



# **COVID-19 MANAGEMENT PLAN**

**Version 2.1**

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## Document Version

Date	Version	Author
19 March 2020	Version 1.6	National Management Team

## Overview and Current Context

Able Australia continues to monitor the impact and spread of COVID-19. COVID-19 has now spread to most countries around the world. Symptoms include fever, fatigue, temperature, dry cough and runny nose. We are closely following developments and advice from various national and international government bodies.

Above 80% of those with COVID-19 recover without needing any special treatment. Those most at risk from the disease are the elderly and those with pre-existing health problems. COVID-19 is thought to be spread mainly through person – to – person contact (i.e. cough and sneezing)

At present no Able Australia employees, volunteers, clients have been confirmed to have COVID-19, nor have any Able Australia offices been subject to known exposure.

Able Australia is preparing for the potential impact of the disease which may involve community transmissions and state/ local government actions such as school closures and movement restrictions.

This document sets out Able Australia's response to COVID-19, both immediate and in the event of identified trigger events. This response will be reviewed continually by the Executive Team in light of swiftly changing global and local developments.

### Current Organisational Situation

- COVID-19 has been declared a pandemic by the World Health Organisation, and Australia has declared a health emergency.
- Able Australia has developed a range of COVID-19 management plans in line with Government advice.
  - Ensure best practice in infection control and management of CV
  - Communicate with staff, families and carers
  - Plan for the prevention, containment and management of incident of CV.
- The Able Australia executive and management are currently meeting daily to review the situation and risk.
- The executive will call together the Emergency Management Team if COVID-19 is confirmed at any service. They will provide information, advice and a plan of action. It is important that you escalate any situations relating to this to management, prior to making decisions.
- When incurring extra costs specifically related to COVID-19 (not including accumulation of general goods that will otherwise be used) – utilise code 9056.

## What is COVID-19?

- [Symptoms](#) include fever, coughing, sore throat, fatigue, and shortness of breath. Symptoms can range from mild illness to pneumonia.
- Some people will recover easily, and others may get very sick very quickly.
- For More information see the [Able Australia Intranet](#) for links to recommended pages to keep updated, and material to support awareness.
- Call the Australian government's **Coronavirus Health Information Line** on 1800 020 080.

### REMEMBER

- This can be a trying time for both clients and staff
- Continue to be patient and kind to one another
- Use Employee Assistance Program as required (1300 130 130)
- Provide clients with additional emotional support as required
- Avoid being overly dramatic in shared workspaces
- Understand and respect some people may **not** want to talk about COVID-19
- Do not don/use extra PPE (gowns/masks) until you have been given direct instruction to do so (conserve supply)

## Able Australia COVID – 19 Response Priorities

Able Australia will continue to implement precautionary measures to help minimise the risk of COVID-19 exposure.

1. Ensuring the health, safety and well-being of our employees, volunteers and clients.
2. Focusing on providing our clients with high quality services as far as is practicable.
3. Taking actions to support community spread of the virus.
4. Closely assess the impact of COVID-19 on our communities and identify ways to safely extend support to those in need.

## Executive summary of current actions

What	Who	How	By When	Completed
Implement additional hygiene measures / communications	Exec Leaders	<ul style="list-style-type: none"> <li>Emails</li> <li>Posters</li> <li>Cleaning Schedules</li> </ul>	13/3/20	✓
Gather information regarding upcoming staff work and private travel plans	Exec Area Managers	Altered Annual Leave form Local Plans	Leave form by 5/3/20 Ongoing	✓
Identify / confirm which services / clients will be heavily impacted	Exec Area Managers	Local plans to inform organisational plan	5/3/20	✓
Identify which personnel/ teams are critical to operations, make plans to mitigate risk	Exec	Document in organisational plan	10/3/20	In progress
Identify IT capacity for larger numbers of staff to work remotely	GM CS	5G Citrix Licences	13/3/20	✓
Nominate a central person to manage information	ND Marketing & Engagement	Document in Organisational Plan	5/3/20	✓
Define primary organisational communication channels regarding COVID-19 responses		Organisational Plan	5/3/20	✓
Limit non-essential work travel	Exec		5/3/20	✓
Identify which employees can/not work from home	Exec Area Managers		16/3/20	
Monitor public health notices	Exec		Ongoing	
Prepare messaging for families and clients	ND Marketing & Engagement	Emails Letters	13/3/20	ND Marketing & Engagement

## Communication Response Team and Channels

Name	Title
Kate MacRae	CEO
Peter Batsakis	General Manager Corporate Services
Lynette McKeown	National Director Quality & Accommodation
Chris Stallard	National Director Community
Angela Politis	National Director People & Culture
Chandi Piefke	National Director Marketing & Engagement
Richard Nelson	National Director Service Development
James Digby	Internal Business Consultant
Bill Iverach	Service and Operational Manager, Tasmania
Romi Tariq	Area Manager
Madeleine Johnson	Area Manager
Anne-Marie Wendt	Area Manager
Bryce Smith	Area Manager
Daniel Barry	Area Manager
Frances Touber	Area Manager
Jennifer Oak	Area Manager
Louise Sullivan	Area Manager

### As needed

- **Quality, P&C and Support staff**

The response team will meet as required to assess current status/ situation – prioritise meeting to discuss urgent issues (Via Zoom).

### COMMUNICATION CHANNELS

- Email is the primary communication channel
  - All email messages also placed on intranet and printed off in each workplace.
- Area Managers accountable to ensure messages passed onto their team members (in cases where people may not have access to emails).
- Central information kept on [SharePoint](#) (past communications, posters links, and latest information).
- Response Team to communicate urgent emerging issues via SMS.

### LEARNING AND DEVELOPMENT RESOURCES

- All additional COVID19- training is accessible on [LearnAble](#). For staff working directly with clients, it is highly recommended to watch these videos.

# Able Australia's COVID-19 - Response Plan

## What can you do for COVID-19?

### INFECTION PREVENTION AND EARLY DETECTION

Able Australia teams must take the following steps:

#### Social Distancing

1. Avoid close contact where possible
2. Do not attend large social gatherings
3. Think about community access alternative such as visiting outdoor spaces instead of shopping centres

**Close contact** is only with a confirmed case of COVID-19 – it is larger than 15 minutes face-to-face (closer than 1 meter) or the sharing of an enclosed space for more than two hours. This does not include those wearing recommended personal protective equipment (PPE). Contact needs to have occurred during the period of 24 hours prior to onset of symptoms of a confirmed case.

### KEEP YOUR ENVIRONMENT CLEAN

1. Use the attached [Site cleaning Procedure Checklist](#) to thoroughly clean the environment.
2. Able Australia expects cleaning to be conducted:
  - a. At least twice per day if no COVID-19 is detected at the site
3. Follow [Able Australia Waste Management Policy](#)

### PRACTICE HAND-HYGIENE AND LEARN APPROPRIATE USE OF PPE

- Watch mandatory videos on [Learnable / Litmos](#)
- Practice thorough Handwashing
- Use gloves as required

### MONITOR CLIENTS AND YOURSELF FOR SYMPTOMS (INCLUDING TEMPERATURE)

1. Monitor body temperature of clients on entry to Able Australia sites, and every 4-8 hours whilst on site (see [Able Australia Body Temperature Measurement Procedure](#)).
2. Watch for symptoms of COVID-19 - fever, coughing, sore throat, fatigue, or shortness of breath.
3. Place the [COVID-19 resources](#) and [posters](#) up in your workplace – Include the [Service Flyer for All Doors](#).



## Infection Management

Able Australia teams must take the following steps:

### CONTINUE PREVENTION AND EARLY DETECTION PRACTICES (ABOVE)

#### ISOLATION

If person is unwell/showing symptoms isolate them to separate room with a closed door.

