and other employers in the building about the [control measures](#) to be implemented to address the risk of COVID-19. You may not be able to implement all of the [control measures](#) yourself but must work with others to ensure those measures are put in place.

#### **What can I do to manage the risk of COVID-19 transmission in lifts?**

- Safe use of lifts is best achieved through a combination of measures, determined in consultation with workers, including those that control the number of people needing to use a lift at any one time.

This includes:

- reducing the number of workers arriving and leaving buildings and using lifts in peak periods, where possible (e.g. stagger start and finish times for workers by 10-15 minutes per team or group)
- maintaining working from home arrangements for some staff (where this works for both you and your workers). This could include splitting the workforce into teams with alternating days in the workplace (e.g. rotate teams so they are one week in the office and the other week at home), and
- changing lift programming to facilitate more efficient flow of users – e.g. decrease the time that doors stay open on each floor (where safe to do so) or where there are multiple lifts, assign specific lifts to certain floors based on demand (e.g. lift A to service floors 1-5, lift B to service floors 6-8 etc).
- Where workers and others use lifts it is still important that they physically distance themselves to the extent possible when waiting for a lift and when in the lift. You must do what you reasonably can to ensure crowding in and around lifts does not occur.
- In the lift lobby or waiting area:
  - ensure workers and others maintain a physical distance of 1.5 metres, to the extent possible
  - implement measures at waiting areas for lifts, such as floor markings or queuing systems. Also create specific pathways and movement flows for those exiting the lifts where

	<p>possible (you may need to consult with your building manager or other employers in the building to ensure this occurs). You could consider engaging someone to monitor compliance with physical distancing measures where appropriate</p> <ul style="list-style-type: none"><li>○ place signage around lift waiting areas reminding users to practice physical distancing and good hygiene while waiting for and using lifts, including to wait for another lift if the lift is full</li><li>○ display an advisory passenger limit for each lift – these limits could be temporarily adjusted up by one or two during peak periods where additional demand is unavoidable (subject to it not leading to overcrowding in lifts) to facilitate extra movement of workers and to prevent overcrowding in waiting areas. This may result in fewer persons travelling in a lift at any one time to ensure workers and others maximise physical distance from each other, to the extent possible</li></ul> <ul style="list-style-type: none"><li>▪ Within lifts:<ul style="list-style-type: none"><li>○ users of lifts must maintain physical distancing, to the extent possible. Lifts must not be overcrowded and users should avoid touching other users.</li><li>○ workers must practice good hygiene in lifts. If they do need to cough or sneeze during a journey they must do so into their arm or a clean tissue.</li><li>○ place signage in the lift reminding workers and others to practice good hygiene by washing their hands, or where this is not possible, using appropriate hand sanitiser, after exiting the lift, particularly if they touched lift buttons, rails or doors – see also our information on hygiene</li><li>○ implement regular cleaning of high touchpoints such as lift buttons and railings – see also our information on cleaning.</li></ul></li><li>▪ Staff must not to come into work, including using lifts, if they are unwell.</li></ul> <p><b>New risks</b></p> <ul style="list-style-type: none"><li>▪ In some cases, depending on the design of a building, stairs may be an option to reduce demand on lifts. If workers and others are to use stairwells or emergency exits as an alternative to using lifts, you must identify and address any new <i>risks</i> that may arise. For example:<ul style="list-style-type: none"><li>○ the increased risk of slips, trips and falls particularly if the stairs are narrow and dimly lit</li><li>○ the risk that arises when opening and closing heavy fire doors, and</li><li>○ the risk that a person may become trapped in the stairwell.</li></ul></li><li>▪ You must also consider workers' compensation arrangements and whether your contract of tenancy allows for workers to use stairs, other than in an emergency.</li><li>▪ You must also consider how other existing <i>WHS</i> measures will be impacted if you allow workers and others to use stairwells or emergency exits. For example<ul style="list-style-type: none"><li>○ does increased usage of emergency exits and stairwells impact your emergency plans and procedures? See also our <a href="#">information on emergency plans</a></li></ul></li></ul>
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	<ul style="list-style-type: none"> <li>○ will stairwell usage increase the risk of fire doors being left open?</li> </ul>
<p>Meeting rooms</p>	<p>Meeting rooms may need to be managed differently during COVID-19.</p> <p>Consider staggering breaks/ implementing signage reminding staff of physical distancing requirements and the maximum room capacity.</p> <p>You may need to temporarily:</p> <ul style="list-style-type: none"> <li>● Adjust advertised seating capacity of a room</li> <li>● Remove chairs to support reduced capacity</li> <li>● Adjust the layout of furniture in the room</li> <li>● Implement 'sit here signs' to indicate the safe positions to be occupied; similar to that used on public transport</li> </ul> <p>Cleaning of such areas may need to be reviewed and increased above what it was previously; see 'cleaning protocols' section of this advice for further information.</p>
<p>Office areas</p>	<p>Office areas may need to be managed differently during COVID-19.</p> <p>Every workplace is different in terms of the physical environment; work being undertaken and the staff occupying the space.</p> <p>Not all of the following will be able to be applied to every office environment; but consider:</p> <ul style="list-style-type: none"> <li>● Staggering start, finish and break times where appropriate</li> <li>● Moving work tasks to different areas of the workplace or off-site if possible</li> <li>● Utilise flexible arrangements where possible within Award requirements</li> <li>● Minimising the number of people within an area at any time. Limit access to the workplace or parts of the workplace to essential workers only</li> <li>● If possible, separating workers into dedicated teams and have them work the same shift or work in a particular area and consider whether these dedicated teams can have access to their own meal areas or break facilities (subject to Award requirements- check with your health agency Workforce experts)</li> <li>● Ensuring each worker has their own equipment or tools and/ or cleaning protocols if equipment must be shared</li> <li>● Adjustments to seat plans etc. to support physical distancing</li> <li>● Cleaning may need to be reviewed and increased above what it was previously; see 'cleaning protocols' section of this advice for further information</li> <li>● Have plans and systems in place to monitor and control the numbers of workers and others in the workplace at any given time</li> <li>● Provide hand sanitiser at ample locations throughout workplace</li> <li>● Provide surface wipes to clean workstations, and workstation equipment such as monitors, phones, keyboards and mice</li> </ul>

