

SO 38 PANDEMIC RESPONSE PLAN

DOCUMENT CONTROL

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PURPOSE OF THIS PLAN

This plan is to provide service and business continuity, protection and reassurance to customers and staff of Lifebridge Australia Ltd. (Lifebridge) in the event of a pandemic or pandemic like event. The activation of this plan is to be made by the Directors of Lifebridge or in their absence through delegation to the CEO.

This document is intended to act as a guide only and should be tailored to meet the unique circumstances of the pandemic threat, advice issued by the World Health Organisation, Chief Medical Officer for Australia, State and Federal guidelines and common sense, guided by the Lifebridge Executive Team.

This document is to be referenced with;

Pol HRM 08 - Infection Control

Pol HRM 08 - Infection Control - Addendum 1- COVID-19 Response

Pol HRM 08 - Infection Control - Addendum 2- COVID-19 Vaccination

Pol HRM 08 - Infection Control - Addendum 3- COVID-19 Risk Assessment and Contact Management

1.1 Objectives

- Provide timely and accurate information to our customers and staff.
- To reduce the risk of serious illness and death.
- To reduce the emergence/spread of a potential pandemic outbreak at Lifebridge, to the extent that this is possible.
- Maintain continuity of Lifebridge customer support during a pandemic for as long as possible.

1.2 Context

Lifebridge is a small-medium service provider of approx. 120 staff. Services provided are in home and community-based support to people with a disability and the aged and consultancy services in the form of Support Coordination. The Lifebridge customer base is a mixture of those who are independent and not reliant on daily staff visits for life essential tasks and those who are.



RESPONSE OVERVIEW

Phases	What It Looks Like	Trigger Points	Relevant Documents
One	Planning, updating records, policies and procedures, pandemic education, increased hygiene awareness, keeping people informed and monitoring risk.	 Evidence of pandemic WHO Alert Government directive Advice and information from PEAK bodies and agencies Advice and instructions from Department of Health 	 Business Continuity Plan Printed version: Continuity of Services for Critical Support Printed version: Critical Functions document Phase one information email – all Phase one information email – staff only
Two	Limiting environmental opportunities for exposure, significant hygiene focus, avoiding close contact, degrees of social distancing and self-isolating based on risk factors. Remote working where possible and recommending people rethink their contact with crowds.	 Increase in local community transmission Government directive Industry best practices recommendations Concern from Lifebridge Executive Team that rapid escalation is likely 	 Risk assessments of programs, activities and delivery methods Modified support program outline is developed (Including virtual programs and work activities where possible) Contact technology providers to ensure everything is in place and nothing further needs to be done Ensure all relevant workers have access to technology providers for problem solving technical issues. Ensure everyone has TEAMs up and running Phase two email – all
Three	Quarantines, enforced lockdowns, significant changes in how the community does business.	 Government directive Break out within Lifebridge community Significant spread within similar community groups in Australia (community aged care, schools, uni's) Customers and staff choosing to selfisolate 	 Continue communications (daily if required) to staff Move to remote service provision where possible Ensure supplies of PPE and hygiene products are in place Ensure staff are aware of hygiene and infection control protocols Begin identifying service options if Lifebridge needs to close or has a significant staff shortage

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PHASE ONE – OPERATIONAL PLAN

Triggers

- o Evidence of pandemic
- o WHO Alert
- o Significant social media evidence
- o Government directive
- o Updated as above

PHASE ONE – BUSINESS FUNCTIONS		
Action	Elements	Who will do it?
Review pandemic plan and related documents. Update to reflect nature of current threat.	 Pandemic Plan Related Government documents Lifebridge Policies and Procedures Communication Strategy 	CEO and Executive
Pandemic Team	The Lifebridge Executive Team will act together as the Pandemic Team to ensure continuity of service. The Team will meet (virtually) in response to the evolving situation as often as required	Executive Team
Update customer emergency contacts	 Review, contact and update information for direct service customers who will rely on Lifebridge for essential support during a pandemic. Ensure information in Visicase and the Continuity of Services for Critical Support on Teams (Teams/All Office/Continuity of Services for Critical Support) is up to date Update Critical Functions Template 	Department Managers Care Managers
Review essential supply and equipment needs and place order (critical this occurs quickly)	 Ensure there are adequate supplies of Personal Protective Equipment (PPE) and hygiene equipment and products Check all hardware and software ensuring people have access to information and have communication capabilities. 	Communications Officer Customer Service Officer/Receptionist

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Action	Elements	Who will do it?
Communicate with customers and	Reassurance email outlining what to expect next	Executive Team
staff re: expectations and potential	Use text messages for urgent messaging/better read rate	Communications Officer
service changes	Ensure all telephone numbers, email addresses and postal addresses of customers and	Department Managers
	staff are up to date and correct	WHS Chairperson
	Daily monitoring of relevant departments, agencies and employer/employee associations	ASU Delegates
	eg. Fair Work, ATO, Jobs Australia, NDIA & ACSA for up to date information	
	Consult with Work, Health & Safety Committee and ASU delegates	
Cash flow analysis to allow for	Presume all leave will be expended and no revenue coming in	Finance Manager and
annual and sick leave pay outs	Use other areas in Australia/world who are in lockdown to estimate possible closure	Business Services
	period	Manager
	Bring all billing up to date to secure cash position	
	Consider weekly invoicing if negative cash position is likely or NDIS/Plan Managers are	
	likely to close	
	Ensure Medicare claims are submitted on 1 st of following month	
	Monitor Department of Health payment cycle	
	Consider requesting payment arrangements for payroll tax or BAS payments to protect	
	cash flow if necessary	
	Monitor and access government relief assistance where applicable.	
	Plan for partial and full stand downs – when, who, how	
Staff mapping to allow for sick leave	Use Service Cancellation List – Volunteer and Staff Cancellation tab	All Department Managers
spike & role contingencies	Use Critical Functions template	
	Identify roles that may need external support and begin organising	
	Secure arrangements with temporary staff agencies for additional resources	
	Look to and prepare for flexible support arrangements	
	Look at staff extending their availability through pandemic	
	Look at staff working across all areas of the organisation	
	Managers to identify other organisations who may be willing to work in partnership	
	and take on extra work throughout a pandemic if required. Begin discussions and	
	identify agreements and other arrangements that would need to be in place.	
	Keep across other organisations and industries in the local area who may have	

