



Released April 2021 via Website

To all workers, clients and stakeholders

We continue to adhere to guidelines established at Devonfield for everyone’s health and well-being during this pandemic period. From observations and discussions, it is necessary to provide a reminder of our **COVID19 SAFETY PLAN**, particularly with “opening of borders” 26 October 2020.

We require you to read below and respond via email to feedback@devonfield.com.au to acknowledge reading, understanding and can apply requirements daily.

Your assistance throughout is appreciated as we continue to monitor updates and respond to any further easing of restrictions and the serious evolving situation on Mainland – we require below:

- Let us know if you have concerns about someone unwell
- **Model, teach and remind** peers and the people whom you support how to limit the spread of infection through:
 - ❖ not shaking hands or hugging – TAP ELBOWS or say hello with a SMILE
 - ❖ thorough washing hands for 20 seconds with soap and water; where available
 - ❖ use hand sanitiser before entering and leaving premises.
 - ❖ covering coughs and sneezes with a tissue or elbow



Our COVID19 safety plan includes above and below for our facilities, homes and vehicles:

- Homes – support staff rostered to work at the home only to enter the home, unless on site for essential assistance to residents
- Homes – visitors only permitted to enter if fit and well and at request of the resident with social distancing required throughout visit plus checking numbers within home meet the capacity limits with 1x2m spacing per person.
- Facilities – all being set-up and operated in accordance with current 1x2m spacing per person
- Employment services – social distancing and set-up spacing being adhered to as much as practical with PPE worn where production/service requirements prevent this.

- Community facility – 3 rooms on site being set-up for social distancing and spacing with maximum persons in each room of 20 including support staff. Also access doors specified for each client to enter each day for their daily support.
- Social and community activities – ensure planned, checked that location attending is adhering to safety guidelines plus vehicles adhering to guidelines for only driver in front row and 2 persons in each row behind. Exception being a mask being worn by driver for passenger to be seated in front seat.
- Public transport – Taxi and local bus services apply distancing as above for vehicles.
- Vehicles – with limits on number of passengers permitted in vehicles plan and book Devonfield vehicles through Team Leaders or Head Office with all drivers responsible for sanitising vehicle on returning to Devonfield site/homes. (*cleaning of vehicle checklist attached*)
- Vehicles – log books to have name of all persons in vehicle being recorded together with location travelling to, odometer readings plus date and time of use
- Rooms booked and used for meetings – facility to be sanitised at end of session ready for next person to use (i.e. chairs, tables, etc used). Professional cleaners completing daily cleaning requirements on sites.
- Contact of Team Leaders to arrange meeting time regarding support is **via text message to Team Leader's mobile phone with brief details**. Team Leaders will respond to arrange convenient time for personal support meeting during their flexible work hours if not possible whilst both are at work.
- **Absenteeism from work – ensure call 64246133 to provide details. Head Office and on-call Manager will contact relevant staff to arrange relief coverage.**
- **COVID19 test –results to be emailed to mobile 0419 357742 to gain authorisation to return to work.** Your absence from work essential during this process to remove risk to all clients and peers.
- Once vaccination has commenced email recruitment of the date and location of each dose given and once fully vaccinated send through the certificate to recruitment@devonfield.com.au
- Infection control attached
- Local agents for Vaccination

Please do not hesitate to contact the Executive team at Head Office during business hours (8am to 4pm) if unsure or needing further details on Devonfield's COVID19 safety plan.

Emergency 24 hours per day contact phone number is 64246133.

Tanya

Tanya Kingshott
Chief Executive Officer



INFECTION CONTROL

Document Title	Date Created	Approved By	Date Reviewed	Version
Information Sheet: Infection Control	1 st September 2020	T. Kingshott	1 st September 2021	1.0

Introduction

Devonfield is committed to ensuring the health, safety and welfare of all its staff and clients. As part of this commitment, Devonfield has adopted a systematic and strategic approach to prevent and manage the spread of infectious diseases - particularly blood borne diseases - in the workplace.

Devonfield has reviewed and updated the infection control guidelines based on legislative requirements and national standards of practice. The procedures are designed to protect staff and clients from a wide range of infections and by following these procedures will ensure that everyone is treated equally and everyone in the workplace is safe.

The adoption of these procedures is a personal and professional responsibility. Management need to ensure provision of adequate facilities, equipment and materials for staff to implement the procedures. Management also need to ensure that staff have access to information and training regarding safe work practices and infection control procedures to minimise occupational transmission risks. Staff must take all measures available to protect their own health and safety and the health and safety of anyone else in the workplace who may be affected by their acts.