	<ul style="list-style-type: none"> <li>• Clean surfaces thoroughly all high contact areas such as doors, handles, kitchen surfaces, bathroom surfaces, printers, lifts, with appropriate cleaning agents</li> <li>• Place reminders and cues about precautions around the workplace, for social distances, hand hygiene, cough and sneeze behaviour. Use hard copy messages such as posters, as well as soft copy (such as email banners, Yammer, Teams) to provide the key messages</li> <li>• Consider physical, distance or other engineering controls to protect staff and customers at social interaction points such as counters / service desks to maintain social distancing or provide barrier controls</li> </ul>
Illness	<p>NSW Health recommends any healthcare workers, staff, students and volunteers with respiratory symptoms or unexplained fever should be tested for COVID-19.</p> <p>For information about COVID-19 testing laboratories and dedicated collection centres across NSW refer to:</p> <ul style="list-style-type: none"> <li>• COVID-19 clinics</li> <li>• Private testing collection centres</li> <li>• NSW Health Pathology public testing laboratories</li> </ul> <p>Healthcare workers with respiratory symptoms or unexplained fever must immediately self-isolate and should not return to duties until tested and cleared from COVID-19. They should follow the home isolation guidance for people suspected to have COVID-19.</p> <p>Supervisors and managers must ensure that procedures are in place to ask every staff member at the beginning of each shift whether they have recent onset of respiratory symptoms or fever, and if so, to ensure staff who have symptoms are either excluded from work or assessed for COVID-19 and, if COVID-19 testing is recommended, to self-isolate until COVID-19 is excluded.</p>
Entry Checking at NSW Health Facilities	<p>All staff and visitors entering a NSW Health hospital or health service must be screened.</p> <p>COVID-19 health screening involves a range of requirements as described in link below. Staff must follow all screening requirements.</p> <p>Please visit the NSW Health COVID-19 screening at NSW healthcare facilities site for information on entry screening requirements as regularly updated:</p> <p><a href="https://www.health.nsw.gov.au/Infectious/covid-19/Pages/screening-procedure-nsw-health-facilities.aspx">https://www.health.nsw.gov.au/Infectious/covid-19/Pages/screening-procedure-nsw-health-facilities.aspx</a></p>
Start/ Finish Times & Transport	<p>Consider adjustment to start and finish times for staff experiencing difficulty travelling to and from work; especially during peak hours in metropolitan areas.</p>

