

# Tasmanian Coronavirus (COVID-19) Disability Service Providers Preparedness and Response Plan

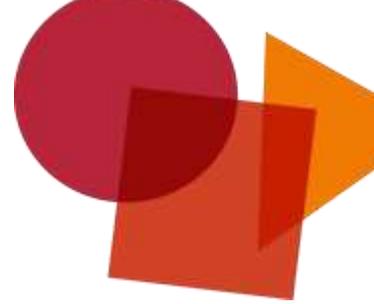
Version No: 06-10-2020

*We acknowledge and respect Tasmanian Aboriginal people as the traditional owners and ongoing custodians of the land on which we work and live, and pay respect to Elders past and present. For around 40 000 years, Aboriginal people have lived on lutruwita/Tasmania, within strong and resilient communities. We acknowledge that as we work to strengthen resilience against COVID-19 across Tasmania*



## Contents

<b>Purpose</b> .....	<b>2</b>
<b>Target Audience</b> .....	<b>2</b>
<b>Context</b> .....	<b>3</b>
<b>Work Safe Requirements</b> .....	<b>3</b>
<b>Disability Service Provider Requirements</b> .....	<b>4</b>
Emergency Plan .....	4
Business Continuity Plan.....	4
<b>Preparedness and Prevention</b> .....	<b>4</b>
Routine Temperature Testing .....	6
Transport.....	7
<b>Coronavirus (COVID-19) in Disability Support Settings</b> .....	<b>7</b>
Approach to persons with respiratory illness.....	7
Coronavirus (COVID-19) in In-Home Support Settings.....	8
Coronavirus (COVID-19) in Supported Independent Living (SIL).....	9
Coronavirus (COVID-19) in Community and Centre-Based Activities .....	10
<b>Management of ill Disability Support Workers</b> .....	<b>10</b>
<b>Governance</b> .....	<b>11</b>
<b>Key Resources</b> .....	<b>11</b>
<b>References</b> .....	<b>12</b>
<b>Appendices</b> .....	<b>13</b>
Appendix 1. Coronavirus (COVID-19) Preparedness Checklist.....	13
Appendix 2. SIL Coronavirus (COVID-19) Outbreak Management Checklist.....	14
Appendix 3. Table 1 – Infection prevention and control measures for clients who are very unlikely to have COVID-19.....	15
Appendix 4. Table 2 - Infection prevention and control measures for clients who have risk factors for having COVID-19 .....	16



## Purpose

The purpose of this plan is to:

- Provide guidance to Tasmanian disability service providers to ensure they are prepared for, and can manage the impacts of, coronavirus (COVID-19) on their business, people with disability being supported and workforce
- Provide links to key information sources and further guidance materials for disability service providers

Guidance in this plan is designed to be used alongside other available resources, including those from the [Commonwealth Department of Health](#) and the [NDIS Quality and Safeguards Commission](#).

Information provided is also consistent with the national [Management and Operational Plan for People with Disability](#).

This plan aligns with the directions issued under the [Public Health Act 1997](#) and should be read in conjunction with information available on the [Tasmanian Government Coronavirus \(COVID-19\) website](#).

This document will be updated on a regular basis. It is best accessed online, as printed copies may become out of date.

Tasmanian disability service providers must always act upon the most up-to-date coronavirus (COVID-19) information provided by:

- [The Tasmanian Government Coronavirus \(COVID-19\) website](#)
- The Tasmanian Public Health Hotline on 1800 671 738

## Target Audience

The target audience of the Tasmanian Coronavirus (COVID-19) Disability Service Providers Preparedness and Response Plan is disability service providers in Tasmania, including:

- National Disability Insurance Scheme (NDIS) registered disability service providers, particularly providers of Supported Independent Living (SIL), community and centre-based activities, in-home support and support coordination
- Non-registered NDIS service providers
- Self-Managed NDIS participants
- Disability and carer advocacy organisations
- Office of the Public Guardian
- Health service providers.

This document is not intended for the general public. Information for the general public is available on the [Tasmanian Government Coronavirus website](#).