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	shutdown/stood down/made staff redundant. Can these staff be used for non-clinical, unskilled service delivery if Lifebridge experience an emergency staff shortage If service cannot be provided using Lifebridge staff refer to Phase 3 – Staffing Crisis If customer sick leave exceeds staffing demand staff hours may need to be reduced through partial or full stand downs as per the plan developed by Business Services and Finance	
	PHASE ONE – CUSTOMER SUPPORT	
Action Review high risk activities (large group gatherings, international travel, interstate travel). Assess risk of each and notify of any potential changes Disseminate easy English directions	 Risk assess events/calendar activities Risk assess individual STA requests Risk assess all Lifebridge activities in preparation for phase 2 and phase 3 Department Managers to notify any governing bodies of changes to service as per directives (Department of Health for CHSP and HCP, NDIS Quality and Safeguard Commission for disability services) Look to pre-existing templates to save time (i.e. Growing Space, NSW Health, NDIS, ACSA) 	Who will do it? All Department Managers All Department
re: the virus, what to do and good hygiene	Provide information to support workers and customers by making hard copies available for staff to collect from office for customer's homes	Managers Communications Officer
Encourage advanced ordering of essential items including medications, personal care equipment and consumables	 Regular communication to be maintained with all customers to reassure and manage expectations. Phone families to discuss support expectations in case of isolation. Note this information on CRM and Continuity of Support Identify risk areas if customers are required to go into lockdown – begin preparations to respond and mitigate risks 	Department Managers

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	PHASE ONE – STAFFING FUNCTIONS	
Action	Elements	Who will do it?
Provide staff with information about the pandemic, what to do and good hygiene practices	 Look to pre-existing templates and Fact Sheets to save time (ie WHO, NSW Health, NDIS, DSC, NDS, ACSA) Guide staff on how to respond to concerns or questions raised by customers Monitor for any undue anxiety or concern in staffing team, remind staff of EAP should they require it Increase telephone calls and text message check in's and offer additional support sessions where needed 	Business Services Manager and Communications Officer Department Managers
Disseminate any equipment needed to protect staff	 Consider stock availability and government advice regarding technique and need. Hand sanitizer, masks and gloves essential 	Finance Manager for procurement Department Managers
	PHASE ONE – INFECTION CONTROL	
Action	Elements	Who will do it?
Identification of any training or upskilling to deal with pandemic ie. infection control training	 Use ELMO where possible to deploy training and avoid group gatherings Look to existing online training (i.e. NSW Department of Health) Mandatory for staff, provided as recommendation to customers and extended networks. 	Business Services Manager and Department Managers
Infection Control Program increased	 Response to be based on relevant health information given regarding pandemic i.e.; Office sterilisation (daily of common touch surfaces) Move to single use paper towels – no fabric cloths Use of single use wipes for high traffic touch areas Physical contact review (no hugging, handshakes or closed spaces meetings) See Resource Section for FACT Sheets and Infection Control Instructions 	Department Managers

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PHASE TWO - OPERATIONAL PLAN

Triggers

- o Increase in local community transmission
- o Government directive
- o Industry best practice recommendations
- o Concern from Lifebridge Executive Team that rapid escalation is likely

	PHASE TWO – BUSINESS FUNCTIONS		
Action	Elements	Who will do it?	
Pandemic Team to begin isolating	 Only present in office on low traffic days Not to be in the office on the same days Work from home preferred 	Executive Team	
Key business roles identified and training back up staff in essential duties to ensure business continuity in the event of illness or death	 Based on Critical Functions document Customers and staff to be given up to date contact list with a tree of alternatives given alternative contacts in case their usual contact is unavailable 	Department Managers	
Work from home arrangements for any staff in a non-customer facing role	 All office-based staff to begin working from home where practical Not to be in the office on the same days Move to phone or Teams meetings wherever possible Avoid travelling to other providers environments unless essential Care Managers and Co-ordinator's of Support to limit face to face contact with customers to essential contact only 	Department Managers	

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Identify high risk community businesses where Lifebridge customers and staff spend time and request details of their infectious control program and begin to risk assess	Particular focus on nursing homes, pubs and clubs, gyms, shopping centres, cafes or activities where bodily fluids and touching of high traffic surfaces exist	Department Managers
Maintain Communication with	Regular emails, texts, electronic meetings where possible.	Communication Officer
staff and customers	 What to do if a customer doesn't answer their phone? What do you do if you suspect a customer has Coronavirus? What do you do if you suspect a customer's mental health is declining? 	Department Managers
Limiting Business Growth	 No new customers to be accepted in this period unless critical to the customers safety and wellbeing No new staff to be employed in this period unless critical to maintaining customer support or business continuity 	Department Managers
	PHASE TWO – CUSTOMER SUPPORT	
Action	Elements	Who will do it?
Individual program restructures based on risk assessment	• Identify high risk areas (gyms, movie cinemas, ten pin bowling alleys, shopping centres, large craft groups) and recommend limiting time, finding safer alternatives and/or increasing hygiene practices within these environments (for example, staff to wipe down immediate surfaces, identify lower traffic volume times or attend immediately after a sterilisation cycle for that business).	Department Managers
	Preferred option to find an alternative activity that is not high risk	
Cancellation of group events	 Groups are to be restructured and only to continue if Public Health Unit rules and guidelines can be adhered to (smaller group sizes, maintenance of personal hygiene practices). Groups will be cancelled if rules and regulations cannot be implemented or if instructed to do so by an authorising government department. Alternatives for group activities should be put in place within a person's home, with social distancing measures in place. If this is outside the funding capabilities of a person's NDIS, HCP or CHSP plan the Care Manager should contact the appropriate funding department or NDIS Commission to discuss. 	Executive Team

