

COVID Safe plan

Guidance on how to prepare your COVID Safe plan is available [here](#).

Our COVID Safe Plan

Business name:	Melbourne Health
Site location:	Royal Melbourne Hospital Parkville
Contact person:	Denise Heinjus
Contact person phone:	0412 255 956
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Guidance	Action to mitigate the introduction and spread of COVID-19
Hygiene	
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.	<ul style="list-style-type: none"> Information about hand hygiene is placed in prominent areas for visitors and staff Hand sanitiser stations are located throughout the organisation Bathroom and kitchen areas supplied with hand soap and paper towels – supplies managed by Environmental Services Hand hygiene promoted at RMH screening points and regularly in staff forums including workplace meetings Signage rotates in the central lift wells as a reminder Staff in RAC wear small sanitisers to practice hand hygiene Signage above hand sanitising stations with appropriate instructions
Where possible: enhance airflow by opening windows and adjusting air conditioning.	<ul style="list-style-type: none"> Windows are not permitted to be open at the City Campus (OHS regulations) Air conditioning is operating within expected parameters Continual review and testing of areas. Procedures regarding workflows are in place to minimise risk to staff and patients. Upgrade of filters in the AHU's to F8 or F9 and where possible systems have been changed over to full fresh air. Increase in the speed of our return fans to help with extraction has been undertaken. Review of infrastructure and air flow/ ventilation enhanced by introduction of air cleaners (Scrubbers) in areas managing SCOVID and COVID patients. Roll out managed by Bed management and Engineering. Procedure available on Workplace's Knowledge Library and iPolicy. Outdoor area(s) introduced for staff breakout areas
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.	<ul style="list-style-type: none"> Staff, visitors, patients, consumers (as appropriate) wear PPE as prescribed by the Department of Health (DH), Commonwealth and RMH Infection Prevention Surveillance Service (IPSS) At each entry point, screening staff provide PPE including surgical masks as appropriate Regular emails are circulated and information via Workplace (Organisation's Internal Communication Tool) on the changing requirements for PPE. All COVID related policies can be found on Workplace's Knowledge Library and iPolicy All areas are requested to have sufficient stock in place which can be procured through our Supply Department.

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<p>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).</p>	<p><i>Online training and information provided to staff on the correct way to wear and dispose of PPE and the frequency on which items are to be changed. Online training and information provided to staff in hand hygiene and supporting good hygiene practices</i></p> <p><i>Fit testing program introduced for public facing staff with priority given to all staff likely to work in COVID and SCOVID wards including Residential InReach, HiTH and surveillance.</i></p> <p><i>PPE Spotters trained up and deployed to all hot wards to support staff in safe donning and doffing practices.</i></p> <p><i>All hot wards have a COVID Marshal assigned every shift. This role is usually assumed by the NUM and/or NIC.</i></p> <p><i>Training videos available for staff to access anytime via a mobile device on Workplace</i></p>
<p>Replace high-touch communal items with alternatives.</p>	<p><i>High Touch Point Cleaning (HTPC) by Environmental Services has been increased in frequency, disinfectant wipes have been provided to staff and their use has been encouraged and signage has been displayed in communal spaces (e.g. staff break rooms) and by shared equipment (e.g. Computers and phones).</i></p>

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Cleaning	
<p>Increase environmental cleaning (including between changes of staff), ensure high touch surfaces are cleaned and disinfected regularly (at least twice daily).</p>	<ul style="list-style-type: none"> • <i>As a further demonstration of keeping our staff and patients safe, we have escalated the provision of our cleaning services effective from July 2020.</i> • <i>Facilities Management – Support Services have recruited additional casual staff to further support our dedicated Environmental Services team, in providing additional cleaning services with an emphasis on common areas and high touch points. This floating cohort will clean many of our communal staff zones repeatedly rotating across the working days of the week, including weekends.</i> • <i>High touch elements in shared common areas including staff nurses stations, shared admin areas and lunch rooms in wards will be a priority in their schedules. Other common areas including public foyers, lifts and stairwells will also be a focus.</i> • <i>Our cleaning resources are still deployed and focusing on our priority patient and public facing areas. Staff located in corporate and administrative areas are still encouraged to maintain their own good housekeeping with regular cleaning of surfaces, desks, telephones, keyboards, etc. Clinell Wipes can be ordered through FMIS procurement processes.</i>
<p>Ensure adequate supplies of cleaning products, including detergent and disinfectant.</p>	<p><i>The provision of adequate cleaning products is maintained through our supply lines managed by our procurement department.</i></p>

