



NDIS Quality  
and Safeguards  
Commission

# COVID-19 Information Pack

Information for NDIS providers  
and workers

Issue 1, Updated July 2020





## Contents

<b>1.</b>	<b>Introduction .....</b>	<b>3</b>
<b>2.</b>	<b>Provider obligations.....</b>	<b>4</b>
	Notifying the NDIS Commission of certain events .....	5
	Our regulatory approach during COVID-19 .....	5
<b>3.</b>	<b>Business continuity planning.....</b>	<b>6</b>
	Outbreak management plan .....	7
<b>4.</b>	<b>Accessing and using personal protective equipment (PPE) .....</b>	<b>9</b>
	When should disability support workers use PPE? .....	10
	How do I access PPE if I need it? .....	10
	Information about risk of infection in your location .....	10
<b>5.</b>	<b>Managing your workforce through COVID-19 .....</b>	<b>11</b>
	Criteria for when staff should not come to work or have contact with participants.....	11
	Training for NDIS workers.....	11
	Minimising the risk of COVID-19 transmission .....	12
	Staff flu vaccinations .....	13
<b>6.</b>	<b>Dealing with suspected or confirmed cases of COVID-19 .....</b>	<b>13</b>
	In-home support settings .....	13
	Disability accommodation settings .....	14
<b>7.</b>	<b>Managing an outbreak of COVID-19 .....</b>	<b>16</b>
<b>8.</b>	<b>Supporting participants through COVID-19 .....</b>	<b>16</b>
	Adjusting services and supports.....	16
	Communicating with participants .....	18
	Flu vaccinations .....	18
	Supporting NDIS participants with behaviour support needs.....	18
	Implementing a new regulated restrictive practice to support an NDIS participant.....	20
<b>9.</b>	<b>Information for participants.....</b>	<b>21</b>
<b>10.</b>	<b>COVID-19 links and resources.....</b>	<b>22</b>

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## 1. Introduction

The coronavirus (COVID-19) pandemic is presenting us all with unprecedented challenges in our daily lives and in how we do our work.

First and foremost, **our focus should be on ensuring the health, wellbeing and safety of people with disability**, and the workforce that delivers the supports and services that are critical to NDIS participants' personal support, nutrition and hygiene.

The NDIS Commission has issued regular updates about important issues to support NDIS providers to continue to provide the safe and quality supports NDIS participants rely on. There is a dedicated [COVID-19 webpage for NDIS providers](#), which contains links to all our resources, and others from trusted sources.

We have also developed resources to support NDIS participants, including a [dedicated page](#) that contains information in a range of formats.

As some states and territories start to lift restrictions put in place during the pandemic, the risk of COVID-19 infection remains, so we strongly encourage you to read this resource and share its guidance with your workers. This will ensure you continue to meet your obligations while protecting the health, safety and wellbeing of the NDIS participants you support.

**Note:** The information in this pack may be useful for all providers of NDIS supports and services; however, it is specifically intended for registered NDIS providers in the states and territories in which the NDIS Commission currently operates (i.e. all states and territories except Western Australia, where it will commence from 1 December 2020).

### Stay updated with current COVID-19 information

For the latest health advice and arrangements in your location, visit your state or territory government's COVID-19 information webpage:

- [Australian Capital Territory](#)
- [New South Wales](#)
- [Northern Territory](#)
- [Queensland](#)
- [South Australia](#)
- [Tasmania](#)
- [Victoria](#)
- [Western Australia](#)

You can also visit the [COVID-19 Restriction Checker](#), an Australian Government initiative that sets out the current restrictions on gatherings, activities and businesses in each state and territory.

### Subscribing to NDIS Commission updates

Registered providers receive our provider newsletters and provider alerts at the email address registered providers have provided in the NDIS Commission Portal.

In addition, anyone can receive NDIS Commission communications by completing the [subscription form](#).

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## 2. Provider obligations

The COVID-19 pandemic does not change the obligations of all NDIS providers – registered and unregistered. These obligations are to protect and prevent people with disability from experiencing harm arising from poor quality or unsafe supports, abuse, neglect and exploitation, or poorly managed changes to supports.

As a registered NDIS provider, you have obligations under the NDIS Code of Conduct and the NDIS Practice Standards, as well as your conditions of registration, that relate to the delivery of safe, quality supports and services, and the management of risks associated with the supports you provide to NDIS participants.

These risks include the possible COVID-19 infection of yourself, your workers and people you otherwise engage to deliver NDIS supports, as well as the risk of infection of NDIS participants.

### NDIS Code of Conduct

The [NDIS Code of Conduct](#) requires workers and providers who deliver NDIS supports to NDIS participants to, among other things:

- provide supports and services in a safe and competent manner with care and skill
- promptly take steps to raise and act on concerns about matters that might have an impact on the quality and safety of supports provided to people with disability.