Information for people with disability, their families and carers is available on the [Tasmanian Government Coronavirus Disability Information webpage](#).



## Context

Tasmanians with disability are subject to the same restrictions as the general population in Tasmania. Providers should always consider the risk of exposure to coronavirus (COVID-19) against the risk to wellbeing, due to isolation of the people with disability being supported.

However, some people with disability may have higher incidents of health issues, including chronic conditions and weakened immune systems. For this reason, the Australian Government has identified people with disability as a potentially vulnerable cohort during the coronavirus (COVID-19) pandemic.

Key factors to be considered regarding coronavirus (COVID-19) infection risk in disability support settings include:

- The high prevalence of chronic or other medical conditions for people with disability can increase people with disability's risk of severe complications
- The difficulty some people with disability may experience adhering to physical distancing and other coronavirus (COVID-19) prevention or management advice due to support needs and/or understanding
- Communal activity centres may facilitate the spread of respiratory illness
- The environment of communal living facilitates the spread of respiratory illness.

## Work Safe Requirements

Work-related risk is managed under the [Work Health and Safety Act](#) and the code of practice [How to Manage Work Health and Safety Risks](#). These require workplaces to assess and manage risk so far as is reasonably practicable.

All workplaces are required to have a Coronavirus (COVID-19) Safety Plan as part of the [COVID-19 Safe Workplaces Framework](#). Minimum Standards were introduced on 15 June 2020 requiring all businesses to have a Safety Plan.

Disability service providers will need to do a risk assessment to decide which control measures are most suited to their business. Providers will need to take into account the level of risk of the virus spreading that exists at the time.

**COVID-19 Safe Workplace Guidelines** that provide more detail on how sectors and workplaces can meet the Minimum Standards for disability providers include [Other Residential Care Services](#) and [Social Assistance Services](#).

There are Public Health Orders in place that require workplaces to comply with many of the Minimum Standards.



# Disability Service Provider Requirements

## Emergency Plan

Disability service providers should have, as part of their obligations under the [NDIS Code of Conduct](#) and [NDIS Practice Standards](#), an emergency plan that includes preparedness and response to outbreaks of disease within their service (an outbreak management plan).

## Business Continuity Plan

All disability service providers should ensure they have a Business Continuity Plan that addresses the potential impact of coronavirus (COVID-19) on their service delivery.

The Business Continuity Plan will identify:

- Loss of staff as a risk, including specialist skill sets
- Dependencies such as use of third-party providers and service level agreements, including consumables and increased cleaning requirements
- The processes or tasks that, if interrupted, could lead to serious impacts (financial, health, reputational, legal, or other)
- How service continuity can be maintained, for example, in the event of potential staff absenteeism and/or people with disability being supported becoming infected
- Communication plans for communicating with people with disability and families
- Current staff members and their responsibilities and back-up staff for key roles
- How PPE will be obtained and appropriate PPE stock levels maintained.

The Business Continuity Plan is to be regularly reviewed and updated as needed, based on updated public health advice.

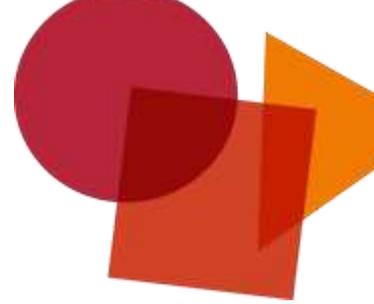
Further information regarding elements to include in the Business Continuity Plan can be found on the [NDIS Quality and Safeguards Commission Fact sheet: Coronavirus \(COVID-19\) – Outbreak preparedness, prevention and management](#).