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Physical distancing and limiting workplace attendance	
<p>Ensure that all staff that can work from home, do work from home.</p>	<p><i>Staff members at a higher risk from COVID-19 were asked to work with managers to develop a personal plan on working from home</i></p> <p><i>Staff in some areas have been identified and are now working from home or a roster system put in place to reduce staff numbers for purpose of achieving social distancing.</i></p> <p><i>Volunteers have flexed up and down according to community acquired presence and personal vulnerability such as age and comorbidities</i></p>
<p>Establish a system that ensures staff members are not working across multiple settings/work sites.</p>	<p><i>Healthcare workers (clinical and non-clinical) working with confirmed COVID patients in an area where a confirmed COVID patient/s is receiving the majority of their care (ie a COVID-streaming ward or COVID- negative pressure room) need to ensure they comply with COV01.01.06 Movement of Workers and Redeployment clinical practice guideline.</i></p> <p><i>Practice in accordance with current DHHS guidelines: Movement of Workers during COVID 19 pandemic.</i></p> <p><i>Significant work to reduce staff movement has occurred in the residential aged care facilities.</i></p> <p><i>Clinical Practice Guideline developed and available: Movement of worker and redeployment of staff. A risk assessment tool has been developed and must be completed by all staff who work with COVID positive patients before they can work in any other parts of the hospital.</i></p> <p><i>Where practical, bank staff are rostered to one ward and/or one site. This is not always possible due to workforce shortages.</i></p> <p><i>Staff who are employed at more than one health service are required to inform all employers in writing.</i></p> <p><i>Staff attestations, including temperature checking and declaration of whether they have worked a shift at another high risk hospital work premises in the last 14 days are undertaken on each site.</i></p> <p><i>Utilisation of a redcap survey to complete the staff attestation process.</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>Number of hospital entry points have been reduced to redirect staff and visitors to controlled entry points where temperature checks, and staff and visitor attestations are undertaken.</i></p> <p><i>Staff who are unwell have been asked stay at home or to present to the staff screening clinic where a swab will be taken with results provided urgently.</i></p> <p><i>Primary and secondary close contacts are identified and advised of quarantine and surveillance requirements by the IPSS or DH PHU.</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>	<ul style="list-style-type: none"> <i>• Social distancing in work areas has been undertaken including rostering of fulltime staff to minimise numbers, and limiting numbers in tearooms, meeting rooms etc including distance markings on floors to indicate appropriate distancing.</i> <i>• Meeting room capacity has reduced – chairs removed or closed. Hand sanitiser and cleaning wipes provided with instructions that all high touch surfaces are to be cleaned pre and post the meeting</i> <i>• Signage in lifts on reduced capacity</i> <i>• Majority of meetings are now held virtually.</i>
<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 in place at the entrance to the hospital and staff encouraged to remind their colleagues of social distancing requirements.</i></p>

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<p>Modify the alignment of workstations so that employees do not face one another.</p>	<p>Social distancing regulations in place. Staff numbers reduced in areas or staff members relocated.</p>
<p>Minimise the build-up of employees waiting to enter and exit the workplace.</p>	<p><i>Floor markings in place to direct entry and exit to the hospital. Security guard stationed to support the flow of people.</i></p> <p><i>Improvement work undertaken to maximise visitor and staff flow through front of house screening processes and minimise aggression toward screening staff.</i></p>
<p>Provide training to staff on physical distancing expectations while working and socialising (e.g. during lunchbreaks).</p>	<p><i>Signs placed in tearooms on need for social distancing and cleaning requirements. Larger spaces have been identified for tea rooms. (see email of 04.08.20 – signage and COVID checklist). In addition, new outdoor break spaces have been implemented for staff (Nov 2021)</i></p> <p><i>Our campus COVID Marshals complete rounding to promote COVID safe behaviours. Message reinforced during live staff briefings, regular executive video updates, all staff emails via Workplace and the RMH intranet.</i></p>
<p>Review delivery protocols to limit contact between delivery drivers and staff.</p>	<p><i>A limited number of internal staff deliver to what is ordered to the loading dock of our healthcare sites.</i></p> <p><i>There is a screening person at the loading dock entry between the RMH and RWH during the week when the majority of deliveries occur.</i></p> <p><i>Suppliers have been advised not to deliver goods through RMH front of house entry points during the week.</i></p>
<p>Review and update work rosters and timetables where possible to ensure temporal as well as physical distancing.</p>	<p><i>Rostering of staff assessed to minimise numbers accessing the workplace. Support is provided to staff who can work from home.</i></p>
<p>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.</p>	<p><i>Signs in place:</i></p> <ul style="list-style-type: none"> • <i>At the entrance/exit to the hospital</i> • <i>on the website</i> • <i>electronic information screens</i> • <i>lifts</i> • <i>entrances to wards</i> <p><i>on visiting hour communications and requirements to adhere too.</i></p>
<p>Mandatory COVID 19 Vaccination for Staff</p>	
<p>Mandatory COVID 19 Vaccination To ensure a safe work environment for staff are required to be vaccinated or show proof of intent to be vaccinated</p>	<ul style="list-style-type: none"> • <i>Effective from 15 October 2021 all employees will be required to have had a minimum first dose of a COVID-19 vaccine; or provide evidence that they have an appointment to be vaccinated before 1 November 2021 in order to continue working. This will apply to all new RMH staff also.</i> • <i>It will be mandatory for all Royal Melbourne Hospital Staff to be fully vaccinated against COVID-19 unless they have a medical exception verified from the Victorian Specialist Immunisation Services (VicSIS) that acknowledges in their circumstances contraindications apply from all available vaccines.</i> <p><i>Information and policies communicated during live staff briefings, regular executive video updates, all staff emails via Workplace and the RMH intranet.</i></p>