1. Minimise contact with others.
2. Prevent spread of illness (noting it may not be COVID-19)
  - a. If at day-service request that the client/staff return home
  - b. If a residential service, clients should be monitored and medical attention sought as required (see [COVID-19 Self-Assessment Tool](#) for guidance on if test for COVID-19 is needed). Staff should return home.

#### TEMPERATURE

- Follow the [Able Australia Body Temperature Measurement Procedure](#) and the [COVID-19 Self-Assessment Tool](#).

#### ESCALATION

- Escalate all cases to your manager/On-Call.
- Notify your Area Manager or the on-call manager of contact with any suspected cases of COVID-19 or other illness.

## If the Department of Health confirms case of COVID-19

### Continue Infection Management & Prevention & Early Detection (above) Increase

#### CLEANING SCHEDULE

1. Able Australia expects cleaning to be conducted:
  - a. At least 4 times per day (every 4-6 hours) if COVID-19 has been detected at the site
  - b. Items/surfaces touched by individuals with confirmed case of COVID-19

#### EMERGENCY RESPONSE TEAM

1. The Able Australia Emergency Response Team will be activated to support the local team if any cases of COVID-19 are confirmed.
2. The Emergency Response Team work with the local team to create a tailored plan
  - a. This will include Personal Protective Equipment (PPE) to enable safe practices in the workplace

## **ISOLATION/NO VISITORS**

1. A No Visitor Policy will be put in place.
2. The Health Department will be notified, and management will proceed as they advise.

## **Return to business as usual**

Once clearance has been provided by Department of Health for each case, we will return to the infection prevention and early detection stage.

Once the Health Emergency status has been removed, and the Government and World Health Organisation (WHO) advise us to – Able Australia will return to business as usual and will remove extra measures created for COVID-19.

## Local Area Plan for COVID-19 (Residential Services)

### GENERAL

Able's Emergency Response team is accountable for assessing and managing risk associated with COVID-19. Able's COVID-19 Plan outlines the organisational strategies Able are taking to prevent, detect (early) and manage COVID-19. The Local Area Plans for COVID-19 will outline the local assessment and response.

Location	
Program/Service	
Team Leader / Area Manager	
Number of Residents	
Date	

## LOCAL ASSESSMENT

### LOCAL STAFF AUDIT

It is important that we understand the local staffing profile to adequately plan for a local response to COVID-10. Collecting the following information will identify:

1. Current staff capacity
2. Additional staff capacity
3. Emergency contact details.

Please complete the following table for all staff who work in your location. **NOTE - ALL STAFF ARE TO RECORD THEIR AVAILABILITY IN CARELINK.**

Staff Name	Email (personal)	Staff Home Address	Staff personal mobile / phone	Work Status PFT, PPT, Casual	Carer duty (Is staff member impacted by school/childcare closures) – No, fully, Partially	Upcoming AL Plan (Is staff member willing to move AL)	Willingness to do additional hours/different hours	Ability to work from different locations (Y/N)	Comments (fitness to work with client with COVID-19 e.g. not able to as respiratory /care for vulnerable people)
John Smith	John.smith@hotmail.com	4 Brown St, Yarraville	0411111111	PPT	Partially	4/4 to 5/6 - willing to move	Yes	Yes	

## MINIMUM STAFFING LEVELS

We would like to model the minimum staff levels required in the event of significant staff shortages. Please assume all clients are at home due to day service/ community venue closures. It is our duty of care to ensure all clients are safe.

Shift	Current staffing level (number of staff per shift)	Absolute minimum staffing level which maintains safety (number of staff per shift)
Night Shift Time from _____ to _____		
Morning Shift Time from _____ to _____		
Day Shift (assume clients at home) Time from _____ to _____		
Afternoon Shift Time from _____ to _____		
Evening Shift Time from _____ to _____		

## CLIENT ASSESSMENT

It is important that we understand the local client profile to adequately plan for the prevention and management of COVID-10. Collecting the following information will help to identify and plan for:

1. Client risks
2. Client care needs
3. Identify local training requirements for staff
4. Identify potential family supports available.

Client Name	Age	Day Supports (Day Service, Community access, in-home Support)	Service Provider of Day Supports	Staffing Ratio	High Intensity Needs (PEG, Trachy, Catheter, Bowel)	Chronic Illness (respiratory, diabetes etc.)	BOC (harm to self/others, Property damage, absconding, verbal aggression, other)	Restrictive Practices (Nil, chemical, environment, physical, seclusion, mechanical)	Language (communication method)	Family involved in care? (No, minimal, a-lot). NOK details	Comments
Jack Smith	59	Day service Mon, Tue Wed In home support Thurs	Day Service – Able Australia In home – Able Australia	1:1	Nil	Diabetes	Nil	Nil	Non verbal, uses Auslan	No Family, Guardian appointed for all matters	

## FACILITY ASSESSMENT

A detailed assessment of the local facility and supplies will help us to formulate a plan.

### FACILITY DETAILS

Facility Details	Details
Number of bedrooms currently occupied	
Number of bedrooms vacant	
Number of Lounge room spaces	
Number of dining spaces	
Number of Bathrooms (client)	
Number of Bathrooms (staff)	
Number of separate toilets (Clients)	
Number of separate toilets (staff)	
Alternative rooms that could be used in the event of isolation	
Other	

## STOCKTAKE OF HOUSE-HOLD ITEMS

Item	Details of supply
Food (1wks, 2wks, 3wks)	
PPE 1. Gloves (number of boxes – how many weeks supply) 2. Masks ( Yes / No, how many?) 3. Aprons ( Yes / No, how many?) 4. Gowns ( Yes / No, how many?) 5. Eyewear ( Yes / No, how many?)	
Hand Soap (1wks, 2wks, 3wks) Hand Sanitiser (1wks, 2wks, 3wks)	
Cleaning Products (1 week, 2wks, 2+wks)	
Medications (1 week, 2wks, 2+wks)	Aim to have 2 week supply
Continence Products (1 week, 2wks, 2+wks)	
Thermometer (Yes / No)	
Clinical waste bin on site (Yes / No)	
Other	



## Local Plan

There are three scenarios we need to plan for:

1. Day Support Service Closure
2. Critically low staffing levels (e.g. school closures)
3. Suspected case of or exposure to COVID-19

There are two levels of planning required to assess and manage risk associated with COVID-19, the organisational-wide Able Plan and local-level Plans.

Please complete your local plan using the template and steps below and send to your Area Manager. To support you in the development of this plan please speak with your Area Manager or buddy with another team leader to complete and discuss ideas.

### SUCCESSION PLAN

Position	Name and Details of Person/s who can provide cover
Team Leader	
Area Manager	

### Plan - Scenario 1 – Day Support Service Closure

	Client Name	Client Name	Client Name	Client Name	Client Name
Service Type					
Days of Week					
Number of Hours					
Timeframe for closure (if known)					
Staff Ratio					
Staffing - Number of additional staff required?					

<ul style="list-style-type: none"> <li>- Staff skill set required?</li> <li>- Alternative service provision identified (in-home, community access)</li> </ul>					
Consider options below to fill vacant staff rosters					
Develop client activity program for engagement					
Other					

### Staffing options to be considered

#### Maximising existing staff

- Redeploy from Day Service
- Agency staffing
- Increase permanent/part time hours – Identify
- Overtime
- Negotiate/Minimise Annual Leave
- Redeploy from other location (other house)
- National and state office staff with required skills

#### Employing new staff

- Volunteers (ex-students)
- Staff who recently worked for Able and resigned, retired
- Buddy Shifts
- Recruiting new staff / casuals

## Plan - Scenario 2 – Critically Low Staffing Levels (e.g. school closure)

STEP 1 – Determine minimum staffing levels (as assessed above)

STEP 2 – Determine additional staff availability from existing pool of staff.

