Coronavirus – COVID-19

Purpose:

The purpose of this template is to assist organisations in being very proactive in their approach with the quickly evolving nature of COVID-19. It will assist workplaces to implement controls to prevent the spread along with protocols to implement should a worker become infected with the virus.

Scope:

The scope of this template includes both internal and external situations. Examples of internal situations include but are not limited to: meetings, office workspaces, personal hygiene etc. Examples of external situations include but are not limited to: travel (domestic and international); public events etc.

How COVID-19 spreads

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth. If they are standing within one meter of a person with COVID-19 they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu.

Use of this template:

This template has been categorised according to the relevant sections.

Definitions:

Close contact: Means at least 15 minutes face-to-face contact or the sharing of a closed space for more than two hours with a confirmed case.

Casual contact: Is a person having any face-to-face contact or sharing of a closed space with a confirmed case for less than two hours.

Internal Processes:

Communication & Consultation:

Have you discussed COVID-19 with your workers and the possible ways the virus can be spread? This may allay fears workers have along with ensuring all workers are getting the same message.

Designate a person responsible for each key component provided: Examples of this could include but not be limited to:

- Having one person responsible to check Department of Health (DHS) updates; World Health Organisation (WHO) updates etc. Their role would be to communicate updates to relevant senior personnel prior to being distributed to the workforce.
- Appoint an information spokesperson to coordinate communication with the public, the media, and health authorities should an issue occur.
- Brief all relevant personnel on their roles and responsibilities in the management of COVID-19
- Establish relevant lines of communication to streamline the sharing of information between the departments or sites. This is important as you want to avoid too many people passing on information as the message can become distorted with the more people involved.

Do you have a policy/procedure for dealing with COVID-19? This should include information relating to the spread of the virus, hygiene controls and travel information. Some of the content for the policy may come following the consultation with workers regarding COVID-19.

Do you have an emergency response plan? This would be similar to an emergency evacuation plan and include information such as:

- Lists of nearest medical centres and hospitals along with travel routes and ways to transport personnel. Major hospitals in the various states (Victoria – Austin, Box Hill, The Alfred The Royal Melbourne Hospitals) are setting up 'Screening Clinics' where personnel who have symptoms compatible with COVID-19 may present, however they are asked to call the hospital before doing so.
- Updated staff contact list including next of kin details.

- Is there a room (e.g. first aid room or similar) where we can isolate an infected worker if needed until we were able to transport them to a medical facility.

How do I report unusual health cases/events? Ensure there is a process in place to promote the reporting of unusual health events or cases of COVID-19. Ensure you have established communication channels and procedures within the organisation.

Hygiene & Prevention:

It has been determined that hand washing can kill the virus and prevent the spread of COVID-19. Therefore ensure the following is in place in your workplace:

- Ensure all workers and visitors are aware of respiratory and hand hygiene and their role in the prevention of infection.
- Access to places where workers, contractors and visitors can wash their hands with soap and water.
- Ensure that your hand washing facilities are cleaned on a regular basis, properly stocked and in good working order. Provide alcohol-based hand sanitiser, tissues and cleaning supplies and ensure these are regularly stocked.
- Provide P2/N95 face masks or equivalent PPE. When supplying P2/N95 face masks PPE you will need to ensure that workers know how to use the PPE. If the P2/N95 face masks are not worn correctly then they provide little protection. Some PPE will be single use e.g. hand wipes so ensure that single use items have been identified and staff are trained/aware of what is single use and that it must be disposed of use.
- Ensure that bins are provided for the disposal of mask and other PPE and that they are 'closed lid bins' for hygienically disposing of soiled items
- Encourage workers to routinely clean and disinfect surfaces with which they (or others) have come in contact. This is relevant to workplaces that have 'hot-desks' or operate under Activity Based Working (ABW) systems. Implement methods of routine cleaning and disinfection following the recommended standards and guidelines for COVID-19.
- Provide training relevant to areas of need, including infection prevention and control. This means staff working in higher risk areas such as reception desks, call centres, open plan offices etc. will need to be reminded of hygiene controls and receive updates more frequently than those in isolated areas such as working from home.
- Display posters promoting hand-washing and other personal hygiene initiatives. These can be obtained from your local health authority or the Department of Health.

