

Work health and safety during COVID-19

Guide to keeping your workplace safe, clean, healthy and informed on vaccinations





Introduction

The COVID-19 pandemic has created an exceptional set of circumstances and many workers, worker representatives and employers have concerns about working safely, especially for those who are required to continue working on site, outside of the home, and those who are returning to work as government restrictions ease. These concerns include the actions that should be taken to ensure workplace hygiene and cleanliness is achieved to the standard necessary to prevent the spread of infection.

To address these concerns, this document has been developed by the Office of Industrial Relations (OIR) to support guidance provided by Queensland Health to the Queensland community, including guidance to Queensland employers and workers, as to measures to be undertaken in the workplace to protect people against COVID-19 infection.

What is COVID-19?

COVID-19 is a respiratory illness caused by a new strain of coronavirus known as SARS-CoV-2. <u>Symptoms</u> can include a fever, cough, sore throat, fatigue, shortness of breath and loss of taste and/or smell.

The virus most commonly spreads from person to person by close contact with someone who is infectious. It may also spread when someone touches a surface that has recently been contaminated with the respiratory droplets (from coughing or sneezing) of an infectious person and then touches their eyes, nose or mouth.

COVID-19 vaccine

In 2021, the federal Government is providing all eligible Australians with access to free, safe and effective COVID-19 vaccines. While the Government aims to have as many Australians as possible vaccinated, receiving a vaccination is voluntary.

The COVID-19 vaccines being used in Australia are safe and effective and offer strong protection against COVID-19.

Having a COVID-19 vaccine is an important step to take to reduce the serious effects of COVID-19 in people who become infected with the virus. Current evidence shows that people who have received a COVID-19 vaccine have a much lower chance of developing more serious symptoms from COVID-19 compared to those who did not get the vaccine.

Even though the COVID-19 vaccine has been shown to be very effective there is still a chance you may get COVID-19 after you've had the vaccination. No vaccine is 100 per cent effective.

For this reason, employers and workers must continue to apply *all* reasonably practicable control measures.

The <u>COVID-19 Vaccines National Rollout Strategy</u> identifies priority groups for vaccination, including critical and high-risk workers. The Rollout will start with older Australians and certain industries.

The federal Government is working with state and territory governments to implement the arrangements under the Australian Vaccination and Treatment Strategy and the Rollout Strategy. For further information, go to the Department of Health website.

In Queensland the vaccine rollout will happen in 5 stages. People at higher risk of COVID-19 will be able to get the vaccine early. This includes priority frontline healthcare workers, quarantine and border workers and aged care and disability care workers and residents. The federal government health department is managing the vaccine rollout to workers and residents in aged care and disability care service. For more information on the Queensland vaccine roll out visit the Queensland government website.

While Queensland has issued a public health direction for health workers working with diagnosed cases of COVID-19, currently there are no public health directions in Queensland mandating COVID-19 vaccination for workers. However, State and territory health agencies

may make <u>public health directions</u> that require some workers to be vaccinated in the future if assessed as necessary. If public health directions are made, employers and workers must follow them.

Duties under the Work Health and Safety Act 2011 (Queensland) Employers

It is your duty as an employer to provide employees with a safe and healthy work environment. Under the *Work Health and Safety Act 2011* (WHS Act), you must assess risks and implement and review control measures to prevent or minimise exposure to these risks. All businesses in Queensland should have a work health and safety plan that outlines how they are managing COVID-19, as well as responding to any relevant directives issued by Queensland Health. If your workplace does not have an existing plan that addresses COVID-19 risks you may wish to use the work health and safety plan published on the Workplace Health and Safety Queensland website.

To properly manage exposure to risks related to COVID-19, employers must:

- identify workplace hazards (such as potential for transmission on the worksite or hazards resulting from a worker who tests positive for COVID-19 infection)
- determine who might be harmed, and how (including workers and any other individuals in the workplace)
- decide on control measures (including ways to prevent the spread of infection)
- put controls in place
- review the controls regularly.

