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# RDHM COVID-19 Plan

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**A beacon of care**

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## Executive Summary

COVID-19 is predominately transmitted via inhalation of aerosols (both short- and long-range transmission is possible) particularly when an infected person is in close contact (<1.5m) with another person. It can cause mild to severe disease and even death.

The Department of Health has developed a Health System Response Matrix to support service delivery. RDHM's COVID 19 response plan is aligned with the Stage set by the Department of Health.

A risk assessment was completed to inform the response required for each stage. RDHM has set the goals of the response for each stage:

- Stage 1: Maintain standard infection control principles.
- Stage 2: Reduce transmission of COVID-19 within RDHM.
- Stage 3: Reduce patients/visitors attending RDHM with COVID-19.
- Stage 4: Reduce staff exposure to COVID-19.

To achieve these goals, RDHM has set the following plan:

Control Plan		Stage			
		1	2	3	4
Mask	<i>Choice - Surgical/ P2 / N95</i>	☑			
	<i>CLINICAL AREAS - Mandated mask use – surgical / P2/ N95</i>		☑	☑	☑
	<i>CLINICAL AREAS - Mandated mask use – N95</i>			◆	◆
	<i>NON – CLINICAL AREAS - Mandated mask use – Surgical/ N95 choice</i>			◆	◆
	<i>ALL AREAS - Mandated mask– N95</i>				◆
<i>Staff strongly recommended to stay home and test for COVID-19 if symptomatic. If COVID positive, stay at home for at least 5 days or until symptom free.</i>		☑	☑	☑	☑
<i>Encourage staff vaccinations</i>		☑	☑	☑	☑
<i>Social distancing reminders</i>		☑	☑	☑	☑
<i>Hospital Signage</i>			☑	☑	☑
<i>Concierge encouraging mask usage</i>			☑	☑	☑
<i>Website</i>			☑	☑	☑
<i>Appointment reminder</i>			☑	☑	☑
<i>Screening</i>				☑	☑
<i>Temperature checking</i>				◆	◆
<i>Work from home</i>					◆
<i>Roster to create staff groupings</i>					◆
<i>Review clinical service model/delivery</i>					◆
<i>Risk assessment review</i>		☒	☒	⊙ or ☒	⊙

### KEY:

☑	Recommended.	☒	On change of Stage by Department of Health.
⊙	Weekly or more frequently as required	◆	Consider based on Department of Health guidelines / RDHM risk assessment.

With the staged implementation of controls, RDHM will support a safe work environment for staff and maintain clinical service delivery as best as possible.

