INFECTIONS/EPIDEMICS/PANDEMICS

Disclaimer: Infections, epidemics and pandemics are serious matters and should be responded to in a professional and informed manner. This guideline was compiled by CCCVAT MINISTRIES LTD from a variety of reputable sources. CCCVAT MINISTRIES LTD has no expertise relevant to this topic and accordingly the user of this guide should refer to the links and other sources of information to ensure your organisation is thoroughly informed before it responds to any infection, epidemic or pandemic. CCCVAT MINISTRIES LTD does not accept any liability for the information presented in this guideline.

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DEFINITIONS:

Infection:

Infectious diseases are caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi; the diseases can be spread, directly or indirectly, from one person to another. Zoonotic diseases are infectious diseases of animals that can cause disease when transmitted to humans.

Source - World Health Organisation

The invasion and multiplication of microorganisms such as bacteria, viruses, and parasites that are not normally present within the body. An infection may cause no symptoms and be subclinical, or it may cause symptoms and be clinically apparent. An infection may remain localized, or it may spread through the blood or lymphatic vessels to become systemic (bodywide). Microorganisms that live naturally in the body are not considered infections. For example, bacteria that normally live within the mouth and intestine are not infections.

Source - MediciNet

Epidemic:

A widespread occurrence of an infectious disease in a community at a particular time.

An epidemic is then unusual increase in the number of cases of an infectious disease which already exists in a certain region or population. It can also refer to the appearance of a significant number of cases of an infectious disease in a region or population that is usually free from that disease.

Source - International Federation of Red Cross

Pandemic:

A pandemic is the worldwide spread of a new disease.

Source - World Health Organisation

IMPORTANT NOTE:

The cause, transmission, vulnerability, symptoms, preventative measures and treatment and cure of infections can vary.

Accordingly, prior to adopting any measures or directives to mitigate the spread of an infection you must first refer to the Australian and State Health Authorities advice on such matters.

- Australian Government Department of Health
- ACT Health
- NT Government Department of Health
- Queensland Health
- SA Health
- <u>Tasmanian Government Department of Health</u>
- VIC Health
- WA GOV Department of Health

INFECTIONS - GENERAL CONTROL GUIDE Source - VIC GOV Better Health Channel

1. Preface:

Infection is caused by pathogens ('bugs') such as bacteria, viruses, protozoa or fungi getting into or onto the body. It can take some time before the microbes multiply enough to trigger symptoms of illness, which means an infected person may unwittingly be spreading the disease during this incubation period.

Infection control in the workplace aims to prevent pathogens from coming into contact with a person in the first place. Employers are obliged under the Work Health and Safety Acts of each state Workplace Health and Safety Act [most states operate under the Harmonised Legislation with the exception of Victoria Health and Safety Act 2004] to provide a safe workplace for their employees, including the provision of adequate infection control procedures and the right equipment and training.

2. Transmission of infection:

Infectious agents can be spread in a variety of ways, including:

- **a.** breathing in airborne germs coughs or sneezes release airborne pathogens, which are then inhaled by others
- **b.** touching contaminated objects or eating contaminated food the pathogens in a person's faeces may be spread to food or other objects, if their hands are dirty
- **c.** skin-to-skin contact the transfer of some pathogens can occur through touch, or by sharing personal items, clothing or objects
- **d.** contact with body fluids pathogens in saliva, urine, faeces or blood can be passed to another person's body via cuts or abrasions, or through the mucus membranes of the mouth and eyes.

3. Assumption of risk:

The basis of good infection control in the workplace is to assume that everyone is potentially infectious. Proper procedures have to be followed at all times. Every workplace should have an appropriate first aid kit, with at least one staff member trained in first aid. Equipment such as gloves, gowns, eye goggles and face shields should be provided where warranted.

4. Workplace infection control – personal hygiene practices:

Infection control procedures relating to good personal hygiene include:

a. hand washing – the spread of many pathogens can be prevented with regular hand washing. Thoroughly wash your hands with water and soap for at least 15 seconds after visiting the toilet, before preparing food, and after touching people or equipment. Dry your hands with disposable paper towels or a sensor activated air-drier if one is available.

- **b.** unbroken skin intact and healthy skin is a major barrier to pathogens. Cover any cuts or abrasions with a waterproof dressing.
- c. gloves wear gloves if you are handling body fluids or equipment containing body fluids, if you are touching someone else's broken skin or mucus membrane, or performing any other invasive procedure. Wash your hands between each client and use fresh gloves for each client where necessary.
- **d.** personal items don't share towels, clothing, razors, toothbrushes, shavers or other personal items.

5. Food preparation and workplace infection control:

When preparing food:

- a. Wash your hands before and after handling food.
- **b.** Avoid touching your hair, nose, mouth, over orifices and cuts or wounds.
- **c.** Keep hot food hot and cold food cold in accordance with your state's Food Safety Standards website addresses as follows:
 - ACT
 - NSW
 - NT
 - <u>SA</u>
 - TAS
 - VIC
 - <u>WA</u>
- **d.** Use separate storage, utensils and preparation surfaces for cooked and uncooked foods.
- Wash all utensils and preparation surfaces thoroughly with hot water and detergent after use.

