Infection Prevention & Control Policy

This **Infection Prevention & Control Policy** sets out the framework for employees, agents and contractors (workers) in relation to infection prevention and control in the workplace. This policy is intended to help prevent the risk to health and safety of workers and the public from preventable infection, contamination or exposure. Notwithstanding this, humans are always infected with some type of pathogen, most of which rarely, if ever, become symptomatic.

For the purposes of this policy we refer to any infection caused by pathogens as any infectious agent that can cause disease, illness or death to their host. This broad definition of pathogens includes a virus, bacterium, protozoan, prion, viroid, fungus or parasite.

Workers have two areas of consideration in the area of communicable disease or infection;

1. the risk of being infected; or
2. the risk of transferring an infection to a fellow employee, customer or resident of a customer.

The basis of good infection control in the workplace is to assume that everyone is potentially infectious, including oneself and proper infection control procedures must be followed at all times.

Infection can come from a very wide variety of vectors including;

- person to person, typically from the transfer of bodily fluids;
- airborne contamination or contaminated surfaces;
- exposure from an infected object such as sharps;
- consuming contaminated food, water or other drink;
- exposure to infected species, organic matter or soil from pathogens, viruses, bacteria, microorganisms, spores, etc.

To prevent the risk from infection, all workers are required to take all reasonable precautions to prevent the risk from infection by conducting a job hazard analysis and following relevant government guidelines, community standards and expectations.

Infection Prevention

In many cases, effective infection control is enhanced by adopting the following precautions in the workplace;

- hand hygiene;
- respiratory hygiene and cough etiquette;
- the use of Personal Protective Equipment ("PPE");
- keep the workplace clean and hygienic;
- stay home when you're unwell, especially if you have a fever or diarrhea, or are vomiting.

Under certain circumstances, employees may also be required to self-quarantine for an extended period or limit their interaction with people (by working from home) to eliminate the risk from the spread of serious infection.

Risk Group Classification

An Australian Standard AS/NZS 2243.3:2010 establishes the risk classification to humans in a laboratory environment that forms a suitable basis for classification for infection as follows;

- **Risk Group 1 (RG1)** pathogens have the lowest individual and community risk and include agents that rarely cause infection in healthy hosts.
- **Risk Group 2 (RG2)** pathogens may cause disease in a healthy host but are difficult to transmit, don't usually cause serious or life-threatening illness and are readily treated or prevented.

- **Risk Group 3 (RG3)** pathogens are those that usually cause serious disease and may present a serious risk to people. A Risk Group 3 agent may also present significant community risk if spread in the environment, but there are usually effective measures for treatment and/or prevention.
- **Risk Group 4 (RG4)** pathogens are those that present significant individual and community risks and usually produce life-threatening disease, are readily transmissible and effective prevention and/or treatment is not usually available.

Quarantine & Medical Release - Risk Group 2

In certain circumstances employees are required to follow the infection controls outlined in this policy which may include self-quarantine if they suspect they have been infected from a Risk Group 2 pathogen and could pose a risk to vulnerable or immunocompromised people. Particular attention applies to people working in healthcare or aged care facilities.

Self Quarantine & Medical Release - Risk Group 3

It is expected that all workers self-quarantine for serious infection or the risk from serious infection related to Risk Group 3 (RG3) prior to returning to work;

- where an employee reasonably believes or knows they have been exposed or infected;
- where an employee has travelled to or within a country or location where the endemic population is at risk from an RG3 or RG4 pathogen;

In these cases, the worker will require doctor's approval in the form of a medical release certificate prior to returning to work and after the duration of the infection plus any additional time as directed by medical advice.

Medical Quarantine & Medical Release - Risk Group 4

Where a worker is directly exposed to a Risk Group 4 (RG4) pathogen, workers must not return to work, and subject to medical advice is likely to be medically isolated. In these cases, the worker will require doctor's approval in the form of a medical release certificate prior to returning to work.

Employee Entitlements

Where an employee is required to be quarantined they shall be entitled to have access to their statutory entitlements such as personal leave or accrued annual leave and in special circumstances may also have access to accrued long service leave.

Epidemics & Pandemics

Where a worker is at risk of infection during the course of their normal duties during an epidemic or pandemic then any discretionary events or activities including business-related travel must be reviewed. Where the review determines the risk of infection to an employee is great then that activity or travel must not continue.

This policy shall be administered and reviewed periodically.

References

- Hand Hygiene Australia (HHA)
- Australian Standard / New Zealand Standard AS/NZS 2243.3:2010 - Safety In Laboratories
- Fair Work Australia - Coronavirus and Australian workplace laws

Infection Prevention Procedures

The following list contains some of the main ways that workers can aim to limit their risks of infection while continuing their normal job role:

- **Adjust your work processes as a result of infection risk** - determine ways to adjust the methods, timing, and contact with other people required for the relevant work tasks required for your role. This may require collaboration with other involved parties.

- **Limit exposure to other people** - consider alternatives to in person meetings wherever possible, such as online video calls, phone or email, and avoid unnecessary physical contact such as shaking hands. Where the job role involves physical contact (such as physical therapists) PPE is required.

- **Limit contact with surfaces, equipment, and other potential contaminated items** - ensure that any equipment used/touched by multiple people is cleaned regularly, and that you wash your hands before and after use. Where practicable, workers should be provided with their own equipment for their sole use during their shift, which is then cleaned and stored after the shift.

- **Limit time in confined spaces with other people** (such as enclosed vehicles, or unventilated offices)

- **Prepare to limit exposure** ("social distancing") such as sourcing supplies and setup of remote work to minimise time spent in contact with people and potential infection

- **Review existing systems to reduce risks** - any recorded and informal systems may need to be reviewed in light of any particular infection risk to determine if additional risk management is needed.

- **Utilise PPE if contact or exposure to potential infection cannot be avoided**, such as essential services workers with necessary contact with other people - face masks, gloves, and protective clothing as relevant.

- **Utilise PPE as a precaution in certain circumstances** - where there is a risk of infection identified for a worker which can't be avoided in their work, utilise PPE to control the risk, being aware of the fact that PPE items may be in limited supply and are to be used when the risk is present (which may not be all times).