## Preparedness and Prevention

Disability service providers should ensure:

- Preparedness and prevention activities and decision making are undertaken in-line with current coronavirus (COVID-19) restrictions and requirements in Tasmania and / or the region where support is provided, as applicable

Staff practice best hygiene (as described on the [Tasmanian Government Coronavirus \(COVID-19\) website](#)) as a mandatory requirement for their service delivery. Reminders should be made often to



- staff, people with disability being supported, and visitors
- Where environmental cleaning is a part of staff duties, it is undertaken regularly as per advice provided by the [Commonwealth Department of Health](#)
- Staff are trained in the appropriate use of Personal Protective Equipment (PPE). The Commonwealth Department of Health has produced a [Guide to personal protective equipment \(PPE\) for disability care providers](#) and [Coronavirus \(COVID-19\) wearing personal protective equipment for disability support workers video](#). Tables on appropriate use of PPE are available at Appendices 3 and 4.
- Updated information being released by the NDIS Quality and Safeguards Commission and the NDIS regarding the use and funding of PPE is adhered to:
  - NDIS providers and self-managing participants who can no longer access PPE supplies through usual means can contact the National Medical Stockpile by emailing [NDISCOVIDPPE@health.gov.au](mailto:NDISCOVIDPPE@health.gov.au)
  - The Tasmanian Government has contracted St John Ambulance to coordinate the supply of PPE to essential service providers unable to obtain their supplies through their normal supplier. Contact St John Ambulance on 1300 360 455 or [ppe@stjohnntas.org.au](mailto:ppe@stjohnntas.org.au) for assistance
  - The Department of State Growth has also set up a [Personal Protective Equipment Temporary Supply Register](#)
- Staff are correctly trained in Infection Control Practices, particularly Standard Precautions and transmission-based Droplet and Contact Precautions. The Tasmanian Department of Health has produced [Transmission Based Precautions - A guide for healthcare workers](#)
- Information on preventive health measures directed at minimising transmission of coronavirus (COVID-19) infection is available to the people with disability being supported, families / carers, and staff. This includes culturally appropriate messaging and accessible information around:
  - Coronavirus (COVID-19) and being able to recognise the symptoms
  - Good hand hygiene
  - Cough and sneeze etiquette
  - Physical distancing
  - Appropriate use of PPE.
- Easy read resources, such as those produced by the [National Disability Insurance Agency \(NDIA\)](#) and [Council for Intellectual Disability](#) are available to the people with disability being supported.
- All staff adhere to the travel and quarantine requirements for Tasmania. Updated requirements can be found at [Tasmanian Government Coronavirus \(COVID-19\) - Coming to Tasmania](#).
- Flu vaccinations are strongly promoted for both staff and people with disability to reduce the concurrent burden of influenza in disability support settings, and the confusion regarding diagnosis/causes of outbreaks.
- Staff are informed that, if feeling unwell, they should not attend the workplace.



A Coronavirus (COVID-19) Outbreak Preparedness Checklist is included at Appendix 1 to assist providers with prevention and preparedness activities.

Providers of SIL should **additionally** ensure:

- Discussions occur with General Practitioners (GPs) about the outbreak management plan and GPs are involved in the planning process
- Information is provided to residents and their families to raise their awareness of infection control policies (including isolation protocols), and to ensure they are aware of visitor restrictions and guidelines
- To facilitate social connection as much as possible and ensure residents' and staff mental health is supported, e.g. facilitate video calls and meetings, facilitate face to face visits where desired and within current health guidelines. Providers must ensure that they do not restrict the rights of people with disability by 'locking down' residences without proper reason
- Staffing contingency plans are made in case there is a decrease in staff that is unexpected and/or to an extent that the provider is unable to provide continuity of services or supports to the NDIS participants who currently receive such services or supports from the provider
- Appropriate processes and practices are in place for rapid identification of respiratory illness in residents and staff
- A communication plan is prepared for communicating with staff, residents, volunteers, families / carers and other service providers (e.g. cleaners) during an outbreak, including appropriate signage
- Additional cleaning requirements are prepared, e.g. liaise with contractors or hire extra cleaners as required. Ensure there are enough environmental cleaning supplies
- Residents' wishes have been discussed with them and their families /carers, as well as their primary care provider. Have advance care directives in place for appropriate clinical management in the event of severe respiratory illness.

