Coronavirus (COVID-19): Outbreak preparedness, prevention and management

This information is intended to support registered NDIS providers to understand how to:

- ensure their workers take reasonable precautions to protect people with disability and themselves
- prepare for an outbreak of COVID-19
- respond to suspected or confirmed cases in different types of service settings
- manage an outbreak of COVID-19.

Provider obligations

In line with your obligations under your conditions of registration, including compliance with the NDIS Practice Standards and NDIS Code of Conduct, you should be planning your response to a potential outbreak of COVID-19, and taking reasonable precautions to minimise infection risks.

In November 2021, a new emergency and disaster management NDIS Practice Standard and Quality Indicators were introduced which set expectations on what providers should have in place to prepare, prevent, manage and respond to emergency and disaster situations. Related amendments were also made to the Quality Indicators for existing NDIS Practice Standards. A transition period applied for existing registered NDIS providers for whom the new standard and indicators came into effect from 24 January 2022. More information is available on the new NDIS Practice Standards and Quality Indicators page on the NDIS Commission website.

This information provides guidance to help you meet your obligations and minimise the risk to NDIS participants' health, wellbeing and safety.

This fact sheet has been endorsed by the Australian Government Department of Health.

Keeping the NDIS participants you support safe

All workers should take reasonable precautions to continue to provide supports and services in a safe and competent manner with care and skill and to keep themselves and others safe.

Workers **must not go to work** if they have symptoms of acute respiratory infection (ARI) even if they have tested negative. Symptoms of ARI include a fever, cough, shortness of breath, sore throat,

runny nose or nasal congestion, headache, muscle aches, fatigue or tiredness, nausea or vomiting and diarrhoea, or loss of smell or taste.

If a worker experiences even mild symptoms of acute respiratory infection (such as those outlined above), they must **report those symptoms to their place of work** and should leave work immediately with due consideration given to ensuring continuity of support for participants. Workers should get tested for COVID-19 in line with jurisdictional health recommendations, seek medical advice from their doctor or call the National Coronavirus Helpline on 1800 020 080.

Once the worker has been tested for COVID-19, they should self-isolate at home until the results are received.

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.

If a diagnosis of COVID-19 is confirmed, the worker should isolate at home in accordance with health guidance. When they are permitted to return to work will depend on local state and territory health requirements. Providers should to refer to the National guidelines for the prevention, control and public health management of outbreaks of acute respiratory infection (including COVID-19 and Influenza) in disability residential services (Communicable Disease Network of Australia (CDNA)) and to State and territory health departments for more information regarding isolation and return to work for workers in disability residential accommodation.

During a confirmed outbreak, staff who are not up to date with their vaccinations should work only if they do not have symptoms and wearing a mask.

States and territories may have vaccination requirements for disability support workers. Providers should monitor local vaccination requirements.

Preparing for an outbreak of COVID-19

Update: Check local guidance about using PPE

As the COVID-19 pandemic continues in Australia, some states and territories have updated their advice about when you should use PPE when providing supports and services for people with disability. Please stay updated with the latest advice from your state or territory's health department to ensure you and your workers are complying with local guidance.

Please read the below information in this context.

Community transmission of COVID-19 is occurring, so NDIS providers should plan and prepare for possible cases involving the people with disability you work with and/or your workers.

As part of business continuity planning for COVID-19, you should prepare an outbreak management plan that is proportionate to the risk of supports you deliver, and the size of your organisation. This plan may include the following components:

- Identify which supports are **critical for the health, wellbeing and safety of a person with disability**. Decisions on which services are continued, altered, or suspended are based on the assessed risk to the person with disability and in conjunction with relevant in-force state or territory public health orders. Read more about making alterations to services.
- Identify and **assess risks** to people you support and to the organisation (such as financial, operational, workplace health and safety obligations), and implement controls to mitigate these where possible. This may include:

- o reviewing [behaviour support strategies](#) for people who are isolated and may display behaviours of concern
- o encouraging workers and people you support to have [COVID-19 vaccinations](#), [flu vaccinations](#), and maintain up-to-date records of vaccination status.

- Outline **workforce contingency plans** in the event of an outbreak, or that workers are unwell and need to self-isolate, or are not able to work because of caring responsibilities or their own health vulnerabilities.
  This may include:
  - o changing leave entitlements to ensure that all workers, regardless of their employment status, can access leave to allow them to self-isolate if required. You should check current award provisions (including to the Social, Community, Home Care and Disability Services Industry Award 2010) and/or the [Fair Work Ombudsman](#) for information about isolation pay and leave.
  - o maintaining an up-to-date contact list of all staff, including casual or agency staff.
  - o streamlining the on boarding of new staff to maintain health, wellbeing and safety, and avoid risk of harm, and having new workers undertake the [training for workers modules](#).