## RDHM COVID-19 Plan.

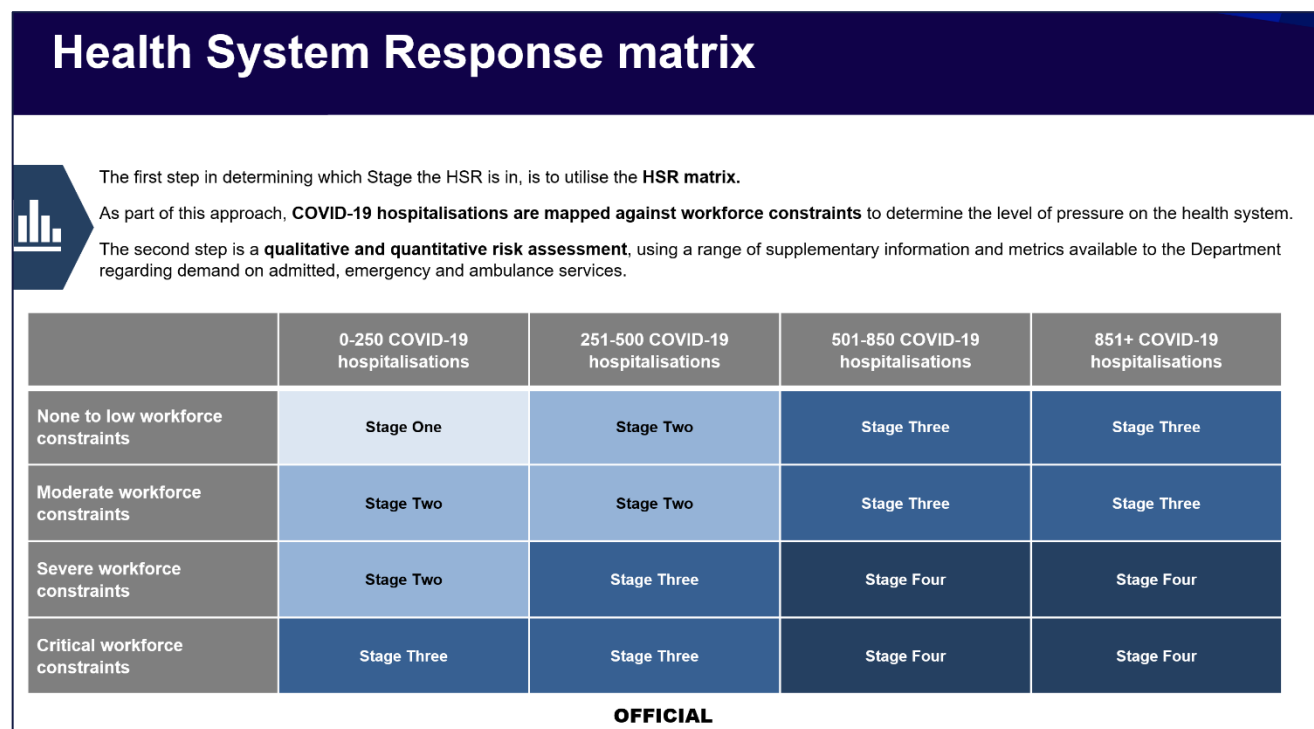
Background:

COVID-19 is predominately transmitted via inhalation of aerosols (both short- and long-range transmission is possible) particularly when an infected person is in close contact (<1.5m) with another person.

Transmission via direct contact with contaminated surfaces (touching the surface and then touching the mouth or nose without hand hygiene) is possible but not common. Factors affecting transmission are:

- the concentration of viable virus shed in aerosols expelled by the infected person in the form of particles (ranging from respiratory droplets to smaller >5 microns to aerosols <5 microns).
- the type of contact the infected person has with others, how close they are and whether the virus can enter via their mouth, nose, or eyes.
- the characteristics of the setting of transmission and the infection prevention and control measures which are in place.

Department of Health has developed a Health System Response Matrix – Figure 1.



**Figure 1: Health System Response Matrix.**

RDHM's COVID 19 response plan will align with the Stage set by the Department of Health.

Risk Assessment:

Risk Statement	Stage	Inherent Risk			Residual Risk		
		Likelihood	Consequence	Risk Rating	Likelihood	Consequence	Risk Rating
COVID-19 transmission from COVID-19 positive patient and / or staff member	1	Possible	Major	High	Rare	Major	Medium
	2	Likely	Major	High	Rare	Major	Medium
	3	Likely	Major	High	Rare	Major	Medium
	4	Almost Certain	Major	Very High	Rare	Major	Medium

RDHM Planned Response:

Stage	Goal of response
1	Maintain standard infection control principles.
2	Reduce transmission of COVID-19 within RDHM.
3	Reduce patients/visitors attending RDHM with COVID-19.
4	Reduce staff exposure to COVID-19.