### NDIS Practice Standards

The [NDIS Practice Standards](#) provide guidance for registered providers, including standards for governance and operational management, as well as the provision of supports environment.

#### **Governance and operational management, includes:**

- having robust governance and operational management systems
- considering organisational risks, other requirements related to operating under the NDIS, participants' and workers' needs and the wider organisational environment in your strategic and business planning
- identifying and managing risks, both to participants and workers
- analysing, prioritising and treating risks to the organisation, including participants, work health and safety risks, and risks associated with providing supports
- ensuring continuity of support so that participants access timely and appropriate support without interruption, including that disaster preparedness and planning measures are in place to enable continuation of critical supports before, during or after a disaster.

#### **Provision of supports environment, includes:**

- each participant accessing supports in a safe environment that is appropriate to their needs. This includes, where relevant, you working with other providers and services to identify and treat risks, ensure safe environments, and prevent and manage injuries
- verification standards include a requirement for risk management, including managing work health and safety, which requires protecting the health, safety and wellbeing of workers and others who may be affected by work activities – including NDIS participants.

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## Notifying the NDIS Commission of certain events

On 24 March 2020, the NDIS Quality and Safeguards Commissioner wrote to all registered providers to remind you that it is a condition of registration with the NDIS Commission that you [notify us of changes or events](#) that adversely affect your ability to deliver supports and services to NDIS participants.

This includes any change or event that:

- significantly affects your ability to comply with your conditions of registration and the NDIS Practice Standards
- seriously impairs your ability to effectively conduct your operations and deliver ongoing supports or services to NDIS participants
- adversely affects a person with disability's access to the supports or services you are registered to provide.

In the context of the COVID-19 pandemic, these may include you becoming aware:

- that the COVID-19 pandemic has, or is likely, to significantly impact your organisation's ability to provide supports and services to NDIS participants
- that a significant shortfall in available workers to provide the supports or services your organisation is registered to provide
- of the cessation, on a temporary or permanent basis, of the provision of supports or services that your organisation is registered to provide.

### *Recommencing services to NDIS participants*

Many states and territories are starting to ease restrictions put in place during the COVID-19 pandemic. Please note you **do not need to submit a notification form to advise us when you recommence services** in line with the lifting of state and territory health directions.

If, after reinstating services, you need to stop delivering services or supports again, you will need to notify us of this by using the [Notification of event – COVID-19 \(registered provider\) form](#) on our website.

### **Our regulatory approach during COVID-19**

We are taking a proportionate regulatory approach, concentrating on supporting providers to be agile and resourceful in meeting their obligations, and adjusting in these complex and challenging times.

During the pandemic, our compliance and provider engagement activities are concentrating on matters that present the **most critical level of risk** to participants' health and safety and wellbeing, and we have adjusted routine regulatory activities (e.g. registration processes) to avoid putting untimely demands on providers.

### *Registration renewals and advice to approved quality auditors*

We have advised approved auditors to:

- ensure audit practices are provided in a way that minimises the risk of exposure to COVID-19 for participants, providers and auditors

- where audits are scheduled to occur, engage with providers to confirm their availability to continue where practicable to do so
- delay or reschedule audit dates where providers are not in a position to proceed with these.

We have written directly to registered NDIS providers who have already started, or are due to start, the registration renewal process. We have advised them about variations we have made to their registration that give them additional time to complete the registration renewal process, including audits.

We will continue to monitor the impact of COVID-19 and will make further adjustments to providers' registration where necessary.

If you have a query about your registration renewal, contact the Provider Registration team at [registration@ndiscommission.gov.au](mailto:registration@ndiscommission.gov.au) or on 1800 035 544.

### 3. Business continuity planning

You are expected to have plans that set out how your organisation will manage in the event of a crisis or disaster situation. Many providers have detailed plans that set out how they will respond in general situations.

We recommend that you:

- **test your plans** to the specific impacts of this pandemic on your business, the people you support and your workforce, and refine as required
- **set regular review points** for the plan, so that you can respond to this rapidly changing situation, and adapt to additional advice from the Australian Government and state and territory public health orders, as required.

When testing the plan, ensure any third parties included in it are able to fulfil their responsibilities to your organisation. You should also:

- identify options for managing temporary changes in support, should this be required
- identify the staff in your organisation who have capabilities in contingency planning, infection control, or other specialisations who can be deployed to provide support
- know your staff availability to support potential gaps in service provision, which may be created by workers impacted by COVID-19
- identify the need to engage an alternative workforce, ensuring that inductions appropriately set the expectations for working with people with disability. These might include:
  - undertaking the NDIS Commission [Worker Orientation Module](#)
  - ensuring they have the appropriate competencies to deliver the appropriate services and supports in accordance with the expectations of the NDIS Practice Standards.