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Action	Elements	Who will do it?
Adjusting customer support	Telephone contact to be maintained with customers	Department Managers
	Written communication to be sent with key points and explaining changes to service	Communications
	Care Managers and support workers to work with customers to assist in setting up technology where possible	Officer
	Develop online activities and programs where possible for example: Virtual 'coffee catch ups' to be facilitated between customers who are also friends through group video conferencing - mentor to facilitate; trivia games; cooking classes	
	Organise telephone/video calls for customers with friends and family, instead of face-to-face visits. This may include establishing a new team to coordinate and initiate connections for customers and their friends and family to stay in touch.	
	• Encourage customers to send (or send on their behalf, with their consent) regular emails to friends and family about the customer's daily activities.	
	 Over the phone welfare checks will be conducted with vulnerable and high-risk customers Where appropriate, consider changing domestic assistance support to welfare checks, with only essential domestic assistance (such as shopping for food, medication delivery or changing bedding) continuing as usual. 	
	1:1 service to continue if instructed by Department of Health ensure that hygiene precautions are practices	
	Essential services such as shopping, medication checks and personal care will continue as usual	
	 Arrange for support workers to do unaccompanied and on-line shopping. Groceries will be paid for by pre- loaded card and new CM 01s - Customer Financial Consent and CM 01e - Customer Cash Transaction Sheet are to be completed. Support worker will leave groceries at the doorstep for high-risk customers. 	
Consider if staffing needs should	Customers who have identified as having comorbidities that may increase their risk of	Department Managers
change – particularly for high risk customers	illness might want to limit the number of staff in their homes and want consistency in staffing	
	Consider consolidating to a smaller team of necessary staff only to limit risk of exposure	
	Consider cancelling services from providers who see multiple customers across multiple environments (ie. Agency, cleaners, personal trainers, home delivery meals). Liaison with	
	other service providers will be the responsibility of the Customers Care/Support Manager.	

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Emotional wellbeing focus	 Consider if a customer may struggle emotionally or physically in the event of a lockdown and start identifying options for them to stay elsewhere or for someone who would willingly go into lockdown with them in their home. This could be a family member, staff member, natural support or another customer depending on needs. Consider government respite options Ensure customers are not unduly worried or anxious Ensure customers understand what a lockdown or quarantine might look like for them and what supports they would have access too Offer access to apps like Calm and Headspace Ensure any technical devices used to stay connected are updated, connected and working. That all phone and internet bills are up to date to prevent disconnection Ensure Teams/Zoom has been installed for anyone wanting virtual support Where possible encourage, setup and facilitate technological solutions for tech resistant customers Maintain contact with all customers through telephone/mail/email/SMS/video conferencing 	Lifebridge – All staff
	PHASE TWO – STAFFING	
Action	Elements	Who will do it?
Staff notified of employment arrangements if impacted by pandemic	 Lifebridge to seek IR legal advice and to assess current financial situation and forecast cashflows to determine flexibility and wage support that can be provided to staff (including casuals) to meet their personal financial requirements in the event of suspicion of illness or mandatory shut down periods. This will be reviewed on an as needed basis and/or as further information is released through government. (flexible use of leave entitlements, pay in advance if possible, leave without pay if preference - all options to be considered) This will limit people attending work whilst sick through financial need Requirement for medical certificates may be on an as required basis during this time This will ensure staff are still available when its business as usual again 	Finance Manager and Business Services Manager
Staff Mapping	 Where possible limit movement of staff across teams and customers to reduce the risk of internal cross contamination Identification of any staff with comorbidities that make them particularly vulnerable to the virus. Contact and discuss options with these staff. Redeploy if possible 	Rostering staff Department Managers

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	Allow staff to self-isolate if they feel unsafe and no longer want to work	
	PHASE TWO – INFECTION CONTROL	
Action	Elements	Who will do it?
Increase infection control program	 Support Workers to undertake car sterilisation between customers using single use Dettol type wipes Increase disinfecting of high touch surfaces in customers' homes All visitors to office/workshops asked to use hand sanitiser upon arrival Offices/HUB cleaning frequency increased to before and after activity. Start and end of day. Cleaning products audited and upgraded where necessary to ensure meets 	All Staff, Volunteers, Support Workers
	 recommendations for virus control Staff to participate in online Infection and Hygiene Protocols Training Use of QR codes as required Follow HRM08 Infection Control policy and related procedures as updated. 	