Employers must consult with workers. Consultation involves sharing of information, including about possible sources of exposure to COVID-19 and associated health risks, giving workers a reasonable opportunity to express views and taking those views into account before making decisions on health and safety matters. A safe workplace is achieved when everyone involved in the work communicates with each other to identify hazards and risks, talks about health and safety concerns and works together to find solutions.

Workers must be consulted on health and safety matters relating to COVID-19 in the workplace, including (but not limited to):

- identifying the tasks and processes that could result in the spread of COVID-19
- developing a plan in response to COVID-19
- making changes to processes or procedures that could result in the spread of COVID-19
- making changes to controls to protect workers from the spread of COVID-19
- providing information and training for workers.

The information outlined below in this guide will assist employers to follow the steps that should be taken in response to COVID-19.

Employers' role in promoting COVID-19 vaccinations

Although vaccinations are voluntary, in response to the Queensland Government's rollout of the COVID-19 vaccinations, employers have an important role in encouraging eligible workers to be vaccinated unless they have medical or other reason for not being vaccinated.

There is no requirement under the WHS Act for employers to mandate vaccinations in their workplace, nor are there any public health directions at this time. However, in the future the Chief Health Officer may designate certain workplaces as high risk and issue public health directions requiring employers to ensure their workers are vaccinated. In this case, employers must follow public health directions.

It is important to understand that COVID 19 vaccine is only one control measure to reduce the risk of serious effects of COVID-19 in workplaces, and therefore if employers intend to implement a vaccination program at work they must:

- consult with workers and health and safety representatives giving them a reasonable opportunity to express their views and contribute to the decision-making about vaccination as a control measure
- provide workers with access to medical and health information regarding the safety and efficacy of the vaccine
- enable access to the vaccine for all workers
- protect workers' privacy in relation to their decisions on vaccination.

Information on vaccine preventable diseases and occupational immunisation programs is available at worksafe.qld.gov.au.

Employers should seek advice about <u>public health directions</u> from <u>Queensland Health</u> and from <u>Fair Work Ombudsman</u>, or employer associations before implementing a vaccination policy or program in the workplace.

Since it is not known at this stage if the COVID-19 vaccine will stop a vaccinated person from being infected with the virus or unknowingly carry or spread the virus to others around them, employers should continue to apply all reasonably practicable COVID-19 control measures which are outlined in the guide below. These include:

- following public health directions when they apply
- staying home if unwell and getting tested if you have any symptoms
- working from home unless work cannot be performed at home
- workplace isolation procedures such as the use of barriers
- engineering controls such as ventilation
- social distancing and rostering arrangements for employees
- good personal and hand hygiene
- regular cleaning and maintenance
- wearing a mask if unable to maintain 1.5 meter distance between people
- training in appropriate control measures for the workplace
- personal protective equipment where necessary.

Workers

Workers have a duty to take reasonable care for their own health and safety and the health and safety of others in the workplace. Workers must co-operate with any reasonable policy or procedure that relates to health or safety at the workplace, including in relation to COVID-19.

The actions taken by both employers and workers to discharge their duties under the WHS Act are an important part of the community response to COVID-19. Workplace Health and Safety Queensland (WHSQ) within OIR is working on an ongoing basis to ensure businesses are complying with their duties to prevent exposure to unacceptable health and safety risks.

Information for workers regarding COVID-19 vaccinations

Vaccination is one way to help protect people by reducing the risk of serious effects from COVID-19 in the person who has received the vaccine. However, it is not mandatory to be vaccinated unless the Chief Health Officer designates certain workplaces as high risk and issues public health directions requiring those workers to be vaccinated.

Workers and health and safety representatives must be consulted by the employer about any intention to implement a vaccination program as an effective control together with other appropriate control measures in the workplace. Workers should also have the opportunity to consult their union if required.

