



COVID PROCEDURES

COVID Procedures

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COVID-19 CLIENT TRANSPORT POLICY

*Version 1.1***Policy:**

To guide a carer on how to safely transport a client in a private vehicle or by public transport
COVID-19 can spread from person to person through:
close contact with an infectious person (including in the 48 hours before they have symptoms
contact with droplets from an infected person's cough or sneeze
touching objects or surfaces (like doorknobs or tables) that have droplets from an infected person, and then touching your mouth or face.

Scope:

All Carers and Members

Responsibilities

Refer to procedure Carer guide to visiting a client in the community during COVID-19
Minimise outings and travel. Consider having medicine, groceries and essential items collected by the carer or delivered to the clients home.
The carer must ensure that the vehicle is stocked with PPE, hand sanitiser, disinfectant wipes and a disposable bag. The carer must ensure cleanliness of vehicle, and use disinfectant wipes for car doors, handles and steering wheels. The vehicle air flow should be checked to minimise recirculation, change setting to outside fresh air position. This setting will depend on the vehicle. All handbags are to be placed on the floor and not the seats. These can be also placed in the boot if they are large.
As physical distancing while in a vehicle or on public transport cannot always be maintained a surgical mask must be worn as a protective measure by the carer and client. Physical distancing means reducing the close physical contact between the client and the carer by staying 1.5 metres away. The client is to sit in the back passenger side (diagonally opposite driver) – as far from the carer as possible
The carer and client must wear a surgical mask in the vehicle or on public transport. The carer will educate the client on how to wear a mask by referring to the guidelines attached. The main value of wearing a mask is to protect other people. If the person wearing the mask is unknowingly infected, wearing a mask will reduce the chance of them passing the virus on to others. Hand hygiene should be attended regularly including prior to leaving the carers house and when returning to the carers home. Approved alcohol-based products for hand disinfection may be used.

References:

Department of Health
NSW Government Clinical Excellence Commission



Accountability	KEY STEPS	CLARIFICATION
1 Care Manager	Training	1. The Care Manager Is responsible for updating and maintaining the Covid-19 Client Transport policy
2 Carer	Driving	2. All personnel of Weejah must be aware of the Covid-19 Client Transport Policy and periodically review the Policy. 3. At induction all personnel will be required to understand and acknowledge that they understand and agree to the Covid 19 Client Transport Policy
3 Care Manager	Monitoring	1. This procedure is audited and reviewed at least 3 yearly (according to organisational risk) as per <i>Audit, Internal Assessment and Review Schedule</i> 2. Data and statistics are analysed and plans developed to improve outcomes for consumers, the organisation and personnel.

***Related documents:**

.	· <i>Audit, Internal Assessment and Review Schedule</i>
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- **Forms* – Work Instructions - Procedures