Control Plan		Stage			
		1	2	3	4
Mask	<i>Choice - Surgical/ P2 / N95</i>	☑			
	<i>Mandated mask use – surgical / P2/ N95 in clinical areas</i>		☑	☑	☑
	<i>Mandated mask use – N95 in selected areas</i>			◆	◆
	<i>Mandated mask use – Surgical/ N95 choice non - public facing</i>			◆	◆
	<i>Mandated mask use all areas – N95</i>				◆
<i>Staff strongly recommended to stay home and test for COVID-19 if symptomatic. If COVID positive, stay at home for at least 5 days or until symptom free.</i>		☑	☑	☑	☑
<i>Encourage staff vaccinations</i>		☑	☑	☑	☑
<i>Social distancing reminders</i>		☑	☑	☑	☑
<i>Hospital Signage</i>			☑	☑	☑
<i>Concierge encouraging mask usage</i>			☑	☑	☑
<i>Website</i>			☑	☑	☑
<i>Appointment reminder</i>			☑	☑	☑
<i>Screening</i>				☑	☑
<i>Temperature checking</i>				◆	◆
<i>Work from home</i>					◆
<i>Roster to create staff groupings</i>					◆
<i>Review clinical service model/delivery</i>					◆
<i>Risk assessment review by COVID-19 Working Party. COVID-19 Working Party will be led by either General Manager or Director Quality &amp; Safety and consist of representatives from:</i> <ul style="list-style-type: none"> <li>• <i>Clinical Directors</i></li> <li>• <i>Operation Managers</i></li> <li>• <i>Supply</i></li> <li>• <i>IT</i></li> <li>• <i>People Partnering Engagement</i></li> <li>• <i>Infection control lead</i></li> </ul>		☒	☒	☉ or ☒	☉ or more frequently as required

KEY:			
☑	Recommended.	☒	On change of Stage by Department of Health.
☉	Weekly or more frequently as required	◆	Consider based on Department of Health guidelines / RDHM risk assessment.

## Attachments

- Attachment 1 – Stage 1 Recommendations
- Attachment 2 – Stage 2 Recommendations
- Attachment 3 – Stage 3 Recommendations
- Attachment 4 – Stage 4 Recommendations
- Attachment 5 – Hospital signage
- Attachment 6 – Appointment reminder
- Attachment 7 - Website information
- Attachment 8 - Patient Screening flowchart

## References:

[Heath System Response Jan 2024.pptx](#)

[Coronavirus \(COVID-19\) Victoria website.](#)

[For health services and professionals – COVID-19](#)

## Attachment 1 – Risk Assessment for (Stage 1)

Controls in Place	<ul style="list-style-type: none"> <li>• Staff routinely perform hand hygiene. Refer to Hand Hygiene procedure.</li> <li>• Staff use standard precautions and transmission-based precautions. Refer to Standard and Transmission based precautions procedure and Communicable Diseases Procedure.</li> <li>• Staff use transmission-based precautions when appropriate. Refer to Standard and Transmission based precautions procedure.</li> <li>• Environment and equipment is cleaned. Refer to:             <ul style="list-style-type: none"> <li>○ Cleaning in the Clinical Areas Procedure.</li> </ul> </li> <li>• Linen is disposed of appropriately. Refer to Linen Management in Clinical Environment Procedure.</li> <li>• Clinical waste is disposed of appropriately. Refer to Waste Management in the Clinical environment procedure.</li> <li>• Staff are vaccinated. Refer to Staff Immunisation procedure.</li> </ul>
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### Treatment Plan Goal

Maintain standard infection control principles

Treatment Plan	<ul style="list-style-type: none"> <li>• Patients are offered a mask at hospital entry and department entry.</li> <li>• Patients are invited to hand sanitize upon entry into clinic and again upon leaving the bay on completion of treatment Staff recommended to stay at home if unwell / close contact.</li> <li>• Social distance reminders in place.</li> <li>• Staff strongly recommended to stay home and test for COVID-19 if symptomatic. If COVID positive, stay at home for at least 5 days or until symptom free.</li> <li>• Staff choice to be in N95/ P2 /surgical masks.</li> <li>• Patients screened in DSU only:             <ul style="list-style-type: none"> <li>○ Patients are informed to notify the DSU if become unwell.</li> <li>○ Patients pre-screened – including RATs.</li> <li>○ If no RAT, complete in the department. For special need clients, RAT completed in theatre by RDHM staff.</li> <li>○ No positive COVID are seen.</li> </ul> </li> </ul>
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## Attachment 2 – Risk Assessment Controls and Treatment Plan (Stage 2)