It is important that workers are kept informed about the safety and efficacy of the vaccine and also about medical and other conditions which might affect their decision to be vaccinated. If workers decide for any reason not to be vaccinated, and their workplace is not affected by a public health direction on vaccinations, their choices and privacy must be respected.

Information on vaccine preventable diseases and occupational immunisation programs is available at worksafe.qld.gov.au.

Workers should also seek information about <u>public health directions</u> from <u>Queensland Health</u> and from <u>Fair Work Ombudsman</u>, or their union about a vaccination policy or program in the workplace.

Since it is not known at this stage if the COVID-19 vaccine will stop a vaccinated person from being infected with the virus or unknowingly carry or spread the virus to others around them, workers should continue to follow the COVID-19 control measures which are outlined in the guide below. These include:

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- engineering controls such as ventilation
- social distancing and rostering arrangements for employees
- good personal and hand hygiene
- regular cleaning and maintenance
- wearing a mask if unable to maintain 1.5 meter distance between people
- training in appropriate control measures for the workplace
- personal protective equipment where necessary.

Employers' role to keep workplaces safe, clean and healthy

1. Put in place a work health and safety plan to respond to the pandemic and public health directions

Stay informed about the pandemic and put a work health and safety plan in place to respond to the issues created by the pandemic. A work health and safety plan should include:

- reviewing infection prevention and control policies and procedures which include actively promoting social distancing, good hand and respiratory hygiene, and increased cleaning of common areas, frequently touched surfaces and shared workstations within the work environment
- implementing a safe system of work consistent with directions and advice provided by health authorities
- how workers and/or their health and safety representatives (HSRs) will be consulted
- monitoring of the COVID-19 situation as it develops, relying on information from authoritative sources such as health authorities.

2. Implement measures to keep workers safe and stop the spread of COVID-19

- People who are sick with a flu-like illness or who have been directed by health authorities
 to either self-isolate or self-quarantine must not attend work and must stay at home and
 away from others.
- Follow the advice from health authorities on social distancing and public gatherings.

Working from home

Depending on the status of the Queensland Government's business restrictions in place to respond to COVID-19, an employer's work health and safety plan to respond to the pandemic may include staff working from home.

Detailed information regarding work health and safety arrangements for employees working at home has been published online by <u>Workplace Health and Safety Queensland</u> and <u>Safety Work Australia</u>.

When implementing work from home arrangements, employers should:

- consider if workers have access to sufficient equipment, resources and support they
 need to carry out work remotely or where this is not possible, the ability to work in the
 office
- give workers guidance on how to set up a safe home office environment to ensure they comply with good ergonomic practices
- maintain regular communication with workers
- provide workers with continued access to employee assistance programs
- be cognisant of each worker's personal circumstances
- consider the psychosocial risks of isolation, high or low job demands, reduced social support from managers and colleagues, fatigue, online bullying, and domestic and family violence, and do what is reasonably practicable to manage these risks.

Measures at the workplace

Where workers and others are attending the workplace, a range of measures should be put in place to minimise the risks posed by COVID-19 to workers and others.

Detailed information regarding COVID-19 workplace risk management has been published online by Workplace Health and Safety Queensland and Safe Work Australia.

Risk management measures for the workplace include (but are not limited to) the following: Social distancing

<u>Social distancing</u> (also known as physical distancing) includes ways to stop or slow down the spread of infection by ensuring less contact between people. This strategy will also help minimise the number of workers who might be categorised as close contacts should a person at work test positive for COVID-19 infection. Some ways to implement social distancing include:

keeping a distance of at least 1.5 metres between people to the extent possible

Example: Office environment	
Move work stations, desks and tables so that they are at least 1.5 metres apart.	Restrict the number of people inside each lift and stagger start/finish times and rest breaks to reduce lift traffic. Use floor markings and display signage to encourage social distancing when queuing up and using the lift. Use internal stairways in addition to the lift if possible. Provide hand sanitiser in the lift lobby. Regularly clean high touch surfaces (e.g. call buttons).

 limit the number of people in an enclosed area to one person per two square metres of space (for example, in vehicles, meeting rooms or in lunch or crib rooms). Workplaces where areas are open to, or used by, the public may be required to limit occupant density. If you are a restricted business, make sure you follow <u>public health directions</u> for occupant density as these apply to your business.