STEP 3 – Share staff from wider pool of staff (refer to staffing options) – Utilise day service staff

STEP 4 – Team Leader to escalate progress and gaps to Area Manager / Roster Coordinator

STEP 5 – Area Manager to escalate progress and gaps to Emergency Response Team to ensure business continuity and mobilise alternative staffing strategies for new staff for the organisation.

Shift	Minimum staffing level which maintains safety (number of staff per shift)
Night Shift Time from _____ to _____	
Morning Shift Time from _____ to _____	
Day Shift ( <b>assume clients at home</b> ) Time from _____ to _____	
Afternoon Shift Time from _____ to _____	
Evening Shift Time from _____ to _____	

### Plan - Scenario 3 – Suspected case of, or exposure to COVID-19

STEP 1 – Follow the COVID-19 Interim Management Plan

STEP 2 – Escalate to Area Manager, National Director and Emergency Response Team.

STEP 3 - The Able Australia Emergency Response Team will be activated to support the local team if any cases of COVID-19 are suspected or confirmed.

STEP 4 - The Emergency Response Team will work with the local team to create a tailored plan

## Actions to contain spread

### Workplace hygiene and screening for risk

What	Why	How	Who	By When
<b>Promote through handwashing.</b>  With soap and water for at least 20 seconds or use an alcohol-based hand sanitiser.	This is the most effective way of preventing disease spread.	Promote through: <ul style="list-style-type: none"> <li>• Hand Hygiene LMS Mandatory training</li> <li>• Emails/ Intranet/ workplace</li> <li>• Posters in toilets/ workplaces</li> <li>• Team Meetings</li> <li>• Ensure hand washing facilities are kept well stocked</li> <li>• Alcohol sanitisers distributed throughout the workplace</li> </ul>	All staff/ volunteers/ clients	Immediately  Some stock on back order
<b>Promote appropriate protocols managing coughs/ symptoms →</b>  Cough into elbow.  Do not enter Able premises if you have a sore throat/ cough / fever	Reduce risk of spreading virus.	Promote through: <ul style="list-style-type: none"> <li>• Definition of Close and Casual contact distributed</li> <li>• Emails/ intranet/ workplace</li> <li>• Posters in workplace</li> <li>• Team Meetings</li> </ul>	All staff/ volunteers/ clients	Now and ongoing
<b>Social Distancing →</b>  <b>Limit physical contact / handshakes</b>  <b>Maintain 1 metre distance from others.</b>	Reduce person to person spread of virus	Promote through: <ul style="list-style-type: none"> <li>• Emails/ intranet/ workplace</li> <li>• Posters in workplace</li> </ul> Team Meetings  <b>Deafblind clients and Comm Guides require additional education and support.</b>	All staff/ volunteers/ clients ( where practicable)	Now and ongoing

What	Why	How	Who	By When
<b>Increased Cleaning</b>  Employees and volunteers asked to regularly clean hard surfaces in all office / domestic areas with disinfectant wipes or similar.  Cleaning in Homes Cleaning in Day Services	The virus can be transferred on hard surfaces.	Email to staff. Provision of disinfectant wipes. All staff to wipe hard surfaces in their work areas at least once daily.  Cleaning schedule developed and distributed	All staff/ volunteers  Team Leaders to implement at each site	Now and ongoing
<b>Management practices if client needs to be isolated</b>	To maintain safety of client and staff	Management protocols for Standard Precautions reiterated.  Personal Protective Equipment procedure reinforced. PPE stock identified PPE stock ordered as required	Area Managers to ensure Team Leaders are	Now and ongoing
<b>Increase cleaning / hygiene supplies</b>	Products required to reduce spread of virus	Orders to be placed and stored centrally for distribution as required. If no supplies, soapy water or alternate cleaning products to be used.	National / State Offices	Now and ongoing
<b>Increased waste collection instigated if a home has an identified risk</b>	Increase the removal of all critical waste to reduce risk of infection	Contact contractor as required	Area Manager	Now and ongoing

## Screening for risk

What	Why	How	Who	By When
Twice daily temperatures to be taken and recorded of all residential clients	To monitor for fever	Digital thermometers distributed Temperature charts to be completed and uploaded onto Carelink	Team Leader	Now and ongoing
Twice daily temperatures to be taken and recorded of all community clients	To monitor for fever	Digital thermometers distributed	Support Worker	Now and ongoing
All staff who are self-monitoring to ensure they take temperatures twice daily and report any symptoms immediately	To monitor for fever and symptoms		All staff and volunteers	Now and ongoing

## Visitor Policy

Able Australia has developed a strict Visitor Policy that is aligned with government advice to minimise the spread of COVID-19. Additional signage has also been developed that should be put up on all services, advising visitors of their responsibilities when entering an Able Australia service.

Please refer to the Appendix for the full Visitor Policy and Poster.

## People presenting with symptoms

Able employees, volunteers and clients need to be vigilant to identify symptoms (respiratory issues, coughing, sneezing, shortness of breath and or fever) and take preventative action to reduce potential spread of the virus.

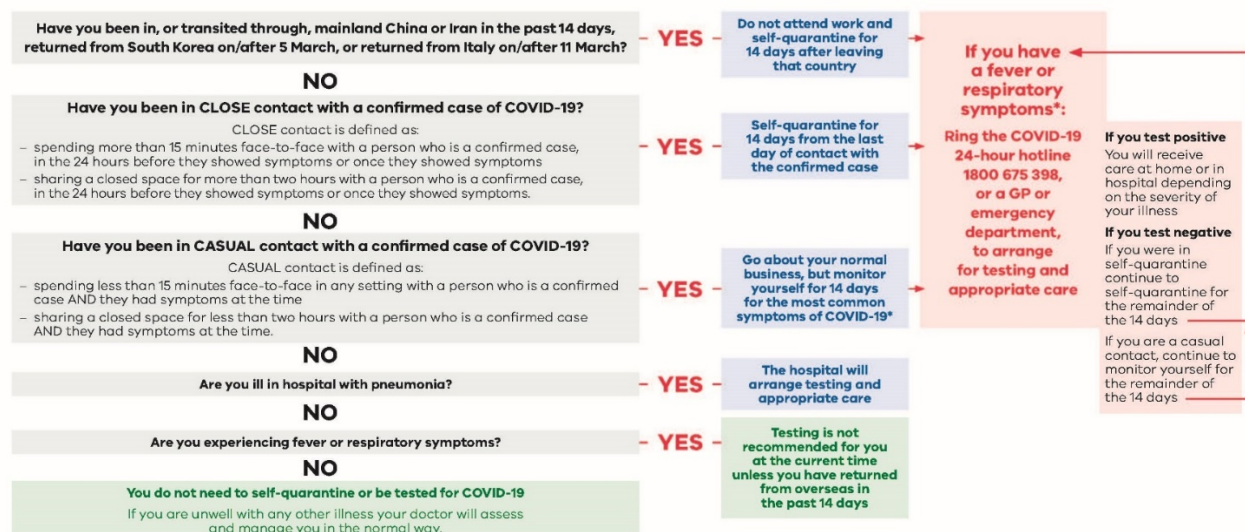
What	How	Who	By When
Employee or volunteer experiencing symptoms. <b>NOT AT WORK</b>	<ul style="list-style-type: none"> <li>Stay home do not attend work</li> <li>Seek medical advice</li> <li>Take sick leave.</li> <li>Inform line manager</li> <li>Line Manager to inform National Director</li> <li>Work with line manager to identify if there may be any infection risks-take action appropriately.</li> </ul>	Employee Volunteer Line Manager National Director	Now and ongoing
Employee or volunteer experiencing symptoms. <b>AT WORK</b>	<ul style="list-style-type: none"> <li>Inform line manager</li> <li>Leave work immediately (travel home by the safest route possible)</li> <li>Line Manager to inform National Director</li> <li>National Director -Devise local response plan identifying any potential exposure.</li> <li>National Director to ensure appropriate staffing to maintain safe conditions for clients.</li> </ul>	Employee Volunteer Line Manager National Director	Now and ongoing
<b>Client or member of the community presenting with symptoms</b>	<p>Ensure <b>Posters or Signage</b> requests that people do not enter Able Australia sites if they experience symptoms</p> <p>Employees to be <b>vigilant for presentation of symptoms</b>, if symptoms present:</p> <ul style="list-style-type: none"> <li>Request that client leave premises and return home by safest way possible, and they seek medical advice.</li> <li>Inform clients NOK</li> <li>Inform line manager</li> <li>Line Manager to inform National Director</li> <li>National Director -Devise local response plan identifying any potential exposure.</li> </ul>	Employee Volunteer Line Manager National Director	Now and ongoing