- Encourage staff with flu liked symptoms to say at home. When coughing ensure you cover coughs and sneezes with the bend of your elbow, or use a tissue, then dispose it immediately in a closed bin and wash your hands.
- Avoid touching your eyes, nose, or mouth with your hands.
- Do not cough or sneeze into your hands.

Human Resources:

Establish a visitors/contractors register: This is important as you will need a record of all persons entering the site, including all workers, visitors and contractors. This could be used by medical authorities to track infected personnel and who they may have had contact with. Make sure that both entry and exit times are completed on the register.

Review absenteeism records: Ensure that records of staff absenteeism are monitored continuously.

Review recruitment policies: Whilst employers cannot discriminate against potential new workers during the recruitment process you want to review polices relating to vetting, accepting, rejecting and liability issues etc. In addition, give consideration to workers who may also be working as volunteers in other organisations i.e. what are the risks associated with the workplace they are volunteering n.

Working from home: If you don't have a working from home policy or checklist it is recommended that one is developed and implemented. If workers have the ability to work from home some may feel safer working in their own environment so this should be encouraged. Whilst working from home can present its own challenges it is recommended that this option is considered and staff are given the option.

Updating travel policy / leave form: Consideration should be given to changing your current leave form to include a section relating to overseas travel. This may ask the worker to provide details of their overseas holiday destination. In addition prior to sending workers on overseas business trips consult national travel advice before authorising trips.

Business Continuity Plan (BCP): Is there a plan in place to ensure business remains viable if a part of the business is closed or slowed due to the virus? For some organisations this will be as simple as sourcing an alternative office location or asking workers to work from home. For others (e.g. manufacturing) it may require more thought and the possibility of sourcing facilities. Once the virus is contained consideration should be given to updating your BCP to include these situations.

Regular updates: Brief workers that if COVID-19 starts spreading in your community anyone with even a mild cough or low-grade fever (needs to stay at home. They should also stay home (or work from home) if they have had to take simple medications, such as paracetamol/acetaminophen, ibuprofen or aspirin, which may mask symptoms of infection.

External Processes:

Events & Conferences:

There is a risk that people attending your conference or event might be unwittingly bringing the COVID-19 virus to that event, therefore before your workers attend an event ensure that there is a real need to attend. If information can be downloaded from the event/conference e.g. video or PowerPoint presentations, this may be a safer option.

Before you attend a conference or event check the advice from the authorities where you plan to hold the event and ensure it is safe to attend. Things to consider:

- Is a face-to-face meeting or event needed? Could it be replaced by a teleconference or online event?
- Could the meeting or event be scaled down so that fewer people attend?

If you are holding a conference or event you will need to develop a responds plan. The response plan should include the following:

- Ensure that you provide an adequate number of hand washing facilities and that they are being cleaned on a regular basis. Encourage regular hand-washing or use of an alcohol rub by all participants at the meeting or event.
- Provide alcohol-based hand sanitise and tissues at the entrance to the event.
- Encourage participants to cover their face with the bend of their elbow or a tissue if they cough or sneeze. Supply tissues and closed bins to dispose of them in.
- As part of the initial material provided about the event, consider including a health section where you would participants in advance that if they have any symptoms or feel unwell, they should not attend.
- Make sure all organisers, participants, caterers and visitors at the event provide contact details: mobile telephone number, email address; where they are staying etc. this is so if someone becomes ill with a suspected infectious disease their details can be shared with local public health authorities.