Example: Building or construction site	
Create specific walkways for different workers through the construction site to maintain physical separation.	Stagger meal times and smokos to limit the number of workers congregating in one area at any given time. Spread out furniture in crib/break rooms so they are at least 1.5 metres apart.
Conduct toolbox and other meetings online, including through an app, where possible. If not possible, conduct such meetings in wide open spaces to enable workers to keep the required physical distance of at least 1.5 metres.	Consider what work can be carried out off-site such as prefabrication work, or administrative work from home.

- don't shake hands to greet people
- separate workers from customers and/or other workers using barriers, screens or social distancing markers on the floor
- restrict visitors to the workplace (e.g. use a screening questionnaire to identify high risk individuals such as those who are sick or in quarantine or isolation)
- cancel non-essential meetings or hold meetings via video conferencing or phone call
- encourage customers to use tap and go, direct deposit or other contactless payment option instead of cash
- limit the number of people in vehicles
- re-organise work schedules and rosters to reduce the number of workers in an area or onsite
- reduce the sharing of equipment and tools (e.g. hot desking)
- do not allow food to be served via self-service buffet
- consider alternative work arrangements where possible for vulnerable workers considered at increased risk of complications of COVID-19
- keep indoor areas where people gather well ventilated through natural or mechanical means, for example by adjusting air conditioning or opening windows to maintain a supply of fresh air.

Example: Road freight and deliveries	
Direct workers to remain in vehicles and use contactless methods such as mobile phones to communicate with customers and deliveries at their premises wherever possible.	Use electronic paperwork where possible. If a signature is required, talk to the business about providing a confirmation email instead, or take a photo of the goods onsite as proof of delivery.
Direct workers to use contactless payment for fuel or supplies.	Prohibit drivers from travelling with passengers.

Infection may spread more rapidly at some types of workplaces if it is introduced. This includes Aboriginal and Torres Strait Islander communities and congregated settings such as residential aged care facilities and correctional centres. Non-essential visits to these types of workplaces should be restricted to protect the health of the people who live or work there.

Practise good personal and hand hygiene

Good personal and hand hygiene helps protect against infection and prevents the virus from spreading.

- Encourage all workers to practice good hygiene by frequently cleaning their hands. Hand washing should take at least 20 to 30 seconds. Wash the whole of each hand (palms, fingers, nails and back of hands), covering all areas with soap before rinsing with water. If hand washing is not practical, alcohol-based hand sanitiser containing at least 60 per cent ethanol or 70 per cent iso-propanol is recommended. Apply hand sanitiser and rub hands for at least 20 30 seconds, covering all surfaces. Alcohol-free hand sanitisers are not recommended because they have not been shown to be effective against the virus that causes COVID-19.
- Provide hand washing facilities including clean running water, soap, and paper towels or an air dryer. If hand washing facilities are not readily available, provide hand sanitiser.
- Place hand sanitiser in locations such as lunchrooms, worker-customer interface areas and at office entrances/exits to encourage hand hygiene.
- Keep hand hygiene facilities properly stocked and in good working order.
- Promote good personal hygiene when sneezing and coughing. People should cover their coughs or sneezes with an elbow or tissue, dispose of the tissue immediately and wash their hands, and avoid touching their face.
- Ensure symptomatic people (staff, contactors, customers, etc.) do not come into the workplace.

Keep the workplace clean during COVID-19

Regularly clean frequently touched surfaces including door handles, benchtops, kitchens, tabletops and desks, bathroom fixtures, toilets, water taps, lunchrooms, photocopiers, reception desks, sign-in stations and desktop equipment including keyboards and telephones

In addition to regular, routine cleaning of workplaces, such as emptying bins and cleaning toilets, enhanced cleaning may help prevent the spread of COVID-19. Keeping the workplace clean is important for reducing the number of germs that survive on surfaces.

