

# Best Practice COVID-19 Safety: for Disability Services

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This information provides best practice guidance to help disability service providers manage COVID-19, influenza and other acute respiratory infections, safely.

**Please use this information alongside Tasmanian Public Health guidance: *Best Practice COVID-19 Safety for Employers*.**

Public Health strongly recommends all workplaces comply with work health and safety requirements and:

- undertake a COVID-19 risk assessment
- develop and maintain policies and procedures to minimise the chances of COVID-19 and other infectious illnesses spreading within the workplace
- use best practice guidance to inform those policies and procedures.

## Risk

Some people with disability may be at increased risk of severe illness from COVID-19 and other viruses. Residents of disability residential services may also be more likely to be exposed to viruses because of the number of people coming and going from their homes.

## COVID-19 requirements

Under the *Public Health Act 1997*:

- people who test positive to COVID-19 must
  - > isolate for at least seven days from the date of their positive test result; this includes people living in disability residential settings
  - > inform Public Health of their positive result if they used a rapid antigen test (RAT)
  - > not visit residential aged care facilities for at least seven days after their positive result
- close contacts of people who test positive to COVID-19 must:
  - > inform their employer that they are a close contact
  - > test for COVID-19 every day they leave their home, for seven days from becoming a close contact
  - > wear a face mask (unless exempt) in indoor settings outside the home
  - > isolate and test immediately if they have symptoms

> not visit high risk settings, including residential care facilities, hospitals, support schools and correctional facilities (employers may permit close contacts to work in high-risk settings, with risk controls according to the workplace risk assessment).

## People with symptoms

**Public Health strongly recommends anyone with acute (or new) respiratory symptoms including fever, cough, sore throat and/or runny nose, to stay at home, even if those symptoms are mild, and get tested for COVID-19. Testing can be by PCR laboratory test or RAT.**

If the result is negative and the person still has acute symptoms, they should stay at home and repeat the test in the next 24-48 hours.

If the result is negative the second time, and they still have acute symptoms, they should stay at home until the symptoms resolve completely or there is significant improvement. There are other respiratory viruses, including influenza viruses, that can cause serious illness in some people, and spread easily from person to person.

**Anyone with a fever, who feels unwell or has any increase in symptoms should stay home even if they test negative for COVID-19.**

If symptoms have resolved or mostly gone, they can return to normal duties. If some mild symptoms remain, Public Health recommends they wear a face mask when away from home. If they have any concerns or are unsure if their symptoms are improving, Public Health recommends they seek medical advice.

## Best practice planning

- Review your COVID-19 safety plan and workplace health and safety policy and procedures; ensure they cover management of COVID-19 cases and close contacts, in workers, visitors, clients and residents.
- Maintain your outbreak management plan; consider including influenza and other acute respiratory infections in its scope. See the *Case and Outbreak Management Framework for Tasmanian Settings*.
- Have policies/processes in place to manage workers with COVID-19 symptoms and close contacts.

## Best practice risk control measures for workers and visitors

- Strongly recommend workers and visitors be up to date with vaccination against COVID-19 and influenza. See *Best Practice Guidance for Workplaces: Vaccination*.
- Screen workers and visitors for:
  - › recent (within the past seven days) positive COVID-19 test results
  - › respiratory and other COVID-19 symptoms
  - › COVID-19 close contacts
- Have policies and processes in place to manage visitors with COVID-19 symptoms.
- Have a supply of RATs available for workers use, to enable rapid identification of cases.
- If there is strong reason for a worker or visitor with symptoms or who is a close contact to enter the setting, require them to:
  - › do a COVID-19 test and return a negative result before entering the setting
  - › wear a face mask while in the setting (and near anyone at risk of severe illness).
- Consider requiring use of face masks by workers and visitors when COVID-19 and/or influenza are highly prevalent in the community. Encourage use of face masks by workers and visitors at other times. (Public Health will generally advise when Influenza and COVID-19 are highly prevalent.) See *Best Practice Guidance for Workplaces: Face masks*.
- Ensure good ventilation. Have doors and windows open and encourage visits to occur outside, when safe, appropriate and feasible. See *Best Practice Guidance for Workplaces: Ventilation*.
- Encourage physical distancing. See *Best Practice Guidance for Workplaces: Physical Distancing*.
- Continue to display COVID-19 safety signage.
- Ensure appropriate cleaning and disinfection, with a focus on frequently touched surfaces. See *Best Practice Guidance for Workplaces: Hygiene & Cleaning*.
- Ensure alcohol-based hand gel, tissues and rubbish bins are readily available in the facility.

## Best practice COVID-19 risk control measures for residents/clients

- Recommend and support residents/clients to be up to date with COVID-19 and influenza vaccination.
- Be familiar with national guidance for management of acute respiratory infections in disability residential settings; review that guidance regularly for updates.
- Maintain systems to identify and test people with symptoms of COVID-19 (and influenza) in your setting. Encourage and support residents/clients to get tested, by PCR or RAT. Test early to support a rapid response and minimise the spread of illness.
- Maintain a robust infection control program, as per national guidelines. Ensure workers receive regular training on infection prevention and control measures, including appropriate use of personal protective equipment (PPE).
- Have information about the setting (size, layout, worker and resident numbers) ready to provide to Public Health to support outbreak risk assessment and mitigation, if requested.

## Case management

- For cases who test positive by RAT, support them to report the result to Public Health.
- Support cases to complete the case survey they receive from Public Health.
- Report cases as per local and national reporting requirements.
- Isolate cases away from other people, preferably in a single room with a door that can be closed. Inform relevant workers and designate specific workers to support the person with COVID-19 (or influenza).
- Plan how resident cases will be managed safely, including cohorting if necessary. People with COVID-19 can reside together; and people with influenza can reside together, however where possible,
  - › people who have not tested positive to COVID-19 should not reside with people who have tested positive to COVID-19
  - › people who have not tested positive to influenza should not reside with people who have tested positive to influenza.
- Minimise the number of people who spend time in the same room as a case/s. Ensure those who do are safe. This includes wearing appropriate PPE, stringent hand hygiene, maximising distance from the case and minimising time spent with the case.

The management of COVID-19 continues to evolve, and as evidence accumulates, advice may be revised. Updates are available at [www.coronavirus.tas.gov.au](http://www.coronavirus.tas.gov.au). If any information in this factsheet is inconsistent with information on that website, please use the information online.

- Identify close contacts in the setting. Support them to follow current requirements and instructions provided by Public Health (Tasmania) for close contacts, including to be alert for signs of COVID-19 and to get tested. For the latest definition of close contact, go to [www.coronavirus.tas.gov.au](http://www.coronavirus.tas.gov.au)

## Support and further information

### Information

- COVID-19 Management and Operational Plan for People with Disability (Australian Government Department of Health, [www.health.gov.au](http://www.health.gov.au))
- COVID-19 Information for healthcare workers supporting people with disability (factsheet, Australian Government Department of Health [www.health.gov.au](http://www.health.gov.au))
- National Guidelines for the Prevention, Control and Public Health Management of Outbreaks of Acute Respiratory Illness (including COVID-19 and influenza) in Residential Care Facilities at [www.health.gov.au](http://www.health.gov.au)
- Australian Guidelines for the Prevention and Control of Infection in Healthcare (2021) at [www.safetyandquality.gov.au](http://www.safetyandquality.gov.au)
- [www.coronavirus.tas.gov.au](http://www.coronavirus.tas.gov.au)

### Support

- Public Health support is available for management of COVID-19 and other disease outbreaks. Phone: 1800 671 738; email: [public.health@health.tas.gov.au](mailto:public.health@health.tas.gov.au)

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