

COVID Safe plan

Our COVID Safe Plan

Business name:	Northern Health (NH)
Site location:	All NH sites
Contact:	Northern Health
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Guidance	Action to mitigate the introduction and spread of COVID-19
Hygiene	
<p><i>Provide and promote hand sanitiser stations for use on entering building and other locations in the worksite and ensure adequate supplies of hand soap and paper towels are available for staff.</i></p>	<p><i>Hand sanitiser stations located throughout entire site inclusive of clinical, non-clinical areas, corridors and entry/exit points</i></p> <p><i>Mandatory requirement for NH staff to complete hand hygiene competency . Compliance >90%</i></p>
<p><i>Where possible: enhance airflow by opening windows and adjusting air conditioning.</i></p>	<p><i>NH engineering monitor electronically the air-conditioning 24/7 and physically inspect plant and Air Handling Units a minimum of twice daily Monday to Friday to ensure correct operation. When staff attend site on weekends for any reason, they check it again.</i></p>
<p><i>In areas or workplaces where it is required, ensure all staff wear a face covering and/or required PPE, unless a lawful exception applies. Ensure adequate face coverings and PPE are available to staff that do not have their own.</i></p>	<p><i>NH procedure PPE Guidelines</i></p> <p><i>All clinical staff with direct patient contact: minimum of level 2 surgical face mask and face shield</i></p> <p><i>All staff must wear a medical grade mask onsite</i></p> <p><i>Daily review of PPE stock levels are monitored and reported in Supply.</i></p>

Guidance	Action to mitigate the introduction and spread of COVID-19
<p><i>Provide training to staff on the correct use and disposal of face coverings and PPE, and on good hygiene practices and slowing the spread of coronavirus (COVID-19).</i></p>	<p><i>All clinical/non clinical staff received PPE training PPE donning/doffing "How to" video on NH intranet COVID page NH intranet COVID page has dedicated to PPE resources, information & training Frequent delivery of All Staff COVID emails, reinforcing PPE, with links to training and resources</i></p>
<p><i>Replace high-touch communal items with alternatives.</i></p>	<p><i>Clinell wipes for all benchtop/desk wipe down in both clinical and non-clinical areas Clinell wipes for all communal patient equipment Directive not to share communal food NH pool cars cleaned and clinell wipe of steering wheel, dashboard and high touch areas within cars All PPE single use & staff issued with own faceshield Staff strongly advised not to car pool & if car pooling masks to be worn if not from same household</i></p>

Guidance	Action to mitigate the introduction and spread of COVID-19
Cleaning	
<p><i>Increase environmental cleaning (including between changes of staff), ensure high touch surfaces are cleaned and disinfected regularly (at least twice daily).</i></p>	<p><i>Increased cleaning commenced in March 2020. High touch general communal areas frequently cleaned minimum twice daily Clinical areas - increased cleaning schedule introduced</i></p>
<p><i>Ensure adequate supplies of cleaning products, including detergent and disinfectant.</i></p>	<p><i>Director Support Services maintains stock levels, monitors and escalates any issues with cleaning supply shortages</i></p>

Guidance	Action to mitigate the introduction and spread of COVID-19
Physical distancing and limiting workplace attendance	
<p>Ensure that all staff that can work from home, do work from home.</p>	<p><i>Managers have access to: Leading your people through COVID 19 Managers Toolkit which is regularly updated with new DHHS directives</i></p> <p><i>NH WFH procedure</i> <i>NH WFH form</i></p>
<p>Establish a system that ensures staff members are not working across multiple settings/work sites.</p>	<p><i>Managers have access to: Leading your people through COVID 19 Managers Toolkit which is regularly updated with new DHHS directives</i></p> <p><i>NH All staff COVID email update – minimise cross campus travel. If must work between two sites, staff must start and conclude each individual work day at only one site.</i></p> <p><i>Staff can work in multiple units on the one site</i></p> <p><i>Commonwealth Guidelines implemented: RACF staff choose only one RACF to work within, this was implemented at IBNH</i></p> <p><i>No NH staff to work in other areas if working in IBNH or other high risk areas wards/units at NH</i></p>
<p>Establish a system to screen employees and visitors before accessing the workplace. Employers cannot require employees to work when unwell.</p>	<p><i>NH screening process for visitors, staff</i> <i>Thermal temperature testing at NHE BH and CC</i> <i>Employees screening questions for symptoms</i> <i>Employees sent immediately to fever clinic and then home if symptoms develop during shift</i> <i>NH All Staff COVID email notification that staff are not to attend work if symptomatic</i> <i>Leave provisions available to staff if unwell or in self isolation</i> <i>HCW prioritised swab results</i></p>
<p>Configure communal work areas so that there is no more than one worker per four square meters of enclosed workspace, and employees are spaced at least 1.5m apart. Also consider installing screens or barriers.</p>	<p><i>Physical distancing review completed for all sites by People & Culture August 2020 – first physical distancing audit completed</i></p>
<p>Use floor markings to provide minimum physical distancing guides between workstations or areas that are likely to create a congregation of staff.</p>	<p><i>Floor markings at ED triage, specialty clinics, Henry's café, front reception and other high traffic areas</i></p> <p><i>Signage in all shared office, meeting rooms and workstation area stating max. number of people in area allowed</i></p>
<p>Modify the alignment of workstations so that employees do not face one another.</p>	<p><i>Masks and face shields issued to all staff</i></p> <p><i>Offices do not have employee desks facing each other</i></p>