Employers must implement a cleaning protocol and provide sufficient cleaning and disinfection supplies and equipment or engage a suitable cleaning service.

Example: Office environment	
Provide detergent/disinfectant wipes to employees to clean workstations, and workstation equipment such as monitors, phones, keyboards and mouses.	Provide supplies of alcohol-based hand sanitiser around the office space, where possible.

Routine cleaning

Routine workplace cleaning should be undertaken at least daily. More frequent cleaning may be needed in larger, busier workplaces and between shifts. Carrying out a risk assessment will help determine how often cleaning should be done.

Cleaning should be carried out in all areas where work is undertaken so far as is reasonably practicable including fixed and mobile work areas such as offices, lunchrooms, mobile plant, and motor vehicles. Where plant, equipment or tools are shared, for example hot desking or motor vehicles, touch surfaces should be cleaned between users.

Example: Agriculture

Provide workers with cleaning agents and train them to clean down plant or equipment (e.g. farm machinery or tools) immediately after use. Workers should each be provided with their own equipment if possible and should be physically organised in a way that maintains social distance.

Special attention should be given to surfaces that are frequently touched. This includes door handles, benchtops, kitchens, tabletops and desks, bathroom fixtures, toilets, water taps, lunchrooms, photocopiers, reception desks, sign-in stations and desktop equipment including keyboards and telephones.

Physically clean surfaces using detergent and water (use as per the label instructions), followed by rinsing and drying. A clean cloth (disposable or able to be laundered) should be used each time.

Start the cleaning process in the cleanest areas and finish in the dirtier areas (also see *Cleaning equipment* section) to prevent cross-infection. Wear either single-use or reusable gloves (such as washing-up gloves) when cleaning. If using reusable gloves wash them off using running water and detergent after use and hang outside to dry. Wash your hands after you have finished cleaning and removed the gloves.

Cleaning equipment includes mops with detachable heads (so they can be washed in a washing machine using hot water), disposable cloths or cloths that can be laundered. Ensure that cleaning equipment is well maintained, cleaned and appropriately stored.

Different cloths should be used for cleaning different areas, e.g. kitchen, bathroom, toilet. It can be useful to have colour-coded cloths or sponges for each area (e.g. blue in the bathroom, yellow in the kitchen) so that it is easier to keep them separate.

Disposable cleaning cloths should be placed in the general waste after use.

For most workplaces, cleaning with detergent and water is adequate for routine cleaning. Disinfectants are usually only necessary if a surface has been contaminated with potentially infectious material or the workplace is considered higher risk (e.g. health and residential care facilities).

If you use a disinfectant, clean the surface first then use disinfectant or use a combined detergent and disinfectant product. Disinfectants will not kill germs if the surface has not been cleaned first. Make sure the disinfectant has enough time in contact with the surface, is used at the right concentration and is applied to a clean, dry surface. Rinse the surface after disinfection if needed to prevent any residue from being left behind.

Cleaning and disinfection after suspected or confirmed COVID-19 infection

Areas that have been used by a person with suspected or confirmed COVID-19 infection should be cleaned and disinfected.

Put on personal protective equipment (PPE) before entering the area. This includes:

- disposable gloves
- disposable apron or other protective garment
- protective eyewear to protect your eyes from the cleaning chemicals
- If a person with suspected or confirmed COVID-19 infection remains in the area while the cleaning is done (e.g. hotel room), that person should wear a face mask (e.g. single-use surgical mask), if available, to cover their coughs and sneezes. The cleaner should also wear a face mask to prevent them from touching their face. Once the cleaner has entered the area, they should avoid touching their face and touching or adjusting their face mask if one is worn. If wearing a mask, it should be either on or off ensure it always covers both the nose and mouth and do not let it dangle from the neck.