- Establish a **COVID-19 incident reporting process** as part of your organisation's incident management system, and understand your [reporting obligations to the NDIS Commission](#)

- Set up an **outbreak management team** – commensurate to the scale of your organisation or the facility. This team will be responsible for planning, coordinating, and managing logistics if an outbreak occurs, and communicating with state/territory public health units, the NDIS Quality and Safeguards Commission (NDIS Commission) and the NDIA (if required).

- **Update staff training** in [infection control](#), 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).

- Implement **standard infection control precautions** throughout all work places.

- Establish communication channels to **keep your workforce informed** of any updates or changes to your business processes as a result of the outbreak. This includes contracted or agency staff, such as cleaners.

- Document a **strategy for communicating with the people you support, their families or guardians/advocates.** This should include the different communication formats depending on communication preferences, and outline how people will be supported to understand changes to services and supports.

- Undertake a **stocktake of consumables and source additional supplies** if necessary. This could include compiling an 'outbreak kit' with items such as:
  - o [personal protective equipment](#)
  - o hand hygiene products (hand sanitiser, liquid soap)
  - o cleaning supplies
  - o other essential supplies such as toilet paper and food.

- Plan for increased **environmental cleaning**, including where additional cleaners and oversight is required.

- Identify any participants who have **advance care or healthcare or support plans**, and keep a copy if possible.

- Develop an **emergency plan** for the people with disability you support. This should contain details of:
    - their emergency contacts (e.g. family, guardian or advocate)
    - any medical conditions as well as ongoing treatment and current medications, including dose and frequency
    - current GP and any other health professionals
    - the advanced care or support plan (if they have one).
- If any participants are at higher risk, **prepare a hospital bag** with things they might need for an overnight stay.
- Document a **visitor management policy** in the event that there is a suspected/confirmed case or an outbreak.
- Arrange for **appropriate isolation** of people who are unwell and have a suspected or confirmed case of COVID-19 and must be isolated, or for your workers to stay in to limit transmission risk. This may include arranging alternative accommodation for a resident who has contracted COVID-19 at their request, or where other residents are at serious risk of adverse effects from a COVID-19 infection. Alternative arrangements for accommodation should always be made in consultation with the person and ensuring that adequate supports are maintained for that person should they need to temporarily relocate.

In-home support settings

An addition to the points above, if you provide **in-home supports** to people with disability, you should also:
- work with them to agree on **escalation processes** and communication plans if their needs change. The COVID-19 Planning Resource for people with disability will assist people with preparing this information
- consider **how you would monitor their safety** and wellbeing if they could not receive services temporarily
- make a record of participants who can **only be contacted by a face-to-face visit** (that is, if they cannot use the phone independently)
- give the participant and their family, guardian or advocate contact details of someone they can call if there is a **change to their health condition or circumstances** (such as, if they develop symptoms, are in self-isolation or have been in contact with a confirmed COVID-19 case)

Responding to a suspected or confirmed case of COVID-19

In-home support settings

If your workers provide supports to a person living in their own home, they should monitor for symptoms of COVID-19 in the person with disability whom they support or any other family members. While a participant or other family members showing symptoms is not sufficient reason to cease providing supports to them, you and your workers should implement your outbreak management plan.

Depending on the types of supports provided, this may include:

- assisting the participant to **seek medical advice** from their doctor or call the National Coronavirus Helpline on 1800 020 080 and assisting them to undergo COVID-19 testing, if that is advised
- identifying **which supports are essential** for the participant's health, wellbeing and safety, and whether any of these supports can be provided in a different way. For example, telephone welfare checks, or purchasing medication and food and leaving it in a safe place.
- ensuring good **communication with the participant** and/or their family members and support workers so that everyone understands any disruption or alteration to supports and services
- **sourcing PPE** through usual means, and using it according to guidance from your state or territory's public health guidelines, or when:
    - a participant 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.

Disability accommodation settings

Providers should review the [National guidelines for the prevention, control and public health management of outbreaks of acute respiratory infection (including COVID-19 and Influenza) in disability residential services](link) (Communicable Diseases Network Australia (CDNA)).

All workers and people with disability in the accommodation setting should actively monitor for symptoms of acute respiratory infection, including COVID-19.