A SIL Coronavirus (COVID-19) Outbreak Management Checklist is included at Appendix 2 to assist SIL providers with outbreak management activities.

## **Routine Temperature Testing**

There is no requirement for disability service providers to routinely take the temperature of people with disability they support, unless a person is showing symptoms of coronavirus (COVID-19), and / or a provider is advised to do so by health professionals.



## Transport

Where practical and safe, disability service providers should try to maintain physical distance between people when travelling (people sitting as far away from each other in cars / vans, etc).

Coronavirus (COVID-19) hygiene practices should be maintained during transport. Commonly touched surfaces, such as door handles, seatbelts and the steering wheel, should be cleaned and disinfected regularly.

Set the air conditioning to fresh air. Do not recirculate air in the vehicle.

There are no specific requirements regarding transport of people with disability.

## Coronavirus (COVID-19) in Disability Support Settings

### Approach to persons with respiratory illness

- Efforts should be made to determine the cause of respiratory disease outbreaks by ensuring appropriate diagnostic tests are performed early
- The Tasmanian Public Health Hotline (1800 671 738) should be contacted for advice on persons with respiratory illness and accessing testing. Isolation advice should be followed as provided by the Public Health Hotline
- All persons with respiratory illness should limit exposure to others, including other people with disability and staff, while symptomatic
- Infection control and PPE should be applied in accordance with the appropriate clinical guidelines, such as the Tasmanian [Home Visits Risk Assessment Tool and Risk Minimisation Guidelines](#)
- Where there are complex and intense support requirements, the continuation of supports in usual settings is in the person with disability's best interest, where it is safe to do so and subject to a medical assessment
- Additional health supports coordinated by the Tasmanian Department of Health in a shared care arrangement with disability support providers will enable ongoing supports in the person with disability's usual residence without hospital admission, where it is safe to do so and subject to a medical assessment
- If a person requires ventilation, they require hospitalisation. Disability service providers, where possible, may provide disability support and assistance to people admitted to hospital
- Ensuring people with disability have access to health resources in addition to disability supports, such as incidental nursing care, PPE, telehealth and case monitoring will deliver better outcomes for the person with disability
- As a condition of registration with the NDIS Quality and Safeguards Commission, providers must notify the NDIS Commission of changes or events that adversely affect a provider's ability to deliver supports and services to NDIS participants. This includes any change or event that:



- Significantly affects a provider's ability to comply with conditions of registration and the NDIS Practice Standards
  - Seriously impairs a provider's ability to effectively conduct operations and deliver ongoing supports or services to NDIS participants
  - Adversely affects a person with disability's access to the supports or services providers are registered to deliver.
- Providers can notify the NDIS Commission of any changes to the scale of operations due to coronavirus (COVID-19) by emailing [registrations@ndiscommission.gov.au](mailto:registrations@ndiscommission.gov.au), calling 1800 035 544 or completing the [Notification of changes or events form – COVID19 \(registered providers\)](#) on the NDIS Commission website.

## Coronavirus (COVID-19) in In-Home Support Settings

Disability service providers of in-home support services and personal care should develop plans and protocols for staff to manage in-home visits. This should include screening of the people with disability being supported and their household members in advance and/or at the time of the visit for:

- Travelers required to quarantine as per current directions under the [Emergency Management Act 2006 or Public Health Act 1997](#)
- Persons identified as a close contact of a confirmed case within their quarantine period
- Fever and/or acute respiratory infection (e.g. shortness of breath, cough, sore throat with or without fever).