Cleaning and disinfection of hard surfaces (e.g. bench tops) following a case of COVID-19 should be done using either:

- a physical clean using a combined detergent and 1,000 ppm bleach solution (2-in-1 clean) made up daily from a concentrated solution. Follow manufacturer's directions for dilution.
- a physical clean using detergent and water followed by disinfection with 1,000 ppm bleach solution (2-step clean), for example, household bleach or hospital-grade bleach solutions that are readily available from retail stores. Follow manufacturer's directions for use or see Table 1 below for a dilution recipe.

A disinfectant listed with the Therapeutic Goods Administration (TGA) with <u>label claims</u> <u>against COVID-19/SARS-CoV-2 may be used as an alternative to bleach solution</u>. If the disinfectant does not have detergent properties, the surface should be first cleaned using detergent and water.

Bleach solutions should be made fresh daily. The bleach product does not need to be listed with the TGA unless it makes specific label claims against COVID-19/SARS-CoV-19.

Gloves should be worn when handling and preparing bleach solutions and other disinfectants. Protective eyewear should be worn in case of splashing.

Do not mix bleach solutions with other disinfectants such as ammonia or vinegar.

Preparation of bleach solutions

Household bleach comes in a variety of strengths of the active ingredient (sodium hypochlorite) which is indicated on the product label often listed as available chlorine.

Table 1: Recipes to achieve a 1,000 ppm bleach solution

Original strength of bleach (available chlorine)	Disinfectant recipe to make up 1 litre of bleach solution. In a bucket, place the volume of water required and gently add the measured volume of bleach.
% strength	Volume of bleach (ml)
1	100 ml
2	50 ml
3	33 ml
4	25 ml
5	20 ml

Note: Minimum standards that must be followed for the handling of hazardous chemicals are outlined in the *Managing risks of hazardous chemicals Code of Practice 2021*.

Once cleaning is completed, place all disposable cleaning items in the general waste. Waste does not need any additional handling or treatment measures. Reusable cleaning equipment including mop heads and cloths should be laundered using hot water and completely dried before re-use. Cleaning equipment, such as buckets, should be emptied and cleaned with a new batch of bleach solution and allowed to dry completely before re-use.

People should use the following process to safely remove personal protective equipment:

Remove and dispose of gloves. The outside of gloves may be contaminated. Remove
gloves being careful not to contaminate bare hands during glove removal. Clean your
hands. This can be done with either soap and running water or hand sanitiser.

- Remove and dispose of the apron. The apron front may be contaminated. Until or break fasteners and pull apron away from body, touching the inside of the apron only. Clean your hands. This can be done with either soap and running water or hand sanitiser.
- Remove protective eyewear/face shield. The outside of protective eyewear/face shield
 may be contaminated. Remove eyewear/face shield by tilting the head forward and
 lifting the head band or ear pieces. Avoid touching the front surface of the eyewear/face
 shield. Reusable protective eyewear should be washed in detergent and water and
 allowed to completely air dry. Clean your hands. This can be done with either soap and
 running water or hand sanitiser.
- Remove and dispose of the face mask if worn. Do not touch the front of the mask.
 Remove the mask by holding the elastic straps or ties and remove without touching the front. Clean your hands. This can be done with either soap and running water or hand sanitiser.
- PPE can be disposed of into the general waste.

For more information refer to **Queensland Health**.

Consider use of personal protective equipment where necessary

<u>Health authorities</u> do not recommend the routine use of face masks by people who are otherwise well in regions where community transmission of COVID-19 is low. You should however wear a face mask if you:

- have symptoms and are seeking medical advice or testing for COVID-19, or
- are in isolation for COVID-19 and are in the same room as another person, or
- are caring for someone with suspected or confirmed COVID-19.

If sustained community transmission is occurring, health authorities may recommend the use of face masks by the community. If you have been told to wear a face mask, it is important to use it correctly. Avoid touching the face mask while you're wearing it, and if you do, wash your hands. Do not reuse single-use face masks and replace the mask regularly, including if you have coughed or sneezed into it. Always wash your hands immediately after removing and disposing of the mask.