## Self-Assessment risk of COVID-19



## Self-assessment for risk of coronavirus (COVID-19)



### Additional information for healthcare workers and residential care workers

In addition to the above steps, the following information applies to healthcare workers and residential care workers who have direct contact with patients or residents.

**If you have an influenza-like illness**, which is a fever above 37.5 and symptoms of an acute respiratory infection (shortness of breath, cough, coryza and/or sore throat):

- **do not go to work**
- **ring the COVID-19, 24-hour hotline 1800 675 398, or a GP or emergency department, to arrange for testing and appropriate care.**

If you test negative you can return to work when well, at the direction of your treating doctor.

A healthcare worker who has worn appropriate personal protective equipment while treating a patient does not become a close contact as a result of that care. They may be a casual contact as a result of that care so should monitor themselves for 14 days.

\*The most common symptoms of COVID-19 are fever, cough, shortness of breath, muscle pain and fatigue.

To receive this publication in an accessible format email [COVID-19@dhhs.vic.gov.au](mailto:COVID-19@dhhs.vic.gov.au)  
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## Residential Visiting Policy during Coronavirus Pandemic

### Monitor Travel

What	Why	How	Who	By When
<b>Reduce non urgent work travel</b>	Potential spread or exposure to the disease reduced.	Audit of employees to determine who can work remotely	All non-client facing staff	16/3/20
<b>International Work Travel cancelled</b>	The virus is spreading faster in some locations and the number of impacted countries is now worldwide.	Immediate ban on overseas travel	All international travel is authorised by CEO/ Board	4/3/20
<b>Interstate work travel to be closely monitored</b>		NDs to review upcoming travel and assess risk. Where possible use ZOOM	All staff	4/3/20
<b>International personal travel monitored</b> Employees and volunteers to inform line manager of recent or upcoming travel plans  14-day self-quarantine required where people return from affected countries.		Annual Leave form amended to have self-disclosure of any international travel	All staff	5/3/20

## Residential Visiting Policy during Coronavirus Pandemic


Active self-monitoring for all others.				
<b>Clients - holidays which are supported by Able employees to be risk assessed.</b>		All rostered holiday support to be risk assessed	Area managers and ND	Now and ongoing

## Residential Visiting Policy during Coronavirus Pandemic

### Trigger Event School/Child care/ Institution closures

Should COVID-19 spread further in our communities, there is a high likelihood that schools and other services and institutions will close. This will impact those who have childcare responsibilities.

Where child care is not available to employees:


 <b>Can the employee do their usual work from home?</b>	Yes	<ul style="list-style-type: none"> <li>Work from home and maintain contact with line manager and wider team through digital channels.</li> </ul>
	No	<ul style="list-style-type: none"> <li>Employee can:               <ul style="list-style-type: none"> <li>- Take personal/annual leave to focus on childcare</li> <li>or</li> <li>- Request undertaking alternate duties from home (data supports etc.)</li> </ul> </li> </ul>
	Maybe?	<ul style="list-style-type: none"> <li>Explore options for remote service delivery (phone, video conferencing etc.)</li> </ul>

### Trigger Event: Rapid spread of virus in local area

We aim to support limiting the spread of COVID-19 in our communities:-

**No Govt. Lock Down** – Encourage people not to attend impacted workplaces, may opt to close certain workplaces, depending on circumstances to support safety, health and wellbeing.

**Govt. Lock Down** – Employees will be directed not to attend work.

 <b>Can the employee do their usual work from home?</b>	Yes	<ul style="list-style-type: none"> <li>Work from home and maintain contact with line manager and wider team through digital channels.</li> </ul>
	No	<ul style="list-style-type: none"> <li>Employee can:               <ul style="list-style-type: none"> <li>- Take personal/annual leave</li> <li>or</li> <li>- Request undertaking alternate duties from home (data supports etc.)</li> </ul> </li> </ul>
	Maybe?	<ul style="list-style-type: none"> <li>Explore options for remote service delivery (phone, video conferencing etc.)</li> </ul>

## **Residential Visiting Policy during Coronavirus Pandemic**

## Residential Visiting Policy during Coronavirus Pandemic



### Operational Implications

- Working from Home (WFH) policy and application process (
- See key personnel/team risk mitigation plan
- IT capacity to support remote working for larger numbers of people



### Action now

- Identify which employees can/not work from home
- Identify training and other work which can be done from home
- Review IT functionality and capacity
- Trial working from home for some roles e.g. Triage team, HUGS? Nils? IT? Payroll?

### Who

Each line manager to undertake a review, send list to Lynette McKeown, National Director Quality & Innovation/Senior Practitioner & Acting Director NDIS Residential (central contact person) Learning and development to support line manager GM Digital Solutions  
GM Digital Solutions

## Residential Visiting Policy during Coronavirus Pandemic

### Able Employee COVID-19 Advice Guide

#### Employee returns from overseas – Self Quarantine for 14 days (home)

The government has mandated 14-day quarantine period for all international arrivals. All countries are included and there are heavy penalties for anyone in Australia who does not abide by these laws.



**Is the employee permanent full-time/part-time and sick?**

**Yes**

→ Employee must stay home for 14 days and self-quarantine.

If the employee was sick during this period they will need a doctor's certificate and use personal leave entitlement or

- Use leave entitlement – Annual Leave or
- Use leave entitlement – Long Service Leave
- Leave without pay if not leave entitlements

**No**

→ "Stand down" with the following options;

- Use leave entitlement – Annual Leave or
- Use leave entitlement – Long Service Leave
- Leave without pay if not leave entitlements



**Is the employee casual and sick?**

**Yes**

→ Doctors certificate before they can return to work

- Casual employees are paid and hired by the hour (+25% hourly rate)
- Casual employees do not have personal leave or annual leave entitlements
- Casual employees will not be paid during the period they are sick and unable to work.

**No**

→ Employee does not work until the 14 day quarantine period is complete.

## **Residential Visiting Policy during Coronavirus Pandemic**



## Residential Visiting Policy during Coronavirus Pandemic

### Employee is sick at work – develops symptoms (coughing, temperature)

Health and safety laws and regulations require that an employer send an employee home if they feel that they are at risk to their own health or the health of others in the workplace.

#### Duty of Care:

Able Australia has the right to send an employee home if they are visibly ill and present with symptoms that can pose a risk even if that employee disagrees. It is Able Australia's duty of care to all employees and our clients. Employees also have a duty to take reasonable care for their own health and safety and to not adversely affect the health and safety of others.