Devonfield acknowledge the information provided by work Health Unit, Resources Division and Public Health Division of the Victorian Government Department of Human Services.

Infection

Infection is the result of a harmful living agent entering the body and multiplying. Infections can be present with or without any visible signs or symptoms of disease. A person may be infectious before they become unwell (ie. During the incubation period) and during their illness. With some infections, people can become chronic carriers and remain infectious.

Remember:

A person may be infectious without any visible signs of illness and this forms the basis of our infection control policies and procedures.

Transmission of Infectious Diseases

Infectious diseases are caused by bacteria, viruses, fungi or protozoa. These agents can be passed on to the next person in a number of ways including:

- Sneezing and/or coughing by an infected person spreads germ by airborne droplets.
- Agents in the faeces of an infected person may be passed directly from soiled hands to mouth or indirectly through contaminated objects soiled with faeces.
- Skin-to-skin contact or sharing of contaminated personal clothing, linen or objects.
- Direct contact with blood and body fluids where there is broken skin or splashes to the mucous membrane such as eyes and mouth.

The germ must enter the next person's body and be in enough quantity to cause an infection. Different germs require different pathways to enter a person. Germs may enter through contact with skin, mouth, nose, mucosa of eyes, lungs, genitals, intestinal tract, sores or broken skin.

The aim of infection control procedures is to prevent germs entering the body.

Legislative Requirements

The Disability Discrimination Act 1992 and Equal Opportunity Act 1984, as amended 1989 make discrimination on the basis of disability (which is defined to include presence in the body of agents capable of causing disease) illegal in a variety of areas including employment.

The Health Act 1958 also does not permit discrimination against a person on the grounds that they have an infectious disease and protects the person's privacy and liberty. However, the Act also states that persons who have an infectious disease need to take reasonable measures to protect others from being infected.

In line with the Occupational Health and Safety Act 1985 employers have an obligation to provide and maintain a work environment for employees that, so far as is practicable, is safe and without risks to health. The provision of infection control procedures, equipment, training and information to staff falls within this duty of care.

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Employees also have an obligation to take all reasonable measures available to protect their own health and safety and anyone else who may be affected by their acts in the workplace.

As the infection status of a client or staff member is unknown the best way to prevent infection is to:

Assume that everyone is potentially infectious and treat everyone in the same way by practicing infection control procedures.

Infection Control Procedures

Basic Hygiene -

The importance of basic hygiene procedures in the prevention of infection cannot be overstated. These include:

Hand Washing -

Thorough hand washing is the best way to interrupt infection transmission and should be practised:

- After each client contact.
- After contact with used equipment.
- As soon as possible should exposure to blood or body fluids occur.
- Before preparing food.
- Before eating.
- After removing gloves.
- After using the toilet.

Thorough hand washing means:

- Remove all rings and bracelets and other jewellery.
- Use soap and running water (a 15–20 second wash with soap and water).
- Rub hands.
- Wash backs of hands, wrists, between fingers, under fingernails.
- Rinse well.
- Dry hands well, with a single-use paper towel where possible.

Healthy intact skin provides an adequate barrier to infection. Staff should check their hands for skin integrity each day and breaks in the skin should be covered with a waterproof dressing. In addition, regular use of moisturizing cream will prevent skin from drying and cracking.

Wearing Gloves -

Gloves are not necessary for contact with intact skin.

Gloves should be worn when:

- Handling blood or body fluids.
- Handling equipment or materials contaminated with blood or body fluids.
- Touching mucous membrane.
- Touching non-intact skin of any person.
- Performing venipuncture.
- Performing any other invasive procedure.

Gloves should be changed when moving from one client to another and/or between procedures.

Gloves should also be removed to undertake clerical tasks and to answer the telephone.

Hands must be washed after removal of gloves.

After use, gloves and other disposable material should be placed in an impervious container, such as a plastic bag, and hands washed.

Food Preparation –

Staff involved in preparing and serving food should maintain high standards of personal hygiene.

- Wash hands before handling food.
- Ensure any open wound is securely covered with a waterproof bandage.
- Don't touch the hair, nose or mouth during food preparation.
- Wash all utensils and food preparation areas between uses with hot or warm water and detergent.

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- Prevent cross-contamination by storing raw and cooked food in separate compartments in the refrigerator and use separate utensils for raw and cooked food.
- Keep food hot (above 60°C) or keep food cold (below 10°C)—never leave food at room temperature.
- Keep animals away from food preparation areas.