Likewise, if you are feeling well, there is no need to use gloves in the community as it can lead to complacency and reduced handwashing, potentially increasing the risk of exposure to the virus. Disposable gloves may also cause irritant or allergic contact dermatitis in some workers. If you have been told to wear gloves, avoid touching your face with gloved hands, change the gloves regularly and wash your hands after removing and disposing of the gloves.

PPE should be worn by those who clean areas that have been used by people with suspected or confirmed infection (refer to sections on cleaning).

Healthcare workers and other frontline workers who have close contact with people with suspected or confirmed infection should wear PPE as advised by health authorities, including Queensland Health.

Example: Health care sector

In addition to appropriate controls outlined in this document, workers in a healthcare setting should refer to Queensland Health for advice on appropriate additional measures, including the selection and use of appropriate PPE.

Managing symptoms of COVID-19 at work

Instruct workers to not attend work if they develop a flu-like illness or have been directed by health authorities to self-quarantine or self-isolate. Active monitoring for COVID-19 symptoms may be recommended for some industries, for example where workers live

together in shared accommodation such as fly-in fly-out or agricultural workers or in workplaces where vulnerable people are present, such as at hospitals and residential aged care facilities.

If a person develops flu-like symptoms at work, separate the person by placing them in an area away from others. Provide them with tissues, hand sanitiser and a face mask, if available, to cover their coughs and sneezes. Inform their supervisor and arrange for the person to be sent home or to access medical assistance. If the person needs to access medical assistance, they should call ahead and advise of their symptoms so that the medical staff can prepare for their visit.

Clean and disinfect their workstation and other areas they have been (refer to sections on cleaning).

Queensland Health will contact an employer if contact tracing of the workplace is required. The employer should follow the advice provided by Queensland Health.

Maintaining a workplace attendance register will assist health authorities with contact tracing in the event that a person with COVID-19 has attended a workplace. Some businesses are required to collect contact information from staff and patrons and you should make sure you follow any public health directions for collecting contact information as these apply to your business.

Managing psychosocial risks

A psychosocial hazard is anything in the design or management of work that causes stress. Stress is the reaction a person has when we perceive the demands of their work exceed their ability or resources to cope. Work-related stress if prolonged and/or severe can cause both psychological and physical injury. Stress itself does not constitute an injury. To manage stress from COVID-19 employers should:

- regularly ask workers how they are going and if there are any work-related stressors that need to be addressed
- be well informed with information from official sources, regularly communicate with workers and share relevant information as it comes to hand
- consult your workers on any risks to their psychological health and how these can be managed
- provide workers with a point of contact to discuss their concerns and to find workplace information in a central place
- inform workers about their entitlements if they become unfit for work or have caring responsibilities
- proactively support workers who you identify may be more at risk of a work-related psychological injury (e.g. frontline workers or those working from home)
- refer workers to appropriate channels to support mental health and wellbeing, such as employee assistance programs.

Further information about managing risks to <u>psychological health</u> during COVID-19 pandemic is available from <u>Safe Work Australia</u>.

Communicate with workers

- be aware of how to spot <u>COVID-19 symptoms</u> (including fever, cough, sore throat, fatigue or tiredness and shortness of breath) and make sure workers do not come to work if they are unwell
- provide workers with adequate information and training in relation to COVID-19 measures, including:
 - changes to work tasks and practices

- o appropriate cleaning and disinfection practices at work
- put <u>signs and posters</u> up around the workplace to remind workers and others of the risks of COVID-19 and the measures that are necessary to stop its spread.

3. Report and notification of a confirmed or probable case of COVID-19

If there is a confirmed or probable case of COVID-19 at your workplace, Queensland Health will be notified by the medical practitioner who confirms the diagnosis.