- Identify a room or area where someone who is feeling unwell or has symptoms can be safely isolated.
- Have a plan for how they can be safely transferred from there to a health facility.
- Know what to do if a meeting participant, staff member or service provider tests positive for COVID-19 during or just after the meeting.
- If there is space, arrange seats so that participants are at least one meter apart.
- Open windows and doors whenever possible to make sure the venue is well ventilated.

Travel Policy:

Travel advice will be updated on a daily basis so it is important that your organisation has one person responsible to check Department of Health (DHS) websites daily and update your advice to workers.

The current information regarding countries of travel is listed below however it is important that this is updated regularly:

Country transmission risk assessment

Higher risk: Mainland China (excludes Hong Kong, Macau and Taiwan), Iran, Italy, South Korea

Moderate risk: Cambodia, Japan, Hong Kong, Indonesia, Singapore, Thailand

This list is based on the risk of the person having been exposed to COVID-19 due to travel to a country with sustained community transmission and other epidemiological evidence. Clinical and public health judgement should be applied.

If you need to send workers overseas to areas where COVID-19 is spreading then organisations should seriously consider the need to travel. If travelling is a necessity then ensure that you do not send employees who may be at higher risk of serious illness (e.g. older employees and those with medical conditions such as diabetes, heart and lung disease).

Make sure all persons travelling to locations reporting COVID-19 are briefed by a qualified professional (e.g. staff health services, health care provider or local public health partner)

Consider issuing employees who are about to travel with small bottles (under 100 CL) of alcohol-based hand rub. This can facilitate regular hand-washing.

Find the latest information:

https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19

https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/

https://www.who.int/emergencies/diseases/novel-coronavirus-2019

https://www.epi-win.com/

COVID-19 Checklist

Question		Yes	No	Comment/ / Action
Communication & Consultation:				
1.1	Have you discussed COVID-19 with your workers and the possible ways the virus can be spread?			
1.2	Do you have an emergency response plan?			
1.3	Has the response plan been communicated to all workers			
1.4	Are roles and responsibilities clearly defined			
1.5	Is there a designated person responsible for each key component of your response plan?			
1.6	Has an information spokesperson been identified to coordinate communication with the public, the media, and health authorities should an issue occur?			
1.7	Do you have a policy/procedure for dealing with COVID-19 and has the policy/procedure been communicated to relevant personnel?			
1.8	Is there a process in place to report unusual health cases/events?			
1.9	Have relevant lines of communication been established?			
1.10	Has a list of the nearest medical centres and hospitals been developed?			

Question		Yes	No	Comment/ / Action
1.11	Is the list prominently displayed in kitchenettes, tea rooms, lunch rooms, bathrooms, toilets, change rooms etc.			
1.12	Has an updated staff contact list been prepared and does it include next of kin details.			
1.13	Have travel routes or other means of transporting personnel to medical facilities been considered?			
1.14	Is there a room (e.g. first aid room or similar) where an infected worker can be isolated?			
Human Resources:				
2.1	Has a visitors/contractors register been implemented?			
2.2	Are relevant personnel completing the register and is the register being reviewed on a regular basis?			
2.3	Have any non-conformances been referred to the relevant personnel?			
2.4	Has a review been undertaken on absenteeism records?			
2.5	Have any non-conformances been referred to the relevant personnel?			
2.6	Have recruitment policies been reviewed?			
2.7	Has a Working from home policy been developed?			
2.8	Has the Working from home policy been communicated to all workers?			
2.9	Has an updated travel policy / leave form been developed and has this been communicated to all workers?			
2.10	Has a travel policy been developed and implemented?			
2.11	Does the policy ask workers to provide details of			