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	<p><i>Policies have been reviewed and developed in line with the Victorian Government coronavirus legislation and WorkSafe's COVID19 guidelines.</i></p> <p>https://www.coronavirus.vic.gov.au/information-workers-required-be-vaccinated</p> <p>https://www.worksafe.vic.gov.au/covid-19-vaccinations-workplaces</p>
<p>Quarantine guidelines – Healthcare workers are required to complete a declaration informing if they work for any other employers</p>	<p><i>Staff are required to complete a declaration informing if they have worked for any other employers.</i></p>
Guidance Action to ensure effective record keeping	
Record keeping	
<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>All visitors must be screened.</p> <p><i>Visitors and patients must fill out a QR code survey before they are permitted entry to the hospital. That survey collects their contact details, where in the hospital they are going, and if they have visited any exposure sites. They are also temperature checked on arrival. If visitors and patients are unable to use the QR code technology, RMH screening staff will support the input of information to ensure correct record keeping.</i></p>
<p>Provide guidance to staff on the effective use of the workplace OHS reporting system (where available).</p>	<p><i>All COVID related incidents and issues are reported through to our Injury Prevention and Surveillance Service (IPSS) for capturing in a database, analysing trends and providing response and management.</i></p> <p><i>Contact details for peer support services and the Wellbeing team have been regularly communicated.</i></p>

Guidance	Action to prepare for your response
Preparing your response to a suspected or confirmed COVID-19 case	
<p>Prepare or update your business continuity plan to consider the impacts of an outbreak and potential closure of the workplace.</p>	<p><i>Business Continuity Plans (BCPs) can be found under Emergency Management on the intranet, and are specific to particular areas of the hospital. All of these include responses to loss of work force due to any reason, including COVID</i></p> <p><i>The four RACFs have BCPs in case of an outbreak and these plans have been scenario tested regularly on site.</i></p> <p><i>The Clinical Code Yellow Pandemic Plan has been updated twice following the first and second wave.</i></p> <p><i>The West Metro Partnership COVID Response Plan was developed and enacted on 21 July 2020.</i></p>
<p>Prepare to assist DHHS with contact tracing and providing staff and visitor records to support contact tracing.</p>	<p><i>Arden Street Labs contact tracing software called COVID Trace has been purchased and will go live on 29th November 2021. This will be used for contact tracing staff and outbreak management including epidemiology investigations and reporting in IRIS. . This includes timing of testing schedules and due dates to return to work.</i></p>
<p>Prepare to undertake cleaning and disinfection at your business premises. Assess whether the workplace or parts of the workplace must be closed.</p>	<p><i>Areas closed with deep clean +/- Nocospray cleaning to be undertaken where required. Where cleaning undertaken by a contractor – a certificate of cleanliness is provided.</i></p>
<p>Prepare for how you will manage a suspected or confirmed case in an employee during work hours.</p>	<p><i>The IPSS team work directly with the suspected or confirmed case including scoping the impact and identifying contacts for contact tracing and isolating according to DH PHU guidelines. Follow up testing is arranged including all primary contacts and some secondary as per risk assessment. Hot zones are established including donning and doffing stations, PPE spotters and COVID Marshals.</i></p> <p><i>Confirmed COVID positive workers, patients, visitors and contractors are reported to WorkSafe in line with WorkSafe guidelines.</i></p> <p><i>Staff movement is restricted. Patients and residents may be cohorted according to the risk assessment and scoping exercise. One person is assigned to data capture for staff, patients and visitors.</i></p> <p><i>Depending on scope, cleaning is organised accordingly including a deep clean at the appropriate time.</i></p> <p><i>An employee suspected to have COVID-19 is to be supported to travel home immediately OR to isolate at work if unable to travel home immediately. Depending on the home situation, alternative accommodation and supports are arranged with ongoing support built in.</i></p>
<p>Prepare to notify workforce and site visitors of a confirmed or suspected case.</p>	<p><i>For a confirmed case, IPSS will inform staff and other stakeholders who are close contacts and direct them to stay in self-isolation.</i></p> <p><i>For a suspected case in an inpatient, signage is placed on doors, PPE stations set up at room, EPIC is updated to reflect COVID status, and isolation status is communicated to staff at huddles/hand over.</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>RMH will immediately notify WorkSafe of a confirmed case: Immediately calling the mandatory incident notification hotline, and providing formal written notification within 48 hours.</i></p>

Guidance	Action to prepare for your response
<p>Confirm that your workplace can safely re-open and workers can return to work.</p>	<p><i>RMH will reopen the worksite once they have assessed that all required measures within the directions have been completed (unless in a high-risk workplace setting).</i></p> <p><i>DHHS and WorkSafe will be notified by RMH that the workplace is reopening.</i></p>

I acknowledge I understand my responsibilities and have implemented this COVID Safe plan in the workplace.