6. Infection control and workplace cleanliness:

Infection control procedures relating to cleanliness in the workplace include:

- **a.** Regularly washing the floors, bathrooms and surfaces (such as tables and bench tops) with hot water and detergent and preferably with steam cleaner, if available.
- **b.** Periodically washing the walls and ceilings, preferably with a steam cleaner.
- **c.** Thoroughly washing and drying mops, brushes and cloths after every use drying mops and cloths is particularly important, since many pathogens rely on moisture to thrive.
- **d.** Using disinfectants to clean up blood and other spills of bodily fluids.
- e. When using disinfectants, following the manufacturer's instructions and wear gloves.

f. Spot cleaning when necessary.

7. Dealing with spills of body fluids:

Examples of body fluids include blood, saliva, urine and faeces. When dealing with spills of body fluids, infection control procedures need to be followed carefully. Always:

- **a.** Isolate the area.
- **b.** Wear gloves, a plastic apron and eye protection, such as goggles.
- **c.** Soak up the fluid with disposable paper towels, or cover the spill with a granular chlorine-releasing agent for a minimum of 10 minutes. Scoop up granules and waste using a piece of cardboard (or similar), place in a plastic bag and dispose of appropriately.
- **d.** Mix one part bleach to 10 parts water and apply to the area for 10 minutes.
- **e.** Wash the area with hot water and detergent, preferably with a steam cleaner.
- **f.** Dry the area.
- g. Dispose of paper towelling and gloves appropriately.
- **h.** Wash your hands with water and a suitable detergent.
- i. Rinse any contaminated clothing in cold running water, soak in bleach solution for half an hour, then wash separately from other clothing or linen with hot water and detergent.

8. Infection control – disposing of infectious waste:

To dispose of infectious waste that has been contaminated with blood or other body fluids:

- **a.** Wear heavy duty gloves.
- **b.** Place waste in plastic bags marked 'infectious waste'.
- c. Dispose of waste in accordance with Environmental Agency Guidelines [EPA] for your state.

9. Workplace infection control – handling contaminated sharps:

Infection control procedures when handling needles and other sharp contaminated objects include:

- **a.** Never attempt to re-cap or bend used needles.
- **b.** Handle by the barrel.
- **c.** Place in an appropriate puncture-proof container (that meets the Australian and New Zealand Standards AS 4031:1992 and AS/NZS 4261:1994) this will be yellow, labelled 'Danger contaminated sharps' and marked with a black biohazard symbol.

10.Infection control - occupational exposure to body fluids:

If you come in contact with blood or body fluids:

- **a.** Flush the area with running water.
- **b.** Wash the area with plenty of warm water and soap.
- **c.** Report the incident to the appropriate staff member.
- **d.** Record the incident via the Disease/Injury/Near Miss/Accident (DINMA) reporting procedure.
- e. Seek medical advice.

Employers and occupational health and safety representatives should investigate all incidents involving contact with blood or body fluids, and take action to prevent a similar incident from happening again.

11. Where to get help:

- a. AUSGOV Communicable Diseases
- **b.** Australian Doctors Directory
- **c.** Your local council's health department
- d. Occupational health and safety officer at your workplace

POLICY

Church or Para-body [Organisation]: Name of Organisation

1. Introduction:

From time to time infectious diseases develop into epidemics or pandemics and create increased risks for the community. These occasions require specific policies targeted at the particular disease and general efforts at preparedness.

- a. In the event an infectious disease develops into epidemic or pandemic as declared by the Australian and or State Government health authorities, the Organisation will aim to protect the general public and parties listed in Clause 3, from infection or contagion.
- **b.** The Organisation will facilitate, through its policies and procedures, strategies designed to reduce risks to the general public and parties listed in Clause 3.
- c. The Organisation will comply with all directions from Australian and State Government health authorities, authorised public health officers and recognised medical authorities in relation to declared epidemics or pandemics.

2. Purpose:

- a. The purpose of this policy is to outline the strategies and actions that the Organisation will take to prevent the transmission of infectious diseases that are declared epidemics or pandemics, and control the transmission of infectious diseases when a case/s is identified.
- b. This policy covers diseases caused by pathogenic microorganisms, such as bacteria, viruses, parasites or fungi and where the diseases can be spread, directly or indirectly, from one person to another. This policy is focused on infectious diseases that are declared to be an epidemic or pandemic.