Question		Yes	No	Comment/ / Action
	their overseas holiday destination?			
2.12	Does the policy include getting national travel advice before authorising trips?			
2.13	Does the policy identify at risk countries?			
2.14	Is someone responsible for updating travel advice on a daily basis?			
2.15	Does the travel policy include assessing the need to travel?			
2.16	Does the travel policy include workers been briefed by a qualified professional prior to travelling overseas?			
2.17	Has it been the determined if travel is required?			
2.18	Has Business Continuity Plan (BCP) been developed and implemented?			
2.19	Does the BCP have a process in place to ensure business remains viable if part of the business is closed or slowed due to the virus?			
2.20	Have alternative locations been sourced?			
2.21	Does the BCP include allowing workers to work from home?			
2.22	Has someone been tasked with providing regular updates to workers?			
2.23	Have workers been advised that anyone with a mild cough or low-grade fever to stay at home.			
Hygiene & Prevention:				
3.1	Are all workers and visitors are aware of respiratory and hand hygiene procedures?			
3.2	Is there access to places where workers, contractors and visitors can wash their hands with soap and water?			
3.3	Are handwashing facilities cleaned on a regular basis?			

Question		Yes	No	Comment/ / Action
3.4	Are the handwashing stations properly stocked and in good working order?			
3.5	Have alcohol-based hand sanitisers and tissues been provided and are these regularly stocked.			
3.6	Has the organisation provided P2/N95 face masks or equivalent PPE?			
3.7	Have workers been trained or shown how to fit the relevant PPE?			
3.8	Has single use PPE been provided and are workers aware it is single use?			
3.9	Have bins been provided for the disposal of masks and other PPE? Are the bins are 'closed lid bins'?			
3.10	Are workers encouraged to routinely clean and disinfect surfaces with which they (or others) have come in contact?			
3.11	Have sanitising procedures been developed for hot-desking' or where organisations operate under Activity Based Working (ABW) systems.			
3.12	Has training been provided to areas of need, including infection prevention and control? This will include staff working in higher risk areas such as reception desks, call centres, open plan offices etc.			
3.13	Are hand-washing posters and other relevant hygiene material prominently displayed throughout the workspace?			
3.14	Do posters include information such as – Avoid touching your eyes, nose, or mouth with your hands. – Do not cough or sneeze into your hands.			
3.15	Have workers with flu liked symptoms been advised to say at home?			

Question		Yes	No	Comment/ / Action
Events & Conferences:				
4.1	Has an events/conference policy been developed and implemented? If the organisation has a policy has it been reviewed and updated?			
4.2	Has it been determined if a face-to-face meeting or event needed?			
4.3	Could the face-to-face meeting be replaced by a teleconference or online event?			
4.4	Could the meeting or event be scaled down so that fewer people attend?			
4.5	Have meeting rooms been stocked hand wipes, sanitiser and tissues?			
4.6	Have bins been provided for the disposal of hand wipes, sanitiser and tissues? Are the bins provided 'closed lid bins'?			
4.7	Are workers at meetings and events encouraged to regularly wash hands, or use alcohol rubs?			
4.8	Ensure hand-washing posters and other relevant hygiene material prominently displayed in meeting rooms?			
4.9	Ensure participants at events / meetings encouraged to cover their face with the bend of their elbow or a tissue if they cough or sneeze?			
4.10	If organising an event or meeting has material been provided prior to the event advising participants that if they have any symptoms or feel unwell, they should not attend?			
4.11	For events or meetings being organised have contact details for all organisers, participants, caterers and visitors been provided? This should include contact details; mobile telephone number; email addresses; and name of their accommodation.			
4.12	Has a room been identified where someone who is feeling unwell or has symptoms can be safely			

Question		Yes	No	Comment/ / Action
	isolated?			
4.13	Has a plan been developed for how ill personnel can be safely transferred from the event to a health facility?			
4.14	Has a process been developed and implemented in case a meeting participant, staff member or service provider tests positive for COVID-19 during or after the meeting/event?			
4.15	When setting up for a meeting/event has consideration been given to arrange seats so that participants are at least one meter apart (if space permits)?			
4.16	When setting up for a meeting/event has consideration been given to opening windows and doors whenever possible to ensure the venue is well ventilated?			