If, upon screening, a person with disability has an acute respiratory infection in the in-home support setting, the disability services provider should:

- Request the person with disability don a surgical mask, where possible, and don PPE themselves
- Call the Tasmanian Public Health Hotline (1800 671 738) for advice on suspected cases
- Involve the person with disability's local medical practitioner
- If under Guardianship, notify guardian. With permission, also notify relatives or representatives of their condition if the person hasn't done so already. Suggest they notify other community visitors
- Recommend to family / friends and other people from outside the household to limit contact with the unwell person with disability
- Commence home isolation strategies that include:
  - Providing advice to the person with disability and family on where to find / providing accessible information regarding coronavirus (COVID-19)
  - Ensuring the person with disability and family / carers have considered how provision of essential household requirements and prescription medication delivery can be met
  - Encouraging people with disability to maintain social contact through means other than physical visits (e.g. telephone/skype).
- Plan for continuation of services to people with disability in home isolation. Situations will be determined on a case by case basis with direction from Public Health Services and clinical oversight



- Where transport to hospital or medical centres is warranted, provide clear communication to the hospital and retrieval services that the transport involves a case or suspected case of coronavirus (COVID-19). It should be noted that some cases will require accessible or specialised transport. In some circumstances, an outreach assessment may need to be considered
- If the person is to be transferred to hospital, information about the person's contacts and preferences (e.g. Individual plan) should be provided and any information about pre-existing health conditions and medications should also be provided.

## **Coronavirus (COVID-19) in Supported Independent Living (SIL)**

Providers of disability services should plan for continuation of services to SIL participants in home isolation or quarantine. Situations will be determined on a case by case basis with clinical oversight and direction from Public Health.

Close contacts - including other people living in the SIL setting, staff, visitors, etc - of unwell people should practice physical distancing until the person's symptoms have resolved. If the person is confirmed as having coronavirus (COVID-19), those close contacts need to be isolated in case they develop the disease to protect the rest of the community. Public Health Services will complete contact tracing to identify these contacts and provide these directions.

If a person with disability within a SIL setting develops an acute respiratory infection, the SIL provider should:

- Isolate the unwell person with disability into a single room:
  - As a priority, accommodate unwell residents with excessive cough and sputum production in single rooms, ensuring that supports can be delivered effectively and the residents have access to their own bathroom.
  - If residents must reside in the same room, cohort unwell residents together and ensure as many efforts are made as possible to physically separate well residents from unwell residents.
- Ideally, identify support staff who can isolate with the person with disability and are trained in infection control and PPE. The isolation placement should have access to health supports as per shared care arrangements
- Check the [Tasmanian Government Coronavirus \(COVID-19\) website](#) to see if accommodation options are available through the State Government for essential workers during an outbreak
- Contact the Tasmanian Public Health Hotline (1800 671 738) for advice to access COVID-19 testing, advising if there are specific requirements due to someone's disability
- Commence infection prevention protocols (including donning PPE) and notify the person with disability's GP, family and guardian, if applicable, as soon as possible to ensure appropriate diagnostic tests are performed promptly
- Perform regular environmental cleaning and disinfection
- Limit visitors to the service and use room restriction signs
- Ensure culturally appropriate and / or accessible information and messaging is available to residents, family and guardians.



## Coronavirus (COVID-19) in Community and Centre-Based Activities

Providers of community and / or centre-based activities should:

- Ensure staff are aware of any current restrictions on gatherings and physical distancing as advised at [Tasmanian Government Coronavirus \(COVID-19\) Gatherings, density and physical distancing](#), noting requirements may change
- Ensure staff are aware of any exemptions that may exist for people with disability from gathering, density and physical distancing requirements. Any exemptions will be noted at [Tasmanian Government Coronavirus \(COVID-19\) Disability Information](#)
- Develop plans and protocols regarding coronavirus (COVID-19), including screening of people with disability being supported in advance of activities for:
  - International or interstate travel in the 14 days before the activity and/or contact in 14 days before the activity with a confirmed case of coronavirus (COVID-19).
  - Fever and/or acute respiratory infection (e.g. shortness of breath, cough, sore throat with or without fever).