3. Scope:

This policy applies to:

- a. Church attendees
- **b.** Volunteers
- **c.** Employees
- d. Board Members/Elders etc
- **e.** Officers
- **f.** Contractors
- g. Suppliers
- **h.** Consultants

4. Guiding Principles:

- **a.** The Organisation will organise prayer meetings to seek God's deliverance from the epidemic/pandemic.
- **b.** The Organisation will as far as possible plan for and make advance preparations for the possibility that its operations will be affected by a declared epidemic or pandemic.
- **c.** In the event of a declared epidemic or pandemic, the Organisation will, as far as possible:
 - **i.** Advise and assist parties listed in Clause 3, to minimise their exposure to the epidemic or pandemic.
 - **ii.** Encourage and assist those who are the most vulnerable or have reason to believe that they are at risk of contracting the epidemic or pandemic to obtain a diagnosis.
 - **iii.** Support affected parties listed in Clause 3 to take reasonable precautions to prevent infection or contagion.
 - **iv.** Provide precautions such as personal protective equipment (e.g. masks, disinfectants, soap, and gloves etc), where warranted and appropriate.
 - **v.** Subject to:
 - The advice of the national or state government health authorities.
 - The degree of vulnerability of those listed in Clause 3 to the infection.
 - The ability of the Organisation to conduct its services via a remote location. Maintain its services and operations throughout the period the epidemic or pandemic remains actively declared.
 - vi. In the event the Organisation is not able to or elects to suspend its services, other than those it is able to provide remotely, it will advise the affected Parties of such and post signs around its facility notifying people services are suspended and details where services can be accessed remotely.
- d. In the event of an infectious disease being declared an epidemic or pandemic, the Organisation requires the parties listed in Clause 3 to take the following precautions and precautions as recommended or directed by any national or state government health authority.
 - **i.** Familiarise yourself with how the infection is transmitted to mitigate your `you exhibit symptoms.
 - ii. Avoid public places and traveling to areas with high rates of infection.
 - **iii.** Notify the Organisation immediately upon your return from your travel to a location known to be high risk or where you are exhibiting symptoms of the infection and observe the directives of the Organisation.
 - **iv.** Practice good hygiene and encourage others to do the same.

- v. Regularly and thoroughly clean your hands with an alcohol-based hand rub, hand sanitiser [carry one with you] or wash them with soap and water, especially after visiting the toilet and prior to handling food or eating.
- **vi.** Maintain at least 1 metre (3 feet) distance between yourself and anyone who is coughing or sneezing.
- **vii.** Avoid touching your eyes, nose and mouth and shaking hands with others.
- **viii.** Cover your mouth and nose with your bent elbow or tissue when you cough or sneeze and dispose of used tissues in the toilet immediately.
 - **ix.** If you are or are likely to be contagious seek medical advice promptly and follow the directions of your local health authority and notify your supervisor as soon as possible.
 - **x.** If you are or are likely to be contagious seek permission to work from home if you feel unwell. This will minimise the risk of infecting others. However, ensure to keep members of your family safe from exposure.

5. Employees - Leave and Flexibility:

- **a.** Employees may request or require paid and unpaid leave when they are unwell, at risk of or vulnerable to infection, and at risk of infecting others.
- **b.** Employees may make use of leave consistent with the Organisation's leave policy, relevant industrial instruments and the National Employment Standards (including access to unpaid leave).
- **c.** The Organisation may, at its discretion, direct those affected or reasonably at risk of being affected by the epidemic or pandemic, to work from home.

6. Notes:

In carrying out the procedures listed in this policy, the Organisation will be guided by the information and directions provided by the Australian and State Governments and local health authorities, and its occupational health and safety obligations.

7. Employees - Above and Beyond Provisions:

- a. The Organisation may subsidise reasonable medical expenses incurred by an employee directed by the Organisation or an authorised medical authority to obtain medical clearance for the infectious disease before returning to work.
- **b.** The Organisation may, at its discretion offer an employee diagnosed with an infectious disease additional paid leave entitlements to cover the period the employee is required to spend in quarantine, where the employee is to unwell to work or has nowhere to work remotely.
- workers with the flexibility to work from home and to attend medical appointments.

8. Related Documents:

- a. World Health Organisation WHO
- **b.** Australian and State Government Health Authorities as listed pages 2 and 6.
- c. Trusted Information Sharing Network (TISN) for Critical Infrastructure Resilience:
 Template Pandemic Emergency Management Plan. TISN

9. Legislation & Industrial Instruments:

This policy & procedure is not intended to override any industrial instrument, contract, award or legislation that covers the handling of infectious deases

- Biosecurity Act 2015 (Commonwealth)
- Fair Work Act 2009 (Cth)
- Fair Work Regulations 2009 (Cth)
- [Insert name of applicable industrial instrument]

The Fair Work Act 2009 (Cth) contains provisions that allow an employer to stand down a worker without pay for a period in which the worker cannot be usefully employed in certain circumstances. These circumstances include where there is a stoppage of work for any cause for which the employer cannot reasonably be held responsible.

Employers looking to engage the stand down provisions should exercise caution. Where the government has not mandated the closure of workplaces, the availability of these provisions are limited. It is suggested employers seek advice about their individual circumstances in order to avoid potential future liability.