Equipment and Facilities -

- Whenever practicable, hand washing facilities should be provided.
- Alcoholic hand disinfectants are useful where hand washing facilities are limited or not readily accessible.
- Toothbrushes, razors, towels, linen and other personal items should not be shared, and personal towels and linen should not be used to wipe down areas.

Equipment Checklist -

The following equipment should be available within the workplace as required.

Are the following items as required available?	Yes	No
• gloves	<input type="checkbox"/>	<input type="checkbox"/>
• soap	<input type="checkbox"/>	<input type="checkbox"/>
• sponge	<input type="checkbox"/>	<input type="checkbox"/>
• mop	<input type="checkbox"/>	<input type="checkbox"/>
• bucket	<input type="checkbox"/>	<input type="checkbox"/>
• plastic garbage bags	<input type="checkbox"/>	<input type="checkbox"/>
• paper towelling	<input type="checkbox"/>	<input type="checkbox"/>
• plastic aprons and gowns	<input type="checkbox"/>	<input type="checkbox"/>
• eye protection	<input type="checkbox"/>	<input type="checkbox"/>
• fluid repellent masks	<input type="checkbox"/>	<input type="checkbox"/>
• sharps containers	<input type="checkbox"/>	<input type="checkbox"/>
• impervious bags for soiled linen and specific bags for infectious waste	<input type="checkbox"/>	<input type="checkbox"/>
• appropriate disinfectants (sodium hypochlorite or bleach type) detergent	<input type="checkbox"/>	<input type="checkbox"/>
• measuring cup	<input type="checkbox"/>	<input type="checkbox"/>

General Cleaning -

- Work areas need to be kept clean at all times.
- Routine cleaning with hot or warm water and detergent is sufficient to keep areas clean.
- *Floors*—should be cleaned using detergent and hot water with a mop. Mop heads and brushes should be washed and dried before reuse.
- *Bathrooms*—wash tap handles, toilet seats, toilet handles and doorknobs with detergent and warm water. Check the bathroom during the day and clean as necessary.
- *Walls and ceiling*—should be cleaned as necessary with warm water and detergent to prevent accumulation of dirt.
- *Beds*—should be kept clean.
- *Surfaces (bench tops, taps, tables)*—should be cleaned regularly with detergent and warm water.
- Mops and cleaning cloths need to be well dried after use. Drying is an important part of the cleaning process as moisture may provide conditions in which germs may grow. Sunlight is excellent.

Disinfectants -

Disinfection is only required where contamination with blood and body fluids is likely to have occurred or when there is an outbreak of an easily transmitted disease. Using disinfectants should never replace good cleaning.

Rules to Follow When Using Disinfectants -

1. Always wear gloves when handling disinfectants.
2. It is important to clean surfaces before applying disinfectant.
3. Measure the disinfectant then add it to the right amount of clean water according to manufacturer's instruction.
4. Always use freshly diluted disinfectants as disinfectants gradually deteriorate after dilution.
5. All disinfectants take time to work.
6. Do not mix different solutions.
7. Store bulk supplies of disinfectant in a suitably labeled closed container in a cool, dry place off the floor and use before expiry date.
8. Remember that disinfectants are easily contaminated, and if handled carelessly will spread infection.

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Cleaning Blood and other Body Fluids -

It is important to treat all blood and body fluids as potentially infectious.

Disposable gloves should be worn whenever contact with blood or body fluids is likely to occur. Care should also be taken to prevent splashing of blood and other body fluids on to mucous membranes such as eyes and mouth.

Procedures for Cleaning Blood Spills -

When cleaning spills with bleach:

- Where possible, isolate the area.
- Wear gloves.
- Apply absorbent paper to soak up substance and discard.
- Cover area with freshly prepared bleach for ten minutes (use 1-part hospital grade bleach to 10 parts water).
- Wipe area with bleach.
- Wipe with warm water and detergent.
- Dry area so that it is not slippery.
- Place gloves and all disposable paper towels in plastic bag.
- Seal bag and dispose of in rubbish bin in residential facility
– for hospitals or training centres place in bags appropriately labeled and dispose of in line with Environment Protection Authority (EPA) regulations.
- Wash hands thoroughly.

Remember

Hot water will make blood stick to the surface it is on. For this reason, cold water should always be used for the first contact with blood or blood stained articles.