If a person with disability within a community and centre-based activities setting develops an acute respiratory infection, the provider of community and / or centre-based activities should:

- Request the person with disability don a surgical mask, where possible, and don PPE themselves
- Call the Tasmanian Public Health Hotline (1800 671 738) for advice on suspected cases
- Involve the person with disability's GP
- If under Guardianship, notify guardian. With permission, also notify relatives or representatives, or SIL provider if applicable, of their condition if the person hasn't done so already
- Where transport to hospital or medical centres is warranted, provide clear communication to the hospital and retrieval services that the transport involves a case or suspected case of coronavirus (COVID-19). It should be noted that some cases will require accessible or specialised transport. In some circumstances, an outreach assessment may need to be considered
- If the person is to be transferred to hospital, information about the person's contacts and preferences (eg. Individual plan) should be provided and any information about pre-existing health conditions and medications should also be provided.

## Management of ill Disability Support Workers

During times of coronavirus (COVID-19) activity, disability service providers should ensure staff:

- Are aware of current exclusion from work criteria for returned travellers as per Tasmanian Government guidelines at [Tasmanian Government Coronavirus \(COVID-19\) Coming to Tasmania](#).
- Know and be alert for symptoms of coronavirus (COVID-19). Symptoms include:



- a fever (a temperature of 38 degrees or above), and / or
- a cough, sore throat, shortness of breath or respiratory illness
- Exclude themselves from work immediately if they develop a respiratory illness, report the illness to their supervisor and be assessed for coronavirus (COVID-19).

It is recommended that disability support workers stay off work until they are symptom-free and have a post infection negative coronavirus (COVID-19) test result. Staff should remain alert to symptoms.

A back up workforce should be investigated if a high percentage of staff are having to self-isolate. The NDIS Quality and Safeguards Commission must be notified of changes and events which substantially affect the ability to provide the supports and services the provider is registered to provide. This includes if a provider is unable to provide services due to a lack of well / non-isolating staff.

## Governance

Liaison Points for Governance of the Tasmanian Coronavirus (COVID-19) Disability Service Providers Preparedness and Response Plan are:

- Director Disability and Community Services
- NDIS Quality and Safeguards Commission State Director of Tasmania
- Tasmanian Department of Health, Public Health Services

The liaisons will work collaboratively with key sector stakeholders for distribution of information to the Tasmanian disability services sector.

## Key Resources

Important recommended sources of truth to go to for information are:

- [Australian Government Department of Health Coronavirus \(COVID-19\) webpage](#)
- [NDIS Coronavirus \(COVID-19\) Information and Support webpage](#)
- [NDIS Quality and Safeguards Commission Coronavirus \(COVID-19\) information webpage](#)
- [Tasmanian Government Coronavirus \(COVID-19\) webpage](#)
- [Tasmanian Department of Health's website](#)
- Tasmanian Public Health Hotline: 1800 671 738
- National Coronavirus Helpline: 1800 020 080
- Disability Information Helpline: 1800 643 787
- COVID-19 Health Professionals Disability Advisory Service: 1800 131 330



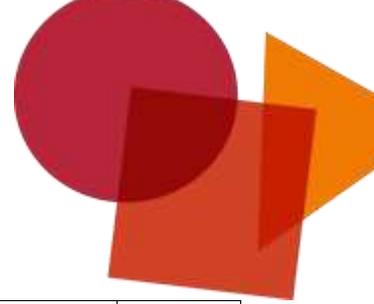
## References

- [Work Health and Safety Act](#)
- [How to Manage Work Health and Safety Risks](#)
- [COVID-19 Safe Workplaces Framework](#)
- [NDIS Code of Conduct](#)
- [NDIS Practice Standards](#)
- [NDIS Quality and Safeguards Commission Fact sheet: Coronavirus \(COVID-19\) – Outbreak preparedness, prevention and management](#)
- [Guide to personal protective equipment \(PPE\) for disability care providers and Coronavirus \(COVID-19\) wearing personal protective equipment for disability support workers video](#)
- [Transmission Based Precautions A guide for healthcare workers](#)
- [Coronavirus Disease 2019 \(COVID-19\) Outbreaks in Residential Care Facilities](#)
- [Coronavirus Disease 2019 \(COVID-19\) CDNA National Guidelines for Public Health Units](#)
- [Home Visits Risk Assessment Tool and Risk Minimisation Guidelines](#)
- [Management and Operational Plan for People with Disability](#)