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PHASE THREE – OPERATIONAL PLAN

Triggers

- o Government directive
- o Break out within Lifebridge community
- o Significant spread within similar community groups in Australia (aged care, schools, Universities)
- o Customers choosing to self-isolate

	PHASE THREE – BUSINESS FUNCTIONS	
Action	Elements	Who will do it?
Business operates remotely	 All office staff working from home All Managers to maintain regular contact with staff Government apps for tracing the disease and any other initiatives mandated or encouraged by the government are to be communicated to staff and customers eg. QR codes, immunisations Contact with customers to be maintained Critical Functions roles ready to be activated in the event staff cannot work Finance Manager to continue closely monitoring income and cashflow projections. Finance Manager to closely monitor government grants and incentives to assist during the pandemic and apply for any that are appropriate Executive to continue monitoring the cashflow and projections to determine if the company can remain open and/or whether stand downs are required. Should full shutdown be required: Identify where overheads can be reduced or "hibernated" e.g partial or full stand downs, redundancies, lease agreements, tax payments, utilities etc. 	Finance Manager and Executive

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Pandemic Management	 Executive Team will meet as often as required throughout the day but at a minimum the team will meet virtually daily @9.00am. Government directives and changing guidelines are to be reviewed and translated into practice Daily communications are to be sent to all staff updating them on changing guidelines, workplace practice and infection control practices. All customer communication is to be sent outlining changes to service and encouraging the maintenance of essential services where allowed by government and identified as being required by the customer. PPE and hygiene supplies are to be closely monitored and replenished as needed Staff numbers and customer numbers are to be closely monitored to ensure that essential services can be maintained. Daily reports to be provided to Executive Team. 	Executive Team Communications Officer Customer Service Officer/Receptionist
	PHASE THREE – CUSTOMER SUPPORT	
Action	Elements	Who will do it?
Customers taken to alternative locations	Customers who have notified they want to be taken to alternative locations are to be collected and driven by identified staff.	Department Managers
Essential Service	 Essential services identified in Phase 2. Staff willing to complete essential in-home services have been identified and included in roster Care Managers have contacted all customers and organised appropriate ongoing service where necessary. Essential services list has been reviewed to ensure all customers have been considered and responded to Alternate methods of service have been discussed with customers requiring essential service should Lifebridge be unable to provide service. All Customers continue to be contacted for well-being checks 	Department Managers

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	PHASE THREE – STAFFING	
Action	Elements	Who will do it?
Work from home processes	 All Managers to maintain contact with staff working from home Regular written communication to all staff informing them of latest developments is to be maintained Staff to be reminded of the EAP service and encouraged to use it as required Working from Home Checklists and Agreements to be updated 	Department Managers
Customer staffing	 Monitoring of staffing levels should be undertaken daily whilst in the emergency phase In the situation where there is an outbreak and the workforce is compromised and Lifebridge is unable to fill shifts with regular employees the following steps should be taken: Use Critical Functions template Refer to Continuity of Services for Critical Support. Cease all service that is not essential for daily living Speak to customers and prepare to enact emergency plans that were discussed with customers in Phase 1 and 2 (contact family and friends or move to alternate accommodation where possible) Ensure all available staff from across the organisation are being fully utilised Request staff to extend availability where possible Proceed with immediate recruitment and placement Contact regular Recruitment Agencies for agency staff Consider all external contractors (e.g nursing service) to determine if service can be outsourced Department Managers to contact other identified organisations to discuss their capacity to take on extra work and where possible enact agreements prepared in Phase 1 and 2 Respite and emergency placement options to be considered For Home Care Packages only: When all avenues for accessing extra staff has been exhausted contact Department of Health Inform the Department of Health of your COVID-19 case or outbreak at agedcareCOVIDcases@health.gov.au 	Department Managers

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	referral to Mable following screening and eligibility checks		
PHASE THREE – INFECTION CONTROL			
Action	Elements	Who will do it?	
Best practice hygiene processes	 Update staff training in infection control procedures, including standard precautions (hand hygiene, correct use of appropriate PPE where needed (and disposal procedures), and cough and sneeze etiquette and transmission-based precautions (contact and droplet precautions). Remind staff of the protocols for not coming to work (see below) Ensure standard infection control precautions throughout all workplaces. Increase environmental cleaning – ensure all staff have access to cleaning materials and are prompted to clean prior, during and after 	All Lifebridge staff, volunteers and Customers	

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2. Critical Functions List

Role	Primary	Back Up One	Back Up two
Pandemic Team	CEO (+ Exec)	Business Services Manager (+ Exec)	General Manager (+ Exec)
Payroll	Denise	Michelle	Kim
Finance (Payable and receivable; board reports)	Michelle	Kim	Denise
Essential Services Aged Care	Beverly	Danielle	Leanne
Essential Services Disability	Andrew	Martin	Beti
Business Services (Human Resources + rosters)	Amanda	Rosters - Heather	Rosters – Sharon M

3. COVID-19 PLAN

Your state or territory's public health unit will help you decide whether to declare an outbreak and in conjunction with medical practitioners will provide guidance on how to manage the outbreak.

If a worker experiences fever or acute systems of respiratory illness (such as those outlined below), they must not attend work but should report those symptoms to their place of work. Should a worker experience any of these symptoms for the first time during a shift, they should contact their supervisor **immediately** and where safe to do so leave work immediately and seek medical advice from their doctor or call the National Coronavirus Hotline on 1800 020 080.

The worker will be required to self-isolate until test results are returned and when no longer displaying any symptoms.

Where possible the worker will be required to provide a list of any person they have been in close contact with (customers, other staff, volunteers) - during the past 48 hours or when symptoms were present. .

Ensure all essential work is allocated to another member of staff if necessary. If it is a support worker reporting an illness, contact the families they have been in contact with and suspend non-essential daily service until test results are known and guidance is sought from the public health unit. Customers should be advised to self-isolate until test results are known.

If service is critical the shift is to be given to another worker with strict instructions for the use of PPE to be used as per the Health Department fact sheets (please see fact sheets below).

If a diagnosis of COVID-19 is confirmed, the worker must be isolated at home, or hospital depending on the severity of illness, until they have complied with current Department of Health advice regarding isolation periods and after receiving a negative test result.

Lifebridge will cooperate with the authorities and provide any information/records that have been maintained and the contacts for customers that have already been asked to self-isolate.