#### Know the NDIS participants you support

- Undertake a risk assessment of the supports and services that your organisation provides. This should include the degree to which NDIS participants rely on those

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supports and services to meet their daily living needs, and the extent to which their health and safety would be affected, should those services be disrupted.

- Understand the specific needs of each of the participants you support and how they would like to receive information. Understand how this would be impacted if changes were made to existing service and support arrangements. See also '[Communicating with participants](#)'
- Make sure participant records are up-to-date and accessible, so that their support needs and preferences are clear, documented and available should new or temporary staff be required to support them. This might include their preferred means of communication, specific needs and preferences, health care plans, behaviour support plans, other providers, and their representatives.
- If possible, understand any informal supports and services that may be available to the person with disability.

### Communicate effectively

- Familiarise your workforce and any third parties with the business continuity arrangements and triage points within your organisation.
- Familiarise your workforce with policies, procedures and responsibilities regarding infection control.
- Make sure clear communication channels are in place with all of the NDIS participants that your organisation supports. This will enable the effective communication of any changes that might be required to a participant's supports and services.

Due to the current limitations on public gatherings and closure of certain facilities and businesses, you may need to explore alternatives for activities or supports that must be ceased or adjusted. Refer to the [Adjusting services and supports](#) section for ideas on ways to do this while adhering to social distancing and other requirements.

### Outbreak management plan

As part of business continuity planning 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 state/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:
  - reviewing [behaviour support strategies](#) for people who are isolated and may display behaviours of concern
  - encouraging workers and people you support to have [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:

- changing leave entitlements to ensure that all workers, regardless of their employment status, can access leave to allow them to self-isolate if required. Temporary changes have been made to awards (including to the Social, Community, Home Care and Disability Services Industry Award 2010) to include a minimum entitlement to 2 weeks [unpaid pandemic leave](#)
  - maintaining an up-to-date contact list of all staff, including casual or agency staff. The National Disability Insurance Agency (NDIA) has links for platforms who match providers with [new or backup support workers](#)
  - 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 health departments, the NDIS Quality and Safeguards Commission (NDIS Commission) and the NDIA (if required).
  - **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).
  - 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:
    - [personal protective equipment](#)
    - hand hygiene products (hand sanitiser, liquid soap)
    - cleaning supplies
    - 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)

## 4. Accessing and using personal protective equipment (PPE)

### ***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 public health unit](#) to ensure you and your workers are complying with local guidance.*

*Please read the below information in this context.*

If you use PPE as a usual part of your support arrangements, you should continue to access it through your usual means. Where this is no longer possible, you should email the National Medical Stockpile (NMS) at [NDISCOVIDPPE@health.gov.au](mailto:NDISCOVIDPPE@health.gov.au).

Access to PPE is being prioritised for those NDIS providers who deliver personal care and other activities that require close physical contact where there is an immediate threat to continuity of safe quality care due to lack of access to PPE, or where the participant has a confirmed or suspected case of COVID-19.

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## When should disability support workers use PPE?

Refer to the Australian Government Department of Health's fact sheet '[Guide to personal protective equipment \(PPE\) for disability care providers](#)' for guidance on:

- using PPE when providing support to a confirmed or suspected case
- how to remove PPE
- what type of PPE to wear in different scenarios
- using PPE when providing care to people with disability
- access to PPE

Workers supporting NDIS participants should wear surgical masks or other items of PPE **when working with people who have suspected or confirmed COVID-19**, and when:

- advised by your local state or territory's public health unit, or
- it is part of the usual clinical care requirements,
- supports being provided are essential to the participant's life, health or safety, or
- contact between people exceeds Australian Government Department of Health guidelines for social distancing or isolation.

It is recommended that NDIS and disability support providers delivering supports to people in residential settings follow the advice from the [Communicable Diseases Network Australia](#) on preventing, controlling and managing COVID-19 outbreaks in residential settings.

**Where a worker is suspected of having been exposed to COVID-19 or is displaying symptoms of COVID-19, they should not be providing direct support to NDIS participants.** PPE is not an appropriate solution to workers in this situation.

## How do I access PPE if I need it?

The National Medical Stockpile will consider applications for access to PPE from NDIS providers, prioritising access to those providers that have a confirmed or suspected COVID-19 case.

Providers will need to include in their applications:

- that they have been unable to source PPE through the open market
- that their existing stocks have been depleted
- who the requested masks are intended for
- how the masks are to be prioritised and distributed in order to minimise transmission to greatest effect
- how previous NMS stocks (if applicable) have been used efficiently and effectively.

Email the NMS at [NDISCOVIDPPE@health.gov.au](mailto:NDISCOVIDPPE@health.gov.au).