- a. If the employee is permanent fulltime/part time
  - Employee sent home – medical certificate before can return to work
  - Use leave entitlements – Personal Leave; or
  - All other Leave entitlements as above (Annual Leave, LSL)
  - Leave without pay if not leave entitlements
- b. If the employee is casual
  - Employee sent home – medical certificate before can return to work
  - Casual employees are paid and hired by the hour (+25% hourly rate)
  - Casual employees do not have personal leave or annual leave entitlements
  - Casual employees may check with Centrelink for special government payment
  - *In Tasmania only* - casual employees may be entitled to long service leave if they have completed 10 years of continuous employment. They are considered to be continuously employed if they have been regularly working for 32 hours or more in each consecutive period of four weeks

### Employee has Carer's responsibilities and cannot come to work e.g. children at home because school has closed



**If the employee is permanent fulltime/part time can employee work from home?**

**Yes**

→ Work from home and check in regularly with Manager

**No**

→ Use carer's leave entitlement up to 10 days.

- If more than 10 days use – Annual Leave or
- If more than 10 days use – Long Service Leave
- Leave without pay if not leave entitlements

## Residential Visiting Policy during Coronavirus Pandemic



**If the employee is casual can the employee work from home?**

**No**

Exposure to COVID-19 is a potential hazard for workers and other people (including children) at workplaces. Able Australia must have measures in place to protect worker health and safety and manage these risks

**If Able Australia cannot provide employees work because a service has shut down due to Covid-19**



**If the employee is permanent fulltime/part time can the employee be redeployed to do other work?**

**Yes**

→ Employee redeployed to work in another Able Australia service.

**No**

→ Employee will be “stood down” (section 524 Fair Work Act)

- Use leave entitlement – Annual Leave or
- Use leave entitlement – Long Service Leave
- Leave without pay if not leave entitlements



**If the employee is casual can the employee be redeployed to do other work?**

**Yes**

→ Employee redeployed to work in another Able Australia service.

**No**

→ Employee will not be engaged to work until Able Australia can provide work

- Casual employees are paid and hired by the hour (+25% hourly rate)

## **Residential Visiting Policy during Coronavirus Pandemic**

### **Employee does not want to work due to fear of contracting the virus**

Able Australia has a responsibility to act in accordance with government advice. If Able is acting to government advice and the direction given to the employee is lawful and reasonable:

- The employee will not be paid for staying at home.

### **Employee is aged 65 year or over or has an underlying medical condition**

If you are over 65 years and or have a medical conditions that puts you at greater risk we ask that you:

1. Prioritise your health at this time – take all relevant precautions as outlined by the Department of Health.

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

2. Adhere to our practices for conducting work safely. Read, listen and communicate with all the people you work with to make sure you know what to do and when to do it – there is lots of information! Ask your Team Leader if you're still not sure.
3. Speak to you Team Leader or Manager so that we can work with you to ensure that you're safe.

## Residential Visiting Policy during Coronavirus Pandemic

### Plan for key person/ team risks – non service delivery

Key role/ team	Business impact / service impact	Impact rating	Mitigating strategies/ alternatives
Payroll Officer	Fortnightly payments to 600 employees at risk, impacting employees cash flow	High	Payroll officer work from home if trigger event If unable to work from home back up includes Finance manager support to payroll. P&C Service partner to support payroll Last resort- upload previous fortnights payroll payments (Finance Team)
IT Support	Current internal issues are escalated to 5 G – no change	Medium	Increase Zoom licences and CITRIX
Property Maintenance	Lack of support to respond to any facilities related issues	Low	Local teams have capacity to identify and respond as required with the endorsement of line leadership
Funding coordinator	Crucial that invoices are processed	High	Funding coordinator can work from home; there is back up
Rostering	Crucial that rostering continues	High	Rostering team have back up
Queensland - Jimboomba	Food pantry Meals on wheels Emergency relief	High	Working with local Queensland council to seek additional support/advice.
Quality	Crucial of quality are addressed in timely manner	High	Team is able to work from home and have access to all relevant systems online. Act as a backup to each other.
Exec team & AM	Crucial that the team an meet daily to address and determine plan	High	Team is able to work from home and there is adequate backup for all systems online. Act as a backup to each other.

## **Residential Visiting Policy during Coronavirus Pandemic**

## Residential Visiting Policy during Coronavirus Pandemic

### Plan for key service delivery challenges

While a number of Able services can be closed or even conducted remotely some services cannot be halted or have a higher exposure to community variables

Those which are rated medium to high risk include:

At Risk Services	Service impact	Impact Rating	Mitigating Strategies/ alternatives
Day Service	Lack of community connection and occupation for clients. Lack of respite for families.	Medium  High	Prioritise clients who most require 1:1 support in their home. Day Service staff deployed to Able Accommodation services
Community Access for Deafblind	Social isolation and reduced access to necessary services. Safety and wellbeing may be greatly impacted.	High	Develop a plan for each client identifying additional social support networks Utilise Comm Guides to provide information/ education to DB clients on COVID-19 and its impact. Consider the use of personal alarm monitoring for emergencies. Check information from vulnerable persons list.
Accommodation Services	Clients living in Able homes are reliant on team members for the operation of the home, including personal care, meals, medication and high intensity care.	High	<ul style="list-style-type: none"> <li>• Risk assessment of all clients</li> <li>• Risk assessment of homes for cumulative risk.</li> <li>• Minimum staffing levels to be determined.</li> <li>• Skills of other staff to be redeployed:</li> <li>• Potential of Day Service staff to be redeployed to homes</li> <li>• Potential of Admin / Exec staff to be redeployed to homes.</li> <li>• 2 weeks of dry goods to be held at each home.</li> </ul>

## Residential Visiting Policy during Coronavirus Pandemic

CHSP Travel	Socially Isolated elderly will be unable to access necessary services	Medium/High	Volunteers being utilised for daily phone calls and triaging of request for essential travel.
ALPS	Most contact is through organised events which will be cancelled	Medium/High	Volunteers to be used for telephone contact and escalation of any risk. Following state government advice and action plan.
Food Pantry	No distribution of food for those most in need	High	Continue as long as food supply continues. Work in collaboration with local council implementing local action plans.
Meals on Wheels	No distribution of food for those most in need	High	Continue as long as food supply continues. Work in collaboration with local council implementing local action plans.

Each home and day service to develop a local action plan covering the following

- Monitor for staff absenteeism
- Risk assessment of each resident
- Home cumulative risk assessment.
- Staff communication
- Provision of hygiene supplies
- Provision of 2 weeks of dry goods for each home
- Key person list
- Permanent roster impact if child care/ schools close
- Minimum staffing levels
- Staff coverage plan

### Community support considerations

How might COVID-19 impact your local community and are there any ideas of ways that Able Australia can safely support the local community?

What might happen?	Impact on community?	Ideas to safely support people?

## **Residential Visiting Policy during Coronavirus Pandemic**

List local resources which might be useful to support responses (partnerships/collaboration/referral points)

-



## **Residential Visiting Policy during Coronavirus Pandemic**

### **APPENDICES**

#### **Appendix 1 - Able Australia's COVID-19 – Interim Management Plan**

#### **ABLE AUSTRALIA COVID-19 – INTERIM MANAGEMENT PLAN**

## Residential Visiting Policy during Coronavirus Pandemic



### **Able Australia** **COVID-19** **Interim Management Plan**

Released: Monday 16 March 2020

#### **Current Organisational situation:**

- COVID-19 has been declared a pandemic by the World Health Organisation, and Australia has declared a health emergency.
- Able Australia has developed a range of COVID-19 management plans in line with Government advice.
  - Ensure best practice in infection control and management of CV
  - Communicate with staff, families and carers
  - Plan for the prevention, containment and management of incident of CV.
- The Able Australia executive and management are currently meeting daily to review the situation and risk.
- The executive will call together the Emergency Management Team if COVID-19 is confirmed at any service. They will provide information, advice and a plan of action. It is important that you escalate any situations relating to this to management, prior to making decisions.
- When incurring extra costs specifically related to COVID-19 (not including accumulation of general goods that will otherwise be used) – utilise code 9056

#### **What is COVID-19?**

- [Symptoms](#) include fever, coughing, sore throat, fatigue, and shortness of breath. Symptoms can range from mild illness to pneumonia.
- Some people will recover easily, and others may get very sick very quickly.
- For More information see the [Able Australia Intranet](#) for links to recommended pages to keep updated, and material to support awareness.
- Call the Australian government's **Coronavirus Health Information Line** on 1800 020 080.