Where other staff members are directed to self-isolate due to contact, they will be deployed to work from home where possible. Emergency procedures outlined in Phase 3 Customer Staffing will be enacted if support worker numbers are affected.

If COVID-19 is excluded, the worker may be able to return to work once well and as guided by medical advice regarding the infectious period for their condition.

Service is NOT to commence until the screening questions have been asked of each customer prior to each episode of service.

If a "yes" response is recorded the support worker is to contact their department Manager immediately before accepting the customer for service.

Responding to a suspected or confirmed case of COVID-19

In-home support settings

All workers providing supports to a person living in their own home, should monitor for symptoms of COVID-19 in the person with whom they support or any other family members. If a customer or other family members are showing COVID – 19 symptoms they should contact the General Manager immediately. Working with the customer, you and your Manager should assist the customer to seek medical advice from their doctor or call the National Coronavirus Hotline on 1800 020 080 and assist them to undergo COVID-19 testing, if that is advised

At all times you should practice good health hygiene and maintain the 1.5 metre social distance, wash your hands after touching any surfaces, do not touch your face.

Ensure **PPE** is used when:

- In accordance with current Department of Health Advice
- a customer has or is suspected to have COVID-19
- the supports being provided are essential to their life, health or safety
- contact between people exceeds the Australian Government Department of Health Guidelines for social distancing and isolation.

Workers should not enter the home of a person who is unwell until either:

- their COVID-19 status is confirmed, or
- appropriate PPE is used correctly to provide any supports necessary to maintain the person's health, safety and wellbeing.

Workers

All staff, whether or not they have customer contact, should not come to work if they:

- have a fever
- have a symptom, even a minor symptom, of respiratory illness, such as a cough, shortness of breath, sore throat, runny nose or nasal congestion

Staff should <u>quarantine</u> after:

- returning from overseas in the past 14 days
- being identified as a Close Contact with someone with
- being in close contact with someone with confirmed COVID-19
- in accordance with Department of Health requirements.

Staff should isolate:

- while waiting for the result of a COVID-19 test
- after testing positive for COVID-19

If you feel unwell with COVID-19 symptoms, even mild ones, stay home and get tested for COVID-19.

After testing

It may take a day or two for your test results to come back.

If you have serious symptoms you will be kept in hospital and isolated from other patients to prevent the virus spreading.

If your doctor says you are well enough to go home while you wait for your test results, you should:

- isolate at home
- protect yourself and others

For questions about testing or patient welfare, call the National Coronavirus Helpline.

COVID-19 test results

If the result is **negative**, the employee should remain at home until they are well enough to return to work. If the result is **positive**, the employee is advised to follow the advice of their doctor and isolate themselves in their home or in a hospital until they are well.

The CEO will contact the Chairperson of the Board on notification of a positive testing for either employee or customer. The CEO will prepare communications to be sent to staff and customers on confirmation of a positive test.

Lifebridge advice – update on masks 2/8/2020

The NSW Government is strongly encouraging greater use of masks in high-risk public settings to help prevent the spread of the coronavirus.

The advice from the NSW Chief Health Officer Dr Kerry Chant specifically recommends the use of <u>face masks</u> in indoor settings where <u>physical distancing</u> is hard to maintain, such as on public transport or in supermarkets.

Lifebridge mandates the use of masks where a support worker is unable to maintain the recommended social distancing requirement of 1.5m. This may include but is not limited to: transporting customers, assisting on and off buses, attending to personal care needs and when serving and supervising a meal.

A face mask is not a substitute for other precautions.

Using a mask may provide a false sense of security. The use of a mask and only a mask will not prevent infection.

The best ways to protect yourself and others against COVID-19 remain:

- practicing social distancing
- washing your hands with soap or sanitiser for a minimum of 20 seconds
- coughing or sneezing into your elbow or tissue
- staying home when sick
- Advise your manager immediately if you are sick or unwell.

Put on your mask safely

- 1. Before putting on your mask, wash your hands for at least 20 seconds with soap and water. Or use hand sanitiser that is made up of over 60% alcohol.
- 2. Ensure you are using a new surgical mask or clean cloth mask. Do not reuse surgical masks. Always use a clean and dry cloth mask.
- 3. Check the mask for defects, such as tears or broken loops.
- 4. If you are wearing a surgical mask, position the coloured side of the mask outward.
- 5. If the mask has:
 - Ear loops: Hold the mask by both ear loops and place one loop over each ear.
 - Ties: Hold the mask by the upper strings. Tie the upper strings in a secure bow near the crown of your head. Tie the bottom strings securely in a bow near the nape of your neck.
 - Dual elastic bands: Pull the bottom band over your head and position it against the nape of your neck. Pull the top band over your head and position it against the crown of your head.
 - A metallic strip or wire: firmly adjust the bendable metallic upper strip to the shape of your nose by pinching and pressing down on it with your fingers.
- 6. Pull the bottom of the mask over your mouth and chin. Be sure your mask fits snugly.

Wear your mask safely

- One mask will be worn when working in a group for a day,
- A new mask will be worn for individual customers where 1.5 social distancing cannot be maintained.
- Carry clean masks in a clean zip-lock bag with you
- Don't touch the mask while you are wearing it. If you do touch it, wash or sanitise your hands
- If your mask gets soiled or damp, replace it with a new one

Remove your mask safely

- 1. When removing your mask, avoid touching your eyes, nose, or mouth at all times.
- 2. Remove your mask outside and away from other people, if possible.
- 3. Carefully remove your mask by grasping the ear loops or untying the ties. For masks with a pair of ties, unfasten the bottom one first, then the top one.
- 4. Dispose of single-use masks responsibly in the rubbish bin. For safety, put it into a sealed bag before putting it in the bin to ensure others won't touch it.
- 5. Wash and dry reusable cloth masks after each use
 - Store in a plastic or zip-lock bag until you have an opportunity to wash them.
 - Wash cloth masks in the washing machine with other clothes or by hand using soap.
 - Lay out flat to dry (in the sun if possible) or put in the dryer.
 - Store in a clean, dry place.
- 6. After removing your mask, always wash your hands for at least 20 seconds with soap and water. Or use alcohol-based hand sanitiser containing at least 60% alcohol.