	<p>Consider Award requirements for varying hours of work and consult your health agency workforce team for advice.</p> <p>For additional information:  <a href="#">Transport NSW COVID-19: Travel advice and information</a></p>
Mental Health	<p>It is important for health agencies to provide, so far as reasonably practicable, a mentally healthy work environment for their workers, ensuring that workers stay both physically and mentally healthy during this time.</p> <p>Promote availability of your Employee Assistance Program and other support mechanisms available to staff that may be specific to your health agency.</p> <p>For additional information:  <a href="#">SafeWork Australia COVID-19 Mental Health Resources</a>  <a href="#">SafeWork NSW COVID-19 Mental Health Resources</a>  <a href="#">Beyond Blue Coronavirus Mental Wellbeing Support Service</a></p>
Vehicles	<p>Where possible have your workers travel in different vehicles. If you can't remove the need for workers to travel together, physical distancing can be difficult.</p> <p>There are things you can do including:</p> <ul style="list-style-type: none"> <li>• Ensure passengers and drivers are spread between the front and back seats where possible</li> <li>• Provide PPE and hand sanitiser to workers</li> <li>• Ensure workers only handle their own tools and bags</li> <li>• Thoroughly clean the vehicle at the end of each shift, focusing on high touch point surfaces such as door handles, seats, steering wheels, seatbelts and window controls</li> <li>• Ensure workers set the air-conditioning to external airflow rather than recirculation</li> <li>• Encourage workers to practice good personal hygiene, including sneezing or coughing into their elbow away from others</li> <li>• Encourage workers to stay away from work if they are unwell.</li> </ul>
Personal Protective Equipment	<p>The Clinical Excellence Commission publishes a range of advice in relation to PPE requirements in the healthcare environment.</p> <p>This advice can be found <a href="#">here</a></p>
Work Related Functions and Gatherings	<p>Due to the current elevation in community prevalence of COVID-19 Health Agencies should avoid events which involve meetings of large numbers of staff.</p>

## Continuity of Violence Prevention & Management Training During COVID-19

### Virtual Delivery Option: Personal Safety Training (Violence Prevention and Management)

HETI continues to support the delivery of Personal Safety training in a virtual environment where there is no alternative that meets local risk assessment guidelines and local infection control requirements.

Where a District/Network is seeking to utilise this delivery method the appropriate steps are:

1. Contact HETI for advice on the framework in place to deliver this virtual training
2. Deliver the training using adult learning principles and best practice in a virtual education environment
3. Record the training in the Local LMS folder against the approved equivalent course

### Continued Face to Face Delivery Option: Personal Safety and/or Team Restraint Training (or approved equivalent programs)

Where a District determines that it is in a position to recommence face to face Personal Safety and/or Team Restraint Training, the following controls must be put in place:

- Consultation occurs with local infection control staff or the local Public Health Unit to identify and determine any specific risk in relation to the planned training site.
- Specific COVID related questions are added to the pre training assessment to ascertain:
  - If the participant has had close personal contact with a person who has been confirmed to be COVID-19 positive or
  - If the participant has a chronic condition that would make the participant more vulnerable if exposed to COVID-19
- Vulnerable staff who wish to be trained will be identified as part of the pre-training contact and may be required to discuss this with their GP and/or Specialist prior to participating.
- Participants numbers are guided by a local risk assessment and local infection control staff or the local Public Health Unit. Risk assessment considerations include but are not limited to:
  - Physical training environment size, layout, ventilation and flooring surface
  - Cleaning protocols
  - Infection prevention measures including hand hygiene before and after contact, PPE if indicated
  - Grouping participants for physical components of training to minimise the number of participants each participant has physical contact with



- Prior to the commencement of training each day all participants will be screened for symptoms:
  - Temperature testing to be done prior to commencement of training
  - If participants have any symptoms, they will not be allowed to commence on that day.
- PPE selection and use to be guided by the risk assessment as part of the broader consideration of control measures to ensure the safety of facilitators and participants.
- Hand hygiene protocols are to be strictly followed, and hand washing is to be reinforced regularly throughout each day. Product will be made available for all participants to use before and after any activity during which they touch another person.
- Trainers should review the training program to assess where demonstrations, role plays and other teaching strategies can be engaged more frequently to support learning so that practicing holds are minimal.
- Physical distancing is to be implemented when not practicing holds or evasive self-defence techniques.
- All equipment and mats being used will be appropriately cleaned at the end of each day.

## Further information on Novel Coronavirus:

- NSW Government  
<https://preview.nsw.gov.au/covid-19>
- NSW Health:  
<https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx>
- Clinical Excellence Commission:  
<http://www.cec.health.nsw.gov.au/keep-patients-safe/COVID-19>
- SafeWork Australia:  
<https://www.safeworkaustralia.gov.au/doc/coronavirus-covid-19-advice-employers>
- SafeWork NSW:  
<https://www.safework.nsw.gov.au/resource-library/COVID-19-Coronavirus>