## Appendices

<b>Appendix I. Coronavirus (COVID-19) Preparedness Checklist</b>	<b>Check</b>
<b>Planning Actions</b>	
Does your organisation have an <b>Emergency Plan</b> ?	
Does your organisation have a <b>Business Continuity Plan</b> ?	
Have the relevant health care providers (e.g. GPs) been involved in the planning process?	
Are <b>all staff aware</b> of the plans, including their roles and responsibilities?	
<b>Staff, People with Disability and Family / Carers Education</b>	
Has your staff undergone <b>education and training</b> in PPE and infection control?	
Has your organisation provided the people with disability you support culturally appropriate and <b>accessible information</b> on topics such as coronavirus (COVID-19), good hand hygiene, cough and sneeze etiquette, physical distancing and the appropriate use of PPE?	
<b>Staffing Actions</b>	
Does your organisation have a <b>staffing contingency plan</b> in place?	
Can you <b>identify close contacts</b> from within your facility of staff members, visitors, and any people with disability who utilise your services in a timely manner if they are confirmed as a COVID-19 case?	
<b>Stock Levels</b>	
Has your organisation acquired <b>adequate stock</b> of PPE, hand hygiene products, and cleaning supplies?	
<b>Outbreak Recognition Actions</b>	
Does your organisation <b>routinely assess</b> the people with disability you support for respiratory illness (with or without fever)?	
Does your organisation encourage staff to report Coronavirus (COVID-19) symptoms and stay home if unwell?	
Does a process exist to <b>notify</b> management and the Tasmanian Public Health Hotline as soon as practicable (and within 24 hours) of when a coronavirus (COVID-19) case is suspected?	
<b>Communication Actions</b>	
Does your organisation have a <b>contact list</b> for the appropriate people to notify if coronavirus (COVID-19) is suspected (including families / carers, GPs)?	
Does your organisation have a <b>plan for communicating</b> with staff, people with disability, family members / carers and other service providers (e.g. cleaners) if coronavirus (COVID-19) is suspected?	
If you are a SIL provider, do you have a plan to <b>restrict unwell visitors</b> entering the accommodation as well as limitation of well visitors during an outbreak to reduce risk of transmission both within the accommodation and externally (e.g. security, signage, restricted access)? Is this plan in-line with public health guidelines and therefore does not restrict the rights of people with disability by 'locking down' residences without proper reason?	
<b>Cleaning</b>	
Does your Emergency Plan and Business Continuity Plan identify who is responsible for overseeing increased frequency of cleaning in disability support settings, liaison with contractors or hiring extra cleaners as necessary?	



<b>Appendix 2. SIL Coronavirus (COVID-19) Outbreak Management Checklist</b>	<b>Check</b>
<b>Identify</b>	
Screen staff for symptoms at the start of each shift	
If you are concerned there is an outbreak at your facility, contact Public Health Services via the Public Health Hotline. Public Health Services will declare if there is an outbreak.	
Nominate an outbreak coordinator and management team at the facility if an outbreak is declared	
<b>Implement Infection Control Measures</b>	
Accommodate all ill residents in a single room or cohort ill residents	
Implement contact and droplet precautions	
Provide PPE outside the room	
Display PPE signage outside room	
Exclude ill staff until symptom free (or if confirmed case of coronavirus (COVID-19), until they meet the release from isolation criteria)	
Reinforce standard precautions (hand hygiene, cough etiquette) throughout accommodation	
Display outbreak signage at entrances to accommodation	
Increase frequency of environmental cleaning (minimum twice daily)	
<b>Notify</b>	
Notify the NDIS Quality and Safeguards Commission of changes and events which substantially affect the ability to provide the supports and services the provider is registered to provide (this includes a coronavirus (COVID-19) outbreak)	
Provide a list of close contacts of the confirmed case to Public Health Services	
Provide a line list of residents and staff with COVID-like illness. Update list daily.	
Contact the GPs of ill residents to assist with the outbreak management plan	
Inform families / carers and all staff of outbreak	
Provide information to residents and their families / carers to ensure they are aware of visitor restrictions and guidelines	
Contact Public Health Services if there are any hospitalisations or deaths from COVID-19 in the facility	
<b>Restrict</b>	
Restrict movement of staff between areas of accommodation	
If possible, identify support staff who can isolate with the person with disability and are trained in infection control and PPE	
Avoid resident transfers if possible	
Restrict ill visitors where practical	
Cancel non-essential group activities during the outbreak period	
<b>Monitor</b>	
Monitor outbreak progress through increased observation of residents for fever and/or acute respiratory illness	
<b>Declare</b>	
Public Health Services will declare when an outbreak is over.	
<b>Review</b>	
Review and evaluate outbreak management – amend outbreak management plan if needed	