If a spill occurs on carpeted or soft areas and you are concerned about discolouring the carpet you may use detergent, but make sure the area is cleaned and dried thoroughly before allowing other people to come into contact with the area.

Procedures for Cleaning Spills of Other Body Fluids -

Body fluid spills (for example faeces or urine) can be cleaned with detergent unless blood is visible.

When cleaning spills with detergent:

- Wear gloves.
- Apply absorbent paper to soak up substance and discard.
- Clean surface with detergent and warm to hot water.
- Dry area so that it is not slippery.
- Place gloves and all disposable towels in plastic bag, seal bag and dispose of (refer to section Handling Infectious Waste).
- Wash and dry hands thoroughly.

Soiled equipment should be cleaned with cold water and detergent and then disinfected in the usual manner.

Waste Management

Infectious waste includes any waste contaminated with blood or body fluids including linen and sanitary napkins. Such waste must be handled and disposed of in a way that will minimise the risks associated with it.

Handling Infectious Waste -

- All bloodstained waste and body tissues should be contained in impermeable bags which are appropriately labelled "Infectious Waste".
- All waste should be handled carefully.
- Bags should never be thrown from person to person.
- Heavy duty gloves should be worn for handling of waste bags.
- Final disposal of waste should be in line with EPA regulations. Advice for Royal Australian Nursing Service (RANS) staff in relation to waste products generated while visiting a patient can be found in the H&CS Guidelines on Hospital Waste Management.

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Clothing and Linen -

- When uncontaminated with body substances, the bed linen and clothing from clients/ patients need no special handling precautions.
- Staff whose main responsibility is to wash and sort linen should wear gloves at all times.

Clothing or linen soiled with body fluids should be washed as follows:

- Wear gloves.
- Remove any solid matter (using paper towels and/or cold running water).
- Place material in a strong solution of household bleach for thirty minutes (as per manufacturer's instructions).
- Launder separately from non-infectious material and use hot water and detergent.

Bleach may damage some fabrics. In these cases, the item should be thoroughly rinsed in cold water to remove infectious material and then washed in hot, soapy water.

Drying and ironing procedures may also assist in decontamination.

Remember

If articles are stained with blood, they should be put through a cold rinse cycle first then a full cycle hot wash with detergent.

Laundry -

If linen or clothing is sent to a laundry, it should be stored and transported in accordance with EPA regulations. The EPA regulations require that this type of infectious waste be placed in yellow bags with the biohazard symbol and the words 'Infectious Waste' in black. Infectious clothing/linen should not be handled directly before it is laundered.

Handling of Needles, Syringes and Other Sharp Equipment

Methods should be devised to reduce the risk of injury from needles and other sharp instruments. Whenever possible, the handling of anything sharp should be reduced.

To prevent needle-stick injury:

- Needles should never be recapped, bent, broken, removed from disposable syringes, or otherwise manipulated.
- When handling needles and syringes found on workplace property, staff should carefully pick up the syringe by the barrel and place it in a puncture-proof container (sharps container).
- After use, needles and syringes and other sharp instruments should be:
 - disposed of at the point of use, without recapping the needle; and
 - placed in a puncture resistant container which is predominantly coloured yellow and on which is printed the words 'Danger', 'Contaminated Sharps' and the biohazard symbol in black. Sharps containers should be located as close as possible to where the sharps are generally to be used.
- Care should be taken by staff, volunteers and clients in situations where a syringe may be concealed, for example, when changing bed linen, handling piles of clothing or cleaning in concealed places.

Local government, or a Needle and Syringe Exchange Program could provide advice to program areas on appropriate disposal procedures for different worksites.

First Aid

Workplaces should have a fully equipped First Aid Kit and staff trained in first aid. If blood or body fluids are involved, the guidelines outlined above should be followed.

Mouth-to-mouth resuscitation presents little risk of infection provided there is no blood or body fluids involved. If available, mouthpieces, resuscitation bags or other ventilation devices should be used. Resuscitation equipment should be used once only and discarded, or thoroughly cleaned and disinfected following manufacturer's instructions.

Always ensure that first aid equipment is readily available on outings and is checked and restocked on a regular basis.

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COVID-19 VACCINATION

Safe. Effective. Free.

Phase 1b rollout

Published date: 16 March 2021

Phase 1b of the COVID-19 vaccine rollout starts on 22 March. To see if you are eligible and find your local service to make an appointment, use [the eligibility checker](#).