COVID-19 CLIENT VISIT POLICY

Version 1.1

Policy:	<p>Purpose: To guide a carer on how to safely care for a client in the community during COVID-19</p> <p>COVID-19 can spread from person to person through:</p> <ul style="list-style-type: none">close contact with an infectious person (including in the 48 hours before they have symptoms)contact with droplets from an infected person's cough or sneezetouching objects or surfaces (like doorknobs or tables) that have droplets from an infected person, and then touching your mouth or face <p>By adhering to the procedures outlined the carer can reduce the risk of infection and slow the spread of COVID-19</p>
Scope:	<p>All Carer's and Members</p>
Process:	<p>1.</p> <p>Ensure that that the carer is fit for duty prior to commencement of duty. Monitor for symptoms including:</p> <ul style="list-style-type: none">- fever- coughing- sore throat- shortness of breath- has the carer been tested for COVID-19? <p>Other symptoms can include runny nose, headache, muscle or joint pains, nausea, diarrhoea, vomiting, loss of sense of smell, altered sense of taste, loss of appetite and fatigue</p> <p>If the carer has any of these symptoms they must self isolate immediately and get tested immediately. The carer must notify their manager.</p> <p>2.</p> <p>The carer must check the link daily to see if they have been in contact with someone in the community during the date and time indicated</p> <p>https://www.nsw.gov.au/covid-19/latest-news-and-updates#self-isolate-and-get-tested-immediately-if-youve-been-to-these-locations</p> <p>If the carer has been to any of the areas identified they must self isolate and get tested immediately</p> <p>3.</p> <p>The carer must phone the client prior to visiting and ask if they have any of the symptoms described in step 1 or have been in contact with anyone in the community in step 2.</p> <p>If the client reports any of the symptoms in step 1 or meet the criteria in step 2 they are to be advised to self isolate and get tested immediately. The carer must not visit the client and must report to their manager.</p> <p>4.</p> <p>If the client or a family member displays respiratory symptoms on arrival to their home the carer is to advise the client that they will not be entering the premises and should advise them to self isolate and get tested immediately. The carer is to advise their manager.</p> <p>5.</p> <p>Physical distancing means reducing the close physical contact between the client and the carer by staying 1.5 metres away. For people at increased risk of severe COVID-19 themselves because of older age or chronic illness, physical distancing is most important. If the carer cannot maintain physical distance while attending to the client a surgical mask must be worn as a protective measure.</p> <p>6.</p> <p>Hand hygiene is crucial in reducing transmission of infections. It includes both hand washing with plain or antimicrobial soap and water, and use of alcohol-based products (gels, rinses, foams) containing an emollient that does not require the use of water. If hands are visibly soiled or contaminated with respiratory secretions, wash hands with soap (either non-antimicrobial or antimicrobial) and water. In the absence of visible soiling of hands, approved alcohol-based products for hand disinfection may be used. Ensure you have facilities for hand washing and hand disinfection (i.e. alcohol-based products) readily accessible.</p> <p>https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/how-to-protect-yourself-and-others-from-coronavirus-covid-19/good-hygiene-for-coronavirus-covid-19#when-you-are-well</p> <p>7.</p> <p>Carers must wear a surgical grade mask if 1.5 meters distancing cannot be maintained in the client's home. The main value of wearing a mask is to protect other people. If the person wearing the mask is unknowingly infected, wearing a mask will reduce the chance of them passing the virus on to others. Prior to wearing a mask the carer must perform hand hygiene.</p> <p>When the carer is wearing a mask they must adhere to the principles below</p> <p>Do Not;</p> <ul style="list-style-type: none">Touch your mask or face as this contaminates the maskPull your mask below your nose or chinLeave it hanging around your neck or on top of your head <p>Do;</p> <ul style="list-style-type: none">Change surgical mask when mask becomes moistChange if sprayed or splashed onImmediately perform hand hygiene if you accidentally touch the mask <p>If the carer needs to remove the mask, they should perform hand hygiene, remove the mask and discard into a general waste bin and put on another mask</p> <p>https://www.health.gov.au/sites/default/files/documents/2020/08/coronavirus-covid-19-do-i-need-to-wear-a-mask_24.pdf</p>
References:	<p>Australian Government Department of Health</p> <p>NSW Government</p> <p>World Health Organisation</p> <p>NSW Government Clinical Excellence Commission</p>

Accountability	KEY STEPS	CLARIFICATION
1 Care Manager	Training	1. The Care Manager Is responsible for updating and maintaining the Covid-19 Client Transport policy
2 Carer	Driving	2. All personnel of Weejah must be aware of the Covid-19 Client Transport Policy and periodically review the Policy. 3. At induction all personnel will be required to understand and acknowledge that they understand and agree to the Covid 19 Client Transport Policy



Accountability	KEY STEPS	CLARIFICATION
3 Care Manager	Monitoring	1. This procedure is audited and reviewed at least 3 yearly (according to organisational risk) as per <i>Audit, Internal Assessment and Review Schedule</i> 2. Data and statistics are analysed and plans developed to improve outcomes for consumers, the organisation and personnel.

***Related documents:**

	· <i>Audit, Internal Assessment and Review Schedule</i>
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COVID-19 CLIENT CLEANING POLICY

Version 1

Policy:

To guide a carer on how to clean a client's home during COVID-19
COVID-19 can spread from person to person through:
close contact with an infectious person (including in the 48 hours before they have symptoms
contact with droplets from an infected person's cough or sneeze
touching objects or surfaces (like doorknobs or tables) that have droplets from an infected person, and then touching your mouth or face
By adhering to the procedures outlined the risk to both client and carers will be minimised

Scope:

All Carer's and Members

**Process:**

1. Refer to Procedure- Carers visiting a client in the community during COVID-19
2. If the carer cannot maintain physical distance while attending to the client a surgical mask must be worn as a protective measure. Physical distancing means reducing the close physical contact between the client and the carer by staying 1.5 metres away. For people at increased risk of severe COVID-19 themselves because of older age or chronic illness, physical distancing is most important.
3. Regular hand hygiene is crucial in reducing transmission of infections in the carers home. In the absence of visible soiling of hands, approved alcohol-based products for hand disinfection may be used. Ensure you have facilities for hand washing and hand disinfection (i.e. alcohol-based products) readily accessible.
4. Carers must wear a surgical mask if 1.5 meters distancing cannot be maintained in the carers home. The main value of wearing a mask is to protect other people. If the person wearing the surgical mask is unknowingly infected, wearing a mask will reduce the chance of them passing the virus on to others. Prior to wearing a mask, the carer must perform hand hygiene.
5. Cleaning means to physically remove germs (bacteria and viruses), dirt and grime from surfaces using a detergent and water solution. Wipe in an 'S' shaped pattern from top to bottom. Cleaning should start with the cleanest surface first, progressively moving towards the dirtiest surface. When surfaces are cleaned, they should be left as dry as possible to reduce the risk of slips and falls. Cleaning should be prioritised for surfaces that many people touch for example door handles, kitchen benches, light switches. The packaging or manufacturer's instructions will outline the correct way to use detergents.
6. Disinfecting means using chemicals to kill germs on surfaces. Before a surface is disinfected, it is important it is cleaned first because dirt and grime can reduce the ability of disinfectants to kill germs. Disinfectant may not kill the virus if the surface has not been cleaned with a detergent first. The packaging or manufacturer's instructions will outline the correct way to use disinfectant. Disinfectants require time to be effective at killing viruses. 10 minutes of contact time is required at a concentration of 0.01% or 1 minute for a concentration of 0.1%. Gloves should be worn when handling and preparing bleach solutions. Appropriate protective eye wear should be worn in case of splashing.
7. Personal waste (for example used tissues, continence pads and other items soiled with bodily fluids) and disposable cleaning cloths can be stored securely within disposable rubbish bags.
8. Carers should not shake dirty laundry before washing. This minimises the possibility of dispersing viruses through the air.
9. After cleaning, any single-use personal protective equipment, disposable cloths and covers should be placed in a plastic bag and disposed of in general waste. Any reusable cleaning equipment, including mop heads and reusable cloths, should be laundered and completely dry before re-use.
10. Increase the amount of fresh air by opening windows or changing air conditioning settings.

**References:**

Department of Health
Safe Work Australia
NSW Government Clinical Excellence Commission

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***Related documents:**

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COVID-19 CLIENT SHOPPING / ATTENDING APPOINTMENTS POLICY

Version 1

Policy:

To guide a carer on how to clean a client's home during COVID-19
COVID-19 can spread from person to person through:

- close contact with an infectious person (including in the 48 hours before they have symptoms
- contact with droplets from an infected person's cough or sneeze
- touching objects or surfaces (like doorknobs or tables) that have droplets from an infected person, and then touching your mouth or face
- by adhering to the procedures outlined the risk to both client and carers will be minimised

Scope:

All Carer's and Members

**Process:**

1. Refer to Procedure- Carers visiting a client in the community during COVID-19
2. Minimise outings and travel. Consider having medicine, groceries and essential items collected by the carer or delivered to the clients home.
3. If the carer cannot maintain physical distance in a shopping centre while attending to the client a surgical mask must be worn as a protective measure. Physical distancing means reducing the close physical contact between the client and the carer by staying 1.5 metres away. For people at increased risk of severe COVID-19 themselves because of older age or chronic illness, physical distancing is most important.
4. Regular hand hygiene is crucial in reducing transmission of infections entering and leaving a shopping centre. In the absence of visible soiling of hands, approved alcohol-based products for hand disinfection may be used. Ensure you have facilities for hand washing and hand disinfection (i.e. alcohol-based products) readily accessible. The carer must encourage the client to perform regular hand hygiene in the shopping centre or at appointments.
5. Carers must wear a surgical mask if 1.5 meters distancing cannot be maintained. The main value of wearing a surgical mask is to protect other people. If the person wearing the mask is unknowingly infected, wearing a mask will reduce the chance of them passing the virus on to others. Prior to wearing a mask the carer must perform hand hygiene. The carer must encourage the client to wear a surgical mask prior to entering a shopping centre or during an appointment.
6. The client and carer must wash or sanitise hands before entering shopping centres or attending appointments and when leaving. The client and carer must sanitise and disinfect trolleys and shopping basket handles prior to using with products made available from the shopping centre.
7. The carer will register details if required entering premises for COVID-19 contact tracing. The carer may encourage the client to register details
Personal waste (for example used tissues, continence pads and other items soiled with bodily fluids) and disposable cleaning cloths can be stored securely within disposable rubbish bags.
8. When returning home from the shopping centre safe handling of groceries is recommended. The carer must wipe down kitchen benches and hard surfaces with detergent or disinfectant wipes after use.

References:

Department of Health
Safe Work Australia
NSW Government Clinical Excellence Commission

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