Controls in Place	<ul style="list-style-type: none"> <li>• Staff strongly recommended to stay home and test for COVID-19 if symptomatic. If COVID positive, stay at home for at least 5 days or until symptom free.</li> <li>• Patients screened in DSU only:             <ul style="list-style-type: none"> <li>○ Patients are informed to notify the DSU if become unwell.</li> <li>○ Patients pre-screened – including RATs.</li> <li>○ If no RAT, complete in the department. For special need clients, RAT completed in theatre by RDHM staff.</li> <li>○ No positive COVID are seen.</li> </ul> </li> <li>• Patients are offered a mask at hospital entry and department entry.</li> <li>• Patients are invited to hand sanitize upon entry into clinic and again upon leaving the bay on completion of treatment Staff recommended to stay at home if unwell / close contact.</li> <li>• Social distance reminders in place.</li> <li>• Staff choice to be in N95/ P2 /surgical masks.</li> </ul>
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### Treatment Plan Goal

Reduce transmission of COVID-19 within RDHM

Treatment Plan	<ol style="list-style-type: none"> <li>1. Signage at the front of the hospital: <i>“If you have any cold or flu symptoms (runny nose, sore throat, cough, fever, chills or sweats), have tested positive for COVID-19 in the previous 5 days or are living with someone who has tested positive for COVID-19 in the previous 5 days please return home and reschedule your appointment.”</i></li> <li>2. Add COVID-19 reminder to SMS appointment reminder: <i>“If you have any cold or flu symptoms (runny nose, sore throat, cough, fever, chills or sweats), have tested positive for COVID-19 in the previous 5 days or are living with someone who has tested positive for COVID-19 in the previous 5 days, please reschedule your appointment.”</i></li> <li>3. Concierge to encourage mask use by patients/visitors.</li> <li>4. Update website information.</li> <li>5. Reinforce mask use by staff in public areas.</li> <li>6. Reinforce staff to stay home and test for COVID-19 if symptomatic.</li> <li>7. Reinforce staff vaccinations as per guidelines.</li> </ol>
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## Attachment 3 – Risk Assessment Controls and Treatment Plan (Stage 3)

<p>Controls in Place</p>	<ul style="list-style-type: none"> <li>• Staff strongly recommended to stay home and test for COVID-19 if symptomatic. If COVID positive, stay at home for at least 5 days or until symptom free.</li> <li>• Leaders to reinforce message for staff to stay at home and test for COVID-19 if symptomatic.</li> <li>• Leaders to reinforce staff vaccinations as per recommended health guidelines.</li> <li>• Website to include COVID-19 information. (Attachment 6).</li> <li>• COVID-19 reminder in SMS appointment reminder. (Attachment 5)</li> <li>• Patients screened in DSU only:             <ul style="list-style-type: none"> <li>○ Patients are informed to notify the DSU if become unwell.</li> <li>○ Patients pre-screened – including RATs.</li> <li>○ If no RAT, complete in the department. For special need clients, RAT completed in theatre by RDHM staff.</li> </ul> </li> <li>• No positive COVID are seen. Signage at the front of the hospital. (Attachment 4)</li> <li>• Concierge to encourage mask use by patients/visitors. Patients are offered a mask at hospital entry and department entry.</li> <li>• Patients are invited to hand sanitize upon entry into clinic and again upon leaving the bay on completion of treatment Staff recommended to stay at home if unwell / close contact.</li> <li>• Social distance reminders in place.</li> <li>• Staff choice to be in N95/ P2 /surgical masks. Leaders to reinforce mask use by staff in public areas.</li> </ul>
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### Treatment Plan Goal

Reduce patients/visitors attending RDHM with COVID-19.