## Information about risk of infection in your location

Some state and territory departments of health are issuing information on the distribution of confirmed cases in local areas across their states. You can find information about case levels in [the ACT](#), [NSW](#), the [NT](#), [Queensland](#), [South Australia](#), [Tasmania](#), [Victoria](#) and [Western Australia](#).

## 5. Managing your workforce through COVID-19

### Criteria for when staff should not come to work or have contact with participants

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:

- a fever, or even mild symptoms, including cough, shortness of breath, sore throat, runny nose or nasal congestion, tiredness or loss of smell or taste, or.
- returned from overseas or interstate in the last 14 days, consistent with their state or territory's public health directions, or
- been in contact with someone diagnosed with COVID-19.

If a worker experiences even mild symptoms of respiratory illness (such as those outlined above), they must **report those symptoms to their place of work**. If they experience any of these symptoms for the first time during a shift, **they should leave work immediately**, report their symptoms as identified above, get tested for COVID-19, and seek medical advice from their doctor or call the National Coronavirus Hotline 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 the infections period for their condition). **If they are diagnosed with COVID-19**, your state or territory's public health unit will advise the worker about what they need to do.

**If the worker attended work in the 24 hours before the onset of symptoms**, close contacts should be informed. Once the test results are obtained (whether positive or negative), the same close contacts should be informed and given advice on whether they need to self-isolate. Note: In some states and territories, this will be done by local health authorities. Check with your [state or territory's public health unit](#).

**Close contact** is defined as:

- More than 15 minutes face-to-face contact in any setting with a confirmed (or probable) case in the period from 24 hours before onset of symptoms in the confirmed (or probable) case, **or**
- Sharing a closed space with a confirmed (or probable) case for a prolonged period (e.g. more than 2 hours) in the period extending from 24 hours before onset of symptoms in the confirmed (or probable) case.

### Training for NDIS workers

#### *Worker Orientation Module: 'Quality, Safety and You'*

It is important that workers in the NDIS understand their obligations under the NDIS Code of Conduct and, specifically, how these relate to the rights, health and safety of the NDIS participants you support.

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The NDIS Code of Conduct applies to all NDIS providers and workers.

The [Worker Orientation Module, 'Quality, Safety and You'](#) is an interactive online course that explains worker obligations under the NDIS Code of Conduct – from the perspective of NDIS participants. It is available in standard, Auslan and screen reader formats.

The module takes approximately 90 minutes to complete, and helps workers understand:

- what the NDIS is and why we need it
- the role of the NDIS Quality and Safeguards Commission
- responsibilities under the NDIS Code of Conduct
- their role in achieving the vision of the NDIS.

### *Infection prevention and control*

The Australian Government Department of Health has developed a free online training module: [Infection prevention and control for COVID-19](#).

It covers the fundamentals of infection prevention and control for COVID-19, including:

- COVID-19 – what is it?
- Signs and symptoms
- Keeping safe – protecting yourself and others
- Myth busting.

At the end of this training module, you should be able to:

- understand the basics about the COVID-19 virus, including how it is spread
- describe what you can do to protect the people you support and your workforce
- know what to do if the person you are supporting develops symptoms
- know what to do if you develop symptoms
- tell the difference between myths and facts of COVID-19.

Email any technical questions about the training portal to [support@covid-19training.gov.au](mailto:support@covid-19training.gov.au)

### *Worker screening*

Worker screening is a way to check that the people who are working, or wish to work, with NDIS participants don't present an unacceptable risk to them.

All NDIS workers must be screened in accordance with the state and territory arrangements.

Find more on our [Worker Screening](#) webpage.

### **Minimising the risk of COVID-19 transmission**

In any support, whether continuing or being adjusted, consideration must be given to reducing the risk of COVID-19 infection. Factors that can increase that risk, and the impact of a COVID-19 infection include:

- the likelihood of underlying medical conditions placing individuals at risk for severe disease from COVID-19
- people with complex support needs who may have difficulty meeting the requirements for social distancing and personal hygiene
- centre-based supports, and the management of a centre-based environment may facilitate the spread of COVID-19.

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### *Strategies to control infection transmission*

- Provide adequate training and refreshers to all staff on respiratory etiquette and hand hygiene practices. This includes:
  - Washing hands frequently with soap and water, before and after eating, and after going to the toilet (see more information about hand washing published by the Department of Health)
  - Covering the mouth when coughing and sneezing, disposing of tissues, and using alcohol-based hand sanitiser
  - If unwell, avoiding contact with others (i.e. touching, kissing, hugging, and other intimate contact)
- Ensure support workers who have travelled overseas or interstate self-isolate for 14 days before returning to work.
- Conduct routine environmental cleaning, particularly for frequently-touched surfaces and proper waste management.
- Where possible, continue in-home supports and shared care planning to minimise the risk of a participant being admitted to health or quarantined facilities.
- Where a case of COVID-19 is suspected, clear communication on preventive health measures should be given to staff and updated as circumstances change.
- Make sure that participants are kept informed and support them to understand how they can stay safe. There are accessible resources on [our Coronavirus information for people with a disability](#) page, including an [Easy Read factsheet](#).