MANGON		40 T	
MNC & NNSW Cross Sector Aged Care – Keep Me Safe at Home; Aged Care Covid 19 Tool Box Suspected / Confirmed COVID 19 case – Domestic Assistance			
Before Entering house or Unit	During	After	
 Customer will be advised to provide a bin liner in their outside bin. Customer will be advised they are not to accompany you out e.g. shopping. Shop before arriving Use a toilet before the visit. On arrival. Ring the office to tell them start of visit. Leave phone and personal items in locked car. Clean your hands—hand sanitiser Prepare plastic container in boot of car with PPE, hand sanitiser, garbage bag. Outside front door*:- Knock and show customer ID then place in container Ask customer and carer to wash their hands and put on face masks Prepare garbage bag at door for disposable items Clean hands with sanitiser & leave at front door Don (put on) gown mask goggles / face shield gloves 	 Ensure customer wears a face mask. Ensure 1.5 metre distancing inside. For cleaning services. Provide 2 step clean to essential areas only. Clean and disinfect e.g. bathroom and kitchen high touch areas e.g. benches, sinks, taps, fridge surfaces and cupboard handles. Soap and water to clean and hospital grade disinfectant wipes with activity against virus to disinfect. Or 2-in-1 clean combined detergent and disinfectant wipes. For laundry. Use machine on hot cycle. Ensure 5 moments of hand hygiene whilst in PPE Do not touch your face or answer phones Do not eat or drink in the home. Do not use the toilet in the home. Carry out all essential domestic assistance activities in full PPE including putting groceries away, laundry, hanging out clothes, putting laundry away, essential cleaning, and washing up. If contamination occurs and the bare skin on your face is touched by you or the customer during the procedure. Take off your gloves Clean your hands with liquid soap and water or hand sanitiser Put on new gloves. Clean contaminated skin with hand sanitiser. Finalise the domestic assistance visit Notify your supervisor immediately on leaving the home once you are outside with your PPE off. Notes and TiPs; Until the customer tests negative, customers must not go out, including shopping with staff. The 5 moments of hand hygiene apply throughout the service. When a customer with COVID19 tests negative, a deep clean of home, in full PPE is required, before staff can return to usual practice. * AT FRONT DOOR – some customers may prefer donning and doffing to occur inside the front door for privacy. If this is the case always open and close the front door with gloves on and perform hand santiser post removal of gloves. * Shield reuse clean; 2 step clean. Use hospital grade disinfectant wipes. Or 2-in-1 clean combined detergent and disinfectant wipes. P	After • Ensure customer distancing, 1.5m • Outside front door:- • DOFF take off and discard in garbage bag • gloves • goggles or face shield • if reusing shield or goggles*. • gown • hands - hand sanitiser Perform hand hygiene with - soap and water as frequently as possible through the day • Close the garbage bag and place in the outside bin • Clean your hands –hand sanitiser • Return to car with plastic container. • Retrieve your phone • Document visit through Visicase • On departure. Notify office leaving home.	

MNC & N	NSW Cross Sector Aged Care – Keep Me Safe at Home; Aged Care Covid Suspected / Confirmed COVID 19 case – Respite Care – In Home Respite	
Before Entering house or Unit	During	After
 Before Entering house or Unit Customer will be advised to provide a bin liner in their outside bin. Customer will be advised that respite will be in home no outing during pandemic Shop before arriving Use a toilet before the visit. On arrival. Ring the office to tell them start of visit. Leave phone and personal items in locked car. Clean your hands—hand sanitiser Prepare plastic container in boot of car with PPE, hand sanitiser, garbage bag. Outside front door*:- Knock and show customer ID then place in container Ask customer and carer to wash their hands and put on face masks Prepare garbage bag at door for disposable items Clean hands with sanitiser & leave at front door Don (put on) gown mask goggles / face shield gloves 	 Ensure carer and customer wear a face mask. Ensure 1.5 metre distancing inside. Ensure 5 moments of hand hygiene whilst in PPE Do not touch your face or answer phones Do not eat or drink in the home. Do not use the toilet in the home. Carry out essential only, in home respite activities in full PPE including meal preparation, toilet prompting, essential cleaning. Clean your hands with liquid soap and water or hand sanitiser, in full PPE if it is essential to assist/touch the customer. Advisable activities: TV, tablets and videos Sitting/walking in yard ensuring 1.5 metre distancing Avoid card games, looking at photos or activities that require close contact (less than 1.5 metres) If contamination occurs and the bare skin on your face is touched by you or the customer during the procedure. Take off your gloves Clean your hands with liquid soap and water or hand sanitiser Put on new gloves. Clean contaminated skin with hand sanitiser. Finalise the domestic assistance visit Notify your supervisor immediately on leaving the home once you are outside with your PPE off. Notes and TIPs; Until the customer tests negative, customers must not go out, including shopping with staff. The 5 moments of hand hygiene apply throughout the service. When a customer with COVID19 tests negative, a deep clean of home, in full PPE is required, before staff can return to usual practice. *AT FRONT DOOR — some customers may prefer donning and doffing to occur inside the front door for privacy. If this is the case always open and close the front door with gloves on and perform hand santiser post removal of gloves. *Shield reuse clean; 2 step clean. Use hospital grade disinfectant wipes. Or 2-in-1 c	Ensure customer distancing, 1.5m Outside front door:- DOFF take off and discard in garbage bag gloves goggles or face shield if reusing shield or goggles*. gown hands - hand sanitiser Perform hand hygiene with - soap and water as frequently as possible through the day Close the garbage bag and place in the outside bin Clean your hands – hand sanitiser Return to car with plastic container Retrieve your phone Document visit through Visicase On departure. Notify office leaving home.