<p>Treatment Plan</p>	<ul style="list-style-type: none"> <li>• Start screening of patients prior to attending appointments.</li> <li>• Consider introduction of temperature checking on arrival based on risk assessment and DOH guidelines.</li> <li>• Review mask guidelines based on risk assessment and DOH:             <ul style="list-style-type: none"> <li>▪ Consider introduction of mandatory N95 use in selected areas.</li> <li>▪ Consider use of mask in non-public areas.</li> </ul> </li> <li>• Review risk assessment and recommendations weekly. Consider further actions required such as:             <ul style="list-style-type: none"> <li>○ enforce social distancing through environmental and engineering controls.</li> <li>○ reducing aerosol generating procedures.</li> <li>○ increasing use of rubber dams.</li> </ul> </li> </ul>
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## Attachment 4 – Risk Assessment Controls and Treatment Plan (Stage 4)

<p>Controls in Place</p>	<ul style="list-style-type: none"> <li>• Leaders to reinforce message for staff to stay at home and test for COVID-19 if symptomatic.</li> <li>• Leaders to reinforce staff vaccinations as per recommended health guidelines.</li> <li>• Website to include COVID-19 information.</li> <li>• COVID-19 reminder in SMS appointment reminder.</li> <li>• Start screening of patients prior to attending appointments.</li> <li>• Signage at the front of the hospital.</li> <li>• Concierge to encourage mask use by patients/visitors.</li> <li>• Patients are invited to hand sanitize upon entry into clinic and again upon leaving the bay on completion of treatment Staff recommended to stay at home if unwell / close contact.</li> <li>• Social distance reminders in place.</li> <li>• Consider introduction of temperature checking on arrival based on risk assessment and DOH guidelines.</li> <li>• Review mask guidelines based on risk assessment and DOH:             <ul style="list-style-type: none"> <li>○ Consider introduction of mandatory N95 use in selected areas.</li> <li>○ Consider use of mask in non-public areas.</li> </ul> </li> <li>• Review risk assessment and recommendations weekly. Consider further actions required such as:             <ul style="list-style-type: none"> <li>○ enforcing social distancing through environmental and engineering controls.</li> <li>○ reducing aerosol generating procedures.</li> <li>○ increasing use of rubber dams.</li> </ul> </li> </ul>
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### Treatment Plan Goal

Reduce staff exposure to COVID-19

<p>Treatment Plan</p>	<ul style="list-style-type: none"> <li>• Encourage work from home where available based on DOH guidelines.</li> <li>• Review clinical service based on risk assessment and DOH guidelines (this may include temporary closure of non-essential services).</li> <li>• Review roster to create staff groupings based on DOH guidelines.</li> <li>• Review mask guidelines based on DOH guidelines.</li> <li>• Review risk assessment and recommendations weekly or more frequently as appropriate. Consider further actions required such as reinforcing social distancing.</li> </ul>
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## **Attachment 5: Hospital Signage**

*"If you have any cold or flu symptoms (runny nose, sore throat, cough, fever, chills or sweats), have tested positive for COVID-19 in the previous 5 days or are living with someone who has tested positive for COVID-19 in the previous 5 days please return home and reschedule your appointment."*

## **Attachment 6: SMS reminder**

If you have signs of COVID-19 or have tested positive, please refer to our website for further instructions prior to attending your appointment.

## **Attachment 7: COVID-19 Website information**

“COVID-19 is an infectious disease. Most people infected with the virus will experience mild to moderate respiratory illness and recover without needing any medical assistance.

Some people can still get very sick even if they are fit and healthy. Older people, people with pre-existing conditions and people with compromised immunity are at a higher risk of experiencing severe illness.