#### **Remember**

- This can be a trying time for both clients and staff
- Continue to be patient and kind to one another
- Use Employee Assistance Program as required (1300 130 130)
- Provide clients with additional emotional support as required
- Avoid being overly dramatic in shared workspaces
- Understand and respect some people may **not** want to talk about COVID-19
- Do not don/use extra PPE (gowns/masks) until you have been given direct instruction to do so (conserve supply)

## Residential Visiting Policy during Coronavirus Pandemic

### What can **you** do for COVID-19?

#### Infection Prevention and Early Detection

Able Australia teams must take the following steps:

##### Social Distancing

1. Avoid close contact where possible
2. Do not attend large social gatherings
3. Think about community access alternative such as visiting outdoor spaces instead of shopping centres

**Close contact** is only with a confirmed case of COVID-19 – it is larger than 15 minutes face-to-face (closer than 1 meter) or the sharing of an enclosed space for more than two hours. This does not include those wearing recommended personal protective equipment (PPE). Contact needs to have occurred during the period of 24 hours prior to onset of symptoms of a confirmed case.

##### Keep your environment clean

1. Use the attached [Cleaning Procedure Checklist](#) to thoroughly clean the environment.
2. Able Australia expects cleaning to be conducted:
  - a. At least twice per day if no COVID-19 is detected at the site
3. Follow [Able Australia Waste Management Policy](#)

##### Practice hand-hygiene and learn appropriate use of PPE

- Watch mandatory videos on [Learnable / Litmos](#)
- Practice thorough Handwashing
- Use gloves as required

##### Monitor clients and yourself for symptoms (including temperature)

1. Monitor body temperature of clients on entry to Able Australia sites, and every 4-8 hours whilst on site (see [Able Australia Body Temperature Measurement Procedure](#)).
2. Watch for symptoms of COVID-19 - fever, coughing, sore throat, fatigue, or shortness of breath.
3. Place the [COVID-19 resources](#) and [posters](#) up in your workplace – Include the [Service Flyer for All Doors](#)

#### Infection Management

Able Australia teams must take the following steps:

##### Continue Prevention and Early Detection Practices (above)

##### Isolation

1. If person is unwell/showing symptoms isolate them to separate room with a closed door
2. Minimise contact with others

## **Residential Visiting Policy during Coronavirus Pandemic**



## Residential Visiting Policy during Coronavirus Pandemic

3. To prevent spread of illness (noting it may not be COVID-19)
  - a. If at day-service request that the client/staff return home
  - b. If a residential service, clients should be monitored and medical attention sought as required (see [COVID-19 Self-Assessment Tool](#) for guidance on if test for COVID-19 is needed). Staff should return home.

### Temperature

- Follow the [Able Australia Body Temperature Measurement Procedure](#) and the [COVID-19 Self-Assessment Tool](#).

### Escalation

- Escalate all cases to your manager/On-Call.
- Notify your Area Manager or the on-call manager of contact with any suspected cases of COVID-19 or other illness.

## If Department of Health confirms case of COVID-19

### Continue Infection Management & Prevention & Early Detection (above)

### Increase Cleaning Schedule

1. Able Australia expects cleaning to be conducted:
  - a. At least 4 times per day (every 4-6 hours) if COVID-19 has been detected at the site
  - b. Items/surfaces touched by individuals with confirmed case of COVID-19

### Emergency Response Team

1. The Able Australia Emergency Response Team will be activated to support the local team if any cases of COVID-19 are confirmed.
2. The Emergency Response Team work with the local team to create a tailored plan
  - a. This will include Personal Protective Equipment (PPE) to enable safe practices in the workplace

### Isolation/No visitors

3. A No Visitor Policy will be put in place.
4. The Health Department will be notified and management will proceed as they advise.

## Return to Business as Usual

Once clearance has been provided by Department of Health for each case, we will return to the infection prevention and early detection stage.

Once the Health Emergency status has been removed, and the Government and World Health Organisation (WHO) advise us to – Able Australia will return to business as usual, and will remove extra measures created for COVID-19.

## Residential Visiting Policy during Coronavirus Pandemic

## Appendix 2 - Workplace Hygiene Plan

### WORKPLACE HYGIENE PLAN

To support prevention and containment of potential COVID-19 infection, we will take proactive steps to ensure high levels of office hygiene are encouraged.

Activity	How	Actioned?
Promote thorough handwashing with soap and water for at least 20 seconds or use an alcohol based hand sanitiser	Email Posters Team meetings	<input type="checkbox"/> Yes <input type="checkbox"/> No
Promote social distancing – limiting physical contact like handshakes, main 1.5m distance from people	Email Posters Team meetings	<input type="checkbox"/> Yes <input type="checkbox"/> No
Promote cleaning of hard surfaces in common areas (receptions, counselling rooms etc.)	Email Posters Conversations	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ensure sufficient supplies of hygiene products including tissues, hand sanitiser, disinfectants, wipes etc.	Usual purchasing systems	<input type="checkbox"/> Yes <input type="checkbox"/> No
If COVID is identified being spread in the community <ul style="list-style-type: none"> <li>Increasing cleaning contract</li> </ul>	Cleaning contractor	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Residential Visiting Policy during Coronavirus Pandemic

### Appendix 3 – Site Cleaning Procedure

#### ABLE AUSTRALIA SITE CLEANING PROCEDURE

##### STATEMENT

Able Australia is committed to providing the highest standard of support for clients, including provision of a safe and healthy physical environment. Key to this is regular cleaning and maintenance.

##### SCOPE

All staff are required to implement this policy when working with participants at Able Australia sites.

##### DEFINITIONS AND ABBREVIATIONS

Term	Definition
<b>Personal Protective Equipment (PPE)</b>	Refers to equipment such as gloves, eye protection, aprons, gowns, waterproof shoe covering and the like which are used to prevent or reduce the spread of infection

##### OVERVIEW

This procedure outlines the basic steps involved in cleaning the interior of a range of sites including supported residential living sites and day services operated by Able Australia. It notes that PPE must be used when undertaking cleaning activities if there is the risk of infection (e.g. if one or more residents in the home are unwell).

##### PROCEDURE DETAILS

1. All Able Australia sites are to be cleaned as per the attached relevant cleaning checklist. Local alterations can be made in line with local circumstances.

*See attached documents for cleaning checklist and record*

- Supported independent living cleaning checklist and record
- Day Services cleaning checklist and record

2. Each room/area is to have its own Cleaning Record so the frequency at which each space is being cleaned is clear.

### **Residential Visiting Policy during Coronavirus Pandemic**

3. At the end of each week the Cleaning Record is to be scanned into Carelink+ under the site.
4. Adherence to cleaning schedules will be audited regularly.



## **Residential Visiting Policy during Coronavirus Pandemic**

### ***Equipment***

Each Able Australia site will have an appropriate set of equipment and cleaning chemicals for undertaking cleaning. PPE will also be available at sites where required.

### **INFECTION CONTROL**

Proper infection control is important in containing the spread of disease. When completing cleaning according to the cleaning schedule, ensure that appropriate PPE is always worn.