### **Staff flu vaccinations**

Although COVID-19 is not the flu, flu vaccinations are critical to reducing the risk of serious health issues for many people with disability.

It is strongly recommended that all providers carers, workers, NDIS participants and their family members to receive the annual flu vaccination from mid-April 2020.

## **6. Dealing with suspected or confirmed cases 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 Hotline on 1800 020 080 and assisting them to undergo COVID-19 testing, if that is advised. Refer to the Australian Government Department of Health's fact sheet '[Information for support workers and carers on COVID-19 testing for people with disability](#)' for advice about the testing process
- 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

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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

We encourage providers to review [National guidelines for the prevention, control and public health management of COVID-19 outbreaks in residential settings](#) (Communicable Diseases Network Australia (CDNA)).

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

If a participant shows symptoms of COVID-19:

- **seek medical advice** from their doctor or call the National Coronavirus Hotline on 1800 020 080. If recommended by a medical practitioner, assist the participant to undergo COVID-19 testing. Refer to the Australian Government Department of Health's fact sheet '[Information for support workers and carers on COVID-19 testing for people with disability](#)' for advice about the testing process
- while awaiting the test results, **isolate the participant** and ensure they wear a face mask when in common areas. Increase routine environmental cleaning, and implement droplet precautions
- inform any person who **may have had close contact** with the participant from 24 hours before the onset of symptoms that there is a suspected case of COVID-19, including co-residents, families, and workers.
- **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, or when:
  - a participant has or is suspected to have COVID-19
  - the supports being provided are essential to the participant's life, health or safety

- contact between people exceeds the Australian Government Department of Health Guidelines for social distancing and isolation.
- 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:

- Inform people who have been in **close contact**, who must then self-quarantine for 14 days.
- Update **internal incident report** of a confirmed case (or other applicable internal reporting).
- **Notify the NDIS Commission** by completing and submitting the [COVID-19 Notification of event form](#).
- Isolate the participant until they have recovered and 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.
- Take precautions to **limit risk of spread** such as
  - 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.

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## 7. 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 Health to have started when **two people in three days become sick** with the symptoms AND **at least one of these has a positive test** for COVID-19.

Your [state or territory's public health unit](#) will help you decide whether to declare an outbreak and 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.

For more detailed information on outbreak management, see the [CDNA National Guidelines](#) for the Prevention, Control and Public Health Management of COVID-19 Outbreaks in Residential Care Facilities.

## 8. Supporting participants through COVID-19

### Adjusting services and supports

Below are some ideas received from NDIS providers about how to continue to support NDIS participants while adhering to current advice from the Australian Government, Commonwealth Chief Medical Officer, and state and territory governments about self-isolation and social distancing.

#### Provide telephone or online supports

- Where possible, consider moving services to be phone-based or interactive online services rather than face-to-face.

#### Provide activities in an alternative way

- Where supports are usually provided in groups that are not exempt from state and territory requirements, consider moving to individual one-on-one support (where a participant's plan/budget allows, and in line with current health advice).
- If participants are unable to access group recreational activities, consider activities that can be provided in the home, such as dance sessions (e.g. "silent disco"), sing-alongs, cooking activities or craft.

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### **Establish COVID-19 communication channels**

- Set up dedicated helplines or email addresses to handle enquiries about COVID-19 and changes to services from participants, their families, support worker and others.

### **Move to drop-in or contactless services**

- 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.
- Arrange for support workers to go grocery shopping without participants. They can leave groceries at the doorstep for high-risk groups.

### **Arrange alternative ways for participants to communicate with friends and family**

- Organise telephone/video calls for participants with friends and family, instead of face-to-face visits. This may include establishing a new team to coordinate and initiate connections for participants and their friends and family to stay in touch.
- Encourage participants to send (or send on their behalf, with their consent) regular emails to friends and family about the participant's daily activities.

### **Organise a contingency workforce**

- Investigate the availability of staff in your local area whose working hours may have been reduced (e.g. staff who may have been providing group and centred-based activities).
- Explore other potential workforce sources who have the necessary skills to assist with the services and supports you deliver.
- If your workforce includes international students, consider increasing their working hours beyond 40 hours per fortnight, in line with the temporary lifting of work restrictions announced by the [Australian Government](#).
- Consider using a [matching platform](#) to search for suitable new or backup workers.