Victoria is currently seeing an increase in COVID-19 cases. To protect those at risk of getting very sick, it is recommended that you:

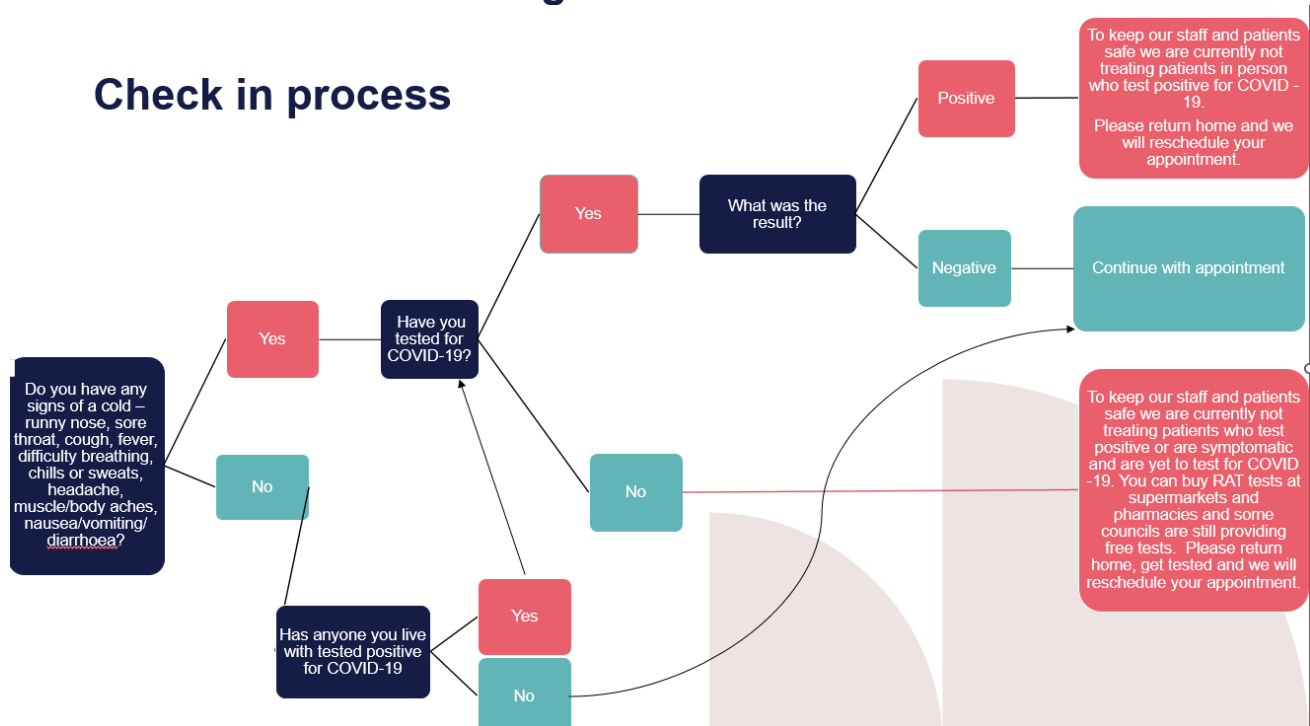
- should stay home if you're unwell to reduce the spread of the virus.
- should get a Rapid Antigen Test (RAT) to test for COVID-19 if:
  - if you have COVID-19 symptoms, even if they're very mild,
  - before visiting a hospital, aged care facility, or disability care facility,

To protect our patients and staff, we ask that when you visit our hospital, you sanitise your hands on entry and wear a face mask. We provide hand sanitiser and masks for patients and visitors.

To keep our staff, patients, and visitors safe, if you have any cold or flu symptoms (runny nose, sore throat, cough, fever, chills or sweats), have tested positive for COVID-19 in the previous 5 days, please reschedule your appointment.

For further information, visit [Coronavirus \(COVID-19\) Victoria website.](#) “

## Attachment 8: Patient screening flowchart



When stage 3 is activated, a working party is convened to operationalize the screening process. The working party will be led by General Manager or Director of Quality and Safety and will include the following representation:

- Clinical Director
- Operations manager
- IT
- P&C
- Infection Control Coordinator
- PLO / PSO Team Leaders