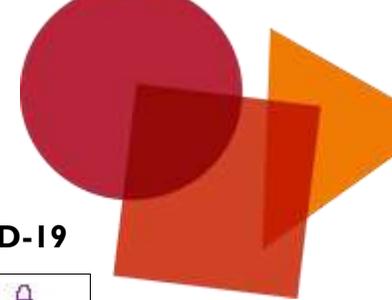


**Appendix 3. Table I – Infection prevention and control measures for clients who are very unlikely to have COVID-19**

For use when:	 Hand hygiene	 Gloves	 Surgical mask	 P2/N95 respirator	 Eye protection (safety glasses/goggles/ face shield)	 Disposable fluid repellent gown	 Plastic apron
Providing care that involves touching the client or contact with blood or bodily fluids eg dressing and showering.	✓	✓	Only if there is risk of splash to the carer's face from blood or bodily fluids.	✗	Only if there is risk of splash to the carer's eyes from blood or bodily fluids.	Only if there is risk of splash to the carer's body from blood or body fluids.	
Providing non-contact care or support.	✓	✗	✗	✗	✗	✗	

Table I relates to delivering care to someone who is **very unlikely to have coronavirus (COVID-19)**, i.e.:

- Are **not** in quarantine
- Are **not** unwell
- Have **not** been diagnosed with coronavirus (COVID-19), and
- Are **not** waiting for coronavirus (COVID-19) results



**Appendix 4. Table 2 - Infection prevention and control measures for clients who have risk factors for having COVID-19**

For use when:	 Hand hygiene	 Gloves	 Surgical mask	 P2/N95 respirator	 Eye protection (safety glasses/ goggles/ face shield)	 Disposable fluid repellent gown	 Plastic apron
Providing care that involves touching the client or contact with blood or bodily fluids eg dressing and showering	✓	✓	✓	✗	✓	✓	✗
Providing non-contact care or support when 1.5 metres distance <b>cannot</b> be maintained or if visit is for longer than 2 hours	✓	✗	✓	✗	✗	✗	✗
Providing non-contact care or support when 1.5 metres distance can be maintained, and the visit is for less than 2 hours.	✓	✗	✗	✗	✗	✗	✗

Table 2 relates to delivering care to someone who **have or might have coronavirus (COVID-19)**, i.e.:

- People in quarantine
- People who are sick with flu-like or respiratory symptoms – fever (or signs of fever, eg night sweats, chills), cough, sore throat or shortness of breath – who have not been tested for coronavirus (COVID-19)
- People who are waiting for coronavirus (COVID-19) test results
- People who have tested positive to coronavirus (COVID-19) and not yet been released from isolation by the Public Health Service

*Thank you to the Tasmanian Department of Health for permission reproduce Table 1 and 2.*

*Thank you to the Victorian Government Department of Health and Human Services for the permission to reproduce the purple icons in Table 1 and 2.*



**Department of Communities Tasmania**

Housing, Disability and Community Services

**Phone:** (03) 6166 3578

**Email:** [HDCS.programsupport@communities.tas.gov.au](mailto:HDCS.programsupport@communities.tas.gov.au)

**[www.communities.tas.gov.au](http://www.communities.tas.gov.au)**