The employer must notify WHSQ of a confirmed or probable case of COVID-19 as diagnosed by a medical practitioner and arising out of the conduct of the business or undertaking:

- that requires the person to have immediate treatment as an in-patient in a hospital
- to which the carrying out of work is a significant contributing factor, including any infection that is reliably attributable to carrying out work that involves providing treatment or care to a person, or that involves contact with human blood or bodily substances.

WHSQ is continuing to respond to all requests for advice or assistance on COVID-19 related matters and our inspectors continue to ensure businesses are complying with requirements to prevent exposure to unacceptable health and safety risks.

To raise a concern about a work health and safety issue, use our online form or call 1300 362 128. For non-COVID-19 notifiable incidents, use our incident notification form here.

What does a suspected or positive case of COVID-19 mean for my workplace?

If someone at your workplace is confirmed to have COVID-19 infection, they will be directed by a Public Health Unit to self-isolate and they must not attend work until their health provider advises that they can. The Public Health Unit will contact the employer when contract tracing of the workplace is required to identify close contacts. The Public Health Unit will direct close contacts to self-quarantine and they must not attend work during this period.

If someone with suspected or confirmed COVID-19 infection has been at your workplace the areas that have been used by the person, including general work areas and high touch surfaces, should be cleaned and disinfected (refer to the section *Cleaning and disinfection after suspected or confirmed COVID-19 infection*).

There is no need to shut down an entire workplace while cleaning and disinfection takes place, particularly if the person has only visited parts of the workplace, however cleaning and disinfection must occur before workers return to affected areas. There is no requirement for 'clearance testing' or other approval processes for workers to return to the affected areas on completion of cleaning and disinfection.

Cleaning and disinfection for COVID-19 should be done thoroughly but it does not require any additional procedures such as microbiological testing of surfaces, 'industrial' cleaning or disinfectant fogging. Disinfectant fogging is not recommended for COVID-19 and may expose workers and others to hazardous chemicals if not done correctly.

Workers' responsibilities in relation to COVID-19

Workers have a duty to take reasonable care for their own health and safety and the health and safety of other persons in the workplace.

What does a worker do if they test positive for COVID-19?

Queensland Health will contact a worker if they have a positive test for COVID-19. They must <u>self-isolate</u> and follow the instructions of health authorities. They should also inform their supervisor of the diagnosis and they must not attend work.

Queensland Health will contact the employer, if required, for the purpose of contact tracing and will advise on what actions are required to protect other workers who may have had close contact with the infected worker.

When can a worker return to work if they have COVID-19?

A health care provider will advise an infected worker when they are no longer infectious and can return to work.

What should a worker do if they have had close contact with someone who has tested positive for COVID-19?

Queensland Health will undertake contact tracing. This involves identifying people who have had close contact with someone with confirmed COVID-19 infection. If a worker is considered a close contact, they will be directed to self-quarantine and will be provided with information to prevent the further spread of infection. People who are not close contacts do not have to go into quarantine but should be alert to the signs and symptoms of COVID-19, monitor their health and continue to practice recommended social distancing and hygiene measures. Anyone who develops symptoms of COVID-19 should not attend work and seek immediate advice from their doctor.

When can a worker return to work after self-quarantine?

If a worker has self-quarantined for 14 days without any symptoms, they can return to work. If they need a medical certificate they should see their GP. If a worker has tested negative for COVID-19 during the period of self-quarantine, they must still remain in quarantine for the full 14 days.

What happens if a worker develops symptoms while they are in selfquarantine?

If a worker develops symptoms while in self-quarantine, they should seek medical attention immediately from their GP or a Fever Clinic. They should call ahead to let the medical practice or clinic know they are under quarantine so preparations can be made for their arrival. If a worker is tested for COVID-19, they must remain in quarantine while waiting for the test results.

If the test comes back negative, the worker is still required to complete the rest of the quarantine period. If the worker tests positive for COVID-19 infection they will be required to self-isolate.

For more information about contact tracing, quarantine or isolation contact Queensland Health on 13HEALTH (13 43 25 84) or visit health.gld.gov.au.



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