### **Arrange back-up accommodation for isolation**

- Identify spare rooms for participants to self-isolate if necessary.
- To reduce risk of infection, identify accommodation for staff to stay on-site or nearby, rather than travelling to and from home.

### **Variations to registered support categories**

If, because of the COVID-19 pandemic, you want to make changes to the supports and services you deliver and these supports are outside the support categories that you are already registered to provide, you can [contact us](#) about a variation to your registration.

Where the additional or new supports you wish to provide are at the same level of risk and complexity as your existing supports, we can consider an urgent registration variation. For example, if you are no longer able to provide supports under *Participate in the Community, Social and Civic Activities* (Registration Group 0125) but would like to provide in-home supports such as *Development of daily living and life skills* (Registration Group 0117).

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## Communicating with participants

It is important to allow the person to **exercise choice and control** over decisions that affect them. Ways to do this include:

- Speaking to them about COVID-19 and seeking their input about sudden changes to their activities due to the measures being implemented.
- Providing them with the right information and seeking their views, as this will help you develop different strategies and approaches.
- Sharing information about adjustments and changes that may happen because of medical isolation and/or due to the closure of services.

See also '[Know the NDIS participants you support](#)'.

## Flu vaccinations

Some NDIS providers have responsibility to assist people they support in accessing their community and mainstream services, such as health care services. This includes helping people to get a flu vaccination.

If this is part of your responsibility, you should:

- make arrangements to assist a person to obtain a vaccination
- be aware of the [population groups and chronic conditions](#) associated with increased risk of flu-related complications
- strongly encourage carers, workers, NDIS participants and their family members to receive the annual flu vaccination
- support a person to get medical advice where appropriate, for example if a participant is unable to receive a vaccination
- reinforce staff hygiene practices especially hand hygiene and respiratory/cough etiquette in addition to vaccination
- implement and reinforce policies addressing good hygienic practices and infection control to reduce disease transmission
- role model and encourage regular handwashing.

## Supporting NDIS participants with behaviour support needs

Below is some practical guidance to assist you to support your NDIS participants with behaviour support needs during COVID-19.

- In the case of a medically directed need for isolation, **review the person's behaviour support plan** (if they have one) for any recommendations for managing their behaviours of concern as well as the common triggers for their behaviour.
- As many community access services have been affected by the measures limiting public gatherings, **activate a business continuity plan**, such as providing alternative community access that complies with state or territory requirements, or at-home activities.
- Identify the **person's preferred modes of communication**, as effective communication can help to reduce their anxiety about any changes that need to happen.
- If the person you support wishes to attend public gatherings that they typically participate in, and those gatherings are limited, it is critical that you **gently explain to**

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**them why they cannot** participate during this period. Refer to their behaviour support plan (if they have one) for any recommendations before doing so.

- If the person does not have a behaviour support plan, draw on your existing **understanding of their interaction and communication preferences**. Or ask someone who knows them well, what those preferences are.
- Consider known **triggers for the person's behaviour of concern** and put in place strategies to mitigate these. Some common triggers are boredom, sudden changes to routines, missing friends or families, and communication difficulties.
- Take into account the **person's preferences** when preparing activities or indoor recreational activities that may be used for time in isolation at home. Ask what they wish to do or offer alternatives that are not inconsistent with the Commonwealth Chief Medical Officer's advice. For example, cooking or baking together at home, fun recreational activities that adhere to social distancing requirements at the home, or going for walks.
- **Explain the need for and importance of social distancing** and ask them what activities they wish to do. For example, some may prefer to do activities on their own or where they do not need to be in close proximity with others. These activities may include a social story-telling activity, individual art or craft, spending time in one's own room to play computer games, read a book or write a journal, individual dance (e.g. "silent disco") or sing-along sessions.
- Maintain the **person's social and family network** through telephone, social media or videoconferencing facilities to help ensure connectedness to friends and families during this period. Some activity ideas include sharing news or stories using video-phone links or sending photos of themselves doing an activity or sharing news via the telephone.
- Consider rostering **support staff with whom the person is familiar** or gets along well.

### *Behaviours of concern after risk mitigation strategies are implemented*

- Any requirements to self-isolate or quarantine (as set out in state or territory Public Health Orders) may, at times, lead to the subsequent use of restrictive practices. For example, if the health order to self-isolate leads to a person being confused or angry about being in 'isolation', which then leads to behaviours of concern (such as leaving their home unsupported placing the person at risk), you may need to apply an environmental restraint, such as locking the doors for this period. **It is not a reportable incident if it is within the required period for self-isolation** as directed by the Commonwealth Chief Medical Officer to the whole community.
- However, if a physical restraint is used to prevent a person leaving the home, **then it is a regulated restrictive practice and its use is reportable**. If the physical restraint is not part of the person's existing behaviour support plan then it is a reportable incident.
- To prevent resorting to the use of physical restraint, it is important to speak to the person about why self-isolation and social distancing are needed. During this difficult time, it is more important to focus on **comforting and reassuring** the person, and providing them with a level of safe choice and control. The use of physical restraint should be the last resort of intervention.
- Staff supporting a person who is in isolation need to follow appropriate universal **infection control precautions**.