Guidance	Action to mitigate the introduction and spread of COVID-19
<p>Minimise the build up of employees waiting to enter and exit the workplace.</p>	<p><i>Shift times staggered for non-clinical staff WFH program introduced to roles that can work from home Introduction of thermal temperature screening at entrances to cease queues at clinical shift commencement times</i></p>
<p>Provide training to staff on physical distancing expectations while working and socialising (e.g. during lunchbreaks).</p>	<p><i>Education and frequent messaging via NH All Staff COVID emails Overhead announcements twice per day reminding staff to physically distance and PPE</i></p>
<p><i>Review delivery protocols to limit contact between delivery drivers and staff.</i></p>	<p><i>Delivery of Monash Health PPE and food supplies is scheduled All other deliveries drop stock at loading dock and do not enter the hospital (compared with previous desktop delivery service)</i></p>
<p><i>Review and update work rosters and timetables where possible to ensure temporal as well as physical distancing.</i></p>	<p><i>Shift times staggered for non-clinical staff WFH program introduced to roles that can work from home Team A and Team B rosters developed for high risk areas, high risk staff groups and business continuity (finance, people and culture, executive, etc. to ensure workforce contingency)</i></p>
<p><i>Where relevant, ensure clear and visible signage in areas that are open to the general public that specifies maximum occupancy of that space, as determined by the ‘four square metre’ rule.</i></p>	<p><i>Visitor restrictions are in place within health service Signage is present throughout site for max. occupancy of spaces/rooms/offices</i></p>

Guidance	Action to ensure effective record keeping
<p>Record keeping</p>	
<p>Establish a process to record the attendance of customers, clients, visitors and workplace inspectors, delivery drivers. This information will assist employers to identify close contacts.</p>	<p><i>An electronic tracking system via the bed management portal to track all patient’s visitors (including visitors for inpatients and ED presentations). Information collected includes the visitor’s full name, contact details, check in and out times. This information is collected against the patient they are visiting. We’re also able to flag how long the visitor has been in attendance with a traffic light system used to flag when the visitor has overstayed their visit.</i></p> <p><i>Also developed is a visitor tracking system to capture all other visitors, contractors, etc. to the organisation. This is an electronic system that captures full name, contact details and check in and out times.</i></p>

Guidance	Action to ensure effective record keeping
	<i>Both systems have been implemented across all NH campuses.</i>
Provide guidance to staff on the effective use of the workplace OHS reporting system (where available).	<i>VHIMS OH&S report</i>

Guidance	Action to prepare for your response
Preparing your response to a suspected or confirmed COVID-19 case	
Prepare or update your business continuity plan to consider the impacts of an outbreak and potential closure of the workplace.	<i>NH COVID Response Escalation Plan & Executive Summary NH BCP Model of care documents for outbreak management established</i>
Prepare to assist DHHS with contact tracing and providing staff and visitor records to support contact tracing.	<i>Contact tracing performed by NH COVID19 Outbreak management Plan & Contact Tracing Guide Liaison with DHHS as required for support</i>
Prepare to undertake cleaning and disinfection at your business premises. Assess whether the workplace or parts of the workplace must be closed.	<i>Process in place for contact names/numbers for urgent cleans Double clean/terminal 2 clean provided by ISS 'room closed' signage placed in an area after-hours if cleaning is to commence early am IMT/POAC will advise CEO/COO if ward/unit closure or reduction in services is required</i>
Prepare for how you will manage a suspected or confirmed case in an employee during work hours.	<p><u>NH procedure for staff positives:</u> Staff notification via NH lab or DHHS</p> <ul style="list-style-type: none"> • ID Reg (Periop Reg after-hours) contacts employee and IP (or Exec on call afterhours) • Contact tracing is conducted by IP team or delegated team • Hospital coordinator organises room closure/deep clean if required (if notification occurs afterhours) <p><u>NH procedures for patients:</u></p> <ul style="list-style-type: none"> • COVID – Patient Management: suspected/ confirmed COVID-19 • COVID – AGP • COVID – Medication Management

Guidance	Action to prepare for your response
	<ul style="list-style-type: none"> • COVID – Daily Nursing Care: Suspected/confirmed COVID-19 • COVID – Nursing model of care for COVID-19 • COVID – O&G: intrapartum considerations • COVID – Endotracheal Intubation and extubation • COVID – Cardiology: Inpatient Services Restrictions • COVID – Caring for patients with delirium /dementia • COVID – Paediatric: management of deteriorating patient
<p>Prepare to notify workforce and site visitors of a confirmed or suspected case.</p>	<p><i>All close contacts identified (from a positive staff result or patient) via contact tracing are advised by ID/IP team to self-isolate for 14 days. A Day 11 swab is required prior to return</i></p> <p><i>Staff members director notified of result to adjust rosters/backfill</i></p> <p><i>Staff member is supported in self-isolation by manager and People and Culture WellBeing team</i></p>
<p>Prepare to immediately notify WorkSafe Victoria on 13 23 60 if you have a confirmed COVID-19 case at your workplace.</p>	<p><i>Notification of all staff positives to Exec Director People and Culture and Director OH&S and Wellbeing</i></p>
<p>Confirm that your workplace can safely re-open and workers can return to work.</p>	<p><i>ID/IP notify Director that area is cleared to reopen to admissions or service delivery after an outbreak</i></p> <p><i>IP, DHHS and People and Culture work collaboratively to return staff to work after positive or close contact exposure</i></p>