The second secon			
MNC & NNSW Cross Sector Aged Care – Keep Me Safe at Home; Aged Care Covid 19 Tool Box			
Before Entering house or Unit	Suspected / Confirmed COVID 19 case – Hygiene During	After	
 Customer will be advised to provide a bin liner in their outside bin. Use a toilet before the visit. On arrival. Ring the office to tell them start of visit. Leave phone and personal items in locked car. Clean your hands—hand sanitiser Prepare plastic container in boot of car with PPE, hand sanitiser, garbage bag. Outside front door*:- Knock and show customer ID then place in container Ask customer and carer to wash their hands and put on face masks Prepare garbage bag at door for disposable items Clean hands with sanitiser & leave at front door Don (put on) 	 Ensure customer wears a face mask. Do not shower the person Sponge the person on their shower chair or in bed (only in bed if this has been assessed as safe). Prepare; a container to carry dirty linen to laundry Prepare; commercial bag bath wipes, baby wipes or a bowl of warm water with soap and wash cloths. Prepare; Towels & clothing. Do not place on floor (clean or dirty). Cover the customer with a towel when removing clothing Commence washing and drying individual parts of the body. Working with the customer, wash face and neck first, arms and hands second, body then legs and feet. Prompt or assist the customer to wash the perineum last (between the legs). If using, squeeze wash cloths remove excess water to wash parts of the body. Replace water when soiled. Dry and assist customer to dress. Dispose of equipment. Place dirty items into container and carry to washing machine. Do not carry against body. Use hot wash. Do not touch your face, answer phone, eat, drink or use the toilet in the home. 	 Ensure customer distancing, 1.5m Outside front door:- DOFF take off and discard in garbage bag gloves goggles or face shield if reusing shield or goggles*. gown hands - hand sanitiser Perform hand hygiene with - soap and water as frequently 	
- gown - mask - goggles / face shield - gloves	If contamination occurs and the bare skin on your face is touched by you or the customer during the procedure. Leaving the customer covered with towels and positioned safely Take off your gloves Clean your hands, liquid soap and water or hand sanitiser Put on new gloves. Clean contaminated skin with hand sanitiser. Finalise the hygiene visit * AT FRONT DOOR — some customers may prefer donning and doffing to occur inside the front door for privacy. If this is the case always open and close the front door with gloves on and perform hand santiser post removal of gloves. * Shield reuse clean; 2 step clean. Use hospital grade disinfectant wipes. Or 2-in-1 clean combined detergent and disinfectant wipes. Place clean googles	as possible through the day Close the garbage bag and place in the outside bin Clean your hands – hand sanitiser Return to car with plastic container Retrieve your phone Document visit through Visicase On departure. Notify office leaving home and inform the supervisor if you have contaminated yourself.	

in reusable container, close lid.

Phn MNC & NNS	W Cross Sector Aged Care – Keep Me Safe at Home; Aged Care Covid Suspected / Confirmed COVID 19 case – Meal Support	19 Tool Box
Before Entering house or Unit	During	After
 Customer will be advised to provide a bin liner in their outside bin. Shop before arriving if needed Use a toilet before the visit. On arrival. Ring the office to tell them start of visit. Leave phone and personal items in locked car. Clean your hands—hand sanitiser Prepare plastic container in boot of car with PPE, hand sanitiser, garbage bag. Outside front door*:- Knock and show customer ID then place in container Ask customer and carer to wash their hands and put on face masks Prepare garbage bag at door for disposable items Clean hands with sanitiser & leave at front door Don (put on) gown mask goggles / face shield gloves 	 Ensure customer wears a face mask Advise customer re 1.5 metre distancing. 2 step clean. Clean and disinfect kitchen high touch areas e.g. bench, sink and fridge surfaces. Soap and water to clean and hospital grade disinfectant wipes with activity against virus to disinfect. Or 2-in-1 clean combined detergent and disinfectant wipes. Comply with 5 moments of hand hygiene whilst in PPE Do not touch your face or answer customers phone Do not eat or drink with the customer. DO not use the toilet in the home. Carry out all meal preparation activities in full PPE including putting groceries away, preparing and labelling food in fridge. Stay in another room whilst the customer eats. When they have reapplied face mask, re enter room and wash up. Clean and disinfect bench and sink surfaces. Soap and water to clean and hospital grade disinfectant wipes with activity against virus to disinfect. If contamination occurs and the bare skin on your face is touched by you or the customer during the procedure. Leaving the customer covered with towels and positioned safely Take off your gloves Clean your hands, liquid soap and water or hand sanitiser Put on new gloves. Clean contaminated skin with hand sanitiser. Finalise the hygiene visit Notify supervisor of contamination after leaving the home * AT FRONT DOOR – some customers may prefer donning and doffing to occur inside the front door for privacy. If this is the case always open and close the front door with gloves on and perform hand santiser post removal of gloves. * Shield reuse clean; 2 step clean. Use hospital grade disinfectant wipes. Or 2-in-1 clean combined detergent and disinfectant wipes. Place clean googles in reusable container, close lid. 	 Ensure customer distancing, 1.5m Outside front door:- DOFF take off and discard in garbage bag gloves goggles or face shield if reusing shield or goggles*. gown hands - hand sanitiser Perform hand hygiene with - soap and water as frequently as possible through the day Close the garbage bag and place in the outside bin Clean your hands -hand sanitiser Return to car with plastic container Retrieve your phone Document visit through Visicase On departure. Notify office leaving home