Note that the Director, Area Manager or Service/Team Leader will set the frequency of the cleaning schedule. This will be dependent on a number of factors such as the physical environment, needs of residents/participants and staff and level of infection control risk (eg. Cleaning might be twice daily if a resident is in the home with influenza in order to curb the spread of the disease and revert to daily once everyone in the house is well).

### **REFERENCE DOCUMENTS**

- Infection Control and Management of Infectious Conditions Policy
- Waste Management Policy
- NDIS Practice Standards and Quality Indicators Version 3

### **CONTINUOUS IMPROVEMENT**

Improvements to this policy can be made by completing an Improvement Opportunity Form, attaching any

## Residential Visiting Policy during Coronavirus Pandemic

### Appendix 4 – Temperature Procedure

#### ABLE AUSTRALIA TEMPERATURE PROCEDURE

##### STATEMENT

Able Australia is committed to providing the highest standard of care for clients, including the early identification and management of physical sickness. A key pillar of this is the identification, timely management and effective monitoring of clients or staff who may have an altered body temperature.

##### SCOPE

All staff are required to implement this policy when working with clients who may have signs of changes in body temperature.

##### DEFINITIONS AND ABBREVIATIONS

Term	Definition
<b>Pyrexia</b>	Refers to a person's elevated body temperature due to an increase in the body temperature's set point. This is usually caused by infection or inflammation. Pyrexia is also known as fever or febrile response. Some causes of fevers do not require medical treatment, whilst other causes need to be identified and treated.
<b>Normothermia</b>	Refers to body temperature within normal range. Exact normal temperature ranges differ between individuals and can be influenced by some genetic and chronic medical conditions. It is important to ascertain the baseline for individual patients in order to identify abnormal body temperature deviations
<b>Hyperthermia</b>	An elevated body temperature due to failed thermoregulation. This occurs when the body produces and/or absorbs more heat than it can dissipate.
<b>Low Temperature</b>	A lowered body temperature, where the body loses heat faster than it can produce heat

## Residential Visiting Policy during Coronavirus Pandemic

<b>Hypothermia</b>	An abnormally low body temperature, where the body temperature drops below a safe level. Both low temperatures and hypothermia can be caused by environmental factors, metabolic complications, disease processes, or can be medically induced.
<b>Antipyretics</b>	Describes medicines including paracetamol and ibuprofen which are taken to reduce or treat fever.

## Residential Visiting Policy during Coronavirus Pandemic

### OVERVIEW

This procedure outlines the basic procedure in terms of measurement of client's body temperature using an electronic thermometer. It also gives direction on the frequency of monitoring, the limits of normal body temperature readings and paths for escalation.

A significant rise in body temperature, also known as pyrexia, can indicate the presence of infection. This increase in temperature can result in increased immune functions.

A mild increase in temperature is harmless and beneficial, as it is an important immunological defense mechanism (The Joanna Briggs Institute, 2001). However, if the body temperature rises above 39.4°C (becoming a moderate fever) actions to reduce fever should be taken.

A significant drop in body temperature is known as hypothermia. It can be caused by a range of medical issues, but in the community setting can be due to environmental factors such as inadequate or wet clothing or immersion in cold water for a period of time. If you believe a participant is suffering hypothermia, apply first aid and seek medical advice immediately.

### PROCEDURE DETAILS

#### WHEN TO TAKE A BODY TEMPERATURE READING

Body temperature should be taken if any of the following is observed:

- Client or staff noted to
  - be flushed in the face
  - be sweaty without having had recently exerted themselves
  - look pale and their skin may feel clammy to touch
  - be shivering or complaining of feeling overly cold when adequately dressed
  - complain of feeling over hot or bothered
  - have a cold, a runny nose or cough
  - be displaying symptoms of hypothermia such as shivering, blue lips and extremities, shock
  - displaying unusual behaviours or being in pain
  - generally unwell
  - or other reason as per your judgement.
- Client or staff is suspected or has been in close contact with a person with suspected/confirmed:
  - coronavirus – COVID-19 over the past 5-14 days
  - influenza A, influenza B or similar
  - measles, mumps, rubella, chicken pox or other similar infectious disease

If a Client or staff meets the above criteria or if the Client or staff are concerned you can take a

## **Residential Visiting Policy during Coronavirus Pandemic**

body temperature measurement providing consent is given.

### **EQUIPMENT**

Able Australia commonly used Braun touchless and forehead thermometers. Whilst the instructions below pertain to the Braun touchless and forehead thermometers, the general principles outlined below can be used across a range of models.

### **PREPARING TO TAKE A BODY TEMPERATURE MEASUREMENT**

Preparing to take a body temperature measurement you should first seek consent from the individual. Preparing to take a body temperature measurement you should carefully follow the instructions laid out by the thermometer's manufacturers.

1. Clean the thermometer using alcohol wipes
2. Let the thermometer and individual being measured acclimatize to the temperature of the room in which the measurement is being taken.
  - a. The thermometer needs to acclimatize to the room temperature for 10 minutes before taking a measurement
  - b. The individual being measured should be indoors for 30 minutes before taking a measurement. External temperature can impact skin's temperature (eg. Hot sun or a cool wind can heat or chill the skin)
  - c. Please take temperature reading in an allowed operating ambient (room) temperature – 15-40 °C.
3. Ensure the individual's forehead is prepared for measurement. The principles below also apply to temperature taken under the arm etc.
  - a. Wipe away any sweat with a dry cloth. Sweat can cool skin and give a false reading.
  - b. Ensure the forehead is clean. If you clean the forehead, wait 10 minutes before taking a measurement.
  - c. Hair can insulate the forehead and make it slightly warmer. Make sure you move hair away from the forehead and wait 10 minutes before taking a measurement.
4. Positioning of the thermometer is very important when taking a 'touchless' measurement.
  - a. Hold parallel to the forehead, and within 2.5cm of the skin. Keep the individual's head still.
  - b. Hold the thermometer steady in the middle of the forehead, just above the individual's eyebrows. Do not 'swipe' the thermometer across the head.
  - c. Press and hold the temperature button until reading is taken.

### **TAKING A BODY TEMPERATURE MEASUREMENT**

## Residential Visiting Policy during Coronavirus Pandemic

Once the individual is ready, take their body temperature. Ensure that you note down the temperature reading on the Body Temperature Recording Chart (see Attachment 1). Also note the result in a case note in Carelink.

Please see below for the temperature range for adult results via forehead reading.

	Normal Body Temperature	Mild Fever	Fever
Adult	35.4 – 37.7°C	>37.8 – 39.4°C	More than 39.4°C

### USING THE RESULTS OF A BODY TEMPERATURE MEASUREMENT

**If the reading shows a normal body temperature and symptoms persist**, then an additional reading should be taken 30 minutes later. If that reading also shows a normal body temperature then no fever is currently present. The Client or staff member should be monitored and if they continue to appear unwell then medical attention can be sought. If they cease displaying the symptoms above and reporting feeling well, no further action is required.

**If the recording shows Mild Fever or Fever**, then the client or staff member should be isolated to a room, preferably with a closed door. The following steps should then be taken:

1. The person should be made comfortable and kept calm
2. **Take the person's body temperature again in 15 minutes time to confirm the fever.**
3. **If the fever is confirmed**, Team/Service leader must be notified immediately with escalation to Area Manager or on-call manager.
4. Medical attention sought for the person who is unwell, with the support of the Team/Service Leader and Area Manager.
5. Follow advice given by medical practitioner in regards to the need for ongoing isolation.
6. Thoroughly clean the areas which the person who is unwell has been in, so to avoid inadvertently spread of the illness.