If a participant shows symptoms of acute respiratory infection:

- **Isolate the participant** by keeping them separate to other residents, to prevent opportunity for infection to spread.
- **Implement initial infection control measures** including use of face masks and other personal protective equipment (PPE), environmental cleaning and droplet precautions.
- **Seek medical advice** from their doctor or call the National Coronavirus Helpline on 1800 020 080. If recommended by a medical practitioner, assist the participant to undergo testing.
- While awaiting the test results, continue to isolate the participant and maintain infection control measures.
- **Keep the participant informed** and support all residents to understand any changes to supports and services that may affect them.
- **Source PPE** through usual means and use it according to guidance from your state or territory's public health guidelines.
- Complete an internal **incident report** for the suspected case of COVID-19 (or other reports as required according to your organisation's outbreak management plan).

If a case of COVID-19 is confirmed by a positive test, you should take the following steps consistent with advice from your state or territory's public health unit:

- **Consult medical advice** regarding clinical care for the participant and COVID-19 antivirals.
- Update **internal incident report** of a confirmed case (or other applicable internal reporting).
- **Notify the NDIS Commission** where the event has a significant impact on your service delivery or your ability to comply with your obligations as a registered NDIS provider by completing and submitting the COVID-19 Notification of event form.
- **Continue to isolate** the participant until they have recovered in accordance with health guidance or they have been cleared by a medical professional. Ideally, this would be in a single room with ensuite, if available. This may involve assisting the participant to **relocate to alternative, temporary accommodation** for this period, if they agree to do so.
- **Assess risks of infection spread for all residents**, and review and initiate your outbreak management plan.
- **Monitor for symptoms** and provide assistance for testing for participants as required.
- Step-up precautions to **limit risk of spread** such as
  - maintaining standard and transmission based precautions
  - suspending non-essential visitors for 14 days
  - arranging for professional cleaning of the residence and increased frequency of cleaning and disinfection
  - where your workers work across multiple outlets, or providers, work with those workers to determine if you can provide the level of work they require within your organisation to limit them working across multiple outlets. You may be able to collaborate with other providers to achieve this outcome.

Visitor management

Regularly review your organisation's visitor management policies to ensure they are consistent with the current public health orders in your state or territory, and reflect whether there are suspected or confirmed cases of COVID-19 within the provider setting. When doing so, seek guidance from the public health officials who are assisting with the confirmed or suspected outbreak.

This will include:

- informing all visitors about social distancing and hand hygiene
- preventing visitors who are not necessary to provide support to people in the residence from attending the facility if there is a suspected or confirmed case, and suspending all group activities (if this has not already been done).

You should communicate often with the people you support, their families and guardians/advocates about the steps you are taking to prevent infection, including any changes to the visitor management policies. Where it is possible in the context of the local health authorities' advice, and public health orders, visits by family members should be supported.

Managing an outbreak of COVID-19

Your outbreak management plan will help your workforce identify, respond to and manage a potential COVID-19 outbreak; protect the health of all workers and residents, and reduce the severity and duration of outbreaks if they occur.

An outbreak is considered by the Australian Government Department of Heath to have started when **two or more residents test positive to COVID-19 or influenza within a 72 hour period.** State and territory public health guidance may vary and providers should follow local guidance.

You should notify the local [state or territory public health unit](#) of an outbreak when it occurs. Your local public health unit may declare (or may help you decide whether to declare) an outbreak. They, in conjunction with medical practitioners caring for staff and residents, will provide guidance on how to manage the outbreak.

If an outbreak is suspected or confirmed, you should:

- confirm standard infection control precautions are in place and implement transmission-based precautions (contact and droplet precautions)
- bring your outbreak management team together
- isolate any suspected or confirmed cases and assign dedicated support workers to them
- liaise with medical practitioners to closely monitor symptoms
- schedule regular environmental cleaning and disinfection of all areas
- put up signage at entrances to inform essential visitors
- put up droplet precaution signage outside symptomatic person's rooms
- suspend all non-essential services and supports
- suspend all non-essential visitors and appointments.

More detailed information on outbreak management can be found in the [National guidelines for the prevention, control and public health management of outbreaks of acute respiratory infection (including COVID-19 and Influenza) in disability residential services](#) (Communicable Diseases Network Australia (CDNA)).

Further information, alerts and resources

The [Coronavirus (COVID-19) information webpage](#) on the NDIS Commission website contains links to updates, training, alerts and other resources.

[State and territory Health Departments](#) have the latest information on COVID-19 relevant to your jurisdiction

[National guidelines for the prevention, control and public health management of outbreaks of acute respiratory infection (including COVID-19 and Influenza) in disability residential services](#) (Communicable Disease Network of Australia (CDNA))

Contact Us

Call: 1800 035 544 (free call from landlines). Our contact centre is open 9.00am to 4.30pm in the NT, 9.00am to 5.00pm in the ACT, NSW, QLD, SA, TAS and VIC Monday to Friday, excluding public holidays.

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