MNC & NNSV	N Cross Sector Aged Care – Keep Me Safe at Home; Aged Care Covid No COVID 19 case – Travel	19 Tool Box
Before Entering house or Unit	During	After
 The destination area e.g. medical facility must be notified in advance of transporting the customer if they require assistance at the other end Clean your hands— hand sanitiser. Knock on door Keep 1.5 metres distance between customer Show customer your ID and indicate that you are here to provide a transport Ask customer if they have any symptoms of COVID19. Sore throat, cough, temperature or shortness of breath. If customer has symptom explain that you will not be able to transport them and ring your supervisor for further advice. If no symptoms continue with service: Accompany the person to the car keeping physical distance. Before customer gets into or touches the car Open boot perform hand hygiene with sanistiser. Provide customer with squirt of hand sanitiser before entering car. Keeping as much distance as possible. Open car door for customer and close return to boot and perform hand sanitiser and put it in the boot your ID & mobile phone in a plastic box with other personal items. Customers are not required to wear a mask but can if they wish to. 	 The customer will be seated in the back seat behind the front passenger seat for maximum distancing from driver. Remain 1.5 metres distancing whilst outside the car. Other than opening door, do not assist customer. If the customer requires assistance to be seated or with the seat belt, a family member carer is required to do this. Drive to destination. Vehicle air-conditioning should be set to fresh air not recycled. Do not touch your face Do not adjust mask for customer if they are wearing one. On arrival at destination. Clean your hands - liquid soap and water or hand sanitiser Alert people receiving or assisting the customer. If waiting for customer do so standing by the car. NB all transport bookings will have been screened at the time of the booking and the day before the appt. The Screen at time of booking should include the customers health (flu like symptoms) or any contact with confirmed or suspected cases. Where it is a medical appt. the customer has explored with the Dr whether a phone appt could be attended instead of face to face Whether assistance is required in and out of the car and how this will occur – staff need to maintain physical distancing. Drs surgery to be notified if customer needs assistance at surgery Screen day before appt; repeat of points 1&3. 	 Clean hands – liquid soap and water or hand sanitiser 2 step clean. Wearing gloves clean and disinfect high touch car surfaces. Working from drivers area and doing passenger area last. Soap and water to clean and hospital grade disinfectant wipes with activity against virus to disinfect. Or 2-in-1 clean combined detergent and disinfectant wipes. Include steering wheel, door handles, gear stick, visor and any areas the customer will contact. Dispose of wipes into a plastic bag, close the bag and put in outside bin. Clean hands – liquid soap and water or hand sanitiser Retrieve your phone from the boot. Clean your phone and hands Document service provision through Visicase At the first opportunity perform hand hygiene with soap and water regularly through the day. Perform hand hygiene if hands become contaminated at any time between steps.
 Remind the customer of cough and sneeze etiquette. Not to touch their face. 		

4. Recovery

The aim of the recovery phase is to restore all business and support functions to pre-pandemic level. Considerations to be made in transitioning back to this will include:

- Following official advice and any phasing requirements for a return to business as usual
- Evaluating the risk and any additional vigilance required around a second wave of the virus
- Considering the transition of customers and staff who may be fearful, fatigued or emotionally fragile after isolation periods, potential sickness and loss of loved ones
- Considering the emotional support needs of the team if loss of customers lives has occurred through the period
- Any practical support for customers that may be required immediately (i.e. Restocking of food or medical supplies, mobility support due to inactiveness)
- Linking people with any immediate services they may require as a result of isolation (i.e. mental health support, occupational therapy, medical services) and considering the likely pressure placed on these services upon a return to "business as usual"
- Ensure thorough clean of all shared spaces before people return
- Maintain working from home arrangements for all office-based staff. At a minimum where
 possible, break departments into teams to maintain separation should there be a second
 wave. If one team falls ill the second team should remain isolated where possible to maintain
 daily functions.
- Develop COVIDSafe Work Plans for Aged Care and Disability Services
- Conduct a post pandemic review to make any improvements or changes to the Lifebridge Business Continuity plan and the pandemic plan
- Facilitate a Staff Survey to gauge the wellbeing and fatigue of staff and develop appropriate remedial actions
- Facilitate a Customer Survey to gauge the wellbeing of customers and develop appropriate remedial actions which may include referrals to other services that are better placed to provide support (i.e mental health services)

5. Contacts

Department of Health

Inform the Federal Department of Health of any confirmed COVID-19 cases via agedcareCOVIDcases@health.gov.au this will facilitate Australian Government support for PPE and staff supplementation.

The Department can help with information on resources to manage an emergency or service delivery issues. If you need urgent assistance outside of normal business hours please contact the department in the relevant state on:

Phone: 1800 852 649 (NSW/ACT)

Website: https://www.health.gov.au/resources/collections/novel-coronavirus-2019-ncov-resources

Agency Staff

Aquamarine Personalised Home Care 1800 458 499 / 0422 867 111 office@acquamarinecare.com.au

Beaumont People 02 9133 9322 admin@beaumontpeople.com.au

Drake Medox 1300 360 070

Elite Aged Care Home Services 0455 255 886 roster@eliteagedcarehs.com.au

SOS Support Services 07 5536 1773 admin@sossupport.com.au

NDIS Commission

Phone: 1800 035 544 (Open 9.00am to 5.00pm in the ACT, NSW, QLD, SA, TAS and VIC Monday to

Friday, excluding public holidays)

Email: contactcentre@ndiscommission.gov.au

Website: www.ndiscommission.gov.au

https://www.nsw.gov.au/covid-19/safe-workplaces/employers