### INFECTION CONTROL

Proper infection control is important in containing the spread of disease. When taking a body temperature reading ensure you adhere to the infection control policy including:

- Thorough and timely hand hygiene
- Clean the thermometer before and after using it
- Isolate the unwell individual if a fever is established

### REFERENCE DOCUMENTS

## **Residential Visiting Policy during Coronavirus Pandemic**

- Infection Control and Management of Infectious Conditions Policy
- Incident Management Policy and Procedure
- Consent Form
- Client Risk Assessment form
- NDIS Practice Standards and Quality Indicator Version 3

### **CONTINUOUS IMPROVEMENT**

Improvements to this policy can be made by completing an Improvement Opportunity Form, attaching any suggested amendments and forwarding to the Quality and Compliance Advisor for review.

**Residential Visiting Policy during Coronavirus Pandemic**

**Appendix 5 – Services Flyer**

**ABLE AUSTRALIA FRONT DOOR FLYER FOR ALL SERVICES**



## Residential Visiting Policy during Coronavirus Pandemic



To reduce the spread of COVID-19 (Coronavirus) and protect our clients and staff we ask that you **NOT** enter this facility if you have:

- a fever or shortness of breath or cough and you have returned from overseas in the past 14 days
- you are generally feeling unwell.

If you are delivering something, please knock on the door or ring the doorbell and leave the parcel at the door.

If you need to speak to someone directly, call **1300 225 369**.

Thank you for understanding

## **Residential Visiting Policy during Coronavirus Pandemic**

## Residential Visiting Policy during Coronavirus Pandemic

### Appendix 6 – Visiting Policy and Poster

#### ABLE AUSTRALIA RESIDENTIAL VISITING POLICY DURING CORONAVIRUS PANDEMIC

##### STATEMENT

Able Australia is committed to providing the highest standard of safety for clients and staff. During the coronavirus (COVID-19) health crisis Able Australia is reviewing key policies and procedures, and putting temporary changes in place where required.

##### SCOPE

This policy is to be adhered to in all residential houses where Able Australia clients reside.

##### DEFINITIONS AND ABBREVIATIONS -

Term	Definition
<b>COVID-19</b>	COVID-19 is the specific virological name for the virus causing the Coronavirus Pandemic as declared by the World Health Organisation on 12 March 2020.
<b>Circle of contact /</b>	Number of people that a person comes into direct contact with each day.
<b>Physical distancing</b>	Refers to staying at least 1.5 meters from another person wherever possible to curb the spread of disease

## **Residential Visiting Policy during Coronavirus Pandemic**

### **POLICY DETAILS**

The coronavirus is a flu-like disease which is very easily spread mainly from person-to-person:

- Between people who are in close contact with one another (within about 1.5 meters)
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. They may also land on surfaces which people nearby touch. If they then touch their mouths, eyes or nose they may become infected with the virus also. Infection can be prevented or slowed if proper infection control procedures are followed.

### **Visitor health**

Ensuring that visitors are not unwell upon entry to the residential home is very important in controlling the spread of COVID-19. Visitors should not enter if they:

- Have returned from overseas in the last 14 days
- Have been in contact with a confirmed COVID-19 case
- Feel unwell with symptoms including fever, cough, sore throat, difficulty breathing

In addition, on entry and exit, each visitor must:

- Wash their hands for at least 20 seconds OR apply hand sanitiser
- Submit to having their temperature tested (via touchless thermometer), if requested to do so
- Adhere to physical distancing (keep 1.5 m from other people)
- Limit the location of your visit to specified visiting areas (eg. Bedroom), as advised by team leader in charge
- If the client is taken outside of the home, the visitor you must not take the client to visit areas where people congregate (no shopping centres etc.)

Where visitors take clients off-site, any breaches of these directions may result in Able Australia being unable to support the client for at least 14 days whilst they are in self-isolation (which would be off-site with no guarantee of Able staff to support the client off site) pending clearance of coronavirus infection.

## **Residential Visiting Policy during Coronavirus Pandemic**

### **Circle of contact**

Reducing the circle of contact can also help lessen the chance of infection.

- Visitors will be limited to 1 – 2 people at a time total for the site
- Visitors will be limited to direct family / guardian unless otherwise discussed and approved with the site Team Leader
- No children under 16 years of age are to visit
- Exemptions can be made for circumstances such as end of life

### **Log of visitors**

All sites will keep a log of visitors who enter the building, including the dates and times of their visits. Refer to attachment one for visitors log during COVID-19.

### **Confirmed or suspected case of coronavirus (COVID-19)**

If a case of coronavirus is confirmed at a site, or suspected, Able Australia will follow all directions given by the relevant state and federal government agencies. In addition, visiting to the site will cease until clearance is given. Exemptions to this may apply in situations such as end of life.

### **EQUIPMENT**

At attachment two is a notice which must be displayed at the entrance/s of all Able Australia residential sites for the duration of the declared coronavirus pandemic.

Where visiting is ceased, the sign at attachment three should be prominently displayed at each entrance.

## Residential Visiting Policy during Coronavirus Pandemic

### INFECTION CONTROL

Able Australia will ensure that their support workers have knowledge of and are trained in infection control procedures are per the Infection Control and Management of Infectious Conditions Policy and the Cleaning Checklist and Record Procedure.

### REFERENCE DOCUMENTS

- Incident Management Policy and Procedure
- Infection Control and Management of Infectious Conditions

**CONTINUOUS IMPROVEMENT** - *This statement is incorporated in all Policies / Procedures etc.* Improvements to this policy can be made by completing an Improvement Opportunity Form, attaching any suggested amendments and forwarding to the Quality and Compliance Advisor for review.

**Document Control** *Documents are controlled for version, traceability and security with SharePoint*

## Attachment 1 - VISITORS LOG DURING COVID-19

Date	Arrival Time	Visitor's Name	Mobile Number	Resident being visited	Purpose of visit (Social, etc)	Hand Hygiene (Please tick once complete)	Temperature (please record)	Are you feeling unwell? (Yes or No)	Departure Time	Visitor's Signature

THANK YOU FOR YOUR COOPERATION, WE APPRECIATE YOUR SUPPORT DURING THIS TIME

## Attachment 2 – Posters to be used at all residential services



### Able Australia Visitors Policy

The coronavirus is a flu-like disease which is very easily spread. It can make some people mildly sick but for others it can become a very serious illness.

To prevent the spread of coronavirus Able Australia has implemented the following visitor's policy:

#### Do not enter if you:

- Have **returned from overseas** in the last 14 days
- Have been in **contact with a confirmed COVID-19** case
- **Feel unwell with symptoms** including fever, cough, sore throat, difficulty breathing

#### Who can visit?

- Visitors will be limited to **1 – 2 people at a time** total for the site
- Visitors will be limited to **direct family / guardian** unless otherwise discussed and approved with the site Team Leader
- **No children under 16 years** of age are to visit
- **Exemptions can be made** for circumstances such as end of life

#### What will I need to do?

If you would like to visit with your loved one you will be required to:

- **Wash your hands** for at least 20 seconds OR apply hand sanitiser
- Submit to having your **temperature tested** (via touchless thermometer, **if requested** to do so)
- **Adhere to physical distancing** (keep 1.5 m from other people)
- Limit the location of your visit to **specified visiting areas** (eg. Bed room)
- If you are going outside of the home you must **not visit areas where people congregate** (no shopping centres etc.)

The points above will be applied to all social interactions both at home and if the visit occurs in the community setting.

Where visitors take clients off-site, **any breaches of these directions may result in Able Australia being unable to support the client** for at least 14 days whilst they are in self-isolation (which would be off-site with no guarantee of Able staff to support the client off site) pending clearance of coronavirus infection.





# Do not enter

**Able Australia has a confirmed or suspected case of coronavirus (COVID-19) at this site**

**You will NOT be able to visit any client living here at this time**

**If you have a delivery, please knock on the door or ring the doorbell and leave the parcel at the door.**

**If you need to speak to someone directly, call 1300 225 369 or (insert house phone number here)**