Appointments will increase as the number of clinics grow from 1,000 to more than 4,000 over four weeks. Revisit the eligibility checker if an appointment is not currently available.

Week 1

General Practices

State	Practice Name	Suburb	Postcode
ACT	Ochre Health Medical Centre Casey	Casey	2913
ACT	My Medical Practice - Charnwood	Charnwood	2615
ACT	Isabella Plains Medical Centre	Isabella Plains	2905
ACT	Kambah Medical Centre	Kambah	2902
ACT	Ochre Health Medical Centre Bruce	Bruce	2617
ACT	Ochre Health Medical Centre Calwell	Calwell	2905
ACT	Ochre Health Medical Centre	Garran	2605
ACT	Ainslie Family Practice	Ainslie	2602
ACT	Gungahlin General Practice	Gungahlin	2912
ACT	Erindale healthcare	Wanniassa	2903



State	Practice Name	Suburb	Postcode
SA	Victoria Road Medical Clinic	Clare	5453
SA	Western Clinic Medical Centre	Torrensville	5031
SA	Martins Road Family Medical Practice	Parafield Gardens	5107
SA	Waikerie Medical Centre	Waikerie	5330
SA	Streaky Bay and District Medical Clinic Incorporated	Streaky Bay	5680
TAS	Victoria Street Clinic	Ulverstone	7315
TAS	ESK Family Health Care Centre	Launceston	7250
TAS	Ochre Medical Centre Smithton	Smithton	7330
TAS	Newstead Medical	Newstead	7250
TAS	Sorell Family Practice	Sorell	7172
TAS	Claremont Medical Centre	Claremont	7011
TAS	Prospect Medical Centre	Prospect	7250
TAS	Latrobe Family Medical Practice	Latrobe	7307
TAS	John Street Medical	Kingston	7050
TAS	Hopkins Street Medical Clinic	Moonah	7009
TAS	Saunders Street Clinic	Wynyard	7325
TAS	City Medical Practice	Burnei	7320
TAS	Ochre Medical Centre Queenstown	Queenstown	7467
TAS	Ochre Health Medical Centre St Helens	St Helens	7216
TAS	Ochre Medical Centre Scottsdale	Scottsdale	7260

State	Practice Name	Suburb	Postcode
TAS	Burnie Super Clinic	Cooee	7320
TAS	George Town Medical Centre	George Town	7253
TAS	The Lindisfarne Clinic	Lindisfarne	7015
TAS	Bega Valley Medical Practice	Bega	2550
TAS	Longford Medical Centre	Longford	7301
TAS	Summerdale Medical Practice	Launceston	7250
TAS	Bellerive Doctors	Bellerive	7018
TAS	Knopwood Medical Centre	Rokeby	7019
TAS	Valley Rd Medical Centre	Devonport	7310
TAS	Deloraine Medical Centre	Deloraine	7304
TAS	Bass House Surgery	Burnie	7320
TAS	General Practice Plus Kingston Plaza	KINGSTON	7050
TAS	Northern Suburbs Medical Services	Mowbray	7248
TAS	Exeter Medical Centre	Exeter	7275
TAS	Greenpoint Medical Services	Bridgewater	7030
TAS	Legana Medical Centre	Legana	7277
TAS	Glenorchy Medical Centre	Glenorchy	7010

State	Practice Name	Suburb	Postcode
TAS	Penguin General Practice	Penguin	7316
TAS	Kingborough Medical Centre	Kingston	7054
TAS	Huon Medical Huonville	Huonville	7109
TAS	Shoreline Doctors Surgery	Howrah	7018
TAS	Family Doctor Service	Kings Meadows	7249
VIC	Doctors of Glenroy	Glenroy	3046
VIC	Medical One - Elwood	Elwood	3184
VIC	Parkmore Medical Centre	Keysborough	3173
VIC	Tullamarine Complete Health Centre	Tullamarine	3043
VIC	Standish Street Surgery	Myrtleford	3737
VIC	Doveton Medical Centre	Doveton	3177
VIC	Lincolnvile Medical Centre	Keilor East	3033
VIC	Wicklow Avenue Medical Centre	Croydon	3136
VIC	Vermont Medical Clinic	Vermont South	3133
VIC	Westcare Medical Centre	Melton West	3337
VIC	SIA Essendon T	Essendon	3040
VIC	Mt Waverley Medical Services pty ltd	Mt Waverley	3149
VIC	Yarrawonga Medical Clinic	Yarrawonga	3730
VIC	Bluff Road Medical Centre	Sandringham	3191