- Contact the person's **specialist behaviour support practitioner** or any other behaviour support practitioner in your organisation that may be able to assist.

## Implementing a new regulated restrictive practice to support an NDIS participant

**The following NDIS provider requirements apply when using regulated restrictive practices.**

If a new restrictive practice for an NDIS participant is identified as needed, you must facilitate steps to engage an NDIS Behaviour Support practitioner to obtain an **interim behaviour support plan and a comprehensive behaviour support plan** for that person. This may require an NDIS plan review or locating an appropriate service providers. The list of service providers can be found on the NDIS 'myplace provider portal' under the service provider finder. Search for providers by their name, profession or support category. Where appropriate and available behaviour support plans can be done over the phone.

If this restrictive practice is not in accordance with a behaviour support plan and does not have current authorisation from your state or territory, it is a [reportable incident](#) to the NDIS Commission as an unauthorised restrictive practice.

### *Using restrictive practices as a 'precaution'*

If you isolate an NDIS participant because you are concerned about their health but there is no directive from a medical practitioner that is in line with the Commonwealth Chief Medical Officer's advice, then this could be a regulated restrictive practice. You should follow the Australian Government's advice on COVID-19 symptoms and always seek medical advice where a person's health presents a concern.

Your workers should never make assumptions about the nature of the person's health issue, or disregard symptoms that may relate to COVID-19.

It is **not a regulated restrictive practice** if there is a self-isolation order or any other direction to the community as a whole that is issued by the Australian Government Chief Medical Officer or as directed by state and territory Chief Health Officers.

If your decision causes an NDIS participant to have more restricted access to the community than they would normally have, within the current limits on public gatherings, then it may be an **environmental restraint or seclusion**. For example, a person normally visits their friend over the weekend. The friend is not sick. It is a regulated restrictive practice if you prevent the person from visiting the friend who is not sick.

The NDIS Commission recognises that this advice needs to be considered in the context of community movement restrictions, which may be progressively put in place across Australia.

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## 9. Information for participants

### Fact sheets

We have written the following fact sheets for participants.

1. There is a [COVID-19 NDIS participant information fact sheet](#) explains:
  - what to expect from your NDIS providers
  - your rights, how to make a complaint about a provider
  - what resources are available from the NDIA
  - where to find more information and resources about COVID-19.

This fact sheet is available in [Easy Read](#) and [Auslan](#) formats.

2. We have also produced a fact sheet to explain [what participants can expect from their providers and workers during COVID-19](#). This includes some changes that a person with disability might experience in the way their supports and services are delivered during this time.

This fact sheet is available in [Easy Read](#) and [Auslan](#) formats.

3. Our third participant fact sheet explains [how you can expect your providers to prepare for a COVID-19 outbreak in a residential setting](#).

This fact sheet is also available in [Easy Read](#) and [Auslan](#) formats.

These fact sheets are also available in in [11 community languages](#).

### COVID-19 information pack

We have also developed an [information pack about COVID-19 for NDIS participants](#). The pack explains how COVID-19 may affect some services and supports they receive, and what they can expect from you and their support workers. It also addresses several frequently asked questions, and contains links to a number of trusted sources of COVID-19 information and support.

We encourage you to share the resource with the NDIS participants you support, to help minimise any anxiety or confusion they may be experiencing.

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## 10. COVID-19 links and resources

### NDIS Commission

#### *FAQs about COVID-19*

We have developed a webpage of [frequently asked questions](#) about COVID-19 and how it affects the services and supports you provide to NDIS participants. We will continue to update these over time.

We have also produced the following updates, tools and resources during the COVID-19 pandemic:

#### *Provider alerts*

- [Preparing for and managing a COVID-19 outbreak in Victoria and NSW \(30 July 2020\)](#)
- [NSW Health guidance for all residential disability outlets \(20 July 2020\)](#)
- [New guidance on PPE use by disability workers in Victorian COVID-19 hotspots \(17 July 2020\)](#)
- [Reminder of COVID-19 reporting obligations \(13 July 2020\)](#)
- [Guidance on using PPE for disability support workers \(7 July 2020\)](#)
- [Guidance from the Australian Government Department of Health \(27 May 2020\)](#)
- [Guidance on preventing, preparing for and dealing with a COVID-19 outbreak \(13 May 2020\)](#)
- [Advice for people with disability \(7 May 2020\)](#)
- [Changes to student visa work conditions for workers of registered NDIS providers \(30 April 2020\)](#)
- [FAQs for all stakeholders and information for NDIS participants \(28 April 2020\)](#)
- [Management and Operational Plan for People with Disability \(20 April 2020\)](#)
- [Further assistance for organisations, people and households \(9 April 2020\)](#)
- [Adjusting supports and reducing infection risk \(3 April 2020\)](#)
- [Practice Alert: Influenza \(flu\) vaccine from mid-April 2020 \(2 April 2020\)](#)
- [Information for providers on the use of Personal Protective Equipment \(31 March 2020\)](#)
- [Behaviour support and restrictive practices \(31 March 2020\)](#)
- [Supporting providers to respond \(31 March 2020\)](#)
- [Assistance for organisations \(26 March 2020\)](#)
- [Information for support workers and access to PPE \(24 March 2020\)](#)
- [Business continuity planning \(19 March 2020\)](#)
- [Online training module for support workers \(17 March 2020\)](#)
- [Provider obligations and COVID-19 health information \(9 March 2020\)](#)
- [Information about the novel coronavirus outbreak \(7 February 2020\)](#)

#### *Fact sheets*

- [Coronavirus \(COVID-19\): What the NDIS Commission is doing](#)
- [Coronavirus \(COVID-19\): NDIS participant information](#)
- [Coronavirus \(COVID-19\): NDIS participant information – Easy Read](#)

- [Coronavirus \(COVID-19\): NDIS participant information – Auslan](#)
- [Coronavirus \(COVID-19\): Behaviour support and restrictive practices](#)
- [Coronavirus \(COVID-19\): Information for providers on the use of Personal Protective Equipment \(PPE\)](#)
- [Coronavirus \(COVID-19\): What NDIS participants can expect from their providers and support workers](#)
- [Coronavirus \(COVID-19\): What NDIS participants can expect from their providers and support workers – Easy Read](#)
- [Coronavirus \(COVID-19\): What NDIS participants can expect from their providers and support workers - Auslan](#)
- [Coronavirus \(COVID-19\): Relaxation of student visa work \(letter from Department of Home Affairs\)](#)
- [Coronavirus \(COVID-19\): Outbreak preparedness, prevention and management](#)
- [Coronavirus \(COVID-19\): Case studies of the NDIS Commission’s compliance approach](#)
- [Coronavirus \(COVID-19\): How NDIS participants can expect providers to prepare for a COVID-19 outbreak in a residential setting](#)
- [Coronavirus \(COVID-19\): What NDIS participants in supported accommodation can expect from their service providers – Easy Read](#)

### **Australian Government resources**

- [COVID-19 webpage](#): Webpage of the Australian Government containing essential COVID-19 information, key updates, advice and links to state and territory governments.
- [COVIDSafe app](#): This app can help health officials quickly contact people exposed to COVID-19. You can download it from on the [Apple App Store](#) or [Google Play](#).
- [Coronavirus Australia app](#): Download the official government 'Coronavirus Australia' app in the [Apple App Store](#) or [Google Play](#).
- [Department of Health Coronavirus FAQs](#): The Department of Health has issued an information sheet that answers common questions about COVID-19.
- [Wearing PPE for disability support workers \(video\)](#): The Department of Health has released a [video](#) explaining how and when disability support workers should use PPE, and demonstrating the correct way to put it on and remove it.
- [Guide to personal protective equipment \(PPE\) for disability care providers](#): The Australian Government Department of Health has produced guidance on using [guidance on using PPE](#) to prevent the spread of COVID-19.
- [COVID-19 testing for people with disability](#): The Department of Health has released a [fact sheet for support workers and carers](#) of people with disability. The fact sheet covers who should be tested, where testing can be done, and how to explain the testing process to a person with disability.
- [Information for disability support providers and workers](#): This Australian Government Department of Health fact sheet provides [guidance to assist people with intellectual or developmental disability](#) to access health care during the COVID-19 pandemic.
- [Residential care facilities](#): National guidelines for the prevention, control and public health management of COVID-19 outbreaks (Communicable Diseases Network Australia). These guidelines provide useful information for NDIS providers.

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- [COVID-19 preparedness webinar](#) for in-home and community aged care (Australian Government Department of Health).
  - [Department of Health videos and campaign resources](#): The Australian Government Department of Health has released a series of short videos, posters and audio about COVID-19 and how we can protect ourselves and those most at risk.
  - [Health care and residential care workers](#): An information sheet issued by the Department of Health for health care and residential care workers about COVID-19.
  - [Management and Operational Plan for People with Disability](#): Supports the objectives of the [Australian Health Sector Emergency Response Plan for Novel Coronavirus \(COVID-19\)](#).

### *Other languages*

- The [Department of Home Affairs](#) has translated COVID-19 information into 36 other languages